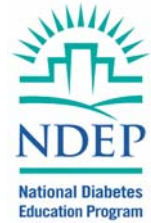


# Eating Well, Part II



**Target Audience:** People with diabetes; people wishing to prevent or control cardiovascular disease

**Objectives:** Participants will be able to:

1. Understand that control of high blood pressure and cholesterol can reduce risk for cardiovascular disease, especially in those who have diabetes.
2. Define and explain the lipid terminology.
3. Make changes in their food choices, food preparation, and lifestyle choices that help lower their blood pressure and cholesterol.

**Time Required:** Approximately 30 minutes without group activities; approximately 45 minutes with group activities

**Equipment:** Laptop or overhead projector and screen, flip chart and marker

**Teaching Tools:** Yellow squares of cardboard or construction paper representing pats of butter or margarine for Group Activity 2

## Handouts:

- “Your Guide to Lowering Your Blood Pressure with DASH” available at [http://www.nhlbi.nih.gov/health/public/heart/hbp/dash/dash\\_brief.pdf](http://www.nhlbi.nih.gov/health/public/heart/hbp/dash/dash_brief.pdf)
- “Don’t Salt It – Herb and Spice It!”
- “Lipids”
- “Choosing Lower Sodium Foods”
- “Solve the Fat Mystery”

## Supplemental Handouts:

- “All About Carbohydrate Counting”
- “Making Healthy Choices When Eating Out”
- “Healthy Eating during Winter Gatherings for People with Diabetes”
- “Small Steps for Healthy Meals to Prevent Type 2 Diabetes”
- “Guidelines for Healthy Meetings”

## Lesson Plan

*(Note: Text regarding diabetes can be excluded if the audience does not include anyone with diabetes.)*

We are going to discuss some general nutrition guidelines today for people with diabetes. Please note, however, that most people with diabetes will benefit from meeting with a Registered Dietitian to design an individualized meal plan.

## Controlling High Blood Pressure

How many of you have high blood pressure? *(Have participants raise their hands if they have high blood pressure.)* You are not alone. About 50 million people in the United States have high blood pressure. In people with type 2 diabetes, high blood pressure is twice as common as in people without diabetes. In fact, high blood pressure and diabetes are almost like twins.

**Show Slide** *“Diabetes and High Blood Pressure Are Like Twins”*

High blood pressure increases your risk for heart disease, kidney disease, and stroke.

**Show slide** *“Ignoring Your Blood Pressure”*

Even though the symptoms of high blood pressure (and sometimes diabetes) may not be obvious, you can't afford to ignore them. Doing so would be like ignoring the rumblings of a volcano before it blows.

What can you do about your high blood pressure? First, don't ignore it.

**Show slide** *“Blood Pressure Levels”*

The National Heart, Lung, and Blood Institute now says even someone with a blood pressure of 120/80 or above should make lifestyle changes that will lower it. If your blood pressure is 140/90 (130/80 if you have diabetes), you will likely need to make the lifestyle changes, as well as take medication to lower your blood pressure. Having a blood pressure of less than 120/80 is best, but any decrease in blood pressure if it is high will help.

What are the lifestyle changes that you should make? First, **lose weight** if you are overweight. Even losing just a few pounds (about 5-7% of your total body weight) will make a big difference in your blood pressure.

Second, **become more active**. Check with your doctor to be sure it's safe for you to exercise. Be careful if you have eye, heart, or kidney disease. If your doctor says it's okay to exercise, do aerobic exercise like walking or biking. Weightlifting may not be a good idea until your blood pressure (and any diabetic complications you may have) is controlled.

Third, **cut down on alcohol** if you drink more than one to two drinks a day. Frequent use of alcohol in large amounts will raise your blood pressure. Remember, one drink equals 1-1/2 ounces of hard liquor, 5 ounces of wine, or 12 ounces of beer.

Fourth, **cut down on sodium**. Most people think about not adding salt to their food, but in reality most of the sodium in our food is hidden. Convenience foods and restaurant meals provide most of the sodium we eat.

**Distribute handout** *“Your Guide to Lowering Your Blood Pressure with DASH”*

Research has shown that a special eating plan called the DASH diet can dramatically lower blood pressure in just 2 weeks. This meal plan recommends eating eight or more vegetables and fruits a day and a two to three servings of nonfat or low-fat dairy products along with a low-fat low-sodium diet. In some cases, the change in blood pressure produced by this diet may be enough to allow people to discontinue or at least lower their blood pressure medicine.

**Show slide** *“Where We Get Our Sodium”*

Certainly if you salt your food at the table, stop doing it. Use an herb shaker or, if your doctor approves, a salt substitute. Never use a salt substitute with potassium chloride

without checking with your doctor first. If you have any kidney problems, a potassium-based salt substitute might make it worse.

Season your food with herbs and spices rather than salt. Usually 1/4-teaspoon of dried herb or spice, or 3/4-teaspoon of fresh herb flavors a dish that serves four.

**Distribute handout** *“Don’t Salt It – Herb and Spice It!”*

If you don’t like to mix your own herbs and spices, there are several commercial herb-spice preparations on the market. You may also add a small amount of regular, not cooking, wine to your food, or a squeeze of lemon juice. All these options enhance the flavor of your food without adding sodium.

Most of our sodium, however, comes from convenience foods and from eating away from home.

**Show slide** *“Nutrition Facts”* and point out where sodium information is listed

Usually, if the label on a food says it provides 5 percent or less of the Daily Value of sodium, it is a low-sodium food. If the label says it contains 20 percent or more of the Daily Value for sodium, then it is a high-sodium food. Use foods carefully that contain more than 5 percent but less than 20 percent of the Daily Value. They are not terribly high, but if you eat a lot of them you may get too much sodium. Again, fresh foods are usually the lowest in sodium, so try to use them more often.

So now tell me what you should do, if you have high blood pressure, to lower your risk for heart disease, kidney disease, and stroke? *(Have participants summarize the steps to lowering high blood pressure. Write their responses on the flip chart.)*

### **Controlling High Cholesterol**

There are many risk factors for heart disease and stroke. Tell me what some risk factors are for heart disease and stroke. *(Participants will take turns identifying risk factors. Write their responses on the flip chart.)*

**Add to flip chart any of these risk factors that are not mentioned:** smoking, sedentary lifestyle, high blood pressure, high cholesterol, high fat intake (especially saturated fats), stress, male gender, high triglycerides and being overweight

Most of these risk factors, except being a male, can be modified. We will focus today on control of fat and cholesterol and how they can influence cardiovascular risk. Let’s look at the handout that defines all the lipids that influence cardiovascular risk.

**Distribute handout** *“Lipids”* and review

**Show slide** *“Sources of Cholesterol and Fats”*

Be aware that cholesterol in food is only found naturally in animal foods. Plant or animal foods, however, can contain saturated or trans fatty acids.

You should know your total cholesterol level, your levels of HDL- and LDL-cholesterol, and your triglyceride level.

**Show slide** *“Blood Fat (Lipids) Goals”*

As you can see, the guidelines for those with diabetes are stricter than for people without diabetes. This is also true for those who already have had a heart attack or stroke. Ideally:

- your total cholesterol should be less than 200
- your triglycerides should be less than 150

If you are *NOT* at high risk for heart disease (no family history or diabetes or you do not fall into any of the risk categories we mentioned earlier):

- your HDL should be more than 40 (women should be over 50)
- your LDL should be less than 100

For those with diabetes and existing heart disease:

- your LDL should be under 70

To control blood cholesterol levels, we need to control saturated and trans fatty acids. Cholesterol in food does not appear to raise blood cholesterol levels as much as these two types of fat do. However, the American Heart Association (AHA) does suggest restricting cholesterol intake to less than 300 milligrams per day. People with high LDL (bad) blood cholesterol levels or who are taking cholesterol medication should consume less than 200 mg of cholesterol per day.

**Show slide** *“Calculating Fat Grams”*

An easy way to cut saturated fat and trans fats is to control total fat. The AHA and other organizations recommend that people get 30 percent or less of their calories from fat. To calculate your fat gram allotment, divide your desired weight by 3. Then keep track of your fat intake by reading labels or using food nutrient books.

To summarize, know your blood cholesterol and triglyceride levels. To keep them under control, eat less saturated fat, trans fatty acids, and dietary cholesterol. Instead substitute controlled amounts of poly- and mono-unsaturated fats. This means eating less animal fat and hydrogenated fat by substituting liquid oil or very soft margarine more often. The food label is an important source of information about the type and amount of fat in a food.

### **Group Activity 1**

**Distribute handout** *“Choosing Lower Sodium Foods”* handout and have audience members fill it out. Suggest they place it on their refrigerators when they get home.

### **Group Activity 2**

**Distribute handout** *“Solve the Fat Mystery”* and have participants identify low-fat and high-fat snacks by guessing the fat content of different foods. [*To show*

*answers, place yellow squares of paper representing pats of butter or margarine next to each product to show fat content.]*

As you can see, better choices can make a big difference on how much fat you get in your diet. Reading labels and choosing lower-fat and modified-fat foods can make a big difference on your cholesterol and triglyceride levels.