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## Center for Disease Control (CDC) Flu Vaccine (Continued from page 1)

Yearly flu vaccinations should begin in September or as soon as the vaccine is available and continue throughout the influenza season, into December, January, and even beyond. This is because the timing and duration of flu seasons vary widely. While flu outbreaks can happen as early as October, most of the time influenza activity peaks in January or even later. It is especially important for the following groups to be immunized: children from age six months to their fifth birthday, adults over 50 years of age and all persons with underlying medical conditions that make them more susceptible to the flu.

\* "Healthy" indicates persons who do not have an underlying medical condition that makes them more susceptible to influenza complications.

Sources: [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)  
TRICARE Manuals

### Benefit Information

TRICARE covers both the flu shot and the nasal spray vaccine for qualifying beneficiaries when administered in a doctor's office or a network Minute Clinic. No referral is needed for vaccinations or other clinical preventive services.

## Diabetes Disease Management Newsletter winter 2009

### Exercise



The benefits of regular exercise are evident to all regardless of their health status or age. It is a well known fact people who are physically active on a regular basis are more productive and feel better. However, you should always check with your physician before starting an exercise program. People with eye problems should talk with their eye specialist before exercising. Even people that do not usually exercise can benefit by activity.

Regular exercise helps to control your blood sugar, control your weight, strengthen your heart and lungs, cope with depression and boost your energy.

If you are just beginning to exercise start out slowly. Start with 10-20 minutes daily of an activity you can tolerate easily and stay with the amount of time for a month. Increase your activity five minutes the next month. Then five more minutes the next month. Repeat this each month until you are active for 30 minutes every day. If

you are not able to exercise for 30 minutes at one time, try to exercise for 15 minutes twice a day.

Be sure to warm up and cool down for 5 to 10 minutes with your exercise. This helps to prevent injuries to your muscles and joints. Don't exercise if you are ill or if your blood sugar is greater than 250 or lower than 100. Wear medical identification when you exercise. It is a good idea to carry a phone with you when exercising outdoors. Watch for symptoms of low blood sugar. Even if you don't have symptoms, check your blood sugar halfway through your exercise routine.

Walking is probably the most user friendly exercise. Whether you are walking your dog or walking for an errand you benefit from this. Challenge a friend or a neighbor to walk a certain amount daily. Wear the proper shoes when you exercise. Don't exercise outdoors when the weather is too hot or too cold. Have an alternative site for walking such as a gym, church or mall.

The possibilities for exercise can range from sit and stretch to water aerobics. Many local television stations have sit and stretch programs several times a week. Be sure to check with your primary doctor, cardiologist or endocrinologist before starting an exercise program. Just remember to get fit for 30 minutes daily and you will feel better and benefit from exercise.

Sources: Diabetes A to Z, Fifth Edition, 2003, American Diabetes Association.  
[www.diabetes.org/home.jsp](http://www.diabetes.org/home.jsp)

## Center for Disease Control (CDC) Flu Vaccine Recommendations

The flu season is rapidly approaching. The single best way to protect yourself and others against influenza is to get a flu vaccination each year. Two kinds of flu vaccines are available in the United States:

- The "flu shot" – an inactivated vaccine (containing killed virus) given with a needle, usually in the arm. The flu shot is approved for use in people older than 6 months, including healthy people and people

with chronic medical conditions such as asthma, diabetes, or heart disease.

- The nasal-spray flu vaccine – a vaccine made with live, weakened flu viruses that do not cause the flu (sometimes called LAIV for 'live attenuated influenza vaccine' or FluMist®.) LAIV is approved for use in healthy\* people 2-49 years of age who are not pregnant.

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## Tips You Can Share With Your Family and Friends

If you have diabetes you know staying healthy takes work, lots of work. Diabetes stays on your mind every day as you plan your meals and activities. A little help from your family and friends may be just the thing to make vacations, picnics and parties fun and easy.

Share your intentions with your loved ones and ask them to learn more about diabetes and how to help you stay in control. The American Diabetes Association (ADA) has lots of helpful information. Go to your local hospital and pick up brochures about diabetes. Ask for suggestions. You can give your friends and family a jump start with a few simple suggestions tailored to your individual needs. Once they learn and understand what diabetes is and how food and activities affect your blood sugar, they can help you make better choices.

Share your concerns and your stressors. Tell your loved ones not to be afraid to ask you how you feel or what they can do to help when you are blue or down. Point

out the things that make it hardest and easiest for you to control your blood sugar and what they can do to help you. When you ask for help from them, take it. They can provide simple assistance such as running errands for you or keeping appropriate snacks available to help you make better choices. Talking about your feelings; sharing frustrations, hopes, concerns and fears will help everyone avoid difficulty in your relationship with diabetes and loved ones.

Talking to each other and sharing ideas and intentions will help you help your loved ones better understand your difficulties and work toward better control. Controlling your diabetes means you stay healthy longer and everybody wins!

Resource: [www.diabetes.org/all-about-diabetes/thriving-with-diabetes.jsp](http://www.diabetes.org/all-about-diabetes/thriving-with-diabetes.jsp)

## Frozen Shoulder and Diabetes

Diabetes is a risk factor for frozen shoulder. Research is being done on why diabetic patients are at an increased risk. One theory involves collagen, one of the building blocks of ligaments and tendons. The glucose (sugar) molecules attach to the collagen. This can contribute to abnormal deposits of collagen in the cartilage and tendons of the shoulder. The shoulder stiffens due to the buildup of the deposits. The cause cannot be pinpointed very often. Any condition that causes you to refrain from moving your arm and shoulder joint can put you at risk. Frozen shoulder affects 20 percent of people with diabetes, compared with 5 percent of people without diabetes.

Frozen shoulder has several stages. First, there is a pain stage. A patient has a general ache in the shoulder and your muscles can begin having spasms. At night the pain can worsen. This stage can last from a few weeks up to eight months. The next stage is when ligaments shorten and do not stretch. Recovery can last from one to nine months. Frozen shoulder, if left to run its course, can last from eight months up to two years.

Some doctors will recommend pain relief during the first stage and others will opt for physical therapy. You can keep the shoulder moving to work out stiffness

of the ligaments and tendons. This will prevent the adhesions that can form. If you lose any mobility in your shoulder it is time to see your doctor. Surgery is the last resort and should be approached with great caution because the condition usually improves on its own over time. It's not unheard of for a doctor to mistake frozen shoulder for other conditions, particularly a torn rotator cuff.

People with diabetes have a greater risk of incomplete recovery. More research is needed. If there is no improvement with medication and/or physical therapy, then consider more aggressive treatments with your physician. This can be a quality of life issue because people tend to compensate by bending in other ways or relying on other muscles but that can lead to chronic pain syndromes. If you have an injury to one of your shoulders or suddenly experience shoulder pain or loss of mobility for no reason, see your doctor. Learn all you can about treatment options if you are diagnosed with frozen shoulder.

References: American Diabetes Association 2008  
Diabetes Forecast August 2002 issue

## Food Chart

The chart below can help you make better food choices within each food group.

Type of food	Tips
Protein and meat: two to three daily servings of meat, eggs, cheese, fish, poultry, dry beans	Skinless meat and fish are best. Avoid frying - bake, roast or broil often.
Dairy: two to three daily servings of low or nonfat milk, yogurt	Yogurt may contain added sugar or sugar substitutes and contains natural sugar. It is best to limit your calories by choosing yogurt with sugar substitutes.
Fruits: two to four daily servings of fruits or fruit juices	Whole fruits are best and preferable over juices because they add fiber. Fruits like oranges, grapefruits or tangerines are recommended. Fruits are low in fat and add minerals, vitamins and fiber to your diet. Read your labels and avoid juice with added sweeteners.
Grains: six daily servings of grains, beans and starchy vegetables	Whole grains are best. Look for bread that is whole wheat or rye. Brown or bulgur rice and beans are high in fiber. Low-fat bread like pita, English muffins and bagels are preferred.
Vegetables: three to four daily servings	Choose fresh or frozen without added sauces, fat or salt. Vegetables provide needed nutrients, are low in fat and contain fiber. Vegetables considered dark green or deep yellow are preferable. Choose broccoli, romaine lettuce, carrots, spinach, peppers.
Sweets, alcohol and fats	Sweets are high in sugar (and fat) and should be avoided. Consult your doctor about drinking alcohol. If you do drink, it is best to drink with a meal. Solid fats, known as saturated fats like butter and cheese, should be reduced.

Resource: [http://www.diabetes.com/diabetes\\_and\\_diet.html](http://www.diabetes.com/diabetes_and_diet.html)

## Some Medications Do More Than Lower Your Blood Pressure

If you have diabetes or heart failure, it is recommended that you take medications from the groups of drugs known as ACE or ARB. These drugs can help protect your kidneys, lower your blood pressure and reduce the work load on your heart.

If you have diabetes, you are at risk for developing high blood pressure and kidney failure. You and your doctor should discuss treatments to protect your kidneys. Severe kidney disease known as end stage renal disease, or ESRD, can be caused by long term diabetes or poorly controlled blood glucose levels. An ACE drug can offer protection to your kidneys, slow the progression of ESRD and help lower your blood pressure.

If you have congestive heart failure (CHF), you and your doctor should discuss treatments that may include drugs known as ACE or ARBs. This group of drugs lowers the blood pressure and reduces the work load on the heart while helping it function more efficiently.

These and other recommendations by the American Heart and Diabetes Associations should be discussed with your physician.

Resource: [docnews.diabetesjournals.org/cgi/content/full/2/5/12](http://docnews.diabetesjournals.org/cgi/content/full/2/5/12)