

Tools for Managing Your Chronic Diseases

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Thanks: We are very thankful that you decided to work with our program. You may improve your own health and may help us to improve the care of other people, too.

What's this project and how might it help you?

This project is the Treatment Enhancement Activation and Motivation ("TEAMcare") Project. Our goal is to help you feel better and take better care of yourself. We know it's a challenge to manage chronic diseases and life—we're here to stand by you and help you.

How does the TEAMcare Project work?

- ✓ The services you receive from the TEAMcare project are in addition to the regular care you get from your Primary Care Team. That means you will still use your Primary Care Team when you need regular health check-ups, have emergencies, or have questions not related to the study.
- ✓ Your TEAMcare Nurse is in regular contact with your Primary Care Physician and Registered Nurse.
- ✓ Your TEAMcare Nurse has weekly supervision sessions with a TEAM of specialty experts, including Internal Medicine Physicians, Psychiatrists, and Psychologists who will help make your treatment choices up-to-date and good for you.
- ✓ You're in charge of your care. We have information, techniques and medications that have helped other people like you. You're the "captain of the team" who decides where you want to start and where you want to go.
- ✓ There will be **no charge** for the visits with your TEAMcare Nurse.

How long will we work together? We'll work together as long as you're changing your chronic disease routines.

What should I expect to happen?

- ✓ When we first start working together, we'll want to see you in person. We'll also want to see you in person if you're starting to monitor blood pressure or are starting a new medication such as insulin.
- ✓ We will also have discussions by phone.
- ✓ If you're registered on "MyGroupHealth", we can follow-up with your care or questions by the secure email system.

What Should I expect from My TEAMcare Nurse?

You should expect us to:

- ✓ Give you the best information we can about your self-management options and their predicted effects.
- ✓ Understand that you're not perfect (and neither are we). We're here to help you manage your health in ways that fit into your life.
- ✓ Understand that the problems you face may seem like mountains. We can help you break down these mountains into smaller hills and then can help you with the steps along the way.
- ✓ Help you figure out which medications may be useful for your health problems and help you manage taking the ones that you choose.
- ✓ Understand that you are in charge of your health. We're here to help you, but you're the captain of your healthcare ship.

A Better Health Plan.

We'll work together to create a Better Health Care Plan. This is a plan that we'll work on together to make sure we're on the same page about plans to improve your health and help you reach goals that are important to you.

**I'm not sure the Depression Diagnosis fits. . .
I'm just tired. . .**

Some people with depression are troubled by negative thoughts and feelings of sadness or hopelessness. Others are most aware of physical symptoms such as low energy, poor sleep, poor appetite or overeating, and feeling agitated or 'slowed down'.

The diagnosis of depression is made by reviewing your mood, your physical symptoms and your score on the PHQ 9 test. This test is a good predictor of depression. The test results are scored by:

- ✓ Scores of 10 or greater = major depression
- ✓ Scores of 5-9 = mild depression
- ✓ Scores of 0-4 = no depression or good response to your treatment.

You can use the PHQ 9 Depression Questionnaire (page 23) tool to check up to see how you're doing—as often the first improvements are hard to see.

What causes depression? Life stresses and medical problems can cause changes in certain brain chemicals. Imbalances in brain chemicals can result in some of the common symptoms of depression such as sleep and appetite problems, loss of energy, loss of concentration, and chronic pain.

The good news is: that there are a number of treatments that help depression and the symptoms it can cause. **We're here to find a treatment that works for you.**

What is Depression?

Basic facts about depression:

- ✓ Depression is a medical condition--not a sign of personal weakness.
- ✓ About 30% of people with chronic disease will experience clinical depression at some time in their life.
- ✓ The best research indicates that depression is caused by a combination of inherited or genetic factors and life stresses—just like high blood pressure or heart disease.

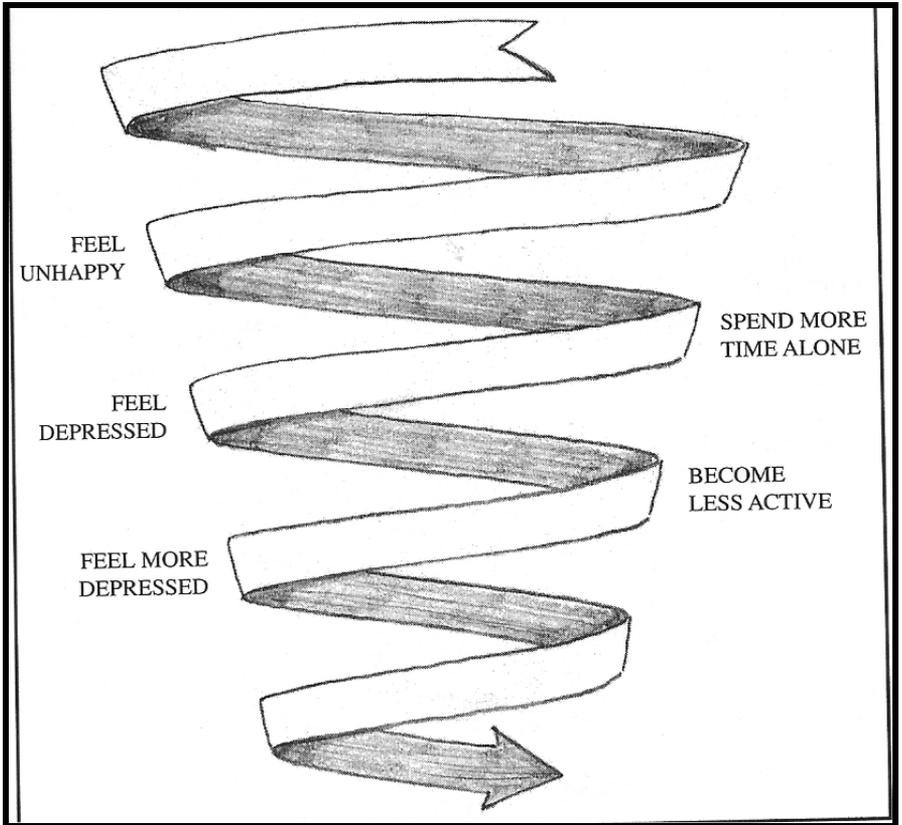
Common symptoms of depression: An individual's symptoms of depression can vary, but often feelings include sorrow, dejection, despair or irritability. Most people feel sad or blue occasionally, but when these feelings persist, worsen or interfere with work or personal relationships, depression is suspected. In addition to these feelings, people will often describe physical symptoms, such as backache, headache, or stomach trouble.

People with depression may feel like staying at home more and avoiding other people, they may lose interest in life and have a more difficult time enjoying usual activities. Living with a chronic disease is always more complex when you are depressed. Depression can make health care routines seem totally overwhelming.

The good news about depression is that it can be helped:

- ✓ Taking antidepressants makes most people feel much better in 2-4 weeks.
- ✓ Psychotherapy helps people improve their relationships and participate in more pleasant activities.
- ✓ Psychotherapy can help most people feel better in 6-8 weeks.

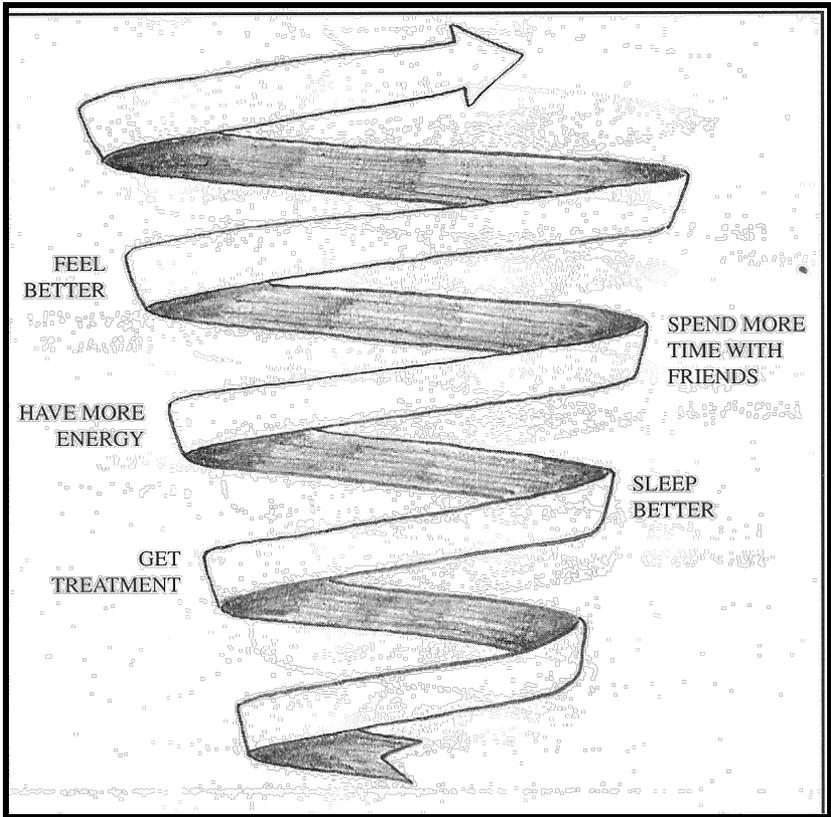
Depression's Downward Spiral



Depression influences your physical well-being, your thoughts and your feelings. People who are depressed usually stop doing things they once enjoyed, like talking to friends or getting projects done around the house.

Depression can feed upon itself, making you feel worse and worse. This Downward Spiral is sometimes caused by stressful events or physical problems.

Interrupting Depression's Downward Spiral



It's possible to break Depression's Downward Spiral.

You can turn it into an upward spiral by:

- ✓ Taking an antidepressant.
- ✓ Getting more active.
- ✓ Doing things you enjoy.
- ✓ Putting a positive spin on your thinking.
- ✓ Improving relationships with friends and family.
- ✓ Establishing a regular sleep pattern.

What can you do to get better when you don't feel like Doing Anything?

Often when you're depressed, it's easy to stay inside—to withdraw from friends and spend lots of time thinking about problems. We want you to try something different. We believe that you must become active and must be in more positive situations before you begin to feel better. We'll help you focus on things "outside" yourself—like changing how you spend your free time, how you act around others and how you approach tedious tasks. By doing these activities, we believe that you'll begin to feel better. We'd like you to "experiment" with one or more of the following:

- ✓ Getting physically active.
- ✓ Enjoying pleasant experiences.
- ✓ Accomplishing something.
- ✓ Connecting with others.
- ✓ Having fun with others.
- ✓ Create something.
- ✓ Take care of your health.
- ✓ Solve problems systematically by breaking them down into smaller problems.

We'll ask you to "experiment" to see what works best to help your depression and your chronic disease. We'd like you to get specific about what you're going to do.

You'll check the effect of these experiments by monitoring your health. When you find things that work, we'll build on them together. Some of these activities may seem strange or odd at first. We've seen them help other people with complex lives. In fact, we use some of these techniques to help manage our lives.

Why is there so much emphasis on **Getting More Active**?

Researchers have found that exercise improves mood by:

- ✓ Increasing the levels of neurotransmitters (mood-altering chemicals) that antidepressants target.
- ✓ Increasing blood levels of endorphins, the body's own painkillers, which improve mood and reduce physical pain.
- ✓ Becoming more active often helps people reduce their stress levels and have **more energy**.
- ✓ Physical activity improves the way glucose is used by the body, improves blood lipid levels and helps to reduce blood pressure.
- ✓ Physical activity helps us to lose weight and helps to maintain weight loss.

What kind of activity is recommended?

We recommend walking. It's an activity that most of us can do. We recommend working towards 30 minutes of walking on most days. If you prefer, we can give you a pedometer to measure your steps. We recommend working towards a goal of 10,000 steps on most days. The keys to increasing your activity are:

- ✓ Choosing an activity that you like.
- ✓ Keeping up with the activity.
- ✓ Knowing that you don't have to "work up a sweat"—walking should be right for you and your health.
- ✓ Start slowly—so that you can keep it up.
- ✓ When you miss exercising for a few days, it's **most** important to start up again.
- ✓ Work with your TEAMcare Nurse to figure out an Initial Activity Plan that will work for you.
- ✓ After you start getting more active, we can work together to update your plan as often as you like.

How do you decide if you're willing to take an antidepressant medication?

How do antidepressant medications work?

Antidepressants help restore the correct balance of neurotransmitters (brain chemicals).

How well do antidepressant medications work?

Antidepressant medications are all very effective. Most people who take antidepressant medications will get better in 4 to 8 weeks. The people who don't improve during the first 8 weeks usually improve with another medication.

Often your friends and family will notice improvements before you do. Usually your sleep and appetite will improve first and your mood, energy and negative thinking will improve later. In addition to improving depression symptoms, antidepressants can help improve sleeplessness and pain. If you have side effects from an antidepressant medication or don't improve, chances are excellent that you will improve on a different medication.

What about side effects?

Side effects usually occur in the first two weeks when taking antidepressants. Side effects can include:

- Nausea
- Headaches
- Jitteriness
- Difficulty sleeping or feeling overly sleepy

Side effects almost always are decreased within two weeks.

Common Questions about Anti-depressant Medications

My problem is sleep. How can an antidepressant help with my sleep?

- ✓ Often poor sleep is related to major depression. Once the depression lifts, sleep often improves as well.
- ✓ Antidepressants can help restore normal sleep, even in people who do not have major depression. They are better than other sleeping pills in that they are not habit-forming, and they usually do not impair concentration or coordination.

My problem is pain. How can an antidepressant help with this?

- ✓ Antidepressants are often used to treat pain--even in people who aren't depressed.
- ✓ Antidepressants may also help restore normal sleep and 'reverse' a vicious cycle of pain and poor sleep.

My problem is being tired and having no energy. How can an antidepressant help with this?

- ✓ Low energy and fatigue commonly occur in people with major depression. Once the depression improves, their energy starts to return as well.

My problem is stress in my life. How can an antidepressant help with this?

- ✓ Life stress can cause or worsen the symptoms of depression. The depression can then worsen the impact of such stressors (such as work stress, family problems, physical disabilities or financial worries) and your ability to cope with them. Treating the depression can help some patients break out of this vicious cycle.

How long will I have to take the medication?

- ✓ Once you are completely recovered from your first episode of depression, you should stay on the medication for another 6-12 months to prevent having another depression episode.
- ✓ Some patients who have had depression multiple times or have been chronically depressed for longer than 2 years are at high risk for a recurrence **and** should take a 'maintenance' dose of antidepressants for longer periods of time.
- ✓ Some people, with a long history of depression, choose to stay on antidepressants for the rest of their lives.

Is it safe to take antidepressants together with alcohol or other medications?

- ✓ Antidepressants can increase the sedating effects of alcohol. Be careful to limit alcohol intake to one glass of wine or beer per day while on these medications.
- ✓ If you start taking a new over-the-counter or herbal medication, let your doctor or TEAMcare Study Nurse know.

What should I do if I miss the medication one day?

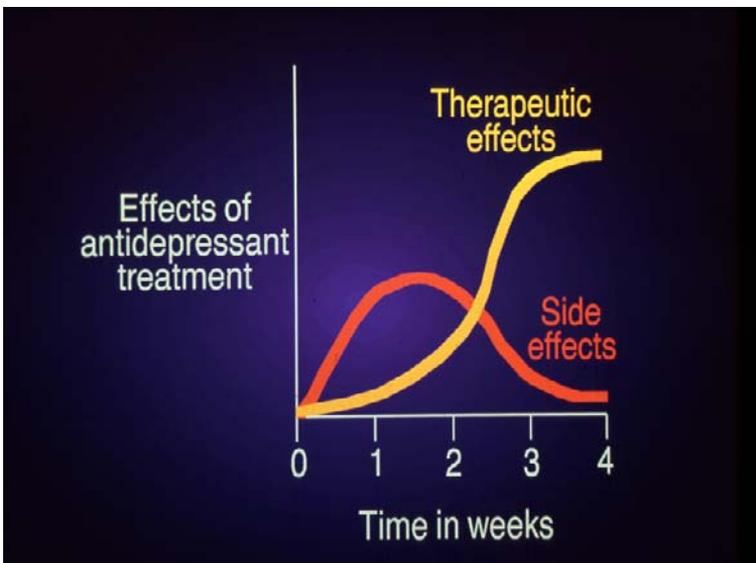
- ✓ Don't 'double up' and take the dose you forgot. Just keep taking your medication as prescribed each day.

Will I get better?

- ✓ With adequate treatment, about 80% of people will have a complete recovery.
- ✓ Should you not respond to the first antidepressant treatment you try, there is an excellent chance that you will respond favorably to another medication or to psychotherapy.

Keys to Getting the Best Action from Antidepressant Medications

- Antidepressants **aren't** addicting—they just help you make more key brain chemicals (neurotransmitters). Some people have been taken antidepressants for up to 30 years without any significant problems.
- Take your medication each day.
- Check with your Physician or TEAMcare Nurse before stopping your antidepressant.
- Expect to begin feeling better slowly. The medications may take 2 to 4 weeks to work.
- As the figure below shows, medication side effects decrease after 1 to 2 weeks. Call us if you're bothered by side effects—we can often suggest ways to help.
- Keep taking your antidepressant medication even when you feel better.



Getting a Good Night's Sleep

Depression disrupts your normal sleep pattern. It makes you feel restless because your body is getting mixed messages about whether it's daytime or nighttime. Pain, alcohol or drugs, and late-night coffee can also disrupt your sleep.

DO's and DON'Ts for Restful Sleep.

- ✓ Don't drink caffeine close to bedtime.
- ✓ Don't drink alcohol close to bedtime.
- ✓ Don't lie in bed if you're tossing and turning for more than 20 minutes. Get up & go to another room. Do something quiet and relaxing. When you feel sleepy, go back to bed.
- ✓ Do exercise—but not close to bedtime.
- ✓ Do establish a regular bedtime.

Set a regular waking time. Set a regular time that works for you. Keep to it even if you slept poorly the night before.

Try not to vary your schedule from day to day. Avoid taking a nap when you're having trouble sleeping at night.

You may need less sleep. As we age, we may need less sleep. This amount varies from person to person, but when you get your ideal sleep, you're likely to get up feeling better.

Antidepressants can improve your sleep. Some have a sedative effect. All antidepressants can help by increasing the levels of chemical messengers in the brain. This leads to a more restful sleep.

Relaxing

Sometimes the hassles of everyday life can make you feel tense. Feeling tense can reduce the levels of key chemicals in the brain—worsening depression. Relaxation techniques can help reduce tension—if you find one you like and practice it!

Deep muscle relaxation is one way to learn to recognize when you need to relax. Sit in a chair that supports your entire body. First tense your muscles in your shoulders by crunching your shoulders up towards your ears. After 5 seconds, relax the muscles in your shoulders completely—paying attention to how your muscles feel when they're fully relaxed. Tense and relax your face, neck, arms, hands, abdomen, back, buttocks, thighs, calves and feet. Tense and release each area twice before starting on the next area.

Using your breath to relax is easy, quick and effective. Let your shoulders drop. Breathe in as slowly and deeply as you can through your nose. Hold your breath while you count to four. Breathe out slowly and completely. Repeat five times.

Stretching, by taking a 2-minute stretch break to stretch your neck, back, shoulders and legs, can work quickly to help you relax.

Imagery. Think of a time or a situation when you felt relaxed. Close your eyes and imagine that time or place. Think about how it felt and looked.

Other steps to relieve tension include:

- ✓ Taking a walk
- ✓ Listening to music
- ✓ Taking a warm bath or a shower.

Thinking More Constructively

Everyone has negative thoughts once in a while. If your negative thoughts occur too often, you'll feel down all the time. Here are things you might try:

- ✓ Identify negative thoughts.
- ✓ When you recognize negative thinking, try substituting a positive thought for the negative one. For example, if you take the wrong bus and think "I'm really stupid", you might substitute "now I've really figured out the bus routes".
- ✓ **Remember most negative thoughts aren't rational.** Negative thoughts are often overreactions which impose unrealistic expectations or conclusions.
- ✓ Argue with your irrational thoughts. When you recognize your self-critical thoughts, you can learn to confront them. Think of yourself in a debate with your self-critical thoughts—you can say "that's not true" to an irrational idea.
- ✓ Replace negative thoughts with positive ones.
- ✓ Accept some negative thoughts. Everyone has some negative thoughts. However, you can take back some control over your thinking.
- ✓ Tame your expectations. Often depressed people have extremely high, often unrealistic, expectations and are more critical of themselves than they are of others.

Ways to reduce negative thoughts:

- ✓ Thought stopping
- ✓ Set a worry time
- ✓ Buddy "check-in"

Ruminating: When You Can't Get it out of Your Mind

Sometimes we get stuck and can go over and over something bad that's happened. Sometimes it's easy to spend a lot of time worrying about something that may happen in the future. This is called ruminating—like a cow chewing its cud. Painful thoughts and feelings or worrying about things that happened in the past is very common in depression.

Because it's so easy to get stuck in the ruminating process, it's important to gain control over this behavior. There are other choices that you can make.

First: Recognize what you're doing. Check if:

- ✓ You're thinking over and over about negative thoughts, feelings or situations.
- ✓ The process of thinking over and over is not helping you feel less depressed, less critical, or more hopeful.
- ✓ The process hasn't helped you solve a problem.

Second: Recognize the situation. Are there times or places when you tend to ruminate?

Third: Spring into ACTION. The **ACTION Strategy** is described on the next page.



ACTION Strategy

A=Assess	How will my behavior affect my depression?
C=Choose	I know that activating myself will increase my chances of improving my life situation and mood. Therefore, if I choose not to self-activate, I am choosing to take a break.
T=Try	Try the behavior I have chosen.
I=Integrate	Integrate any new activity into my daily routine.
O=Observe	Observe the result. Do I feel better or worse? Did this action allow me to take steps toward improving my situation?
N=Never	Never give up.

Managing Your Medications

Most of us have trouble remembering to take our medications, if that's a problem for you, there are some things that we can try:

- ✓ We'll always try to change medications to once a day or twice a day scheduling. It's difficult for everyone to take medications 3 or more times a day.

- ✓ If you have concerns about taking a medication, tell your TEAMcare Nurse or Physician.
- ✓ Make sure that we tell you the name of each medication, reason for taking the medication, how to take it (how many times a day and when during the day), how long to take it, and the side effects that could occur.
- ✓ Many of us get advice from our friends or family about medications. Sometimes this creates fears. Please tell us what your fears are so that we can talk about them.
- ✓ Please check with your TEAMcare Nurse or Physician before stopping medications.
- ✓ If you are taking many medications, a medication set may help. We have medication sets that we give you and help you learn to use daily.
- ✓ Ways of taking medications can get very complex. We will work to make routines as simple as possible.
- ✓ However, please let us know what is **(and isn't)** working well for you.



Managing Persistent Pain

Is persistent pain a natural part of growing older?

No. Even though pain is very common, it is not normal or healthy. If pain is interfering with your activities, it should not be ignored or dismissed.

Can I take over-the-counter medications for pain?

Over-the-counter pain medications are safe and helpful to take for mild to moderate pain. If you have pain that lasts more than a few days, or severe pain, please talk with your Primary Care Physician about medication choices.

What over-the-counter medicine is best?

Acetaminophen (Sustained-release or "arthritis" Tylenol) may be the best choice for mild-to-moderate pain, such as osteoarthritis or low back pain. If you use over-the-counter medicines long-term, please check with your Primary Care Physician to make sure your routine is safe.

What can I do besides taking medications?

Physical activity is extremely important. Contrary to popular belief that exercise worsens joint pain from arthritis, regular physical activity can improve muscle strength, flexibility, and decrease pain.

What if my pain is not relieved?

Although you may not get complete relief from pain, ***don't give up!*** The most important goal is to have the best quality of life that you can. Discuss persistent pain with your Primary Care Physician and your TEAMcare Nurse to help you solve problems and make your treatment plan work best for you.

Monitoring your Health

As we begin to work together, it's important for us to understand how different treatments are working. You may want to know if a behavior experiment or a medication is working. For example:

- ✓ If you're taking a new antidepressant, how is your mood changing?
- ✓ If you're working to change eating habits, are there certain times of the day that are a problem for you?

In order to make changes in our medication routines or in our lives, it can help to know what we're doing and how we're changing. Many people have success monitoring behavior or measures more often when they're working to change. After a while the change can get so routine, you may be able to manage with fewer monitoring check-ups.

If we're working together to improve your blood pressure or your blood sugar, we'll be asking you to check those measures fairly often. Most people also find it helpful to monitor their mood—by rating their PHQ 9 score.

Keep in mind that this monitoring is to help you and your TEAMcare Nurse understand how behavior experiments and medicines are working for you. Monitoring is **not** a report card that labels you or your efforts to change. Monitoring allows you to chart your progress and make changes when necessary.

Monitoring Your Depression: The PHQ 9

The PHQ 9 is a way that we'll use to follow how you're progressing with your depression treatment. It will also be a way that you can check your symptoms yourself.

Over the <u>LAST 2 WEEKS</u> how often have you been bothered by any of the following problems?	0 = Not at all	1 = Several Days	2 = More than Half the Days	3 = Nearly all the time
1. Little interest or pleasure in doing things				
2. Feeling down, depressed, or hopeless				
3. Trouble falling or staying asleep OR sleeping too much				
4. Feeling tired or having little energy				
5. Poor appetite OR overeating				
6. Feeling bad about yourself or that you are a failure or have let yourself or your family down				
7. Trouble concentrating on things, such as reading a newspaper or watching television				
8. Moving or speaking so slowly that other people could have noticed? OR the opposite - being so fidgety or restless that you have been moving around a lot more than usual?				
9. Thoughts that you would be better off dead or thoughts of hurting yourself in some way?				

Add all the numbers together to get your PHQ 9 score. An ideal goal is to keep your score less than 5 or to keep your score stable. When your score doubles or goes over 10, it's time to get help.

Making Choices about Your Health

****For Everyone**

Your TEAMcare Nurse wants to help you manage your health. The way you manage will be your choice. Our job is to give you the best information and support so that you make choices that work for **you**.

Improving your mood: Depression is common in people with chronic disease. Depression can make it difficult to manage your health. Medications, counseling and physical activity are successful at helping people who are depressed.

1. Increasing your physical activity is very important to helping improve your mood. Getting more active can help your mood and can help your heart disease or diabetes.
2. Taking antidepressant medications makes most people feel much better in 2-4 weeks.
3. Psychotherapy helps most people improve relationships and depression in 6-8 weeks.
4. Working on strategies to improve relationships, problem-solving skills and mood can be helpful.

On the next several pages, we'll list some choices you can make to improve your diabetes or heart health. Diabetes and heart disease last for life. Managing them means that you will always make choices, do your best and learn from mistakes. We know you will never be perfect but we want to be your partners to support you as you make choices that can improve your health.

Making Choices about Your Health

**For Better Heart Health

Below, you'll see a number of ways that you can improve your health and lower your risk of complications.

Stop smoking: If you smoke, stopping smoking decreases your risk of heart attack and early death more than any other treatment. Free & Clear is a Group Health program that can help you prepare to quit, help you manage withdrawal symptoms and help you learn the new behaviors and skills needed to remain tobacco-free. You can register for Free & Clear by calling toll-free: 1-800-462-5327.



Taking Aspirin: Taking an aspirin every morning decreases your risk of heart attacks and early death.

Improving your blood pressure: High blood pressure increases your risk of an early death. People with heart disease or diabetes who lower their blood pressure to less than 130/80, decrease their risk of having a heart attack or stroke. Exercising and losing weight can help people lower their blood pressure. For most people, medications are needed.



Lowering your cholesterol. Changing your eating habits or taking medications can lower your cholesterol level. Diets low in saturated fat or higher in monounsaturated fats improve blood cholesterol. "Statin" medications can lower cholesterol levels and lower your risk of having a heart attack or stroke.

Monitoring Your Blood Pressure

Our blood pressure varies quite a bit during the day. If you're active, have a cup of coffee or a cigarette, your blood pressure may be higher. When you start working to lower your blood pressure, it's important to have reliable blood pressure measurements. The steps that have been found to be important in getting a reliable blood pressure measurement are:

- ✓ Take the measurement at the same time each day. Most people take their blood pressure in the early morning or in the evening.
- ✓ Don't have a beverage containing caffeine (including coffee, tea or 'pop') for 30 minutes prior to taking your blood pressure.
- ✓ Don't have tobacco or alcohol for 30 minutes prior to taking your blood pressure.
- ✓ Sit in a chair with back and feet supported and your arm bare and supported at about your mid-chest level.
- ✓ Try to take your blood pressure in quiet and calm surroundings.
- ✓ Wait two minutes and repeat your blood pressure. The readings should be very close. If they are very close, write down the second blood pressure number. If the numbers vary by more than 5 points, take a third blood pressure and write it down.
- ✓ Expect that the blood pressures will be different every day.



Making Choices about Your Health ****For Better Diabetes Management**

Getting more Active: Increasing your activity may help you lower your blood glucose, lose weight and improve your mood.

Eating Habits: Most of us eat too much food and weigh too much. Eating smaller portions of food, limiting the amount of saturated fats, or balancing carbohydrate eaten at different times of the day can help you lose weight, improve your blood pressure and improve your HgA1c.

Improving your Hemoglobin A1c (HgA1c)—your long-term blood sugar: The lower your blood sugar, the lower your risk of early death, heart attacks, eye disease, kidney disease and nerve disease. For many people, having their HgA1c level about 7 would lead to important health improvements. Getting your HgA1c down to 7 may require working on your eating pattern, getting more active and taking blood-sugar lowering medications. You will need to test your blood sugar to know how well you are doing.

Finding a medication routine that works for you and following it. Different medication routines work for different people. The key is working with your medical team to understand how your diabetes medications are working and how they may work differently if you're sick, if your weight changes or if you get more active.

Take lisinopril: People with diabetes, who are older than 55 or have high risk of heart attacks, are less likely to have heart attacks, stroke, or develop kidney disease if they take lisinopril. **It's your choice:** we're here to help you!

For People with Diabetes: Using Blood Sugar Readings to Manage Medications and Feel Better



Why should I bother testing my blood sugar?

Everyone reacts differently to diabetes. For some people, a change in exercise and activity or a small amount of a diabetes pill, like metformin, will bring down blood sugar. For others, higher doses of pills or insulin are needed. The best way to tell how the medications are working is by testing your blood sugar.

I've just been diagnosed with diabetes. When's the best time to check my blood sugar?

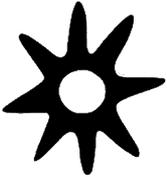
If you're going to start taking one blood sugar reading a day, we usually recommend taking a morning blood sugar reading. This reading, called a "fasting blood sugar" should be taken before eating or drinking anything (other than water or black tea or coffee).

How can I use a morning blood sugar to tell how my diabetes medication is working? Blood sugar readings vary each day. The goal for fasting blood sugar readings for most people is 80-120. If your blood sugar reading is higher than this most days, a change in your medication routine may be needed.

What does my fasting blood sugar test tell me if I'm taking insulin at bedtime? The first dose of insulin ordered is almost always too low. Taking fasting blood sugar tests can tell you how well your night time dose of insulin is working. Your TEAMcare nurse or Primary Care Team may teach you how to use your fasting blood sugar to increase your bedtime insulin dose until you've found the right amount for your body.

How will I use blood sugar results if I'm taking two doses of long-acting insulin (NPH or Lantus)?

You will use the before breakfast and before bed blood sugar results to see how well your insulin doses are working.



Two before breakfast blood sugar readings in a row give a good idea of how well your **bedtime** dose of insulin is working.



Two bedtime blood sugar readings in a row give a good idea of how well your **morning** dose of insulin is working.

How about taking tests before meals? Sometimes it can be very helpful to take blood sugar tests prior to meals. These tests can be used to tell how well your daytime insulin is working or, for people who need meal-time insulin, to predict how much insulin to take for a meal.

What if I have low blood sugar symptoms: We'd always like you to take a blood sugar test, if possible, if you have symptoms of a low blood sugar reaction.

Taking blood sugar tests after meals. Some people like to take blood sugar tests after eating to see how a particular food changes their blood sugar. We do not recommend testing blood sugars after meals when you're first working to get better control of your diabetes. The results of after meal blood sugar tests can be hard to understand and aren't often as important as other tests.

For People with Diabetes: What to Do When Your Blood Sugar is too Low

Who can get low blood sugar reactions?

- ✓ People who are taking insulin or diabetes pills (like glipizide or glyburide).

How do you feel with low blood sugar reaction?

Symptoms include:

- ✓ dizziness, blurred vision
- ✓ confusion, irritability
- ✓ headache
- ✓ feeling weak or shaky
- ✓ tingly lips, tongue, or fingers



However, these feelings can occur when your blood sugar drops quickly or when other things are going on. How do you know if a low blood sugar is causing your symptoms?

- ✓ If you can, take your blood sugar. If you can't take your blood sugar, you should treat the symptoms.

How do you treat a low blood sugar reaction?

Eat or drink something with carbohydrate in it. Examples include:

- ✓ 4 oz. fruit juice or **regular** soda
- ✓ 5-6 life savers or 2-3 glucose tablets

After 10 to 15 minutes, recheck your blood sugar. If your blood sugar is still low, eat more carbohydrate. **Don't eat protein** to treat a low blood sugar reaction. New research suggests that protein can increase the action of your insulin and can cause blood sugars to go lower.

What to Do When You're Sick

What's special about illness and diabetes?

- ✓ Usually, when you're "fighting off" an infection or when you're sick, your blood sugar results will be higher than you'd expect.
- ✓ When you're not feeling well, you may not be able to eat, drink, or exercise as usual.
- ✓ High blood sugars and drinking smaller than usual amounts of fluid can make you very ill.

What's most important to know about being sick?

- ✓ If you take metformin and have a bad problem with diarrhea or vomiting, **stop** taking metformin and **call** your physician or consulting nurse right away.
- ✓ If you're taking other diabetes medications, keep taking them when you're sick.

Drinking fluid:

- ✓ It's important to try to drink fluids when you're sick. Try to sip at least 8 ounces (one cup) of fluid every hour when you're awake.
- ✓ If you're too ill to eat any regular food and your blood sugars are less than 240, drink non-diet liquid (like *Gatorade* or regular pop).

When should you call your Primary Care Team?

- ✓ If throwing up and can't take your medication.
- ✓ If you're taking **metformin** and can't eat and drink like normal.
- ✓ If you're blood sugar levels are much higher than normal.
- ✓ If you need help figuring out what to do to get feeling better.

Communicating with Your Doctor

Talking with your doctor can be challenging. We're all busy—sometimes a doctor can seem so busy that you may be hesitant to mention your problems. It's also hard to talk about depression or other medical problems. Five steps can help to improve communication with your doctor.

1. **Come prepared.** Come with a clear objective. What do you hope to get from this visit? It's also useful to make a list of symptoms and questions before you get to the doctor. List your most important concern first. Refer to your notes during the visit.
2. **Ask questions.** In order to make choices about your care, you need to understand what the choices mean.
3. **Discuss problems.** In particular, mention problems that you're noticing with any medication or therapy.
4. **Ask for reading materials.** It can help to review information after leaving your doctor, so you can better understand your care choices.
5. **Ask for your After Visit Summary.** This is a copy of the important information from your clinic visit and often has information about any medications or other treatments that have been ordered.

These steps can help you develop a plan for managing your health. Your TEAMcare Nurse will help you!

Using all the Tools: My Group Health

If you have access to a computer and the internet, you can use it to:

- ✓ "Talk" to your TEAMcare Nurse. Let your nurse know that you've joined MyGroupHealth. She can send you a note that will allow you to send e mail messages directly back to her.
- ✓ Ask questions of your Primary Care Doctor and you Health Care Team.
- ✓ Look up health information.
- ✓ Refill medications and have them sent to you at home.
- ✓ View your medical record.
- ✓ Request appointments.

MyGroupHealth is private and confidential. Your medical information is secure.

Read the instructions below, then go to www.ghc.org.

1. Click on "new to MyGroupHealth? Register now" in the upper left corner.
2. Enter your exact card number (Consumer Number, MyGroupHealth Access Number or ID Number), your last name, and your birth date (make sure you enter a 4-digit year). Click "Submit."
3. Create a private password and memorize it or keep it in a safe place. Click "Submit."
4. You are now a registered member on MyGroupHealth.
5. Log in by entering your card number and the password you just created.
6. Personalize your site by creating a profile. This section is optional.
7. You are now logged into MyGroupHealth. Enjoy!

Your Relapse Prevention Plan

A Relapse Prevention Plan focuses on stress reduction and self-monitoring and can help you to recognize depression early.

First: Use the depression-fighting strategies that have worked for you in the past, including taking your antidepressant medication regularly, increasing your pleasurable activities and maintaining a healthy lifestyle.

Second: Write down the problems that can trigger your depression and strategies that have helped you in the past.

- ✓ What are some of my everyday stressors?
- ✓ What coping strategies have worked for me in the past?
- ✓ What strategies do I think will be most useful for combating my everyday problems?
- ✓ Are these skills I can use every day or every week?
- ✓ How can I remind myself to use these skills daily?

Third: Try to identify three or four specific actions that will help you. Be realistic about what you can and will do.

Fourth: Prepare yourself for high-risk situations.

- ✓ What are some problems or predictable stressors that might affect you in the future?
- ✓ Can you do anything to make a particular event less likely or less stressful?
- ✓ If you can't avoid a stressful situation: can you avoid negative reactions (like criticizing yourself) or react in a more positive way?

Fifth: Watch for warning signs by regular self monitoring. You can check routinely for personal warning signs or telltale patterns of thought or behavior. You may want to ask a partner or friend to let you know if they notice any warning signs

Sixth: Use the PHQ test (page 23) to check your depression score. If your score goes up over 10, it's time to get help again.

My Relapse Prevention Plan

My depression medications and their doses are:

- 1.
- 2.

I've been taking these medications since: _____

Most people take antidepressants for at least 6 months. Many take them for many years. If you decide to stop taking antidepressants, please check with your Primary Care Physician about safe ways to decrease the medication.

My PHQ score today is:

In the past, I recognized that I was depressed because I felt the following symptoms:

- 1.
- 2.
- 3.

✓ If these personal warning signs recur, I will get help!
My plan for getting help is:

To reduce stress and keep daily hassles from adding up, I will:

- 1.
- 2.
- 3.

Finally, I will remember that I deserve to feel good!

Staying on Track with other Changes

When we've made changes in our behavior, there's always a tendency to drift back towards old habits.

How can you stop the backward drift?

- ✓ Think about reasons that you might drift. Make a list of reasons that you might not keep up with healthy changes.
- ✓ Keep an eye on yourself. Monitor your behavior enough that you can catch your drift early, before you feel like you're in a deep hole.
- ✓ Keep an eye on your blood work. Tests to check on diabetes control (like hemoglobin A1c) or heart disease risk (like cholesterol tests) are like early warning systems—best done every three months so you can know if you've drifted.
- ✓ If you feel you need to change medications—please call your Primary Care Team. Your Physician or Nurse can help you decide the safest options for medication changes.
- ✓ Use your “coaches” or “partners” to help you realize that you're drifting. Give them specific behaviors that you'd like noticed and ways that you'd like them to give you feedback.
- ✓ Put drift into perspective. We all make plans, but all of us drift away. The key is catching yourself and getting back on track.