

Diabetes and you

Your guide to better living with diabetes



Tamara Actual Diabetes Health Coach

Diabetes Health Coach



- There's no need to manage diabetes on your own. This program provides FREE, one-on-one support for up to 6 months*
- Each week, based on your needs and schedule, your personal Diabetes Health Coach will connect with you to discuss diabetes topics that matter to you
- You will also receive helpful emails and videos, and you can exchange text messages
- Your Diabetes Health Coach will provide tips and reminders to reinforce the goals set with your diabetes care team
- Available in English and Spanish



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*Some features are for people with commercial insurance starting certain Novo Nordisk products.

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WHAT'S INSIDE

Introduction	4
ABOUT DIABETES	5
Take charge of your health	6
Diabetes basics	7
Type 2 diabetes	12
LIVING WELL WITH DIABETES	17
Managing diabetes	18
Eating healthy	19
Being active	25
Taking medicines	30
MANAGING DIABETES	35
Monitoring and tracking	36
Lowering your risks	47
Problem solving	52
Healthy coping	58

This booklet gives you key information about diabetes and why it happens. It also offers tools and resources to help you manage your diabetes. If you have questions, be sure to reach out to your diabetes care team.

Look for this symbol throughout the booklet





Visit NovoCare.com from your smartphone, tablet, or computer for more information and support.

Also available in Spanish at espanol-diabeteseducation.novocare.com



This booklet is consistent with American Diabetes Association educational materials, including the Standards of Care in Diabetes. This booklet does not replace the advice of your diabetes care team. Be sure to talk with your diabetes care team about a diabetes care plan that is right for you. "Seeing my progress has given me more confidence that I can reach my goals through daily healthy habits!"*

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ABOUT DIABETES

In this section:

- ✓ Take charge of your health
- ✓ Diabetes basics
- ✓ Type 2 diabetes

Actor portrayals. *Individual results may vary.

Take charge of your health

If you have diabetes, you are not alone. Millions of people have it. Many others care about someone who has diabetes.

There is no cure for diabetes yet. But you can do many things to live well with diabetes.

It's important to learn all you can. The more you know about diabetes, the better you'll be able to manage it. This booklet can help you get started.

Work with your team



Good diabetes care takes a team. Your team of experts may include your doctor, nurse, diabetes care and education specialist, dietitian, and pharmacist. But the most important team member is *you*. Only you know how you feel with diabetes.

Get support to stay strong

Ask your family and friends for the kind of support you need. You may also want to join a diabetes support group. You can meet other people with diabetes who may be feeling many of the same things that you are.

Diabetes basics What is diabetes?

Understanding diabetes starts with learning how food and insulin work in your body. When you eat, most of your food breaks down into sugar called *glucose*. Glucose travels in your blood to your body's cells. Your body needs this glucose for energy.

The pancreas, an organ found near your stomach, makes the hormone insulin. Insulin helps move the glucose from your blood into your cells. It acts as the "key" that opens the body's cells and lets glucose in. Without insulin, glucose can't get into the cells and it stays in your blood.





Visit **NovoCare.com** to learn more about living with diabetes.

Diabetes develops when:

- The pancreas does not make any or enough insulin and/or
- The body does not use insulin the right way

Each of these things can cause too much glucose to build up in the blood. Over time, high blood glucose levels can cause serious health problems. But there are many things you can do to manage your blood glucose and live well.

Key words

Glucose

A sugar in the blood that is the main source of energy for the body's cells.

Insulin

A hormone that lowers the amount of glucose in the blood.

Pancreas

An organ behind the stomach that makes enzymes to help digest food and secretes the hormone insulin.



The types of diabetes

Type 1 diabetes

In type 1 diabetes, the body makes little or no insulin. People with type 1 diabetes must take insulin every day. Type 1 diabetes is common among young people, but it can develop in anyone at any age.

Type 2 diabetes

In type 2 diabetes, the body prevents the insulin it makes from working the right way. Your body may make some insulin, but not enough. Treatment includes healthy eating and being active. You may also need medicines to help meet your target blood glucose levels. Type 2 diabetes mostly develops in middle-aged and older adults but is increasing in young people.

About 9 out of 10 people with diabetes have type 2 diabetes





Visit **NovoCare.com** to learn more about the types of diabetes.

Other types

Type 1 and type 2 diabetes are the most common, but there are also other types of diabetes. **Prediabetes** is when blood glucose levels are high, but not high enough to be diabetes. **Gestational diabetes** is when changes during pregnancy can make it hard for the mother's body to make and use insulin. This leads to higher blood glucose levels.



Testing for diabetes

You may get 1 or more of these blood tests to find out if you have diabetes.

- A1C (an average of your blood glucose for the past 2 to 3 months)
- Fasting plasma glucose test (blood glucose level after not eating or drinking for at least 8 hours and before your first meal of the day)
- Oral glucose tolerance test (glucose levels after a certain period of time after drinking an oral glucose drink)
- Random plasma glucose test (blood glucose level at any time of day)





Visit **NovoCare.com** to learn more about tests for diabetes.

Type 2 diabetes

Risk factors for type 2 diabetes

No one knows exactly what causes diabetes. But scientists are working hard to find out what's behind it. We now know that having certain risk factors for type 2 diabetes can increase your chance of developing it.

Risk factors that cannot be changed

You are more likely to develop type 2 diabetes if you:

- Are 35 years of age or older
- Have a parent, brother, or sister with diabetes
- Belong to a high-risk race and ethnic group, such as African American, Latino, Native American, Asian American, or Pacific Islander
- · Have a history of cardiovascular disease, such as heart disease
- Had diabetes during pregnancy (gestational diabetes)
- Are a woman with polycystic ovary syndrome
- Have human immunodeficiency virus (HIV)

Risk factors that can be managed

You are at a higher risk if you:

- Are overweight or have obesity
- Have low levels of HDL "good" cholesterol

 Have high levels of triglycerides, a type of

fat in your blood

- Are not physically active
- Have high blood pressure
- Have prediabetes

Know the symptoms of diabetes

Diabetes symptoms vary from person to person. Some people have no symptoms at all. Common symptoms include:



Early detection and treatment of diabetes can help decrease the risk of developing other health problems from diabetes.



Visit **NovoCare.com** to learn about how your diabetes can change over time.

Managing your diabetes

Living with diabetes can be a challenge. Work with your diabetes care team to help you with the everyday diabetes care. Try to:



Go to your appointments

Get any needed laboratory tests

Learn all you can about diabetes

Know your ABCs

As part of managing your diabetes, it's important to track your ABCs:



A1C (your average blood glucose level over the past 2 to 3 months)



Blood pressure



Cholesterol

Meeting your ABC goals helps reduce your risk for other health problems including cardiovascular disease or CVD. CVD includes all types of problems that affect your heart and blood vessels.



When you are in good health, blood vessels carry blood with oxygen and nutrients throughout your body. A process called atherosclerosis is when plaque *(fatty deposits)* builds up in the walls of your arteries, a type of blood vessel. This makes it hard for the blood to flow through. If a blood clot forms, it can block the blood flow. This can cause lead to a stroke or heart attack.



Ask your healthcare team what your ABC goals should be. You can fill them in here.



Visit **NovoCare.com** to learn how to set goals to help manage your diabetes.



- Educational videos
- Ask Sophia! A digital assistant

You can also enroll in NovoCare[®] Education & Resources for Diabetes, that includes access to the Diabetes Health Coach program.

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"I feel great about my progress! I've lost weight, learned how to eat right, and improved my numbers."*

— NovoCare[®] Education & Resources Member

LIVING WELL WITH DIABETES

In this section:

✓ Managing diabetes

✓ Eating healthy

✓ Being active

✓ Taking medicines

Managing diabetes

Eating healthy and being physically active are the first steps in managing type 2 diabetes. Why? Because type 2 diabetes is affected by what, how much, and when you eat. It's also affected by how active you are.

Diabetes changes over time. At some point, eating healthy and being active may not be enough to manage your blood glucose levels. Your treatment may need to change too. You might need medicine for diabetes if:

- Your daily blood glucose levels stay above your goal range
- Your average blood glucose level over the past 3 months is still too high



Eating healthy

Your diabetes care team may recommend that you follow a healthy-eating plan. This plan can help you manage your:



When these things are managed, you may prevent or slow down the chance of getting other health problems.

Creating your eating plan

There is no such thing as a "diabetes diet." Work with your diabetes care team to figure out what eating plan makes the most sense for you and your treatment goals. It will likely include a variety of foods from all food groups. Be sure to ask how you can add your favorite foods to your eating plan so you enjoy what you eat.





Visit **NovoCare.com** for healthy recipes and guidance on well balanced meals.

A typical healthy eating plan includes:



Fiber, which is found in beans, whole grains, fruits, and vegetables



Lean protein, such as chicken (without skin), tofu, fish, and eggs



Complex carbohydrates, such as whole-grain bread, oats, and brown or wild rice





Carbohydrates and your blood glucose

There are 3 main types of carbohydrates (carbs) in the foods you eat. They are sugar, starch, and fiber. Each type of carb affects your blood glucose levels in a different way.

Sugar can be natural like in fruit or added sugar in regular soda, sweets, and baked goods. Foods with added sugars raise your blood glucose levels very quickly after you eat them. It's best to eat fewer foods with added sugar.



Starchy foods, such as bread, pasta, potatoes, rice, and corn. They do not raise blood glucose levels as fast as sugary carbs do. Skip the foods made with refined grains, such as white flour, and choose foods made with whole grains or whole wheat for more nutrients.

Fiber is found in plant foods, such as vegetables, fruits, nuts, seeds, beans, and whole grains. When you eat fiber-rich foods, your blood glucose levels rise slowly. Because your body cannot

digest fiber, the fiber slows down digestion and helps you feel full. It can also help you manage your blood glucose, lower cholesterol, and reduce your risk of heart disease.





Tips for healthy eating

Using these tips may help you make good food choices and follow your eating plan:

Read food labels

- Always check the serving size and the amount of carbs
- Look for foods with 2.5 or more grams of fiber per serving
- > Try to avoid saturated and trans fats
- Limit added sugars

Measure each serving

Measuring lets you see actual portion sizes and helps you eat the right amount.



Count carbs

Your body breaks down carbs into glucose, which is a kind of sugar. Counting carbs can help you manage your blood glucose levels. Try to eat about the same amount of carbs each day at similar times during the day. This is especially important if you take diabetes medicines or insulin. Talk with your diabetes care team about what amount of carbohydrates are right for you.



Ask your diabetes care team for the *Meal planning and carb counting* booklet. You can learn more about healthy eating, carb counting, and portion sizes.

Serving size	Nutrition F 8 servings per container Serving size 2/3 c Amount per serving Calories						
		Daily Value*					
	Total Fat 8g	10%					
	Saturated Fat 1g	5%					
Fats 🕨	Trans Fat 0g						
	Cholesterol Omg	0%					
	Sodium 160mg	7%					
Carbs 🕨	Total Carbohydrate 37g	13%					
Fiber 🕨	Dietary Fiber 4g	14%					
	Total Sugars 12g						
Added	Includes 10g Added Suga	ars 20%					
sugar	sugar Protein 3g						
	Vitamin D 2mcg	10%					
	Calcium 260mg	20%					
	Iron 8mg	45%					
	Potassium 235mg	6%					

Some packaged foods may have a label that has 2 columns. This is to show the difference in how much you are eating or drinking if you have one serving or the entire package at one time.



Visit **NovoCare.com** for tips for managing portions and serving sizes.

Set goals for healthy eating

For many of us, changing how and what we eat isn't easy. So start with simple goals. Work with your diabetes care team to create a plan that's right for you. Write some of your goals for healthy eating in the boxes below.

Example

Goal:I will not skip breakfast.How:I will set my alarm 10 minutes earlier to
allow time to eat.



My goals for healthy eating

Goal: How: Goal:

How:

Goal:			
How:			

Being active

With diabetes, being active and eating healthy work together. Being active helps manage your blood glucose levels. It's also good for your overall health.

Physical activity helps:

- Lower your blood glucose
- Improve your heart health
- Lower your blood
 pressure and cholesterol
- Burn calories to help manage your weight
- Give you energy
- Lower stress
- Improve your sleep





Visit **NovoCare.com** to learn more about why moving with diabetes matters so much.

Three steps to being more active

Step 1: Talk with a member of your diabetes care team before you start.



Discuss the level of physical activity that is best for you.

Step 2: Choose an activity.

Choose activities that you enjoy. Just about anything that gets you moving is good. You might want to:

- Walk or jog
- Take a hike or ride a bike
- Swim or play a sport



• Dance or do yoga

Step 3: Set your goals.

The American Diabetes Association (ADA) recommends being active for 2½ hours (150 minutes) or more a week. To get the greatest benefits, do your activity until you develop at least a light sweat. Spread out the activity over 3 or more days a week and try

not to go more than two days in a row without activity. The ADA also recommends doing resistance exercise (exercise with weights or weight machines) 2 to 3 times per week, with a rest day in between.



Flexibility and balance training, such as yoga and tai chi, are recommended for older adults 2 to 3 times a week. This can help with range of motion, muscle strength, and balance.



Break up long periods of time sitting by getting up and moving around every 30 minutes.

You may not think you have the time in your schedule. See below for examples, and write in your own activity goals.

Adding activity, try this



Be active for 30 minutes, 5 days a week (150 minutes total).



Be sure to start slowly and increase intensity as you see fit. Always talk with a member of your healthcare team before starting or changing your physical activity.

My activity goals

Goal:

Goal:



Visit **NovoCare.com** for tips to start or stick to your diabetes activity plan.

Stay safe

Follow these simple tips to stay safe during exercise:

- Talk to your healthcare team about what activities are safe for you
- Bring a fast-acting carb snack with you, such as fruit juice or hard candies, in case your blood glucose drops too low



- Drink plenty of water
- Protect your feet. Always wear shoes and socks. Check your feet before and after being active. If you injure your feet, let your healthcare team know right away
- Stop if you feel any pain, shortness of breath, or lightheadedness
- Wear an "I have diabetes" ID bracelet in case you need help

Starting an activity program

Try these tips to help you get started and stay motivated to keep it up:

- **1. Do something you like to do.** Change things up so you don't get bored and work different muscles.
- **2. Start slowly**, especially if you have been inactive or are trying a new activity.
- **3. Find a buddy.** You can support and motivate each other to keep going.
- **4. Track your progress,** to help you assess your routine.



Small steps can add up to big benefits

Walking is one of the easiest activities to start with, and most people with diabetes can do it. It's not too late to make walking part of your daily routine. You can start slowly and walk for just a few minutes at first. Then the more you walk, the easier it will get, and you'll be able to add intensity by increasing your time, pace, or distance.

Higher daily step counts can make it more likely that you'll reach your blood glucose targets. Walking can also help improve your weight, balance, heart health, and so much more! The ADA recommends to try to work your way to 10,000 steps per day or at least 30 minutes a day.

To increase your step count each day, try to:

- Walk during your lunch break
- Walk and talk when you're on the phone
- Pick a far parking spot or get off the train or bus at an earlier stop
- Use the stairs instead of the elevator or escalator
- Clean your living space or do household chores
- If you have one, take your dog for a daily walk
- Set up walking dates with friends

There are many types of fitness trackers and apps available. You can track your number of steps and the amount of time you spend being active each day. You can even set reminders to get up and move!



Visit **NovoCare.com** to learn more about keeping exercise with diabetes fresh, safe, and smart.

Taking medicines

Many people with diabetes may have to take medicine to help reach their blood glucose goals. The more you know about the medicines you take and how to take them, the easier it may be for you to manage your diabetes.

There are 2 main types of diabetes medicines to treat type 2 diabetes:

- Medicines that are taken by mouth in the form of a pill
- Medicines that are taken as an injection

Learning about the different types of diabetes medicines may help you talk with your diabetes care team about treatment options. Together you can decide what type of medicine is right for you.

Diabetes pills

There are many types of diabetes pills for people with type 2 diabetes. These medicines are taken by mouth and lower blood glucose in different ways. Some common types of pills include:



- Metformin
- Dipeptidyl peptidase-4 (DPP-4) inhibitors
- Sodium-glucose cotransporter-2 (SGLT-2) inhibitors
- Sulfonylureas
- Thiazolidinediones (TZDs)

Type 2 diabetes medicines work in different ways in the body to help manage blood glucose levels including:

Help improve the body's response to insulin in the liver, muscle, and fat cells

Lower the amount of ______ glucose the liver releases

Help the kidneys to _____ get rid of extra glucose in the urine

Help the pancreas — release more insulin

Slow down movement of food leaving the stomach

Help prevent the breakdown of GLP-1, a hormone produced in the intestines

Key term

GLP-1: Glucagon-like peptide-1, is a hormone made by your body. It helps the pancreas release insulin and stops glucagon release when blood glucose levels are high. Insulin helps move glucose from the blood into the cells. GLP-1 also slows movement of food leaving the stomach after a meal.



Visit **NovoCare.com** to learn more about diabetes medicines.

Diabetes medicines you inject

There are some diabetes medicines that are injected under the skin—non-insulin medicines and insulin. Your diabetes care team can teach you how to use them. Some of these medicines are also available in other formulations, such as a pill or inhaled.

Non-insulin medicines injected under the skin are taken using a pen device and may be taken once a day, twice a day, 3 times a day, or once a week. These medicines include:

Glucagon-like peptide-1 (GLP-1) and dual GLP-1/gastric inhibitory peptide (GIP) receptor agonists work to:

- Help the pancreas release more insulin when blood glucose levels are high
- Keep the liver from making too much glucose when glucose levels are high
- Slows down movement of food leaving the stomach

Amylin analogs work to:

- Keep the liver from making too much glucose
- Slows down movement of food leaving the stomach
- May suppress appetite

Insulin you inject works like your body's own insulin. It lowers blood glucose levels by helping glucose move from the blood into your cells.

There are many types of insulin. The difference is how quickly they start to work, when they peak, and how long they last. If you need insulin, you and your diabetes care team will select the type that's right for you.

Combination therapy

Since diabetes medicines act in different ways to lower blood glucose levels, they may be used together to meet your diabetes goals. Diabetes also changes over time. At some point you may need more than one diabetes medicine even if you have been following your treatment plan. Many people use insulin or a medicine that helps the body make more insulin **plus** a medicine that helps the body use insulin better. This is called *combination therapy*.

Other medicines you may take

Diabetes can affect many parts of your body. This includes your heart, blood vessels, nerves, eyes, and kidneys. You may also need to take medicines for other health conditions to help:

- Lower blood pressure
- Lower cholesterol
- Lower risk of heart attack
- Stay healthy with vaccinations (including influenza, pneumonia, and COVID-19)



Visit **NovoCare.com** for information about programs that may help make medicines more affordable.

Your treatment plan

You may have to take diabetes medicines to reach your blood glucose goals. It's important to know what each medicine is and how to take it. Be sure to take each medicine exactly as directed by your healthcare professional.

Your treatment plan will tell you:

- ✓ What type of diabetes medicines and other medicines to take
- ✓ How much to take✓ When to take it

Your treatment plan will be based on many things, such as:

- ✓ Your blood glucose levels
- ✓ Your eating habits
- ✓ Your activity level
- ✓ Other health conditions you have
- ✓ Your daily schedule

Work closely with your diabetes care team to create a treatment plan that is easy to follow and right for you.



Ask your diabetes care team for the *Living with diabetes* booklet. It gives you more information on how to take steps to manage your diabetes by eating healthy, being active, and taking medicines. "I've worked hard making small adjustments toward my goal. I'm actually looking forward to my next doctor appointment!"*

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MANAGING DIABETES

35

In this section:

- ✓ Monitoring and tracking
- ✓ Lowering your risks
- Problem solving
- ✓ Healthy coping

Actor portrayals. *Individual results may vary.

Monitoring and tracking Checking your own blood glucose

Each time you check your own blood glucose you learn more about your diabetes and how it's being managed. Why? Because when you check your blood glucose:

- You know right away if it is too high or too low
- You see how activity, food, and stress affect it
- You know if your insulin or other diabetes medicine is working



When to check your blood glucose

Your blood glucose levels go up and down all day. They are affected by what, when, and how much you eat, as well as how active you are. You and your diabetes care team will decide when and how often you should check your blood glucose.

Here are some common times when people check:









Visit **NovoCare.com** to order or download a blood glucose tracker.

Glucose testing

A **blood glucose meter** is a small device that uses a drop of blood to check what your levels are at that moment. There are many kinds of meters. Your diabetes care team can help you choose a meter and show you how to use it.



A **continuous glucose monitor**, or **CGM**, tracks glucose levels all day and night. It works through a tiny sensor put under the skin usually on your belly or arm. It sends your glucose data wirelessly to a smartphone, receiver, or an insulin pump. A CGM reports glucose levels in real time and provide insight into your glucose trends.



Tracking your glucose levels

The more you know about your blood glucose levels, the more power you have over your own health.



You can write your numbers in a journal or log book. You can also use an app to help you track your blood glucose levels. Be sure to share your blood glucose log or app with your diabetes care team at your office visits.



Different types of blood glucose tests tell you different things.

- **Daily checks** with a blood glucose meter tell you about your blood glucose at the time of the test
- An A1C test during an office visit tells you what your average blood glucose level has been over the past 2 to 3 months
- **A CGM** tells you the amount of time you spend in your target glucose range. This is your time in range

A1C and daily blood glucose goals

Your A1C goal is your own! You and your diabetes care team will set an A1C goal that's safe and right for you. This goal may be different than someone else you know with type 2 diabetes and it may change over time. Higher A1C levels are linked to diabetes complications. So, reaching and maintaining your A1C goal may help reduce your risk.

Your blood glucose goals will depend on how long you have had diabetes, your age, and other factors. Ask your diabetes care team for your goals and fill them in on the next page.



Ask your diabetes care team for *Staying on track*. This booklet can help you understand more about blood glucose goals and what the numbers mean. Use the diary to fill in your blood glucose readings.



Call **1-800-727-6500** from 8:30 AM to 6:00 PM EST to request a blood glucose tracker.

Time in range goals

If you use a CGM to monitor your glucose levels, your diabetes care team will determine your target time in range. This is the amount of time that your glucose levels are within your target range. Talk with your diabetes care team to figure out what targets are right for you.





Time in range **between** 70 and 180 mg/dL for at least 70% of readings.

This means you should aim for about **17 hours a day in range.**





For most nonpregnant adults with diabetes **the ADA recommends:**

Blood glucose levels between 80-130 mg/dL **before meals** Blood glucose levels under 180 mg/dL 1-2 hours after the start of a meal

My A1C goal



- If your A1C is at goal, have your A1C checked at least 2 times a year
- If you are not at your goal, or if your treatment has changed, have your A1C checked at least 4 times a year

For most nonpregnant adults with diabetes **the ADA recommends** an A1C of less than 7%. Your A1C goal may be different.



Visit **NovoCare.com** to learn more about digital devices for managing diabetes.

Managing changes in your blood glucose

It is important to know what to do if your blood glucose level goes too high or too low. Your friends, family, and co-workers need to know too, in case you have a blood glucose emergency. If your blood glucose goes very high or very low, it can be mistaken for other serious health problems. That's why you should always wear an "I have diabetes" ID.

Be sure to keep track of any episodes of low or high blood glucose. Then talk with your diabetes care team about why it may have happened.

Low blood glucose

There may be times when your blood glucose level drops too low (called *hypoglycemia*). For most people with diabetes, below 70 mg/dL is too low.

Low blood glucose may happen if you take certain diabetes medicines, or if you take too much insulin or diabetes pills. Your blood glucose can also drop if you:

- Don't eat enough carbs
- Skip or delay meals
- Are more active than usual
- Are sick
- Drink alcohol without eating enough food

If your blood glucose level is too low, you might feel:



Symptoms of low blood glucose vary from person to person. Sometimes there may be no symptoms at all.



Visit **NovoCare.com** for more information and tips for handling low blood glucose.

How to treat low blood glucose

If you have any symptoms of low blood glucose, check your blood glucose level right away. If you can't check it, treat it by following the "15-15 Rule":

Eat or drink 15 grams of fast-acting carbohydrates (carbs) right away, such as:





Wait 15 minutes, then check your blood glucose level again:

- If it is still below 70 mg/dL, or your CGM doesn't show your glucose trending up, have another 15 grams of fast-acting carbs
- Once your blood glucose is above 70 mg/dL, or is trending up on your CGM, have a protein and carb snack, such as cheese and crackers. This will help keep your blood glucose from dropping low again before your next meal

High blood glucose

High blood glucose (called *hyperglycemia*) is when there is too much glucose in your blood. Over time it can cause serious health problems. High blood glucose can happen if you:

- Skip a dose of insulin or other diabetes medicine
- Are less active than usual
- Are under stress or sick
- Eat more than usual

Here's how you might feel when your blood glucose level is high:



Sometimes there may be no symptoms at all.



Visit **NovoCare.com** for more information and tips for handling high blood glucose.

What to do about high blood glucose

The best thing to do about high blood glucose is prevent it. Follow your eating and activity plans and take all your medicine as directed. Call your diabetes care team if:

- Your blood glucose has been above your goal for 3 days and you don't know why
- You have symptoms of high blood glucose

You may need a change in your eating plan, physical activity, or diabetes medicines.

Lowering your risk for other health problems

When you have diabetes, you are at risk for developing other serious health problems. Diabetes can affect your heart, kidneys, blood vessels, feet, nerves, and eye sight. But there are *many* things you can do to stop or delay the problems diabetes may cause.







Visit **NovoCare.com** for tips to manage the risks of long-term problems with diabetes.

Monitoring your overall health

With diabetes, you know that you should track your blood glucose levels. It is just as important to monitor your overall health. You and your diabetes care team should pay attention to your:



Heart health

People with diabetes are twice as likely to have heart disease or a stroke than people without diabetes. Talk with your doctor about your own risk. You should also have your blood pressure and cholesterol checked as directed.



Kidney health

Diabetes can damage the kidneys and cause them to stop working as they should. Have your urine and blood tested at least once a year, or more often if needed.



Eye health

Diabetes puts you at risk for eye disease. Have dilated eye exams to check to see if blood glucose has damaged any blood vessels. Have this eye exam done every 1 to 2 years, or more often if needed.



Foot health

People with diabetes can develop many different foot problems. Check your feet every day. And have the doctor check them at least once a year, or more often if needed.

Take control of your health

Doing these things may help to delay the problems diabetes may cause as well as manage your health:



Try your very best to manage your blood glucose



Be active. Start slow but increase your physical activity as you are able



Take all your medicines exactly as directed



recommended screening tests



Follow your eating plan. Make a commitment to healthy eating

Ouit smokina

Work with your diabetes care team to keep your blood pressure and cholesterol at your target levels.



Visit NovoCare.com to learn more about heart health with diabetes.

Follow a recommended diabetes care schedule

Another way you can take control of your health is to follow a diabetes care schedule. It includes recommended tests and how often they should be done.

This is the diabetes care schedule recommended by the American Diabetes Association (ADA):



☐ A1C test (if your blood glucose is at goal)



These recommendations are only guidelines. Every person with diabetes is different. So, talk with your diabetes care team to set up a care schedule that's right for you.





Visit **NovoCare.com** for more information and the latest updates about diabetes.

Problem solving

When you have diabetes, planning ahead is really important. Try to keep your blood glucose levels within your goal range. So it's smart to set up a plan for food, exercise, blood glucose checks, and medicine. However, things will happen that upset even the best of plans. And that's where problem-solving helps.

Problem solving is an important skill. It helps you prepare for times when unexpected things happen.

Everyone with diabetes can have low or high blood glucose once in a while. Here are 3 problem-solving steps you can take when this happens to you:

1. Take a look at the situation.

What was different? Did you:

Travel?

□ Feel sick or stressed?

Drink alcohol?

- \Box Change how much you ate?
- □ Change your amount of physical activity?
- \Box Not take medicine as prescribed?

2. Make changes.

What can you do to fix the problem? Talk with your diabetes care team if you need help finding answers. Perhaps you could:

Carry an extra snack

 \Box Try a different eating plan or add more activity to your day

 \Box Check your blood glucose more often

3. Try to keep it from happening again.

What has worked for you in the past in a similar situation? Use those solutions again. Or try something new to find what works best for you.





Visit **NovoCare.com** for support with staying on track with your diabetes.

Planning for different situations

When you are sick

Being sick makes it harder to manage diabetes. Your blood glucose levels can vary when you're sick. You may have trouble taking your medicine. And you may not be able to eat in the usual way. Let your diabetes care team know you are sick. Find out:

- How often to check your blood glucose
- If you should change how you take your diabetes medicines
- What to eat and drink
- When to call your doctor or healthcare professional

Check with your healthcare team *before* you take over-the-counter medicine, like aspirin, cough syrup, decongestants, or herbal supplements. They might raise or lower your blood glucose level.



Prepare for emergency situations

There may be emergency situations when you may not be able to get to a pharmacy for your medicines or other diabetes supplies. Gather the supplies you may need to manage your diabetes, such as:

- Blood glucose testing supplies
- Extra medicine to last at least 14 days
- Fast acting carbs to treat low blood glucose (glucose tabs, juice, hard candies)
- A form of glucagon in case of a severe low blood glucose emergency



Be an active member of your diabetes care team. Talk openly and honestly about any difficulties you have managing your diabetes. You all have the same goal: **to keep you as healthy as possible.**



Visit **NovoCare.com** to help you create a plan for if you get sick.

When you're at work



Diabetes doesn't have to get in the way of work. Talk with your diabetes care team. Together you can make any needed changes to your eating, activity, or medicine plans.

Most employers must make arrangements for people with diabetes. It's the law. So be sure to let your employer know you have diabetes. Teach your co-workers the signs of low blood glucose. You may need their help if yours drops too low.

Here are some other ways you can plan for work days:

- Follow the workday eating and activity plans suggested by your diabetes care team
- Take regular breaks to eat or drink, test your blood glucose, or take medicine
- Keep snacks nearby. Carry some with you to treat low blood glucose
- Always wear an "I have diabetes" ID



When you travel

Don't let diabetes tie you down! Just plan ahead so you can manage your diabetes while you're away from home.

Here are some things to do when you are traveling:

- Ask your healthcare team for any extra prescriptions or supplies you may need while you're gone
- Ask a member of your healthcare team for a letter about your diabetes and any devices you may use
- Always carry diabetes medicines, insulin and testing supplies with you. Never put them in your luggage. And never store them in the glove compartment of a car
- Carry extra food and snacks with you
- Limit alcoholic beverages. Eat something if you choose to drink to prevent low blood glucose
- Always wear an ID that says you have diabetes
- Check your blood glucose often
- Know where you can receive medical care at your destination



Visit **NovoCare.com** to help you plan for specific situations.



Healthy coping

It's not easy to cope with diabetes. Managing it can be an everyday challenge. It's normal to feel discouraged sometimes. Try to manage your diabetes one step and one day at a time. The small steps you take each day can add up to many daily successes.

To help cope with your feelings you can:

- Learn all you can about diabetes. Find out what you can do every day to manage it now and as you move forward to the future
- Develop coping skills. Use different ones for different situations. Read coping with stress on page 60 for some ideas
- ✓ Find a mental health provider. When managing your diabetes you may feel stressed, sad, angry, or scared. A mental healthcare provider can help guide you through the many emotions you may feel and provide you support and tools to help you tackle the day-to-day challenges



Recognizing depression

Some days can feel better than others when you have diabetes. It's normal to feel low from time to time, but not most of the time. People with diabetes can develop depression. With depression, it can be harder to follow a diabetes care plan.



Here are some common symptoms of depression:

- Loss of interest or pleasure
- Change in sleep patterns
- Change in appetite
- Trouble concentrating
- Loss of energy
- Nervousness
- Depression is real and needs to be treated. If you think you may have depression, let your diabetes care team know how you're feeling and how often you feel that way.



- Morning sadness
- Thoughts of suicide
- Pull away from friends and activities
- School and work
 performance gets worse

Visit **NovoCare.com** for suggestions on how to deal with the diabetes blues.

Coping with stress

Stress can affect how well you manage your diabetes. Stress may make it hard to stick with healthy eating, being active, or doing regular blood glucose checks. Stress can also cause blood glucose levels to rise.

Here are a few things you can try to help lower your stress:

- **Do breathing exercises.** Try deep breathing for 5 to 20 minutes each day
- **Move your body.** Relax through motion, such as gardening, taking a walk, or doing yoga or tai chi
- **Reach out for support.** Turn to family and friends when you feel stressed or upset. Consider being part of a support group where you'll meet other people with diabetes. Chances are they will understand what you're feeling. They can share ways they manage stress and cope with diabetes

The daily burdens of diabetes can be a lot to handle and COVID-19 can add to this stress. Here are some simple ways to help ease the stress from diabetes:

- Sign up for auto-delivery of diabetes supplies
- Use a food delivery service
- Set virtual appointments with your diabetes care team

Erectile dysfunction and diabetes

Erectile dysfunction is a common problem for men with diabetes. Having erectile dysfunction can be a real challenge. It can leave you and your partner feeling frustrated and discouraged. It may not be easy to talk about, but there may be ways to help you cope with erectile dysfunction.



Talk with your diabetes care team

Ask if there's anything you can do to better manage your diabetes. Improving your blood glucose levels can help prevent some of the problems that may lead to erectile dysfunction.

Consider treatment options

There are many erectile dysfunction treatments. Ask your doctor if there is one that may be a good choice for you.

Make some healthy changes

Being physically active, losing weight if you have excess weight, cutting down on alcohol if you drink, and if you smoke, quitting, all can improve erectile dysfunction as well as overall health.





Novo Nordisk is dedicated to diabetes

Diabetes is our passion and our business

As a leader in diabetes, Novo Nordisk is dedicated to improving diabetes care worldwide. Since 1923, we have been focused on innovation and leadership in diabetes care.

The Novo Nordisk Patient Assistance Program (PAP) is our continued commitment to people living with diabetes. If you are having trouble affording your Novo Nordisk medicine, you may qualify for help. Call Novo Nordisk PAP toll-free at 1-866-310-7549 Monday to Friday from 8:00 AM to 8:00 PM EST to see if you qualify.

For questions about Novo Nordisk products or to request a Blood Glucose Tracker, call the Customer Care Center at 1-800-727-6500 (option 8 for Spanish) from 8:30 AM to 6:00 PM EST.



The more you know about diabetes, the better you will be able to manage it. Ask a member of your healthcare team for these **FREE** books. For even more information, go to **NovoCare.com**.

This educational booklet series is designed to help people with diabetes work with their diabetes care teams to learn about and manage diabetes.



Living with diabetes

Take steps to manage your diabetes by eating healthy, being active, and taking medicines. This booklet gives you more information about how to live well with diabetes.



Staying on track

Reading this booklet can help you understand more about blood glucose goals and what your numbers mean. Learn how to monitor your health and use a tracker to fill in your blood glucose readings.



Meal planning and carb counting

Learn more about meal planning and carb counting with diabetes. This booklet offers helpful tools and resources for eating healthy and managing your diabetes. Use the food lists to help you make healthy choices.



NovoCare[®] can help

Managing your physical, mental, and emotional health with diabetes is important. Visit NovoCare.com, your one-stop online resource for all things diabetes!

- Personalized resources and educational tools for living with diabetes
- Affordability and savings support for your medicine

If you have questions or would like assistance with any of our resources, call 1-800-727-6500 (option 8 for Spanish), Monday to Friday, from 8:30 AM to 6:00 PM EST.

Visit NovoCare.com or scan this code with a smartphone or tablet



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