

Myth vs. Reality: Diabetes Related

Myth: Only medication can control my diabetes.

Reality: Lifestyle changes such as good nutrition, increased physical activity, weight loss and limiting alcohol/cigarette consumption can have a positive effect on diabetes and its complications, including high blood pressure.

Myth: “Borderline” diabetes is nothing to worry about.

Reality: Diabetes is a serious condition and needs to be monitored regularly by health care professionals. There are many ways to control both diabetes and high blood pressure.

Myth: Eating too much sugar causes diabetes.

Reality: Diabetes is caused by a problem with insulin in the body (either not enough is produced or the body does not respond appropriately to the insulin). Risk Realityors for diabetes include being overweight and having a genetic predisposition for diabetes (history of diabetes in the family).

Myth: People with diabetes are more likely to get colds or other illnesses.

Reality: People with diabetes are not more likely than anyone else to get sick. However, infection can interfere with blood glucose management, so flu shots and other preventive/control measure are advised.

Myth: Once you have diabetes, there is nothing you can do to prevent other health problems.

Reality: Keeping glucose, blood pressure and cholesterol on target can help prevent complications, especially cardiovascular disease and eye-related problems.

Myth: Now that I have diabetes, I cannot eat sugar or carbohydrates.

Reality: A small amount of sugar can be okay. A dietitian or nutritionist can help you plan what to eat.

Myth: If I take my diabetes medication, I do not have to worry about my diet and exercise habits.

Reality: Medication, healthy nutrition and physical activity are all important and work together to control diabetes!

Myth: I’ll have to eat “diabetic” foods.

Reality: Special “diabetic” foods are not needed, just a healthy and balanced diet that is low in fat and sodium, and rich in whole grains, fruit and vegetables.

Myth: Proper foot care includes soaking my feet every day.

Reality: Soaking your feet daily can cause the skin to become dry and is not recommended.

Myth: Diabetes will make you go blind.

Reality: While eye-related problems can result from diabetes, good control of blood glucose levels can reduce the risk for blindness and other complications.

Myth: By drinking water, I can wash away extra sugar in my blood.

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Reality: High glucose levels cannot be controlled or reduced by drinking water. The best way to reduce glucose levels is to eat healthy food, be physically active, control your weight, monitor your glucose level and know what to do if it is too high or too low, take prescribed medications, and get regular medical care.

Myth: Only people with diabetes need insulin.

Reality: Everyone needs insulin. It is naturally produced in the body, but people with diabetes either don't make any, don't make enough, or their bodies cannot use it properly.

Myth: Only overweight people get diabetes.

Reality: Although being overweight can increase your risk of diabetes, people who are not overweight can still get diabetes. Staying within a healthy weight range, or losing weight, can help reduce the risk of diabetes, or help control it if you already have it.

Myth: People who follow their treatment plan never have high blood sugar readings.

Reality: Even when diligently following your treatment plan, glucose levels can be high because it is influenced by diet, exercise, stress, illness or infection, and medication.

Myth: Insulin causes atherosclerosis (hardening of the arteries) and high blood pressure.

Reality: Insulin does not cause these problems, and adhering to prescribed medications can actually help reduce the risk of complications.

Myth: Since I have diabetes, my child(ren) will have it too.

Reality: While close blood-relatives have an increased risk of diabetes, that does not mean your child(ren) definitely has the disease, especially if (s)he does not have other risk Realities.

Myth: Exercise can make diabetes worse.

Reality: Exercise burns blood glucose, reducing the amount of sugar in the blood and lessening the need for insulin or other medications. Exercise plans should be discussed with your doctor, and you should be aware of the possibility of low glucose levels and the possibility of other complications (such as foot irritation).

Myth: Diabetes can be cured with insulin.

Reality: There is no cure for diabetes. It can, however, be controlled through healthy eating habits, physical activity, and medication as needed.

Myth: As long as I take my medicine, it doesn't matter if my levels are under control

Reality: Keeping your levels under control over time may reduce the risk of developing long-term diabetes-related complications.

Myth: Taking insulin is all I need to do to control my blood sugar.

Reality: Insulin should be a part of an overall diabetes treatment plan, which includes diet, exercise, and other diabetes medications.

Myth: Having to take insulin means I have failed and that my diabetes is getting worse.

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Reality: No, you haven't failed at all. Diabetes is a disease that gets harder to manage over time. Adding insulin isn't a sign of failure. It replaces what your body isn't making naturally to help control blood sugar. If diet, exercise, and oral diabetes medications are not bringing your blood sugar levels under control, insulin may help. It may be an important tool in gaining blood sugar control, which is important to your overall health.

Myth: Insulin should be considered as a last option for treating diabetes.

Reality: Insulin does not have to be the last option you and your doctor consider. Your guide should be your A1C level. The American Diabetes Association (ADA) suggests your level should be **less than 7%**. If it is above that – or above the goal your doctor set for you – ask your doctor about insulin.

Myth: Taking insulin can be very complicated.

Reality : Many people fear that taking insulin will interfere with their daily schedules. But patients on insulin often say that their routines have not changed much since starting insulin.

Myth: Taking insulin injections will be painful.

Reality: Many patients are surprised when they see how small and thin the needle is. Also, many insulins come in small, easy-to-use insulin pens that make taking insulin more convenient.

Myth: Insulin may be started at any time to help control your blood sugar.

Reality: Insulin does not mean that you are "at the end of the road." In fact, the ADA treatment guidelines suggest you add insulin **earlier** if diet, exercise, and pills alone do not offer enough blood sugar control. Insulin does not have to be the last option.

Myth: Insulin will make me gain a lot of weight.

Reality: The benefit of helping to manage your blood sugar with insulin outweighs the risk of some weight gain. Some people find that they do put on a few pounds when they begin taking insulin. But following a meal plan and exercise program may help. Taking insulin turns calories into energy for your body. Because lost calories are absorbed by your body, **some** weight gain is possible.

Myth: Insulin is dangerous.

Reality: Like any medicine, insulin may have side effects such as low blood sugar. So ask your doctor how to take it. Proper use of insulin may help reduce the risk of side effects.

Myth: Insulin cures diabetes.

Reality: Taking insulin may help manage blood sugar levels. But it does not cure the disease. While progress toward finding a cure has been substantial, there is still no cure for diabetes.

Myth: Insulin always needs to be refrigerated.

Reality: Insulin does not always need to be refrigerated. Many people store open bottles at room temperature because they find it more comfortable to inject. Opened and unopened insulin can be stored at room temperature for up to 28 days. Some for up to 42 days! Refrigerated, unopened

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bottles are good until the expiration date printed on them. Always read the instructions that come with your insulin.

Myth: Once I start taking insulin I will get addicted to it and will have to take it for the rest of my life.

Reality: Insulin is not physically addictive or habit-forming. Some patients choose to take insulin to help manage their blood sugar. This does not mean they are addicted. They are replacing something the body once made naturally.

Myth vs. Reality: Blood Pressure

Myth: I can tell when my blood pressure is high

Reality: High blood pressure usually has no signs or symptoms, unless very dangerously high. The only way to know blood pressure is high is to measure it you cannot tell based on how you are feeling.

Myth: Signs like sweating, nervousness or fatigue mean blood pressure is high.

Reality: High blood pressure usually has no signs or symptoms. Without regular checks, high blood pressure may not be noticed until later signs of serious disease develop (heart disease, kidney failure, and stroke).

Myth: If I do diet and exercise, I don't have to take my blood pressure medication.

Reality: Medication, healthy nutrition and physical activity are all important and work together to control blood pressure! Each one makes a small change in blood pressure.

Myth: If I cut back on caffeine in my diet, I can control/reduce my high blood pressure.

Reality: Caffeine raises blood pressure temporarily, but does not cause long term high blood pressure.

Myth: If I get my blood pressure to normal, I can stop my medicine.

Reality: Blood pressure goes back up in almost all people who stop their medications.

Myth: My blood pressure is close to goal; a few points do not matter.

Reality: A few points *do* matter!!! Any increase in blood pressure increases risk of heart attack kidney failure, or stroke.

Myth: High blood pressure is not that serious; no one dies from it.

Reality: High blood pressure causes complications that kill one person in the U.S. every 2 minutes!

Myth: High blood pressure damages just my heart.

Reality: With each heart beat, blood is pumped throughout the entire body. If pressure in the vessels becomes too great, it damages blood vessels, the brain, kidneys and eyes.

Myth vs. Reality: LDL

Myth: All cholesterol is bad.

Reality: Some cholesterol is necessary for vital functions in your body. The key is to have a healthy amount of HDL (good)-to-LDL (bad) cholesterol.

Myth: Only overweight people need to worry about their cholesterol.

Reality: Weight plays only a small role in cholesterol levels; anyone of any body weight can have too much (bad) LDL or too little (good) HDL cholesterol.

Myth: Cholesterol issues are genetic, there's nothing you can do about it.

Reality: Inheritance or genetics plays some role in cholesterol health, no matter why your levels are where they are, diet, exercise, and medication can help get them where they need to be.

Myth: I can control my cholesterol with diet and exercise alone.

Reality: Diet and exercise are extremely important for overall cardiovascular health, but most people with bad cholesterol levels need medication for optimum cholesterol health.

Myth: A low-carb diet is always bad for your heart.

Reality: A "low-carb" diet based on lean sources of protein, vegetables, unsaturated fats and some whole grains is heart-healthy.

Myth: Eggs are evil

Reality: While eggs do have some cholesterol, eating an egg a few times a week is not dangerous. In fact, eggs are an excellent source of protein and contain unsaturated fat, a so-called good fat.

Myth: Cholesterol is always a bad thing

Reality: High cholesterol can be dangerous, but some cholesterol in large amounts is essential to various bodily processes.

Myth: Margarine is better than butter.

Reality: Butter contains saturated fat that, when eaten in excess, can raise "bad" (LDL) cholesterol increases the risk of heart disease, contains trans fats, which increase LDL cholesterol and lower the "healthy" (HDL) cholesterol. You need to limit both margarine and butter