Guided Meditation
Fridays
9:50-10:15am
Relaxation Lounge
No RSVP required

August Cooking Demo:
Make Your Own Salsa

Featured Recipes:
Garden Salsa
Pineapple Mango Salsa

August 23rd
11:30 am - 1 pm
Diabetes Center Theatre Kitchen
Please RSVP by August 21st
8 spots available.

Move for Health (MFH):
Nurse supervised exercise classes
Must be enrolled in LGHP
Monday-Thursday
8-9am, 9-10am, 10-11am, 11am-12pm & 3-4 pm

Community Classes:
No registration required

Public Fitness
Monday - Thursday
5am-8am
&
Mondays - Fridays
12-1pm

Boot Camp
Monday & Wednesday
4:30-5:15pm

Water Aerobics
Monday & Thursday
5:00pm - 6:00pm

Supervised Swim
Wednesday & Friday
8:00-9:00am

Club Circuit
Friday
9:00-9:45am

All exercises classes offered by the Let’s Get Healthy Program are free to ages 18 and older
Please wear comfortable clothes and bring clean/dry sneakers and a water bottle.

Saint Regis Mohawk Tribe Clubhouse
Is now OPEN at the Diabetes Center for Excellence!!!
The clubhouse is a safe and welcoming space for ages 15-20 in the community who are seeking a drug and alcohol free environment.

Monday - Friday: 11 am – 9 pm
Saturday & Sunday: 1 pm - 8 pm

*Snacks provided

Water Aerobics:
Time change
Monday August 6th
Class will begin at 4:30pm for that day only

There will be NO Guided Meditation
August 10th & 24th

*News*

On Thursday July 12th our staff participated in the Health Fair that took place at the Hogansburg - Akwesasne Volunteer Fire Department. To celebrate Akwesasne’s Wellness Week, our Nurses implemented a blood glucose screening, our Registered Dietitian set up a display with sugar in beverages and we also shared information about the Stopping Gestational Diabetes Study. Our Health Promotion Specialists set up a balloon popping game. Participants chose their own balloon to pop and if they performed the exercise that was inside their balloon, they won a small prize! Everyone had a lot of fun and we enjoyed our time at the event as we had plenty of participation to help keep everyone moving!

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August is Summer Sun Safety Month
Your skin is your body’s largest organ, so it’s not a surprise that skin cancer is the most common kind of cancer, with about 3.5 million cases of basal and squamous cell skin cancer diagnosed in the United States each year. These cancers in the outer layer of your skin occur most where your skin is exposed to the sun, such as the face, ears, neck, lips and the backs of your hands.

Melanoma, a more dangerous type of skin cancer that begins in the cells that make pigment, will account for about 73,000 new cases this year.

You can reduce your risk of getting skin cancer by protecting your skin from overexposure to ultraviolet rays, which are emitted by the sun but also by tanning beds and sunlamps.

The American Cancer Society notes the best way to avoid overexposure to harmful rays is to stay in the shade.

But when you know you will be in the sun, it suggests you “Slip, Slop, Slap and Wrap:”

- Slip on a shirt
- Slop on sunscreen
- Slap on a hat
- Wrap on sunglasses

https://healthplans.providence.org/fittogether/find-your-fit/manage-health-conditions/cancer/august-is-summer-sun-safety-month/
Because the type of carbohydrate can affect blood glucose, using the GI may be helpful in "fine-tuning" the total amount of carbohydrate in food, in general, is a stronger predictor of blood glucose response than the GI. Blood pressure, and weight management.

There is no one diet or meal plan that works for everyone with diabetes. The important thing is to follow a meal plan that is tailored to personal preferences and lifestyle and helps achieve goals for blood glucose, cholesterol and triglycerides level.

Many nutritious foods have a higher GI than foods with little nutritional value. For example, oatmeal has a higher GI than chocolate. Use of the GI needs to be balanced with basic nutrition principles of variety for healthful foods and moderation of foods with few nutrients.

The glycemic index or GI, measures how a carbohydrate-containing food raises blood glucose. Carbs are the foods that affect blood glucose the most. Examples of carbs are fruits, starchy vegetables, breads, pastas, rice, sugar, syrup and honey. The food you eat gets digested and broken down into sugar your body's cells can use. This is glucose, one of the simplest forms of sugar.

A food with a high GI raises blood glucose more than a food with a medium or low GI. Meal planning with the GI involves choosing foods that have a low or medium GI.

Examples of carbohydrate-containing foods with a low GI include dried beans and legumes (like kidney beans and lentils), all non-starchy vegetables, some starchy vegetables like sweet potatoes, most fruit, and many whole grain breads and cereals (like barley, whole wheat bread, rye bread, and all-bran cereal). Meats and fats don’t have a GI because they do not contain carbohydrate.

**Low GI Foods (55 or less)**

- 100% stone-ground whole wheat bread
- Pumpernickel bread
- Oatmeal (rolled or steel-cut)
- Muesli
- Pasta, converted rice, barley, bulgur
- Sweet potato, corn, yam, lima/butter beans, peas, legumes and lentils
- Most fruits
- Non-starchy vegetables
- Carrots

**Medium GI (56-69)**

- Whole wheat bread
- Rye bread
- Pita bread
- Quick oats
- Brown, wild or basmati rice
- Couscous

**High GI (70 or more)**

- White bread or bagel
- Corn flakes, puffed rice, bran flakes
- Instant oatmeal
- Short grain white rice, rice pasta
- Macaroni and cheese from mix
- Russet potato, pumpkin
- Pretzels, rice cakes, popcorn
- Saltine crackers
- Melons and pineapple

What Affects the GI of a Food?

- Fat and fiber tend to lower the GI of a food. As a general rule, the more cooked or processed a food, the higher the GI; however, this is not always true.
- Below are a few specific examples of other factors that can affect the GI of a food:
  - Ripeness and storage time — the more ripe a fruit or vegetable is, the higher the GI.
  - Processing — juice has a higher GI than whole fruit; mashed potato has a higher GI than a whole baked potato, potato ground whole wheat has a lower GI than whole wheat bread.
  - Cooking method — how long a food is cooked (al dente pasta has a lower GI than soft-cooked pasta).
  - Variety — converted long-grain white rice has a lower GI than brown rice but short-grain white rice has a higher GI than brown rice.

The GI value represents the type of carbohydrate in a food but says nothing about the amount of carbohydrate typically eaten. Portion sizes are still relevant for managing blood glucose and for losing or maintaining weight.

The GI of a food is different when eaten alone than it is when combined with other foods. When eating a high GI food, you can combine it with other low GI foods to balance out the effect on blood glucose levels.

Many nutritious foods have a higher GI than foods with little nutritional value. For example, oatmeal has a higher GI than chocolate. Use of the GI needs to be balanced with basic nutrition principles of variety for healthful foods and moderation of foods with few nutrients.

GI or Carbohydrate Counting?

There is no one diet or meal plan that works for everyone with diabetes. The important thing is to follow a meal plan that is tailored to personal preferences and lifestyle and helps achieve goals for blood glucose, cholesterol and triglycerides levels, blood pressure, and weight management.

Research shows that both the amount and the type of carbohydrate in food affect blood glucose levels. Studies also show that the total amount of carbohydrate in food, in general, is a stronger predictor of blood glucose response than the GI. Based on the research, for most people with diabetes, the first tool for managing blood glucose is some type of carbohydrate counting.

Because the type of carbohydrate can affect blood glucose, using the GI may be helpful in "fine-tuning" blood glucose management. In other words, combined with carbohydrate counting, it may provide an additional benefit for achieving blood glucose goals for individuals who can and want to put extra effort into monitoring their food choices.


**What is Glycemic Index?**

**Joslin Vision Network (JVN) Telemedicine**

Diabetes is the leading cause of blindness among adults. American Indians and Alaska Natives (AI/AN) with diabetes are particularly susceptible to diabetes-related blindness, largely because only half of them get an annual diabetic eye exam. The Indian Health Service-Joslin Vision Network (IHS-JVN) Teleophthalmology Program was established in 2000 to use telemedicine technology to provide accurate, cost-effective annual eye exams to AI/AN.

The JVN Program is designed for early diagnosis and treatment of diabetic retinopathy to prevent complications and decrease vision loss and blindness. A trained professional uses a digital camera with specialized computer software to take images and send to a team of Doctors trained in this program. A report is sent back to your Provider. It’s only a 15 minute appointment and dilation is not required.

Blindness caused by diabetes can be prevented. Early diagnosis and treatment of diabetic retinopathy can reduce severe vision loss by more than 95%.

**What is diabetes-related blindness?**

Virtually all people with diabetes eventually develop damage to blood vessels in their eyes. This condition is called diabetic retinopathy.

The damage to the blood vessels can sometimes grow to dangerous levels, ultimately leading to blindness. People with diabetic retinopathy usually do not experience visual symptoms until it is too late and blindness has irreparably set in.

The good news is that timely annual eye exams of people with diabetes can help prevent diabetes-related blindness. These exams identify people at high risk for losing their sight who need to be treated to prevent vision loss.

**JVN Frequently Asked Questions**

Q. Would a live examination be better than JVN imaging?

A: The conventional and most prevalent method of evaluating diabetic patients for retinopathy is a dilated retinal examination by an ophthalmologist or optometrist. However, the gold standard for establishing the level of diabetic retinopathy is a photographic method established by the Early Treatment Diabetic Retinopathy Study (ETDRS). The JVN has been proven to hold a high level of concordance with the ETDRS. For this reason the IHS statistical methods tally a JVN examination as equivalent to a conventional live examination. However, all supra-threshold JVN readings are referred for live examination to confirm or rule-out the need for referral for treatment.

Q. Does an IHS-JVN examination replace a complete eye exam?

A: No; a periodic complete eye examination is a component of good health care for almost everyone. The IHS-JVN examination is equivalent or better than a live eye examination for the purpose of achieving standard of care for diabetic retinopathy surveillance and diagnosing diabetic retinopathy, but it does not replace other features of a complete eye examination such as a check of intraocular pressure or glasses. However, it does meet/exceed the standard of care needed to avoid the consequence of the leading cause of new blindness among working age adults, diabetic retinopathy. An additional evaluation is not needed unless there is another reason for an eye exam, e.g. pre-existing eye condition other than DR, need for new glasses/contact lenses, periodic general eye evaluation, etc.

Q. Usually a diabetic eye examination requires dilation of the patient's pupil with eye drops. Does the JVN system use eye drops?

A: The IHS-JVN system uses a specially designed camera that does not require pupil dilation in most cases. In certain cases with unusually small pupils a very weak and short acting drop may be used to improve image quality.

Q. Can the JVN system identify eye disease other than diabetic retinopathy?

A: Yes. The JVN system can identify most clinically evident eye diseases visible within the imaging fields used for evaluating diabetic retinopathy. This covers a wide range of diseases including macular degeneration, glaucoma, hypertensive retinopathy, and many other diseases with clinical finding in the posterior ocular fundus.

The JVN clinic will be offered at the Diabetes Center August 21-23, 2018. If you have not had a screening in the past year, please call the Let's Get Healthy Program (518) 358-9667.
Breastfeeding provides unmatched health benefits for babies and mothers. It is the clinical gold standard for infant feeding and nutrition, with breast milk uniquely tailored to meet the health needs of a growing baby. We must do more to create supportive and safe environments for mothers who choose to breastfeed.

- Dr. Ruth Petersen, Director of CDC’s Division of Nutrition, Physical Activity, and Obesity

**What is Insulin Resistance?**

Insulin resistance is what eventually causes type 2 diabetes. Insulin is a hormone secreted by the pancreas that allows your body to process sugar. The body’s cells don’t respond normally to insulin, the sugar (glucose) can’t enter the cells as easily and this causes a build up of sugar in the blood. Typically the only symptoms are Acanthosis Nigricans, feeling tired and hungry. The only treatment is weight loss and exercise.

**What is Type 2 Diabetes?**

The most common form of diabetes. In type 2 diabetes the body does not use insulin properly.

This is called insulin resistance. At first, the pancreas makes more insulin to make up for it. But, over time your pancreas isn’t able to keep up and can’t make enough insulin to keep your blood sugars normal.

**Type 2 Diabetes treatment:**
- Lifestyle changes (diet and exercise)
- Oral medications (pills)
- Injectable medications (insulin)

**What happens in your body:**

When glucose builds up in the blood instead of going into your cells it causes your cells to be starved for energy. Overtime it can cause complications with your eyes, kidneys, nerves and heart.

**Can Type 2 Diabetes be controlled?**

It can be controlled but never cured. Once you have diabetes you will always have it. The good news is, you can live a long, healthy life.

**August is National Breastfeeding Month**

"Breastfeeding provides unmatched health benefits for babies and mothers. It is the clinical gold standard for infant feeding and nutrition, with breast milk uniquely tailored to meet the health needs of a growing baby. We must do more to create supportive and safe environments for mothers who choose to breastfeed."

- Dr. Ruth Petersen, Director of CDC’s Division of Nutrition, Physical Activity, and Obesity

**Benefits for Infants**

- Infants who are breastfed have reduced risks of:
  - Asthma
  - Obesity
  - Type 2 diabetes
  - Ear and respiratory infections
  - Sudden infant death syndrome (SIDS)

**Benefits for Mothers**

Breastfeeding can help lower a mother’s risk of:
- Heart disease
- Type 2 diabetes
- Ovarian cancer
- Breast cancer

There are a few ways that exercise lowers blood glucose:
- Insulin sensitivity is increased, so your muscle cells are better able to use any available insulin to take up glucose during and after activity.
- When your muscles contract during activity, your cells are able to take up glucose and use it for energy whether insulin is available or not.

This is how exercise can help lower blood glucose in the short term. And when you are active on a regular basis, it can also lower your A1C.

**Understanding Your Blood Glucose and Exercise**

The effect physical activity has on your blood glucose will vary depending on how long you are active and many other factors. Physical activity can lower your blood glucose up to 24 hours or more after your workout by making your body more sensitive to insulin.

Become familiar with how your blood glucose responds to exercise. Checking your blood glucose level more often before and after exercise can help you see the benefits of activity. You also can use the results of your blood glucose checks to see how your body reacts to different activities. Understanding these patterns can help you prevent your blood glucose from going too high or too low.

**Hypoglycemia and Physical Activity**

People taking insulin or insulin secretagogues (oral diabetes pills that cause your pancreas to make more insulin) are at risk for hypoglycemia if insulin dose or carbohydrate intake is not adjusted with exercise. Checking your blood sugar before doing any physical activity is important to prevent hypoglycemia (low blood sugar).

Talk to your diabetes care team (doctor, nurse, dietitian or pharmacist) to find out if you are at risk for hypoglycemia. If you experience hypoglycemia during or after exercise, treat it immediately:

- Follow the 15-15 rule:
  1. Check your blood glucose.
  2. If your reading is 100 mg/dL or lower, have 15-20 grams of carbohydrate to raise your blood glucose. This may be:
     - 4 glucose tablets (4 grams per tablet), or
     - 1 glucose gel tube (15 grams per gel tube), or
     - 4 ounces (1/2 cup) of juice or regular soda (not diet), or
     - 1 tablespoon of sugar or honey
  3. Check your blood glucose again after 15 minutes. If it is still below 100 mg/dL, have another serving of 15 grams of carbohydrate.
  4. Repeat these steps every 15 minutes until your blood glucose is at least 100 mg/dL.

If you want to continue your workout, you will usually need to take a break to treat your low blood glucose. Check to make sure your blood glucose has come back up above 100 mg/dL before starting to exercise again.

Keep in mind that low blood glucose can occur during or long after physical activity. It is more likely to occur if you:
- Take insulin or an insulin secretagogue
- Skip meals
- Exercise for a long time
- Exercise strenuously

If hypoglycemia interferes with your exercise routine, talk to your healthcare provider about the best treatment plan for you. Your provider may suggest eating a small snack before you exercise or they may make an adjustment to your medication(s).

For people engaging in long duration exercise, a combination of these two regimen changes may be necessary to prevent hypoglycemia during and after exercise.


**What are the health benefits of exercise?**

Regular activity can improve your muscle strength and boost your endurance. Exercise delivers oxygen and nutrients to your tissues and helps your cardiovascular system work more efficiently. And when your heart and lung health improve, you have more energy to tackle daily tasks.
Cucumber Salad with Greek Yogurt Dressing

**Ingredients:**
- 1 lb. fresh cucumbers, thinly sliced, (3 medium)
- ¼ cup onion, thinly sliced
- ¼ cup fresh dill, chopped
- ½ cup plain greek yogurt
- 2 tsp Dijon mustard
- 2 tsp olive oil
- Fresh garlic clove, minced or pressed
- 2 tsp white vinegar
- ½ tsp white sugar or sugar substitute

**Directions:**
1. Place the cucumbers, onion and dill in a bowl.
2. In a separate bowl combine the yogurt, mustard, oil, garlic, vinegar and sugar, whisk to combine.
3. Add the dressing to the cucumbers and mix well.
4. Refrigerate until ready to eat.

**Best if eaten on the same day it is made.**
*Try using white wine vinegar or apple cider vinegar
* Sugar can be eliminated or try switching sugar for a stevia based blend.
* You can use any onions available: white, sweet, red, scallions or shallots.

Cucumber Salad with Vinaigrette Dressing

**Ingredients:**
- 1 lb. fresh cucumbers, thinly sliced, (3 medium size)
- ⅛ cup onion, thinly sliced
- ⅛ cup fresh dill, chopped
- 2 TBSP olive oil
- 2 TBSP white vinegar
- 1 tsp white sugar or sugar substitute

**Directions:**
1. Place the cucumbers, onion and dill in a bowl.
2. In a separate bowl combine the oil, vinegar and sugar, whisk to combine.
3. Add the dressing to the cucumbers and mix well.
4. Refrigerate until ready to eat.

Can be saved for up to 24 hours in the fridge.
*Try using different flavored vinegars
* Sugar can be eliminated or try switching sugar for a stevia based blend.
* You can use any onions available: white, sweet, red, scallions or shallots.

Health Benefits of Zucchini:

- Low in calories
- High in fiber
- Easy to cook
- Easy to grow
- Versatile vegetable
- Can be used as “zoodles” noodles

Sautéed Green Beans and Yellow Squash

**Ingredients:**
- 2-3 fresh yellow squash
- Fresh string beans, 2 handfuls
- 1 TBSP olive oil
- Fresh garlic clove, minced or pressed
- Fresh ground black pepper

**Directions:**
1. Wash and chop the squash and green beans.
2. Add oil to sauté pan over medium heat. Add fresh garlic and cook for 1 minute.
3. Add squash and green beans and cook for 5-8 minutes until beans are bright green and squash is tender.
4. Add black pepper to taste.

Grilled Vegetable Quinoa Salad

**Ingredients:**
- 4 cups cooked quinoa
- 1 red bell pepper seeded and cut into thin strips
- 1 red onion sliced ⅛ inch thick
- 1 zucchini sliced lengthwise into thin slices
- 3 tablespoons red wine vinegar
- 2 tablespoons extra virgin olive oil
- 2 teaspoons minced garlic
- ½ teaspoon crushed red pepper
- 1 cup cherry tomatoes, quartered
- ½ cup thin sliced fresh basil
- 1/4 cup fresh chives, chopped
- Ground black pepper-to-taste

**Directions:**
1. Heat an indoor grill pan over medium high heat. Brush both sides of the vegetables with olive oil and sprinkle with black pepper. Grill vegetables until tender, flipping once.
2. Remove from heat and when cool enough to handle cut the vegetables into ½ inch pieces. Stir in cooked quinoa.
3. Meanwhile make dressing by combining vinegar, olive oil, garlic and crushed red pepper. Toss vegetables and dressing and stir in cherry tomatoes.
4. Sprinkle with basil and chives.

Serve warm, room temp or chilled.

This recipe can be made using an outdoor grill pan.

Tomato Garlic Salad Dressing

**Ingredients:**
- 1/4 cup red-wine vinegar
- 1 medium tomato quartered and seeded
- 1 teaspoon minced garlic
- 1 tablespoon capers
- 1/2 teaspoon dried basil
- 1 teaspoon ground mustard
- 1/2 cup extra-virgin olive oil
- Ground black pepper-to-taste

**Directions:**
Place red wine vinegar, tomato, garlic, capers, basil, ground mustard and black pepper in a blender. Process until smooth. Add in oil in a steady stream and process until combined.

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Local Farmer’s Markets
Mobile Farmer’s Market
Akwesasne– Every Tuesday at Sunrise Acres Pavilion 10am-2pm
Akwesasne Farmer’s Market
SRMT Office for the Aging
Friday 9:30am-2pm
(times subject to change)

Massena Farmer’s Market
Massena Memorial Hospital
Mondays 2:30pm-5:30pm

Tractor Supply
Thursdays 2pm-6pm
Sundays 10am-2pm

Fort Covington Farmer’s Market
Tuesdays 12:30pm-2:30pm

Grilled Vegetable Quinoa Salad

**Ingredients:**
- Fresh yellow squash, 2
- Fresh green zucchini, 2
- 1 TBSP olive oil
- Fresh garlic clove, minced or pressed
- Freshly ground black pepper

**Directions:**
1. Wash and chop the squash and zucchini into bite size pieces.
2. Add olive oil to sauté pan over medium heat. Add fresh garlic and cook for 1 minute.
3. Add squash and zucchini and cook for 5-8 minutes until squash is tender.
4. Add ground black pepper to taste.

Pineapple Mango Salsa

Health Benefits of Zucchini:

- Loaded with Vitamin A
- High in fiber
- Low in calories
- Easy to grow
- Easy to cook
- Versatile vegetable
- Can be used as “zoodles” noodles
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Sautéed Green Zucchini and Yellow Squash

**Ingredients:**
- Freshly ground black pepper
- 1/2 cup extra-virgin olive oil
- 1/2 teaspoon dried basil
- 1 medium tomato quartered and seeded
- 1 tablespoon capers
- 1/2 teaspoon ground mustard
- 1/2 cup extra-virgin olive oil
- Ground black pepper-to-taste

**Directions:**
1. Heat an indoor grill pan over medium high heat. Brush both sides of the vegetables with olive oil and sprinkle with black pepper. Grill vegetables until tender, flipping once.
2. Remove from heat and when cool enough to handle cut the vegetables into ½ inch pieces. Stir in cooked quinoa.
3. Meanwhile make dressing by combining vinegar, olive oil, garlic and crushed red pepper. Toss vegetables and dressing and stir in cherry tomatoes.
4. Sprinkle with basil and chives.

Serve warm, room temp or chilled.

This recipe can be made using an outdoor grill pan.