DIABETES

An overview for Behavioral Health Consultation

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DIABETES

- **Type 1**: Body produces no (or very little) insulin
- **Type 2**: Body does not use insulin effectively
RISK FACTORS

- Genetics
- Obesity
- Sedentary Lifestyle
- Age >45 years
- Diabetes during a previous pregnancy
- Given birth to a baby weighing more than 9 pounds
- HDL cholesterol under 35 mg/dL
- High blood levels of triglycerides (250 mg/dL or more)
- High blood pressure (greater than or equal to 140/90 mmHg)
- Impaired glucose tolerance
- Metabolic syndrome
- Polycystic ovarian syndrome
HEALTH COMPLICATIONS

- Heart Problems
- Stroke
- Kidney damage
- Neuropathy
- Eye Problems
- Gum disease
- Wounds/Infections
- Sexual dysfunction
- At risk pregnancy
TESTING BLOOD GLUCOSE

Testing at the PCP office
- A1c
- Fasting Glucose

Testing At Home
- Pre-prandial/Postprandial
- Random
- Fasting
- Tools
  - Glucometer
  - Test strips
WHAT CAUSES CHANGES IN BLOOD SUGAR

- Food
- Exercise
- Illness
- Stress
- Medications
SYMPTOMS OF HYPERGLYCEMIA

- Excessive thirst
- Blurry Vision
- Frequent urination
- Weak/Tired
- Hungry
- Dry Skin
SYMPTOMS OF HYPOGLYCEMIA

- Shaky
- Dizzy
- Weak/Tired
- Upset/Nervous
- Hunger
- Sweaty
- Headache
DIABETES AND DEPRESSION

- Persons with Diabetes have an increased risk of Depression
- Persons with Diabetes and Depression have an increased risk of mortality
- Smoking and Obesity increase risk of depression in women with Diabetes
SELF MANAGEMENT

- Diet
- Exercise
- Medication management
- Checking blood sugar
- Sick day plans
- Foot care
- Stress management
- Smoking cessation
- Limiting Alcohol consumption
- Education/Family Issues
Potential Interventions Include:

- Patient Education/Assess understanding
- Depression screening and intervention
- Motivational Interviewing for behavior change
- Help patient establish goals for Dietary Changes
- Medication Adherence Strategies
- Help patient establish goals for Starting Exercise Plan
- Smoking Cessation Counseling
- Alcohol Moderation/Referral to Substance Abuse Treatment if appropriate
- Teaching stress management techniques
- Family Support/Issues
- Checking blood sugar (adherence, needle/blood phobia)
- Self-care (foot care, sick days) planning
You are meeting with Alan, a 45 y/o male, newly diagnosed with Diabetes. The PCP would like Alan to change his lifestyles that impacting his Diabetes treatment. Alan currently drinks between 6-12 sodas per day, and eats the majority of his food at night, frequently skipping breakfast and lunch. Alan would like to “eat better”
It sounds like you clearly see how ___________ is affecting your health. In the past you did ___________ but you currently ___________________________. It sounds like it would be helpful to develop a way to manage __________________________ so that you will be able to ________________. Would you be interested in developing a plan to improve your ________________?

SMART GOAL

Feedback to medical provider
RESOURCES

- Diabetes.org
- Learningaboutdiabetes.org

Diabetes Care. 2004 Apr;27(4):914-20