Prevention Generation

Inside This Issue

Wellness Navigator

November 2025

November is National Diabetes Awareness Month

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– Dr. Paul J. Pavlik, Director of Education at AHWA

National Diabetes Month is celebrated in November to raise awareness about diabetes, a chronic disease that affects millions of Americans. This month is also a reminder of the importance of understanding, preventing, and managing diabetes.

For more information, visit the American Diabetes Assoc website at:
https://diabetes.org/about-diabetes

FACTS ABOUT DIABETES

- 7th leading cause of death in U.S.
- At age 50, life expectancy 6 years less for Type 2 diabetics. By following treatment, life expectancy can increase by 3 - 10 years.
- 1 in 10 people impacted
- 37 M people or 11% of Americans
- 1 in 5 don't know they have it
- 1.4 M will be diagnosed this year

3 Types of Diabetes

1. Type 1. It is a non-reversible, auto-immune disease**.** It **c**an develop at any age and requires insulin treatment for survival. It occurs when the body can't produce insulin, a hormone in the pancreas that breaks down carbohydrates into blood sugar (or glucose) for energy. Insulin therapy helps the pancreas to function normally. Many children suffer from Type 1 diabetes although it can affect people of any age or background.

2. Type 2. Accounts for around 90% of all diabetes and is more commonly diagnosed in adults.. It is the most common form of diabetes where the body is unable to process internal insulin well enough to keep blood sugar at normal levels. Insulin helps the body use food for energy, and when the body doesn't produce enough insulin, the body breaks down fat or muscle for fuel.

3. Gestational. Occurs with high blood glucose during pregnancy and can cause complications for both mother and child. Once a woman is diagnosed with this form of diabetes in pregnancy, she is at greater risk for developing diabetes at some point later in her lifetime. You may also have a greater risk of diabetes if you give birth to a baby weighing over nine pounds.

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What is Prediabetes?

Before people develop type 2 diabetes, they almost always have prediabetes—blood glucose levels that are higher than normal but not yet high enough to be diagnosed as diabetes. This condition puts you at a higher risk for developing type 2 diabetes and cardiovascular disease.

Symptoms of Prediabetes. There are no clear symptoms of prediabetes, so you may have it and not know it. Some people with prediabetes may have some of the symptoms of diabetes. If you have prediabetes, you should be checked for type 2 diabetes every one to two years.

Warning Signs

The following symptoms of diabetes are typical. However, some people with diabetes have symptoms so mild that they go unnoticed. Common symptoms of diabetes includes:

- Urinating often
- Feeling very thirsty
- Feeling very hungry even though you are eating
- Extreme fatigue
- Blurry vision
- Weight loss - even though you are eating more (Type 1)
- Tingling, pain, or numbness in the hands/feet (Type 2)

Diabetes Increased Risks

Early detection and treatment of diabetes can decrease the risk of complications of diabetes. Diabetes can lead to severe, and sometimes, life-threatening complications. You can lower your risk of diabetes-related complications by making healthy lifestyle changes, knowing the warning signs, and attending regular visits with your health care provider.

Here are potential complications:

- **Cardiovascular Disease (CVD)** is the leading cause of death in people living with diabetes.
- **Peripheral Artery Disease (PAD)** results in narrowed arteries reduce blood flow to arms or legs.
- **Chronic Kidney Disease**. Diabetes is the leading cause of chronic kidney disease (CKD).
- **Diabetes-Related Eye Disease**. Diabetes is leading cause of of blindness in working age adults.
- **Neuropathy**. Neuropathy (or nerve damage) affects about half of all people with diabetes.
- **Foot Complications**. Diabetes can lead to nerve damage, reduced circulation, and limb loss.
- **Skin Complications**. Diabetes can impact the body's largest organ—your skin.
- **Oral Complications**. Risk for gingivitis (gum disease) and periodontitis (advanced gum disease)
- **Hearing Loss.**.Twice as common in people with diabetes as in those who don't have diabetes.
- **Diabetic Ketoacidosis (DKA)**. Life-threatening condition caused by an overload of ketones.
- **Stroke**. Chances of having a stroke are twice as high than in people without diabetes.
- **Age**. As you get older, your risk for type 2 diabetes goes up.
- **Gender**. Men also have a slightly higher risk of diabetes than women.
- **Race/Ethnicity**. African Americans, Native Americans, Hispanics/Latinos, and Asian Americans/Pacific Islanders are at higher risk for developing type 2 diabetes.
- **Overweight**. Being overweight can increase your risk of type 2 diabetes.
- **Inactivity**. Higher physical activity levels lower the risk of type 2 diabetes.
- **Smoking**. Smoking is a risk factor for the development of type 2 diabetes.
- **Alcohol**. Drinking more than one drink a day for women or two drinks a day for men raises risk.

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Tests Used to Determine Diabetes Risk

Since it can take time for patients to develop symptoms, early screenings of prediabetes (elevated blood sugar levels) and diabetes are important. Here are the 4 most common types of screenings:

1. **A1C Test**. The A1C test measures your average blood sugar levels over the last three months. It's the most common blood test to diagnose both Type 1 and Type 2 diabetes, as well as for monitoring blood sugar levels for diabetics. It can identify prediabetes, which raises your risk for diabetes. The higher the levels, the greater your risk of developing diabetes complications. Your doctor will tell you how often you need the A1C test, but usually you'll have the test at least twice a year if you're meeting your treatment goals. If you're not meeting your goals or you change treatments, you may need an A1C test more often. A1C test results are reported as a percentage. The higher the percentage, the higher your blood glucose levels over the past 2 to 3 months. The A1C test can also be used for diagnosis, based on the following guidelines:

- o If A1C level is between 5.7% and less than 6.5%, levels may be in the prediabetes range.
- o If you have an A1C level of 6.5% or higher, your levels were in the diabetes range

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- o Another term you may come across when finding out your A1C is eAG. eAG is what you see . when monitoring blood glucose at home on a meter. eAG should be less than 154 mg/dl

2. **Fasting Blood Sugar Test**. Blood glucose (blood sugar) monitoring is the primary tool you have to find out if your blood glucose levels are within your target range. This tells you your blood glucose level at any one time. It's important for blood glucose levels to stay in a healthy range. If glucose levels get too low, we can lose the ability to think and function normally. If they get too high and stay high, it can cause damage to the body over the course of many years. Talk to your doctor about whether you should be checking your blood glucose. People who may benefit from checking blood glucose regularly include those:

- o taking insulin
- o who are pregnant
- o having a hard time reaching your blood glucose targets
- o having low blood glucose levels
- o having low blood glucose levels without the usual warning signs

3. **Random blood sugar test**. A random blood sugar (RBS) test measures your blood sugar levels at the time of testing. This test doesn't have to be done at a specific time of day, nor does it require fasting. An RBS test can only test for diabetes, not prediabetes.

4. **Glucose tolerance test**. A glucose tolerance test measures how your body responds to sugar or glucose. While it's commonly used as a screening test for Type 2 diabetes.

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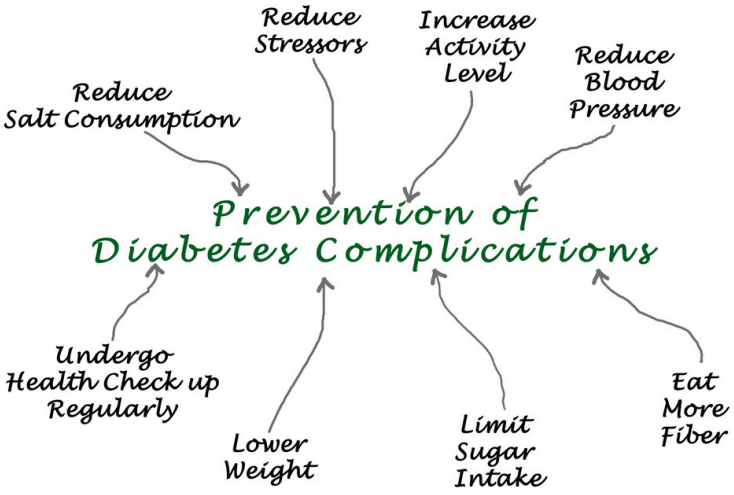
Living With Diabetes & Prevention

Type 1 Diabetes. If you have type 1 diabetes, your pancreas does not produce insulin. It requires monitoring your blood glucose and administering daily insulin injections with a pen, syringe, or a pump.

Type 2 Diabetes. To use blood glucose (blood sugar) as energy, your body uses insulin. With Type 2 diabetes, your body doesn't make enough insulin, use it well, or both—and your cells can't use blood glucose for energy. Medication, diet, and exercise are important parts of managing Type 2 diabetes. Work with your doctor to find to help you set up a management plan.



Diet & Exercise not only do they help you control your blood glucose, but they can mean the difference between feeling run down and feeling great. Here are some ideas you can use:

- **Eat Healthy**. By understanding how foods affect blood glucose, you can take charge.
  o Eat vegetables, whole grains, fruits, non-fat dairy, healthy fats, and lean meats
  o Try not to eat too much food or too much food of one type
  o Space your meals evenly throughout the day and avoid skipping meals
- **Understand Carbs (carbohydrates)**. It's the balance of the amount of insulin in your body and the carbs you eat that determine your blood glucose. When someone's blood glucose is too high, it is called hyperglycemia. Causes for "highs" include not having enough insulin to process the glucose in the blood or the cells in your body not effectively reacting to the insulin, leaving extra glucose in the blood. A low blood glucose is known as hypoglycemia. "Lows" can be caused by not consuming enough carbs, or an imbalance in medications. When choosing carbs:

 Eat the most of these: Whole, unprocessed, non-starchy vegetables. Non-starchy vegetables like lettuce, cucumbers, broccoli, tomatoes, and green beans.

 Eat some of these: These include fruits like apples, blueberries, strawberries and cantaloupe; whole grains like brown rice, whole wheat bread, whole grain pasta and oatmeal; starchy vegetables like corn, green peas, sweet potatoes, pumpkin and plantains; and beans and lentils like black beans, kidney beans, chickpeas and green lentils.

 Try to eat less of these: Foods with added sugar including sugary drinks like soda, sweet tea and juice, refined grains like white bread, white rice and sugary cereal, and sweets and snack foods like cake, cookies, candy and chips.

- **Get Active**. Any type of physical activity helps lower your blood glucose. Recommended:
  o Aerobic activity (walking, biking, swimming)
  o Being active throughout the day (take the stairs)
  o Strength training (lifting weights, resistance bands)
  o Flexibility & balancing (stretching, yoga, Tai Chi)
- **Control Weight**. Injectables, like GLP-1, are now a major contributor to controlling weight.
- **Monitor Glucose** on a regular basis.

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Chiropractic Care

Chiropractic care can help manage diabetes by improving the nervous system, which can positively affect the pancreas, how it is supposed to function, and blood sugar levels.

5 Ways Chiropractic Care Helps Treat Diabetes:

1. I**mproved Nervous System Function**. The nervous system plays a crucial role in regulating many bodily functions, including insulin production, glucose metabolism, and the overall control of blood sugar levels. Chiropractic adjustments aim to correct misalignments in the spine, known as subluxations, which can interfere with the proper functioning of the nervous system. By restoring proper alignment, chiropractic care helps optimize nerve flow and communication, which is essential for maintaining healthy blood sugar levels.
2. **Stress Reduction**. Stress is known to have a detrimental impact on blood sugar levels in diabetics. It can lead to increased insulin resistance and difficulty in managing glucose levels.
3. **Enhanced Blood Circulation**. Proper blood circulation is crucial for individuals with diabetes as it aids in delivery of oxygen and nutrients to different organs and tissues. Chiropractic adjustments improve blood flow by addressing subluxations and increasing the flexibility of blood vessels. Improved circulation allows for better nutrient absorption, optimal waste elimination, and faster healing of damaged tissues.
4. **Inflammation Reduction**. Chronic inflammation is often associated with diabetes and can worsen diabetes symptoms. Chiropractic care can help reduce inflammation by addressing misalignments in the spine and joints. Research has demonstrated that chiropractic adjustments can lower levels of inflammatory markers, leading to improved insulin sensitivity and reduced diabetic complications.
5. **Lifestyle Guidance**. Chiropractors can help develop personalized plans that focus on healthy eating, weight management, and regular physical activity, all crucial for managing diabetes effectively.

Take Aways ...

Diabetes is a manageable, treatable disease. Talk to your primary care provider (PCP) or holistic primary care provider (HPCP) to get tested and find out what your glucose is. Then, diabetes can be easily treated and managed. Education is the most important tool in preventing major issues from diabetes. If the individual is educated and understands the disease, and understands the importance of meal planning and exercise, and understands what their medications are doing, it will make a significant difference. Don't let the diagnosis get you down since treatment options continue to improve every day.

For more information, visit the American Diabetes Assoc website at: https://diabetes.org/about-diabetes

Many thanks to the American Diabetes Association, Cleveland Clinic, Mayo Clinic, National Today, YouTube, Sutter Health, and At Last Chiropractic for supplying some of the documentation and images for the above information relating to Diabetes.