

KITCHEN CREATIONS FACULTY NEWSLETTER #12
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What are the AADE 7 Self-Care Behaviors™?

Diabetes care is about self-management and behavior change. Educators influence excellent diabetes care as we recognize patients as managers of their diabetes and we take on the role of guide, facilitator or mentor.

Guidance for how diabetes education is provided comes from sources such as Nutrition Practice Guidelines published by the American Dietetic Association (latest edition 2001); and the National Standards for Diabetes Self-Management Education (including the 10 content areas to be covered in the curriculum) (Revised 2000).

The American Association of Diabetes Educators (AADE) has defined the AADE 7 Self-Care Behaviors™ including detailed guidelines for measuring, monitoring and managing behaviors.

The **10 content areas** list the topics that a person with diabetes needs to know and the **seven behaviors** focus specifically on behaviors that must be learned or changed for effective diabetes care. Logical progression is that as educators facilitate behavior change in their patients, desired clinical outcomes and health-status outcomes will follow.

The AADE 7 self-care behaviors™ include:

1. Healthy eating
2. Being active
3. Monitoring
4. Taking medication
5. Problem solving
6. Healthy coping
7. Reducing risks

Suggested goal might be:

- Reduce portion size
- Exercise more often
- Follow monitoring schedule
- Miss fewer medications
- Plan problem situation treatment
- Get support from family/friends
- Stop smoking

In 2004, AADE released the **AADE 7 Self-Care Behaviors™ Goal Sheet** as a tool to measure self-care behavioral outcomes. Using this tool helps educators guide patients in goal setting, measure and monitor change and manage behavior change outcomes.

Health outcomes like A_{1c} and economic outcomes like cost benefit of changed behaviors demonstrate the value of education programs. Standardization of outcomes data collection allows measurement, not only of individual change, but also of impact on a population.

Purchasing information for [AADE 7 Self-Care Behaviors™ Goal Sheet](http://www.diabeteseducation.org/AADE7/goalsheet.html) is available at 1-800-338-3633 X100 or an order form can be downloaded at www.diabeteseducation.org/AADE7/goalsheet.html.

Information for this article came from [On The Cutting Edge](#), Spring 2005, Volume 26, No. 2. [On the Cutting Edge](#) is a publication of the American Dietetic Association dietetic practice group, Diabetes Care and Education. This issue contains a series of articles about behavior change, measuring outcomes and performance improvement. Articles specifically addressing the AADE 7 Self-Care Behaviors™ included:

Using Self-Care Behavior Resources To Maximize Outcomes, M. Maryniuk, Joslin Diabetes Center, Boston MA, pp 5-7.

The AADE 7 Self-Care Behaviors™ Goal Sheet: A New Framework, B. Broussard, V. Valentine, Albuquerque NM, pp. 7-10. Includes sample tool.

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International Definition of Metabolic Syndrome

The International Diabetes Foundation (IDF) has issued a consensus statement with a worldwide definition of the metabolic syndrome.

Metabolic syndrome includes diabetes or pre-diabetes, abdominal obesity, high blood lipids and high blood pressure. Metabolic syndrome triples the risk of heart attack or stroke and doubles death from heart attack and stroke. It also increases the risk of developing type 2 diabetes, if not already diagnosed, five times. Recent data from Australia and the U.S. suggest that as many as 25% of the adult population may have metabolic syndrome.

The goal of the definition of metabolic syndrome is to improve the identification of people with metabolic syndrome. Early lifestyle changes and treatment will reduce the risks of developing heart disease and type 2 diabetes.

According to the new IDF definition, for a person to be identified as having metabolic syndrome they must have:

Central obesity: waist circumference greater than 40” for men and greater than 35” for women

Plus any two of the following four factors:

- High triglyceride level: 150 mg/dL or above
- Low HDL level: below 40 mg/dL for men
below 50 mg/dL for women
- High blood pressure: systolic BP 130 mmHg or above
diastolic BP 85 mmHg or above
- High fasting glucose: 100 md/dL or above or previously diagnosed type 2 diabetes

The management of metabolic syndrome is by healthy lifestyle promotion. This includes a 5-10% weight loss, moderate increase in physical activity and changing dietary composition.

Metabolic Syndrome in Adolescents

In the October 2004 issue of *Diabetes Care*, there is an article on the prevalence and trends of metabolic syndrome in U.S. adolescents. Metabolic syndrome increased from 4.2% in NHANES III (1988-1992) to 6.4% in NHANES 1999-2000. This is a significant increase. Based on population-weighted estimates more than 2 million adolescents have metabolic syndrome.

Metabolic syndrome is most common in overweight adolescents (BMI 95 percentile or above), with a prevalence of 32.1%. In comparison, adolescents at-risk-for-overweight (BMI between the 85th and 95th percentiles) have a prevalence of 7.1%. This shows that small amounts of weight loss can potentially help adolescents avoid metabolic syndrome.

Metabolic syndrome is more common in male adolescents than in females. High fasting triglycerides and low HDL cholesterol were the criteria of metabolic syndrome found most often.

MyPyramid Resources

Now that the new “MyPyramid” has been released there are several websites with information on using it.

http://www.mypyramid.gov/downloads/MyPyramid_Getting_Started.pdf

Information on the getting started using the new My Pyramid

<http://extension.missouri.edu/fnep/pubs.htm>

Free on-line training for My Pyramid from Missouri Extension. Included are some items from the web reformatted for easy readability and a Q and A section. Also there are their versions of the My Pyramid mini-poster; one for adults and one for youth

<http://www.fnp.uconn.edu/shoptips/shoptips.php>

Tips for eating for eating more whole grains, vegetables, fruits, protein, milk products and for controlling food costs from Connecticut Extension.

<http://lancaster.unl.edu/food/ftmay05.htm>

From Lancaster county Nebraska Extension is a power point presentation Avoid Portion Distortion with MyPyramid's Specific Guidelines. You can print off single frames and use them as a flip chart or display

<http://lancaster.unl.edu/food/mypyramid-foodsafety.htm>

Also from Lancaster county Nebraska Extension; this is on MyPyramid and food safety.

Websites, etc

DIABETES PHD (Personal Health Decisions) www.diabetes.org/diabetesphd

Diabetes PHD is a risk assessment tool on the American Diabetes Association web site. The participant is asked to create a personal health record by entering height, weight, cholesterol levels, blood pressure reading, last dilated eye exam, current medications, A1c reading, etc. Diabetes PHD will determine the risk for diabetes, heart attack, stroke, kidney failure, foot complications and eye complications. By changing variables such as stopping smoking or getting a regular foot exam, Diabetes PHD will show how making these changes would affect future health.

Prevent and Control High Blood Pressure: Mission Possible

This site contains materials and information that can be used by community groups and individuals to combat high blood pressure. There are fact sheets, healthy eating tips, and activity tips. There are fact sheets and radio spots in Spanish.

Go to <http://hin.nhlbi.nih.gov/mission/>

Worst Pills, Best Pills by Sidney Wolfe, MD

I checked this book out from the library. It recommends “Do Not Use” for some drugs. Interestingly, it recommended “Do Not Use” for Celebrex, Mobic, Vioxx, and Bextra before Vioxx and Bextra were pulled off the market. It lists drugs that can cause life threatening reactions if used together. The description of each drug lists adverse reactions that it can cause. It gives 10 rules for safer drug use.

“Take Charge” is a power point presentation from the California Diabetes Program. It is based on ADA standards of care. It can be downloaded at

http://www.caldiabetes.org/content_display.cfm?CategoryID=0&ContentID=288

There is also a Diabetes Health Record Card that is available in 14 languages and a Basic Guidelines for Diabetes Care Packet. They can be downloaded at www.caldiabetes.org

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