

WHAT YOU NEED TO KNOW ABOUT DIABETES

[A Free Report from Control Diabetes For Life.com](http://ControlDiabetesForLife.com)

The Signs and Symptoms of Diabetes, What It Is and What It Does

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[Information. Attitude. A System That Works.](#)

This free report is excerpted and adapted from

Take Your Life Back!
Managing Diabetes to Save Time, Money and Your Health

by Jaye Marno

available at [Control Diabetes For Life.com](http://ControlDiabetesForLife.com)

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INTRODUCTION

Hi, I'm Jaye Marno. And I'm happy to say I've got my life back from diabetes – and even happier to say, *so can you!*

Like so many others, I was diagnosed with type 2 diabetes in my mid-thirties. I went through the mill of diets and drugs, trying to maintain good blood sugar control. After a few years of this my doctor finally put me on insulin.

I didn't like taking shots but I thought I was doing okay. Though I was still a little overweight and my HgbA_{1c}⁽¹⁾ results averaged about 7, even my doctor told me I was doing “okay”.

At meal times or if I felt funny I'd test my blood sugar. If it was high, I might take a shot of insulin. If it was low, I'd grab something to eat or drink. I tried to handle whatever the situation might be at the time. Little did I know that my “snapshot” approach to diabetes was leading me into serious trouble.

Sure enough, after a few years my “okay” control led to a significant heart attack. It put me in fear for my life. Fortunately I received great medical care and recovered well. This frightening shock to me and my family turned out to be for the good. It turned my life and control of my diabetes around.

(1) Often shortened to “A1C”. A test that indicates blood sugar averages over several months.

I determined from that time on to learn all I could about my disease, and especially how to use what I learned to get my life back. Over the next several years I did just that.

Through study and research, and lots of trial and error, I developed *three keys* that helped me lose weight, lower my blood pressure and best of all to *take my life back from diabetes*.

The first key is good, solid information. You must understand the disease and how it works. That's what this report is about. The basic information is here: what diabetes is and does, the signs and symptoms of pre-diabetes as well as diabetes itself. There is also significant information every type 2 diabetic should know about insulin resistance.

Whether it is for you, a friend with diabetes or a loved one, my hope is that you will *arm yourself with knowledge and understanding* of diabetes. Then *act* on that knowledge. Take control of your diabetes and get your life back.

Sincerely,

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What You Need To Know About Diabetes

JUST WHAT IS DIABETES?

Diabetes is a disease at the cellular level. Your cells are the building blocks for your entire body. Cells make up your muscles, bones, blood, nerves and skin – every organ and tissue of your body is made from living cells.

Your cells need energy to live and grow, which they get mostly from the food you eat. The food is broken down into sugar, or glucose, which is used by your cells. For glucose to enter the cell, the cell must be "unlocked," and *insulin* is the glucose "key".

Insulin is a hormone produced by specialized cells in your pancreas. It unlocks the cells so they can receive glucose from the blood. That is how the cells get energy for you to grow and heal and live.

Simply put, diabetes cuts this process short. It is the inability of your body to use insulin properly. Whether there is not enough insulin to do the job ("type 1"), or the cells themselves have become *insulin resistant* ("type 2"), the basic effect is the same. Your body does not adequately move glucose from your bloodstream into your cells.

WHAT TYPES OF DIABETES ARE THERE?

The main “types” of diabetes are type 1 and type 2. The two types are similar but *different diseases*. In **type 1 diabetes** your autoimmune system, which defends your body from foreign invaders such as viruses, mistakes your own pancreatic cells as foreign.

Your antibodies attack and destroy the pancreas' insulin-producing cells. Without insulin production, type 1 diabetes is onset quickly rather than slowly as in type 2 diabetes. Since most cases are diagnosed in the teenage years it used to bear the nickname, "juvenile diabetes".

Type 2 diabetes accounts for 70-90% of diabetes diagnoses. Its onset is much slower than type 1 and is diagnosed primarily in middle-aged and older adults. Rather than an attack by your antibodies on your pancreas (type 1), type 2 diabetics' cells gradually become *resistant* to the insulin produced by the pancreas.

The causes of insulin resistance are several, including genetics, obesity and an inactive and unhealthy (as in smoking) lifestyle. Insulin resistance is a major player in other medical disorders such as heart disease, hypertension and strokes.

Besides types 1 and 2, there are *gestational diabetes* and *LADA* (Latent Autoimmune Diabetes of Adults).

Gestational diabetes is the onset of high blood sugar levels in a woman who was not diabetic before she was pregnant. Pregnancy causes many changes in her hormones and of course there is weight gain. These changes can affect both the production of sufficient insulin and insulin

receptivity or resistance.

Gestational diabetes has some health risks for the baby, unborn as well as following birth. The doctor should closely monitor the mother and her baby through the pregnancy, birth and post-delivery.

Gestational diabetes affects 3–8% of pregnant women in the United States. Other factors increase the risk of gestational diabetes as well. Blood sugars usually return to normal in the woman after her pregnancy, but she may develop type 2 diabetes later in life.

Latent Autoimmune Diabetes of Adults (LADA) is a bit of a hybrid of type 1 and type 2. Some call this hybrid “*type 1 and a half*” diabetes. Because it is usually onset after the age of 25, LADA is often diagnosed as type 2 diabetes. The disease is more akin to type 1, however, in that the autoimmune system attacks the body's insulin-producing cells.

People with LADA are not generally insulin resistant. LADA statistics are difficult to determine because many are diagnosed as type 2. Some estimates hold LADA at as much as 5–10% of the U.S. diabetic population.

WHAT ARE THE SYMPTOMS OF DIABETES?

• Type 1 Symptoms

Just as type 1 and type 2 are similar but different diseases, so are their symptoms both similar and different. In either type, the lack of insulin has likely brought on high blood sugars, a condition called *hyperglycemia*.

Unlike type 2, however, the onset and diagnosis of type 1 is rapid and unavoidable. Type 1 diabetes is entirely genetic and presently incurable, though it can be treated and controlled. It is only waiting for a trigger (such as a virus) to set it off.

Symptoms may include rapid weight loss. No insulin-key for your cells means they are not getting the glucose they need. Your body senses this and begins to burn *fat* for energy. That is the reason for the weight loss.

One of the by-products of this fat-burning process is *ketones*, which can be measured in the urine with a simple and inexpensive test kit.

The state of burning fat and producing ketones can be toxic, leading if not treated to coma and death. This condition is called *diabetic ketoacidosis*, or DKA.

Severe DKA requires immediate and expert medical care. This is not the place for home remedies. There are electrolytic imbalances (electrochemicals, salts and water) that *must* be treated by medically-trained professionals.

The signs of DKA include a flushed appearance, dehydration, exhaustion, shock and eventual unconsciousness. If you are experiencing these symptoms see your doctor or get to the hospital emergency room *immediately*.

- **Type 2 Symptoms**

Like type 1, your cells are not getting enough glucose. Unlike type 1, your cells are getting *some* glucose. Your body does not go into fat-burning mode or diabetic ketoacidosis.

As high levels of glucose remain in your bloodstream it stresses your system. Your body expels some of the excess glucose in various ways, often producing recognizable symptoms. If and when such symptoms begin, however, they are usually mild and gradual. There are both *short-term* and *long-term* symptoms.

- **In the short term:**

- More frequent trips to the bathroom

You find that you urinate more often. You wake up at night having to go. It may be a sign that your body is trying to flush glucose out of your system. One of the earliest discovered symptoms of diabetes was sugar in the urine. Which helps explain another symptom:

- Constant thirst

When you urinate more frequently, you need to drink plenty of water to replace what you lose by going to the bathroom.

- General fatigue

Feeling a little tired is common to everyone. But if your cells aren't getting the energy they need from glucose, then on the whole *you* aren't going to feel very energetic either.

- A change in disposition

I don't mean the onset of personality disorders or anything like that. The fatigue that results from high blood sugar is not limited to physical fatigue but includes mental and emotional fatigue as well.

It can affect how you feel day-to-day. You can become irritable and touchy. Or emotionally tired and lackadaisical. You may not care as much about things or even people that you ordinarily would feel strongly about.

- **In the longer term:**

- *Blurry vision*, especially associated with one or more of the diabetes symptoms above, can be a significant symptom of too much glucose in the bloodstream. You may also have an *increased dryness to the skin*. Cuts and bruises may take longer to heal.

- *Red or swollen gums* may be a sign of the beginnings of gum disease that is often associated with diabetes. There is strong evidence that diabetic gum disease may be associated with developing heart disease.

- *A change in the sense of touch in your hands, legs or feet*. In some people it is like a tingling sensation. In others it's numbness. Sometimes it's both. Tingling in the fingers and

numbness in the feet, for example. *Cold feet* is another common and related symptom.

Consistent high glucose levels are harmful to your nervous system, producing the scary-sounding symptom of *diabetic neuropathy* (nerve damage). If that doesn't sound scary, consider that diabetic neuropathy is often associated with *sexual dysfunction* especially in men. It can lead to *blindness* or *loss of your limbs*.

Your doctor can quickly and easily test your fasting blood sugar levels and determine whether diabetes is indicated. Your symptoms might not even be diabetes or anything serious. It's better to know and deal with whatever it is than to let it go on and get worse. Get tested and find out for sure.

After all that bad news it's time for some *good* news:

As we will see in the following pages, *many of the worst symptoms can be stopped or even reversed*. Diabetes can be controlled and its effects kept minimal. Being diagnosed with diabetes doesn't mean it has to ruin your life. You just need good information, the right attitude, and a system that works.

WHAT IF I HAVE NO SYMPTOMS? AM I STILL AT RISK?

You could be. Even without symptoms it isn't always easy to tell if someone has diabetes without actual testing by a doctor's office or lab. About 30% of people with undiagnosed diabetes have no symptoms for some time. The disease gradually progresses in their system not yet showing symptoms.

The things to look for are *risk factors for diabetes*. The risk factors for type 2 diabetes include your family history (especially your mother or brothers or sisters with diabetes), genetics and aging. These we cannot do anything about.

I mentioned on the previous page some good news:

Several significant risk factors for type 2 diabetes are *reversible*. That's potentially *great news!* If you change your risk factors you can greatly help prevent or delay the onset of type 2 diabetes. Let me say that again, with a little more oomph:

**If you change your risk factors
you can greatly help prevent or delay
the onset of type 2 diabetes!**

As it turns out, the primary and most prevalent risk factor is the most reversible. Reduce it and other risk factors will very likely reduce as well, delaying and possibly preventing the onset of type 2 diabetes.

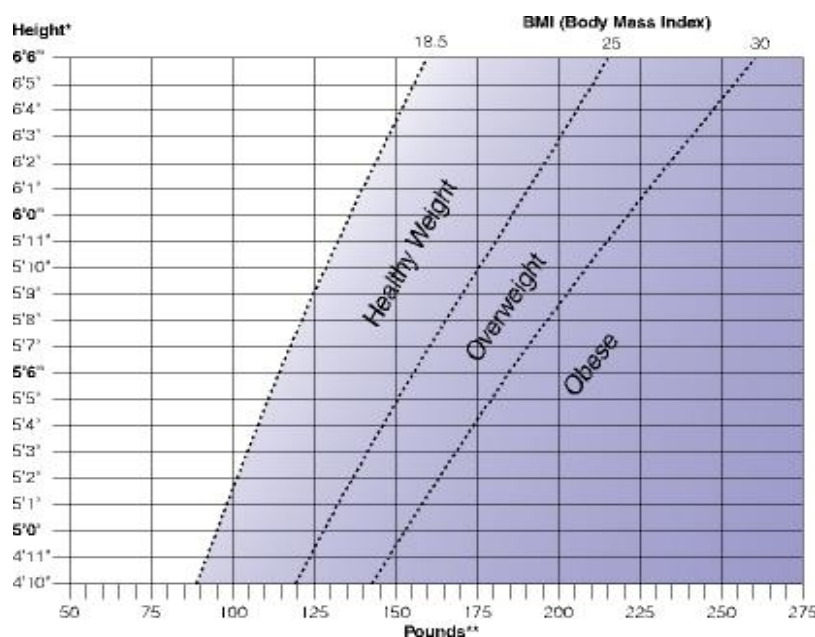
The single most reversible risk factor is the subject of the next few pages.

The Number One Reversible Risk Factor – MEDICAL OBESITY

Doctors are always telling their overweight patients to lose weight. This is one of the chief reasons why: medical obesity is the number one reversible risk factor for type 2 diabetes.

I say *medical* obesity, because in our culture we tend to think of “obesity” as being more than “pleasantly plump”. But medical obesity is not based on how we look or how well we carry our weight. It is based on scientific calculations that reduce to a single number called your *Body Mass Index*, or BMI.

Use this chart to find your BMI range. Find your height on the left hand side of the chart. Slide your finger to the right until it intersects with your weight in pounds. The chart is designed to show you whether you are in the healthy weight range, overweight, or obese.



Even if you are one of those blessed with a BMI below 25, *thin people get diabetes too*. The test is no longer difficult or expensive. Your doctor or health care provider can quickly and easily test your fasting blood sugar. The test takes less than a minute.

There are other risk factors. Most of the books and websites that we have seen usually continue with listing some of those other risk factors (inactivity, a high-carb, high fat diet, high LDL cholesterol and so on). They are every one of them serious, to be sure. We'll get to them in the next section. But what's important to understand right now is this:

Most if not all of these other factors are inter-related with medical obesity. That's why reducing your BMI into the "healthy" range reduces the other risk factors as well.

THE METABOLIC SYNDROME

If you are in the medically obese range (a BMI of 30 or higher) and your waist size is 35 inches or more for a woman, or 40 inches or more for a man, then the most important question for you is: *Do you have "the metabolic syndrome"?*

What the heck is the metabolic syndrome, you say.

Well, it's not all that technical. *Metabolic* has to do of course with your *metabolism*, which is the whole system of processes for life, growth and health at the cellular and molecular level. And it is called a *syndrome* because it is *a group or cluster of factors* that together indicate a high risk of diabetes, hypertension and heart disease.

There are five risk factors generally associated with the metabolic syndrome. A BMI of 30 or higher is the most common (and most reversible). The other four signs are:

- **triglycerides** (fat in your blood), 150 mg/dl or higher
- **low HDL ("good") cholesterol**, under 40 mg/dl for men and under 50 mg/dl for women
- **high blood pressure**, 135/85 or higher
- **fasting blood sugar** of 110 mg/dl or higher

It is not very likely that you can test these at home (though if you have a reliable blood pressure kit and glucose meter you could test those). So there are *two questions* you need to answer for yourself right now:

Do you know what your levels are?

Are you comfortable not knowing?

Knowledge of your triglyceride levels, HDL, blood pressure and fasting blood sugar is vital to know whether you are at risk. Please. If you are medically obese see your doctor. Get tested for these signs of the metabolic syndrome.

If you have the metabolic syndrome, don't think it's the end of the world for you. It most certainly is not. Every one of these factors is something you can change.

Remember, if you change the first one – from obese to a healthy weight – the other risk factors will almost certainly improve dramatically. Achieving and maintaining a healthy weight goes a long way to reducing and likely eliminating the metabolic syndrome.

The first step begins with *knowledge*. Get tested and get your results so you know.

THE GRIP OF INSULIN RESISTANCE

We have already pointed out that type 2 diabetics are *insulin resistant*. In fact, insulin resistance all but *defines* type 2 diabetes. If that were not hardship enough, it's also the beginning of a terrible cycle that is very difficult to break.

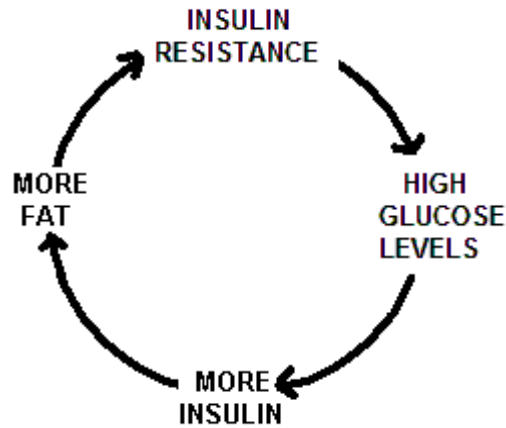
Your insulin resistance starts the cycle. It's what leads to the high glucose levels in your blood. To lower the glucose level your body tries to overwhelm the resistance with a flood of extra insulin from the pancreas or by an injection or both.

Once the job is done, you still have excess insulin in your system. Now the insulin-resistance cycle turns serious. This is because *insulin is also the primary hormone for building fat*. Whatever insulin was not used to transfer glucose into the cells is then used to increase your body-fat.

The relationship between insulin and fat is complicated and has to do with your body's starvation response. During drought or famine the added store of fat helps you to survive.

Unfortunately this same response in the type 2 diabetic only makes your situation worse. Not only does it make you fatter, but as your body fat increases, *so does your insulin resistance*.

Each turn of the cycle leaves you a little fatter and more insulin resistant. Every time your blood sugar goes up, so does your fat and insulin resistance. And so on, over and over again.



This vicious cycle has a terrific grip on many type 2 diabetics. What's worse, other life-threatening factors increase dramatically in this cycle. The excess fat and insulin also increase cholesterol and triglycerides, high blood pressure and other health-threatening, even life-threatening factors. *It's the metabolic syndrome on steroids.*

You can break free of the insulin resistance cycle. It isn't easy, but you can do it. You can take your life back from diabetes. I mentioned in my story at the beginning how I developed three keys to help me lose weight, lower my blood pressure and take my life back from diabetes.

Let me share those three keys with you...

THREE KEYS TO BREAK THE CYCLE AND TAKE YOUR LIFE BACK

If you struggle with your weight and blood sugar, I know that struggle. I've totally been there, done that. I had never even heard of the metabolic syndrome or the insulin-resistance cycle but I was battling them every day and losing the war. Maybe that's where you are right now.

One thing about this battle is you can't give up. Surrender leads to disaster. So you try one thing after another in hopes of gaining an edge. My edge is these three keys that helped me break the cycle and control my diabetes – and I am absolutely certain they can do the same for you.

The three keys are *good information, the right attitude and a system that works.*

I've given you part of the first key in this free report. Now you have a solid base of information – what diabetes is and how it works. But to effectively treat and control it, you have to continually update your information.

Hardly a week goes by without some significant discovery about the disease or its treatment. It's important to keep up or else miss out on information that could improve your life.

Everyone with diabetes should participate in various forums and social websites focusing on diabetes. I publish a blog ([Control Diabetes For Life.com](http://ControlDiabetesForLife.com)) to help keep you inspired and informed.

The second key is the right *attitude*. You can start out gangbusters, but day in and day out, week after week and month after month it will wear you down.

If you've been diabetic for very long you've experienced this already. You need a buffer and your own personal source of strength and perseverance to lift you up and out of it.

The third key – *a system that works* – is essential to break the cycle and enjoy better health. You cannot effectively control your diabetes without an organized and goal-focused system or action plan. Most diabetics have no system. Or like I did, they take the “snapshot” approach or some other approach that doesn't work.

I turned it around and got my life back and so can you. I'll be happy to explain more about the three keys and how you can take your life back from diabetes. Click on the link below.

[Take Your Life Back!](#)

One last thing...

THIS MAY BE THE MOST IMPORTANT PART

Please pass this report on to others who need it. Maybe you're concerned about a family member or friend who has diabetes. Or maybe you know someone who has symptoms detailed in this report. But they don't do anything about it. They just shrug it off for one reason or another.

Perhaps if they knew the serious health risks of undiagnosed and uncontrolled diabetes – the potential for heart attack or stroke – they would not shrug off the warning signs. They would act. Get tested so they know.

You can send an email with this PDF file attached, or you can copy and paste the link where they can get it. When it comes from you they know it isn't spam, it's something they really need.

Here's a reminder of that free link:

<http://freediabetesreport.controldiabetesforlife.com/>

Best wishes for a long and healthy life,

Jaye Marno

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Diabetes is a serious disease requiring professional medical attention. The information in this report or on controldiabetesforlife.com and related or referenced sites is for education purposes only and is not intended to diagnose or prescribe. As with any and all medical decisions concerning your specific diagnosis and treatment, PLEASE discuss them with your physician or health care provider.