Many people believe that when they are diagnosed with Diabetes – Type 1 or Type 2 and even pre-diabetes that they can no longer enjoy eating food. Part of the reason that those diagnosed with diabetes feel this way is they are asked to consider the carbohydrate content, fat content, glycemic load, and potential impact on your weight of everything you eat. This can make it extremely difficult to maintain a healthy relationship with food, to truly enjoy eating and to allow food to nourish you. It does not help when doctors, dieticians, friends and family members all seem to have something to add to the topic of how to eat with diabetes.

If you have tried several “diabetic diets” and none of them worked for you in the long run, or if the prospect of choosing food strikes fear in you, we have some great news for you. There is no need to see food as your enemy, or to carefully restrict eating. In fact, the opposite is true. The secret to managing your diabetes lies in learning to celebrate food and its amazing ability to nourish you.

Ending the Blame Game

If you are like most people, you find it is hard to stick to a rigid plan and if your meal plan excludes certain foods that you like, you mourn the loss of those foods. Perhaps you have tried to follow your meal plan, only to find yourself eating the very foods you were told to avoid. You may have even been told you needed to lose weight and even though you shed some pounds they come back within a few months and many times with more pounds than before. In fact, if you have Type 2 diabetes, you may think that if you had done a better job monitoring your food intake and weight before you diagnosis you would not be in this predicament now.

So here is the first piece of advice: Don’t blame yourself! Genes play a large role in the development of diabetes. We are all born with challenges in our genetic code and this is one of the challenges that you were dealt. Your body was vulnerable to difficulty with glucose regulation, and some combination of factors triggered that genetic propensity. However, now that you are diagnosed you are in the driver’s seat: you can learn how to manage your blood glucose and nourish yourself better. To get there you need to let go of certain beliefs that harm rather than help you.

The “Science” of Diabetes in the Body

It is true that the majority of people with Type 2 diabetes fall into the body-mass index (BMI) categories of “overweight” or “obese”. But it is also true that insulin resistance, one of the main underlying problems in Type 2 diabetes, encourages weight gain. In fact, weight gain may actually be an early symptom of the path to Type 2 diabetes.

A short explanation of the science behind diabetes may help explain how this weight gain happens. Insulin a hormone responsible for guiding nutrients—both glucose and fat—out of your blood stream and into your cells. If you have diabetes,
your pancreas can not make sufficient insulin and/or your cells are resistant to insulin, meaning they do not respond effectively to insulin’s message. In either case, you may have difficulty getting glucose into the cells that need it for energy. Instead the excess glucose remains in your blood stream, a situation that is believed to contribute to many of the complications associated with diabetes.

In people with Type 1 diabetes, prolonged high blood glucose typically leads to weight loss as the glucose exits the body in the urine and the body begins to break down fat tissue for energy. In people with Type 2 (or prediabetes) whose pancreases still make insulin, the body’s response to high blood glucose is to make and release more insulin resulting in hyperinsulinemia, or higher-than-normal blood insulin levels. Hyperinsulinemia may promote weight gain in three ways: by causing increased storage of glucose as fat; by interfering with the action of the hormone leptin, which normally signals the brain that the body has had enough to eat; and by increasing the pleasure derived from food, even when the body does not need more calories. Given these mechanisms, it is not surprising that many people gain weight when they have Type 2 diabetes.

Without a doubt, weight loss is very effective at improving blood glucose in the short term. But this does not mean that your health will be better off in the long run. A review of controlled weight-loss studies involving people with Type 2 diabetes showed that initial improvements in glucose control were followed by a return to starting levels of control within 6 to 18 months, even in a few cases where weight loss was maintained.

What can have lasting positive results, however, is developing sustainable behaviors. A wealth of evidence shows that people of all sizes can substantially improve their general health and well-being through healthy behaviors.

### Changing the “Diet” Mentality

Research is beginning to show that the pursuit of weight loss— which more often results in fluctuating weight than permanent weight loss – can actually be harmful, both physically and emotionally. It also tends to distract a person from the behaviors and attitudes that really can improve one’s health such as eating well, being physically active, and cultivating a positive sense of self. What can have lasting positive results however is developing sustainable behaviors. A wealth of evidence shows that people of all sizes can substantially improve their general health and well-being through healthy behaviors – even in the absence of weight loss.

### Health at Every Size

Health at Every Size (HAES) is a new approach to health management that emphasizes wellness rather than weight. HAES encourages people to trust their body to guide them in nourishing a natural weight. The HAES includes three guiding principles:

- **Size and Self Acceptance** - respect and appreciation for the diversity of body shapes and sizes, rather than pursuit of an idealized weight or shape.
- **Joy of Movement** – participation in physical activity for pleasure and health benefits rather than primarily for the purpose of weight loss.
- **The pleasure of eating well** - “Intuitive Eating” based on physical cues rather than on external food plans or diets.

### Becoming an Intuitive Eater

Many people who have been diagnosed with diabetes feel betrayed by their body and find it difficult to trust their body can actually support them in eating well. Research shows that you can learn to read your body’s signals and respond to
them in a loving, nourishing way. Intuitive eating means eating what feels right to you, when it feels right. This approach helps you to reclaim the pleasure in eating and at the same time allowing your body to help you manage your diabetes.

The first step in becoming an intuitive eater is to shift away from external rules about when you should eat and to learn to listen to your body’s internal cues. To identify your physical hunger, pay attention to signals such as an empty or gnawing feeling in your stomach, a feeling of low energy or lethargy, a head ache, difficulty concentrating, irritability or persistent thoughts of food. Each person experiences hunger a little differently, and your job is to learn what hunger feels like to you. Checking your blood sugar when you feel these sensations can provide you with valuable information. If it is low, the feeling you are experiencing is indeed physical hunger. If your blood glucose is high the impulse to eat may be coming from emotional rather than physical trigger, but that is not always the case. If for some reason your body does not have enough insulin available to move the glucose in your blood stream into the cells that need it, you may be experiencing real hunger. Insufficient insulin can result from not enough being injected or from a pancreas that simply cannot put out enough to handle the level of glucose in the blood. And while food is the best known contributor to glucose in the blood stream, high blood glucose can also occur after intense exercise, as a consequence of an infection (even one that you are not aware of having), and as a side effect of certain drugs.

Having high blood glucose when you are feeling hungry, therefore, is an opportunity to think about what is going on for you at that moment. Is your urge to eat coming from a physical trigger or an emotional cue? As you become an intuitive eater, you can experiment with different amounts and combinations of food and get feedback through assessing how you feel and checking your blood glucose level. You will find that responding to true hunger is one way to put pleasure back in eating.

Food actually tastes better when you are hungry. To ensure that you can eat what you want when you are physically hungry carry a bag of food that you can eat that has a wide variety of options. It is a good idea to package the foods in one “carb” exchange amounts. The more that you practice listening to your body’s signals and responding to them, the less you will feel the drive to eat when you are not really hungry. However, if you continue to turn to food for emotional reasons in spite of this work, consider doing some further reading or seeking counseling to learn how to manage your feelings without reaching for food.

Choosing What to Eat

Just as important as moving away from the external rules about when to eat, it is also important to let go of the rules about what you “should” and “shouldn’t” eat. Instead think, about what food(s) would feel truly nourishing in your body. By choosing foods you like that will also keep your body feeling well, you can end the feelings of deprivation you may have surrounding food. When you eat pay attention to how various foods affect you. Note how you feel physically and mentally before and after you eat. Check your blood glucose level before and two hours after eating for additional feedback on the foods you choose. The more that you do this, the more that you will feel in charge of your eating and your diabetes care, rather than feeling controlled by them. Another factor playing into the equation is physical activity. Match your physical activity levels to your daily food intake. Know that walking helps to use up the extra blood glucose in your system after eating a heavy “carb” load foods. Becoming an intuitive eater and learning how to feed yourself in a way that gives you pleasure takes some experimentation. The payoff is the feeling of sustained energy that comes from matching your hunger with pleasurable, nourishing food choices.
Stopping When Full

When you are hungry and eat exactly what you are hungry for, it feels very satisfying. As you eat there is a point when you have had enough, and the food no longer tastes good. By paying attention to this internal cue, you can stop eating when you are full so that your body feels satisfied and comfortable. But keep in mind that if there is not physical hunger signal to start eating, there will be no internal signal to stop.

There may be times when you suddenly feel hungry again even though you recently finished eating. This may be because your insulin-resistant cells have not received energy from the meal. Try making your meals smaller and eating more frequently. Smaller meals will require your pancreas to release less insulin, so you may have a better match between the amount of glucose from the meal and the amount of available insulin. You will learn in time, based on the way that your body feels how much food is right for you at a particular time. Craving food after a filling meal may also mean that your food choices did not entirely satisfy your physical needs.

As you become an intuitive eater, honoring your internal cues and reclaiming the pleasure in eating, you will be in a stronger position to make decisions about your health. The transition from a focus on dietary control and weight loss to the HAES mindset, with an emphasis on wellness, will put you in charge of managing your diabetes and altering your choices as necessary. Remember, it takes time and practice to develop the skills of intuitive eating.

References


HEALTH AT EVERYSIZE, *www.HAEScommunity.org* This site give visitors the opportunity to become part of a community committed to honoring HASE values and lists organizations, Web sites, blogs, books and other media that support HAES.


