With summer just around the corner, opportunities for outdoor activities abound. Have you noticed your favorite outdoor activities like gardening or sports are becoming difficult due to pain, lack of strength, shortness of breath, or loss of flexibility? A well-planned physical activity routine combining aerobic conditioning, strength training, and flexibility will help make your day-to-day activities more enjoyable.

Get F.I.T.T.!

To find time for regular fitness, develop a plan that fits your lifestyle and needs. It’s important to understand how your chronic health condition may affect your ability to engage in regular physical activity. Below are some general exercise guidelines for individuals with diabetes. Ask your healthcare provider to recommend appropriate activities given your health condition.

Use the F.I.T.T. principle to establish a workout that works for you.

**Frequency:** How often do you take part in regular physical activity?

**Intensity:** How intense is this activity?

**Time:** How long do you do this activity?

**Type:** What type of activity will you do?

Aerobic Activity Guidelines for Individuals with Diabetes

**Frequency:** Aim for 3 to 7 days per week of aerobic activity. To get the most benefit of blood sugar control have no more than 2 days of rest between activities.

**Intensity:** Work at about 40 to 60 percent of your maximum heart rate (to estimate maximum heart rate subtract your age from 220). You can also use the talk test: during moderate-intensity aerobic exercise you can talk but not sing, and during high-intensity exercise you are too winded to talk. If you have diabetic retinopathy, either early stages or advanced, you should avoid vigorous aerobic exercise.

**Time:** Accumulate 20 to 60 minutes per day of aerobic activity in bouts of at least 10 minutes. Get at least 150 minutes per week of moderate physical activity. Additional benefits are seen with 300 minutes or more of moderate activity each week.

**Type:** Activities you enjoy that use large muscle groups in rhythmic fashion such as brisk walking, jogging, cycling, rowing, swimming, aerobic dance, and water aerobics.

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**Benefits of Regular Physical Activity**

- Helps your insulin to work better
- Improves blood glucose control
- May decrease your need for certain diabetes medications
- Can lower bad cholesterol and blood pressure
- Helps to maintain weight loss

Before beginning an exercise program other than brisk walking, talk with your doctor. Individuals with diabetes should get a medical evaluation of cardiovascular, kidney, and eyes to identify diabetes-related complications to consider when exercising.

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Strength Training Guidelines for Individuals with Diabetes

Strength training is encouraged for most people with diabetes. It is not advised for those with diabetic retinopathy or recent laser eye treatments. If you have retinopathy, either early stage or advanced, talk with your eye doctor before beginning strength training exercises due to increased risk for retinal detachment and other serious eye damage.

**Frequency**: Aim for 2 to 3 days per week of whole-body strength training with at least 48 hours separating the exercise sessions.

**Intensity**: Complete 2 to 3 sets of 8 to 12 repetitions at a weight of 60 to 80 percent of the maximum weight you can lift with 1 rep of the exercise. Rest 2 to 3 minutes between sets.

**Time**: Complete 8 to 10 various exercises that cover all of the major muscle groups: chest, back, shoulders, biceps, triceps, abdomen, quadriceps, and hamstrings.

**Type**: Use free weights, weight machines, exercise bands, or your own body weight to build strength in the major muscle groups listed above.

Flexibility Training Guidelines for Individuals with Diabetes

**Frequency**: Stretching should be performed at least 2 to 3 days per week.

**Intensity**: Perform stretching to the limit of mild tightness without discomfort.

**Time**: Engage in a stretching exercise program of at least 10 minutes in duration. Static stretches can be held for 15 to 60 seconds and repeated for 4 repetitions.

**Type**: Stretch the major muscle tendon groups of the body (neck, shoulders, upper and lower back, pelvis, hips, and legs).

Plan It Out

You may be eligible to work with a health coach. To learn more contact us at yoursupport@pacificsource.com or (888) 987-5805.

Research has found that if you write out a plan, share it with a friend, and send a weekly progress report you’re much more likely to reach your goals.

- How many times per week will you perform cardio, strength, and flexibility exercises?
- What type of activity will you perform for each?
- How many minutes will you spend doing each?
- What days and times will work for your schedule for each activity?
- What level of intensity will you aim for with your cardio workouts?
- Who will you share this goal with as your accountability partner?
Special Considerations for Physical Activity with Diabetes

- It's a good idea to check your blood sugar before and after exercise, especially when beginning or changing your routine.
- If you take insulin or an oral medication that can cause low blood sugar, such as glipizide, glyburide, glimepiride, Actos, or Avandia:
  - You have an increased risk of low blood sugar during or after exercise. Be familiar with the signs of low blood sugar and always carry a carbohydrate snack with you.
  - To reduce the risk of low blood sugar, exercise at a similar time on a daily basis. If possible, don’t exercise during peak insulin action. Exercise before bed is not recommended because of the risk of delayed post-exercise low blood sugar. If you have to exercise late in the evening, you may need a carbohydrate snack before bed.
- Especially for individuals with Type 1 Diabetes, if your blood glucose is above 300 mg/dL without ketones in your urine and you are feeling well and adequately hydrated—it is typically safe to engage in moderate activity, but avoid vigorous physical activity.
- If you have numbness, tingling, or pain in your feet, take care to prevent ulcers, avoid blisters, and keep feet dry. Nonweight-bearing activities, such as cycling, rowing, swimming, or water aerobics may be better tolerated. Always check your feet before and after any activity or exercise.
- Individuals with kidney damage can safely exercise. There is no evidence that vigorous exercise accelerates the progression of kidney disease.

Signs of low blood sugar:
Shakiness, weakness, abnormal sweating, nervousness, anxiety, tingling of the mouth and fingers, and hunger

Signs of high blood sugar:
Frequent urination, fatigue, weakness, and thirst

Exercise Videos and Programs

Think-Nourish-Move Exercise Video Playlist: http://tinyurl.com/lwprsec

ACE Fit Exercise Library: acefitness.org/acefit/exercise-library-main/


Cranberry Apple Quinoa Cereal

Adapted from Cooking Light’s Pressure Cooking Made Simple, this recipe makes 4 servings. For some added protein serve this with plain, low-fat Greek yogurt, or low-fat milk.

Ingredients
1/2 cup slivered raw almonds
1 cup uncooked quinoa
1 1/2 cups water
1/3 cup dried cranberries
1/4 tsp. salt
1 medium apple (like braeburn), cored and chopped into bite size chunks (leave skin on)
1 tsp. vanilla extract
1/4 tsp. ground cinnamon
2 tsp. granulated sugar

Directions
1. Heat a large sauce pan on medium-high heat. Add almonds and cook for about 2–3 minutes until slightly browned, stirring frequently. Remove almonds from pan and set aside.
2. Add the quinoa to the pan and toast 1–2 minutes until lightly browned. Add the water, cranberries, salt, and half of the apple. Cover, reduce heat, and simmer 10–15 minutes or until cooked and water is absorbed. Remove from heat and stir in vanilla.
3. Meanwhile, combine sugar, cinnamon, almonds, and remaining apple, mixing well. Top each serving with a quarter of this mixture.

Nutrition Facts:
300 calories, 9g protein, 9g fat (1g sat. fat), 47g carbohydrate, 6g fiber
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