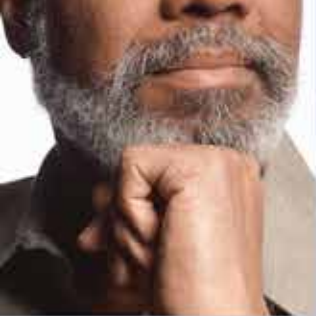




NA MATENISUKA

NA VEIKA E DODONU MO KILA



Diabetes: what
you need to know

ENGLISH/FIJIAN



diabetes
nsw & act

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Foreword

Diabetes –What you need to know has been written for people with diabetes and for people who would like to learn more about the condition.

Health professionals with skills and knowledge in a variety of specialised areas have contributed to the content and presentation.

This book has been reviewed by diabetes educators, dietitians and exercise physiologists.

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Ai vakamacala taumada

Na Matenisuka- Sa volai na veika e dodonu mera kila ko ira era tauvi matenisuka kei ira era via kila tale eso na kenai vakamacala ni mate oqo.

Era vakaitavi ena lewe ni vola oqo kei na kena tuvani, ko ira na kena dau vakaivola ka tu vei ira na kila-ka kei nai walewale ni veiqaravi.

Era dikeva nai vola oqo ko ira na qasenivuli ni matenisuka, na vuniwai ni kakana kei na vuniwai vakavakasama ni vakaukauwa yago.

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Introduction

One in four people in Australia have either diabetes or are at high risk of diabetes. Diabetes prevalence is considerably higher in Aboriginal and Torres Strait Islander and certain culturally and linguistically diverse (CALD) groups.

So far there is no cure for diabetes but with proper management most people can lead a full and active life and delay or prevent long term complications. To ensure best possible health, people with diabetes and their families need to understand a great deal about diabetes.

Being diagnosed with diabetes can be frightening and overwhelming. It's a lot easier when you understand it and develop a lifestyle plan to manage it. For this reason it is very important to have information about food, medicines, exercise, community resources and diabetes self care.

This book has been produced by Diabetes NSW & ACT. It has been written in English and several other languages to explain what you need to know about diabetes.

A kenai kau

E lewe dua mai na va na lewei Ositerelia era tauvi matenisuka se e rivarivabitaki vakalevu ni na tauvi ira. Na kena rawa ni veitauvi e levu cake sara vei ira nai taukei loaloa, na Aboriginal and Torres Strait Islander kei ira eso nai wasewase ni matatamata duidui se culturally and linguistically diverse (CALD).

Me yacova mai oqo, e sa sega nai wali ni matenisuka ia ni qaravi ga vakavinaka, e lewevuqa e rawa ni ra bula vinaka ka vakaberaberataka se tarova na kena veitauvi vakadede ka yaco me bibi sara. Me vukea me rawati nai vakatagedegede ni bula e vinaka, e dodonu vei ira na tauvi matenisuka kei ira na nodra matavuvale me ra kila e levu cake nai vakamacala me baleta na matenisuka.

Ni dua e laurai vua na matenisuka, e rawa ni vakatubu rere kei na yaluma. E mamada cake ni ko kila na kenai vakamacala ka qai vakarautaka edua nai tuvatuva ni bula mo sotava kina. Oqo na vuna sa ka bibi kina mo kila nai vakamacala ni kakana, na kena wainimate, na vakaukauwa yago, na veika sa tu rawa tu me vukei iko vata kei na nomu qaravi iko vakataki iko.

E vakarautaka nai vola oqo na Diabetes NSW & ACT. E volai e na vosa Vakavavalagi kei na so tale na vosa me vakamacalataka na ka e dodonu mo kila me baleta na matenisuka.

1

What is diabetes?

Diabetes is a condition where the amount of glucose (sugar) in the blood is too high. Glucose is your body's main energy source but when blood glucose is too high over long periods it can damage certain organs.

Glucose comes from carbohydrate foods that are broken down and released into the bloodstream. Carbohydrate foods include bread, rice, potatoes, fruit and milk. The pancreas, a part of the body that is found behind the stomach, releases a hormone called insulin into the blood stream. Insulin allows the glucose to move from the blood stream into certain cells of the body, where it is changed into energy. We use this energy to walk, talk, think, and carry out many other activities.

Diabetes occurs when there is either no insulin, not enough insulin or the insulin that is produced is not working properly to move the glucose out of the blood. .

Currently there is no cure for diabetes.

Symptoms of high blood glucose (sugar)

1. Frequent urination (both night and day)
2. Thirst / dry mouth
3. Tiredness / lack of energy
4. Blurred vision
5. Slow healing of wounds
6. Infections e.g. urine and skin
7. Tingling sensation in feet
8. Itchy skin.

2

Types of diabetes

The most common types of diabetes include:

- Type 1 diabetes
- Type 2 diabetes
- Gestational Diabetes (GDM).

1

Na cava na matenisuka?

Na Matenisuka sai koya nai tuvaki ni bula ni sa rui levu na suka (glucose) ena dra. Na suka oqori sai vurevure levu duadua ni kaukauwa e yagomu ia ni sa sivia ga na levu ni suka ena dra ena dua na gauna balavu, sa rawa ni vakacacana na gacagaca eso.

Na suka e lako mai na kakana yabia ka qaqi sobu ka vakadewataki yani ki na salanidra. E okati ena kakana yabia na madrai, raisi, pateta, vuanikau kei na sucu.

Na pancreas, na gacaga ka koto mai ena daku ni kete, e liviraka mai e dua na waibula (hormone) ka vakatokai na inisulini, ki na salanidra. Na inisulini e rawa kina me dewa mai na suka mai na salanidra ki na viciko ni yago eso, ka la'ki vuki sara me solia na kaukauwa. Eda vakayagataka na kaukauwa oqo me da taubale, vosa, vakasama, ka kitaka e vuqa tale na ka.

E tubu na matenisuka ni sa sega na inisulini, se, e lailai na inisulini, se, e sega ni cakacaka vinaka na inisulini me tosoya yani na suka mai na dra.

E sa sega nai wali ni matenisuka ena gauna oqo.

Nai vakatakilakila ni sa sivia na suka (glucose)

1. Suasua wasoma (bogi kei na siga)
2. Via gunu/mamaca na lomamu
3. Oca/malumalumu
4. Buwawa na mata
5. Mavo berabera na mavo
6. Tauvimate (infections) e.g. na suasua kei na kuli
7. Cucula na yava
8. Milamila na kuli.

2

Veimataqali matenisuka

Na mataqali matenisuka ka veitauvi vakalevu e wili kina:

- Matenisuka Kalasi 1
- Matenisuka Kalasi 2
- Na Matenisuka o sucu kaya mai (GDM).

Type 1 diabetes

This type of diabetes usually occurs in children and young people, but it can occur at any age. In type 1 diabetes the body's immune (defence) system has destroyed the cells that make insulin. As a result no insulin is produced by the pancreas. The development of type 1 diabetes is NOT linked to lifestyle e.g. eating too much sugar, not exercising enough or being overweight.

Symptoms of type 1 diabetes usually happen very quickly and include:

- Feeling very thirsty
- Passing a lot of urine frequently
- Sudden weight loss (despite normal or increased appetite)
- Tiredness
- Generally feeling unwell
- Abdominal pain, nausea and vomiting
- Mood changes.



If undetected, blood glucose levels become very high. When the body cannot get enough glucose from the blood to use as energy it will begin to breakdown fat. When the body is breaking down too much fat, ketones are produced. High ketone levels and high blood glucose levels are very serious and need immediate medical treatment.

If untreated, the person will become very ill and may develop:

- Rapid or deep breathing
- Dehydration and vomiting, leading to
- Coma.

The treatment for type 1 diabetes is insulin which must be commenced immediately and must be taken for life. The management of type 1 diabetes also includes:

- Balancing exercise, food and insulin
- Regular blood glucose monitoring
- Healthy lifestyle.

Matenisuka Kalasi 1

Na matenisuka oqo e tauvi ira vakalevu ga na gone lalai kei ira nai tabagone, ia e rawa ni tauva nai taba kecega.

E na Kalasi 1, era sa vakamatea na sotia ni yago na viciko ka bulia na inisulini. Sa vakavuna me sa sega ni rawa vua na gacagaca na pancreas me bulia na inisulini.

Na kena tubu na matenisuka Kalasi 1 e SEGA ni vu mai nai tovo ni nomu bula me vaka na kena gunuvi vakalevu na suka, sega ni vakaukauwa yago se na levulevu.

Nai vakatakilakila ni matenisuka Kalasi 1 e dau basika vakatotolo ka wili kina na:

- Karamaca levu
- Suasua wasoma
- Lutu vakasauri na yago (veitalia o dau kana se dau kana vakasivia)
- Oca
- Vakila ni sega ni o bula vinaka
- Mosi na kete, lomalomaca se lualua
- Veivukiyaki nai vakarau ni yalomu.



Kevaka e sega ni kilai, ena yaco me tubu vakalevu sara na suka. Ni sa kila na yago ni sa sega ni veirauti na suka mai na dra me solia na kaukauwa, sa na vakavuna me tekivu qaqia sobu na uro. Kevaka sa rui sivia na uro e qaqia na yago, ena vakasucuma mai na kitone. Ni sa sivia na levu ni kitone kei na suka ena dra, oqo sa rerevaki sara ka dodonu me vakatotolotaki na kena qaravi vakavuniwai.

Kevaka ena sega ni qaravi, sa na tauvimate bibi sara o koya ka rawa talega ni yaco vua na:

- Cegu totolo se cegu vakatitobu
- Mamaca na yagona ka lualua ka na yaco me
- Sega ni vakilai koya.

Na wainimate me qaravi kina na matenisuka Kalasi 1 sai koya na inisulini ka me soli vua ena gauna totolo duadua, ka me na yacova na vo ni nona bula taucoko. Na veiqaravi ki na matenisuka Kalasi 1 sa okati kina na:

- Me caka vakatautauvata tiko na vakaukauwa yago, kana kei na inisulini
- Me dikevi vakawasoma na levu ni suka ena dra
- Me bulabula nai tovo ni nomu bula e na veisiga.

Type 2 diabetes

This type of diabetes is usually diagnosed in people over 40 years of age. However it is now being diagnosed in younger people, including children. Poor lifestyle choices are a major reason for this increase in young people .

Inactivity and poor food choices can result in weight gain, especially around the waist. This prevents the body from being able to use insulin properly (insulin resistance) so blood glucose levels rise. Type 2 diabetes has a slow onset.

Type 2 diabetes runs in families so children and grandchildren are at risk. The good news is that type 2 diabetes can be delayed or prevented when healthy lifestyle choices that focus on increasing physical activity, healthy food choices and weight loss are made. For this reason it is important to know your risk for type 2 diabetes.

Symptoms of type 2 diabetes may include frequent urination, thirst, blurred vision, skin infections, slow healing, tingling and numbness in the feet. Often, there are no symptoms present, or symptoms are not recognised.

Once diagnosed, it is very important to maintain good blood glucose (sugar) levels as soon as possible to avoid complications.

Management should begin with healthy food choices and regular physical activity. However, diabetes is a progressive disease and over time, oral medications and/or insulin may be needed.

Na Matenisuka Kalasi 2

Ma mataqali matenisuka oqo e laurai vakalevu vei ira sa sivia na yabaki 40. Ia ena gauna oqo sa kunei talega vei ira era gone, okati kina o ira na gone lalai. Na vuna levu ni ra digitaka nai tabagone. na mataqali itovo ni bula ka sega ni veiraurau kei na tiko bulabula.

Na kena sega ni yavalati na yago kei na kena digitaki cala na kakana, e vakavuna na levulevu, ka laurai vakalevu ena toloda. Sa la'ki tarova kina na yago me vakayagataka vakavinaka na inisulini ka sa na la'ki tubu cake kina na suka ena dra. E dau berabera na kena laurai mai na matenisuka Kalasi 2.

Na Matenisuka Kalasi 2 e mate ni kawa, o koya gona sa na ka rawarawa me tauvi ira talega na luvedra kei na makubudra. Nai tukutuku vinaka aya ni rawa ni vakaberaberataki se tarovi na matenisuka Kalasi 2, ni digitaki vakavuku nai tovo ni bula ka vakabibitaka ka vakalevutaka na yavalati ni yago, digitaki na kakana bulabula kei na vakalutu yago. Ena tikina oqo, sa ka bibi mo kila na veika e veimecaki kei na matenisuka Kalasi 2.

Nai vakaraitaki eso ni matenisuka Kalasi 2 sa okati kina na suasua wasoma, karamaca, buwawa ni mata, milamila ni kuli, berabera ni mavo na mavo, cucula kei na nunu ni yava. E vuqa na gauna, ena sega na kenai vakatakilakila, ka da sega ni siqema rawa.

Ia ena gauna ga sa kilai kina, sa ka bibi na kena qaravi vakatotolo sara me rawa ni vinaka tiko nai vakatagede ni suka ena dra me kakua ni la'ki bibi sara kina na mate oqo.

Me tekivu na vei qaravi ena kena digitaki na kakana bulabula kei na vakaukauwa yago wasoma. Me nanumi tiko ni mate oqo e dau tubucake vakamalua, ni na oti e dua na gauna, sa na gunuvi eso tale na wainimate ka soli vei iko na inisulini.

Type 2 Management Plan

- Be physically active (e.g. walking) – aim for 30 minutes of moderate physical activity every day of the week. Check with your doctor first
- Adopt a healthy eating plan
- Lose weight or maintain a healthy weight
- Reduce salt intake
- Drink plenty of water
- See your diabetes health care team for regular health checks –, blood glucose levels, blood pressure, cholesterol, kidneys and nerve function, eyes and dental health
- Take care of your feet - check daily
- Stop smoking
- Regular dental care to avoid teeth and gum problems.

Encourage your family to adopt a healthy lifestyle



Smoking and diabetes

Tobacco has many unhealthy effects, especially for people with diabetes. People with diabetes who smoke are three times more likely to die of heart disease or stroke than people with diabetes who do not smoke.

Smoking raises blood glucose levels, reduces the amount of oxygen reaching the body's tissues, increases fat levels in the blood, damages and constricts blood vessels and increases blood pressure. All of these contribute to the risk of heart attack and stroke. Smoking can also worsen blood supply to feet.

For those who quit smoking, more frequent monitoring of blood glucose levels is important. This is because blood glucose levels may get lower when they quit smoking and can require changes to medication doses.

It is advisable that people with diabetes discuss with their doctor, the products and services available to help them quit smoking.

Kalasi 2 Ai Tuvatuva ni kena Veiqaravi

- Dau yavavala (me vaka na taubale) - nakita me 30 na miniti na kena yavalati vakarauta na yagomu ena veisiga ena veimacawa. Raici Vuniwai taumada
- Vakamuria edua nai tuvatuva ni nomu kana
- Vakalutu yago se qarauna me vakarauta tu ga na kemu bibi
- Vakalailaitaka na kana masima
- Gunu wai vakalevu
- La'ki raica na nomu timi ni veiqaravi vakavuniwai me raici vakawasoma na -, levu ni suka ena dra, tubu ni dra, levu ni uro, ivi, nave, matamu, batimu
- Qarava na yavamu – dikeva ena veisiga
- Muduka na kana tavako
- Raici wasoma na batimu me tarova na mate ni bati.

Vakauqeti iratou na vuvale mera tiko bulabula.



Na Vakataavako kei na matenisuka

E vuqa na mate e kauta mai na vakataavako, vakabibi vei ira era matenisuka. O ira na matenisuka ka ra vakataavako, e vakatolutaki ni rawa ni ra mate ena mateniuto se na stroke mai vei ira era matenisuka ia era sega ni vakataavako.

Na vakataavako e vakatubura vakalevu na suka ena dra, vakalailaitaka na cagi bulabula me drodrova na viciko, vakalevutaka na uro ena dra, vakacacana se vakasanukitaka na salanidra ka vakatubura na dra. Na ka kece oqori e la'ki vakarawarawataka na mateniuto kei na stroke. Na vakataavako e rawa talega ni vakadredretaka na drodro ni dra ki na yava.

Vei ira era sa biuta na vakataavako, sa ka bibi me dikevi wasoma tiko na levu ni suka ena nomu dra. Na vuna ni sa rawa ni lutu vakalevu na suka ena dra kevaka ko sa sega ni vakataavako ka sa na vinakati kina me veisautaki na memu wainimate.

Sa ka bibi vei ira na matenisuka mera veitalanoa kei na nodra vuniwai, ena wainimate kei na veiqaravi tale eso me vukeyi ira ni sa mai biu na vakataavako.

Gestational Diabetes

This type of diabetes occurs during pregnancy and usually goes away after the baby is born.

In pregnancy, the placenta produces hormones that help the baby to grow and develop. These hormones also block the action of the mother's insulin. As a result, the need for insulin in pregnancy is two to three times higher than normal. If the body is unable to produce enough insulin to meet this extra demand, gestational diabetes develops.

Screening for gestational diabetes occurs around the 24th to 28th week of pregnancy. Gestational diabetes may re-occur at the next pregnancy.

Blood glucose (sugar) levels that remain above target range may result in bigger babies, which can make birth more difficult. It can also increase the risk to the baby of developing diabetes in later life.



What do you need to do if you have been diagnosed with gestational diabetes?

It is necessary to see a diabetes educator, dietitian, endocrinologist and obstetrician. The management includes healthy eating for the mother, moderate exercise plus regular monitoring of blood glucose levels.

It is a good idea to have small frequent meals throughout the day that are nutritious for you and your baby, rather than three big meals. This will ease the insulin demand on the pancreas.

Those most at risk for developing gestational diabetes are:

- Women over 30 years of age
- Women with a family history of type 2 diabetes
- Women who are overweight
- Aboriginal or Torres Strait Islander women
- Certain ethnic groups, in particular Pacific Islanders, people from the Indian subcontinent and people of Asian origin
- Women who have had gestational diabetes during previous pregnancies.

Women who have had gestational diabetes are at increased risk of developing type 2 diabetes. It is strongly recommended to have a follow up Oral Glucose Tolerance Test 6-8 weeks after the baby is born, then every 1-2 years.

Na Matenisuka eda Sucu vata mai

Na mataqali matenisuka oqo e tekivu mai na gauna ni bukete ka rawa ni seavu yani ni sa sucu oti na gone. Ena gauna ni bukete, e dau bulia nai davodavo ni gone na waibula (hormone) me vukea na nona tubu na gone. Na hormone e rawa ni vakalatia na cakacaka ni inisulini nei tinani gone. Ena vinakati kina na inisulini ena gauna ni bukete me vakarua se vakatolutaki na kena kaukauwa. Kevaka e sega ni rawa ki na na yago me bulia na hormone me veirauti kei na ka e gadrevi io ena tubu mai na matenisuka oqo.

E dau vakayacori na kena vakadidike ni sa macawa 24 ki na 28 na gone e buketetaki tiko. Ena rawa ni basika tale na matenisuka oqo ena nomu bukete ka tarava.

Kevaka e tiko voli ga e cake na levu ni suka ena dra, ena rawa ni ra buketetaki na gone lelevu, ka vakavuna na dredre ni vakasucu. Ena rawa ni tauvi matenisuka vakarawarawa kina na gone ni sa qase cake mai.



Na cava mo cakava ni sa kune vei iko na mataqali Matenisuka oqo?

Sa ka bibi mo la'ki raici iratou: na vuniwai ni matenisuka, vuniwai na endocrinologist kei na nodra vuniwai na marama. Na nodratou veiqaravi ena okati kina na kena kakana bulabula na tinani gone, na vakaukauwa yago vakarauta kei na kena dikevi wasoma na suka ena dra.

E ka vinaka mo dau kana vakalalai vakawasoma ena loma ni siga; me kakana bulabula vei iko kei na gone, ka kakua me tolu na kana vakasivia. Oqo ena vakamamadataka na kena qaqia tiko mai na gacagaca na pancrease na inisulini.

O ira oqo ena tauvi ira vakarawarawa na matenisuka:

- O ira na marama sivia na yabaki 30
- O ira na marama sa tu oti ena nodra kawa na matenisuka Kalasi 2
- O ira na marama levulevu
- O ira na marama era kai Aboriginal se Torres Strait Islander
- E vica na matatamata, vakabibi na kai Pasifika, o ira mai Idia kei ira era vu mai Esia
- O ira na marama sa tauvi ira oti na matenisuka ni bera na nodra sucu, ena nodra veibukete sa oti.

O ira na marama sa tauvi ira oti na matenisuka oqo, sa rawarawa ni tauvi ira na matenisuka Kalasi 2. Ko sa vakasalataki vakabibi mo la'ki dikevi ena Oral Glucose Tolerance Test ena 6-8 na macawa ni ko vakasucu oti, qai yadua ena 1-2 na yabaki.

3

Risk Factors

Risk factors for developing type 2 diabetes include:

- Family history of diabetes
- Overweight and over 45 years of age
- Heart disease, heart attack or stroke
- High blood pressure and over 45 years of age
- Anyone over 55 years of age
- High blood cholesterol
- High blood glucose levels during pregnancy (gestational diabetes)
- Higher than normal blood glucose levels
- Aboriginal, Torres Strait Islander, Pacific Islanders, Indian sub-continent or Chinese cultural background
- Women with Polycystic Ovarian Syndrome.

The Australian Diabetes Risk Assessment Tool (AUSDRISK) should be used to identify your risk of developing type 2 diabetes. You can get this risk assessment tool from your doctor or from www.health.gov.au. Discuss your results with your doctor.

Children and adolescents who are overweight, experiencing increased thirst, urinary frequency, tiredness and/or who may have a family history of diabetes should also be tested for diabetes.

One of the main risk factors for developing diabetes is a family (hereditary) link. This means that if a person has diabetes, there is an increased risk that other members of their family (e.g. brother, sister, children, grandchildren) will develop diabetes.

Your family needs to be aware of the importance of a healthy lifestyle to delay or prevent type 2 diabetes. Regular physical activity and healthy food choices will help reduce the risk of developing type 2 diabetes.

PREVENTION - THE TIME TO ACT IS NOW

People at high risk of type 2 diabetes should be tested by their doctor every year to check for the possible onset of diabetes.

3

Veika e rawa ni vakavuna

Veika e rawa ni veitauvi kina na matenisuka Kalasai 2:

- Tubu mai na kawa ni matenisuka
- Levulevu ka sa sivia na 45 na nomu yabaki ni bula
- Tauvimate ni uto, mateniuto se stroke
- Tubu nomu dra ka sivia na 45 na nomu yabaki
- O ira sa sivia na yabaki 55
- Sivia na cholesterol ena dra
- Sivia na suka ena dra e na gauna ni bukete (gestational diabetes)
- Sa sivia ka tiko sara e cake na levu ni suka ena dra
- Aboriginal, Torres Strait Islander, kai Pasifika, o ira mai Idia se mai Jaina
- O ira na marama ka tauvi ira na Polycystic Ovarian Syndrome.

Me vakayagataki na Australian Diabetes Risk Assessment Tool (AUSDRISK) me dikevi kina se ena rawarawa li ni tauvi iko na matenisuka Kalasi 2 se sega. E rawa ni solia vei iko na nomu vuniwai na veivuke oqo, se, mo lako ki na www.health.gov.au. Drau veivosakitaka kei na nomu Vuniwai na kena macala.

E dodonu mera dikevi ena matenisuka ko ira na gonelalai kei ira nai tabagone qase cake ka sa sivia na kedra levu, se o ira era vakila ni tosocake tiko na nodra karamaca, dau la'ki suasua wasoma, dau oca, ka/se e lako mai na vuvale ni matenisuka.

E dua na vuna levu e vakavuna na tubu ni matenisuka aya na kena vakadewataki mai na kawa. E kenai balebale kevaka edua sa tauvi matenisuka tiko, io sa rawarawa cake vei ira na vo ni vuvale (ganemu, tacimu, gonelalai, makubumu) me tauvi matenisuka talega.

E dodonu ki na nomu matavuvale me kila na bibi ni tiko bulabula me vakaberaberataka se tarova na matenisuka Kalasi 2. Na vakaukauwa yago wasoma kei na kena digitaki vinaka na kakana ena rawa ni tarova na matenisuka Kalasi 2. Na vakaukauwa yago vakawasoma kei na noda kania vakavuku na kakana digiatki, ena vukea me vakalailaitaka na tauvi matenisuka Kalasi 2.

AI TATAROVI – NA GAUNA OQO MO TOSO KINA

O ira kece sara e rivarivabitaki ni rawa ni tauvi ira vakarawarawa na matenisuka Kalasi 2 e dodonu me ra raici vei vuniwai ena veiyabaki, me rawa ni dikevi se sa tekivu na matenisuka se sega.

4

The Diabetes Health Care Team

Diabetes is a lifelong condition. Your health care team is available to support, advise and answer your questions.

The most important member of this team is you!

You are the one who will be at the centre of your diabetes management. Your family, friends and co-workers might also be part of your team.

The Diabetes Health Care Team includes:

- **Your family doctor** who looks after your diabetes and refers you to other health professionals as needed. Your family doctor is responsible for organising your diabetes tests.
- **An Endocrinologist** is a specialist in diabetes. Many people with type 1 diabetes see an endocrinologist. People with type 2 diabetes may see an endocrinologist if they are having

problems with their diabetes management or when insulin therapy is needed.

- **A Diabetes Educator** is usually a registered nurse who has done special training in diabetes. Educators can assist with teaching you about diabetes in many of the important areas such as blood glucose monitoring, medications, insulin, sick days, travel and stress.

- **A Dietitian** can answer questions about healthy eating for you and your family.

- **An Exercise Physiologist** can help to develop a physical activity plan suitable for you - regardless of age, ability or disability.

- **An Optometrist** will do a diabetes eye check and a vision check. Some people with diabetes need to see an Ophthalmologist, a doctor with special training in diseases and problems with the eye.

- **A Podiatrist** is a health professional who deals with the feet. Many podiatrists have advanced training in caring for the 'diabetic foot'.

- **A Dentist** will check your teeth and gums.

Sometimes people with diabetes have trouble coping with the day to day burden of their disease. **Social workers** and **psychologists** can help in this area. Your family doctor or diabetes educator can often refer you to these services.

Other specialists are sometimes needed. Children and adolescents with diabetes should see a **paediatric endocrinologist** or a **paediatrician**.

Women with diabetes who are planning a pregnancy, who are pregnant or women who develop gestational diabetes should see an **obstetrician** and endocrinologist. If complications of diabetes are present, referral to other health professionals may be required.

Pharmacists are also very important in your diabetes management. They have special knowledge of how medicines work and which medications may interact with each other.

Ask your doctor or diabetes health care team about any structured **diabetes education** classes/programs in your area. Diabetes education programs, either individual or as part of a group, will help you set some healthy lifestyle goals and assist you with managing your diabetes.



4

Na Timi ni Veiqaravi Vakavuniwai ni Matenisuka

Na Matenisuka e mate ka na tiko veikeda ena vo ni noda bula. Sa ratou tiko na timi ni veiqaravi me ratou vetokoni, vakasala ka sauma na nomu vakatataro. E lewe ni timi bibi taudua sai iko!

O iko ga o na tiko e loma donu ni kena qaravi na nomu matenisuka. E rawa talega ni lewe ni timi na nomu vuvale, itokani kei ira era mai veivukei.

Oqo o ira era lewe ni timi ni Veiqaravi:

- **Nomu vuniwai** o koya ena yadrava na nomu matenisuka ka vagolei iko vei ira tale na vuniwai kevaka e gadrevi. E nonai tavi na nomu vuniwai me tuvalaka na veivakadidike ni matenisuka me vakayacori vei iko
- **Na Endocrinologist** o koya e vuniwai ka kenadau e na matenisuka. E vuqa na matenisuka Kalasi 1 era



la'ki raica na vuniwai oqo. O ira ena Kalasi 2 era na la'ki raici koya kevaka e sega ni cici vinaka tiko na nodrai tuvatuva se, ni gadrevi me sa soli na inisulini

- **Na Qasenivuli ni Matenisuka** e levu ga era nasi vakaivola ka ra sa vulica vakavinaka na matenisuka. E rawa ni vakavulici iko ena vuqa na ka bibi me baleta na matenisuka me vaka na kena yadravi na levu ni suka ena nomu dra, wainimate, inisulini, siga ni tauvimate, veitosoyaki kei na oca
- **Na Vuniwai ni Kakana** e rawa ni sauma na taro me baleta na kakana bulabula mo kania kei na nomu matavuvale
- **Na Vuniwai ni Vakaukauwa Yago** e rawa ni vakarautaka edua na nomui tuvatuva ni vakaukauwa yago e ganiti iko – sega ni kauwaitaki na yabaki ni bula, cava o rawata se cava na kemu ituvaki
- **Na Vuniwai ni Mata** ena dikeva na mata kei na kaukauwa ni rai. Eso na matenisuka e dodonu me na raica na Ophthalmologist, na vuniwai e kenadau ena veimate tale eso kei na leqa ni mata

- **Na Vuniwai ni yava** e kenadau ena qaravi ni iyava. Lewe vuqa vei ira era sa vakaivola ena qaravi ni yava ni matenisuka
- **Na Vuniwai ni Bati** ena dikeva na batimu kei na gadromu.

Ena so na gauna edau dredre vei ira na matenisuka me ra sotava vinaka nai colacola ni nodra qarava na nodra matenisuka ena veisiga. E rawa ni ra mai veivuke eke na **Dauniveiqaravi raraba** (social workers) kei na vuniwai ni vakasama. Ena rawa vua na nomu vuniwai kei na.

E tiko tale eso na kenadau era na gadrevi ena so na gauna. E dodonu vei ira na gonelalai kei ira na gone qase cake me ra raica na **paediatric endocrinologist** se na **paediatrician**.

O ira na marama era nakita tiko me ra vakaluveni, era sa bukete tiko se o ira sa tiko oti vei ira na matenisuka era sucu vata mai, e dodonu me na raica na nodra vuniwai na marama kei na endocrinologist. Kevaka sa bibi tiko na matenisuka, sa na gadrevi beka me ra vagolei vei ira tale na kenadau eso.

O ira na **kemesi** e bibi talega na nodrai tavi ena kena qaravi na matenisuka. Era kila se cakacaka vakacava na wainimate se na wainimate cava e rawa ni ra waki vata.

Taroga na nomu vuniwai se o iratou na nomu timi ni Veiqaravi me baleta na kalasi/porokaramu ni vuli ni matenisuka ena nomu yasana. Na porokaramu ni vuli ni matenisuka, vuli duadua se tiki ni dua nai wasewase, ena vukei iko mo tuvana eso na takete ni tiko bulabula ka me vukea na nomu manidiataka na nomu matenisuka.

5

Annual Cycle of Care

What regular health checks are recommended?

Regular health checks help to reduce your risk of developing diabetes complications.



The recommended health checks are:

What needs to be checked?	How often?	Who do you need to see?
Blood pressure	Every visit to your doctor	Your family doctor
Weight, height and waist circumference Body Mass Index (BMI): if required – this helps determine if you have a problem with your weight	Every six months/ more often if required	Your family doctor
<u>Feet</u>	Daily self check and Six monthly health professional checkups	Podiatrist or family doctor
<u>Kidneys</u> : a blood and urine test, to make sure your kidneys are working well	Once a year/ more often if required	Your family doctor
HbA1c: this blood test shows your average blood glucose level over the past 2 - 3 months	At least six monthly or more often if not on target	Your family doctor
Lipids: blood fats	Once a year/ more often if required	Family doctor
<u>Eyes</u>	At diagnosis and at least every two years/ more often if required	Optometrist / Ophthalmologist
<u>Healthy eating plan</u>	Once a year	Dietitian
<u>Physical activity</u>	Once a year	Your family doctor / exercise physiologist
Medication	Once a year/ more often if required	Your family doctor
Review self care education	Once a year	Diabetes educator
Review smoking status	Once a year	Your family doctor

Your family doctor, with the help of your health care team, should develop a care plan to manage your diabetes. This will allow you to access additional Medicare services for people with chronic conditions.

5

Ai Tuvatuva Vakayabaki ni Veiqaravi

Na raici vakavuniwai cava e vakasalataki?

Na nomu raici vakavuniwai wasoma ena vukea me vakalailaitaki na bibi ni mate ni matenisuka.



Na raici vakavuniwai e vakaturi tiko:

Na cava me dikevi?	Dikevi vakavica?	O cei mo la'ki raica?
Tubu ni dra	Raica na nomu vuniwai ena veigauna kece	Nomu vuniwai
Kemu bibi, balavu kei na toloomu wavoki. Body Mass Index (BMI): ke gadrevi – me kilai se sa tiko na leqa ni levulevu	Veiya 6 na vula/sivia kevaka e gadrevi	Nomu vuniwai
<u>Yavamu</u>	Dikevi iko ena veisiga kei na veivula-ono mo raici vakavuniwai	Vuniwai ni yava se nomu vuniwai
<u>Na Ivi</u> : dua na kena dikevi na dra kei na suasua, me vakadeitaka ni cakacaka vinaka tiko na nomu ivi	Vakadua dua na yabaki/vakawasoma ke gadrevi	Nomu vuniwai
HbA1c: oqo ena vakaraitaka nai vakatagedegede ni suka ena nomu dra ena 2-3 na vula sa oti	Ke lailai, ena veivula ono se vakawasoma kevaka e sega ni rawa tiko na takete	Nomu vuniwai
Lipids: na uro ena dra	Vakadua ena dua na yabaki/sivia ke gadrevi	Nomu vuniwai
<u>Matamu</u>	Ena gauna ni nomu laurai/ke lailai ena veiyabaki rua/sivia kevaka e gadrevi	Vuniwai ni Mata/Vuniwai e kila nai tuvaki ni mata
<u>Tuvatuva ni kakana bulabula</u>	Vakadua ena veiyabaki	Vuniwai ni kakana
<u>Vakaukauwa yago</u>	Vakadua ena veiyabaki	Nomu vuniwai/vuniwai ni vakaukauwa yago
Wainimate	Vakadua ena veiyabaki/sivia ke gadrevi	Nomu vuniwai
Dikevi na nomu sa rawa ni vulica mo qaravi iko ga	Vakadua ena veiyabaki	Qasenivuli ni matenisuka
Dikevi nomu vakatavako	Vakadua ena veiyabaki	Nomu vuniwai

E dodonu vua na nomu vuniwai, kei na veivuke ni nomu timi ni veiqaravi, me tuvana edua nai tuvatuva me manidiataki kina na nomu matenisuka. Ena vukei iko oqori mo curuma kina eso tale na veiqaravi ni Medicare vei ira sa bibi sara na nodra tauvimate.

6

Healthy eating for diabetes

Eating does more than just provide food and building materials for the body. Eating is a pleasurable and social experience.

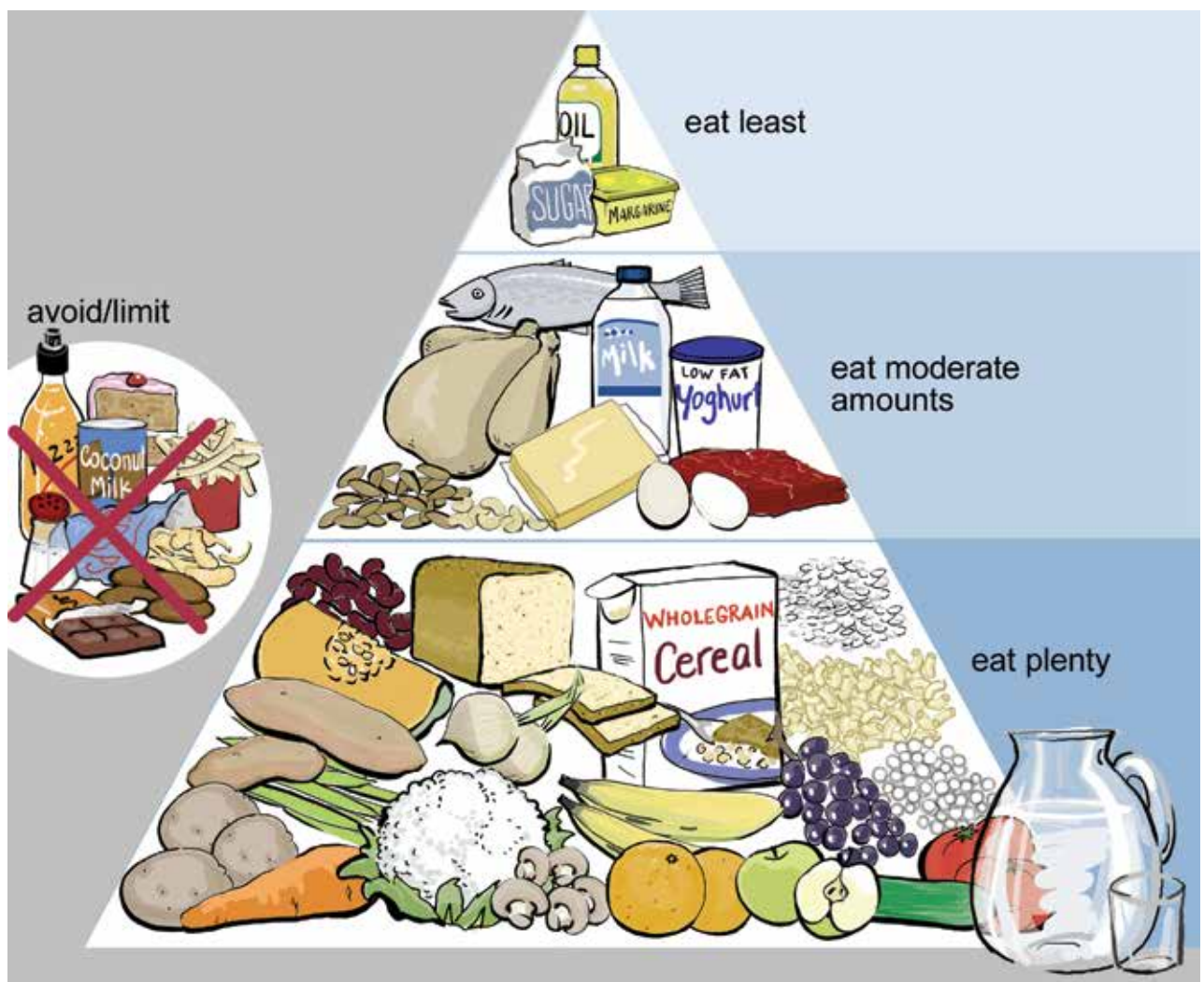
Diabetes should not stop you from enjoying food and eating with friends and family. You can still enjoy special occasions such as family, social, school and religious festivals. Tell your dietitian, diabetes educator and doctor what you eat and when. Your food and diabetes medications can be adapted to suit your lifestyle and normal family routine. However you may need to make changes to your eating habits to keep your diabetes under control and stay healthy.

Why is healthy eating important?

A healthy diet is one of the most important parts of diabetes management.

Eating well can help to manage your blood glucose (sugar) levels, cholesterol and blood pressure. Eating well can also help you to maintain a healthy body weight. Being overweight makes it harder to manage your diabetes. It is therefore important to have a healthy diet to help you lose excess weight and improve your diabetes management.

It is important that any dietary advice is tailored to your needs. That is where your dietitian is helpful.



6

Kakana Bulabula ni Matenisuka

Na kana e solia tale eso na ka mai na kena solia na kakana kei na veika me tubu kina na yago. Na kana e ka marautaki ka vakilai kina na bula ni veitokani.

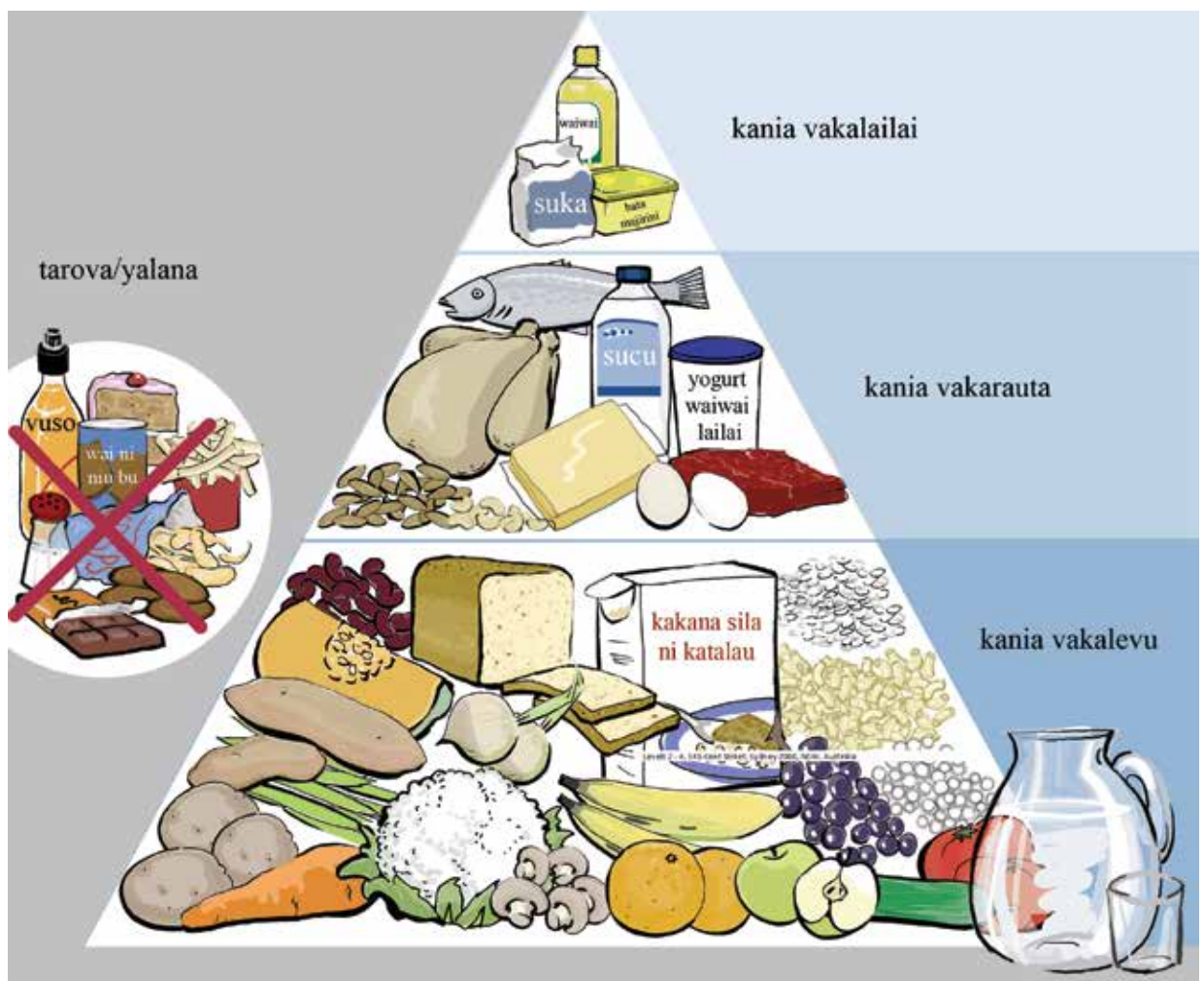
Na Matenisuka e sega ni dodonu me tarovi iko mo marautaka na kakana kei na nomu kana kei ira na nomui tokani kei na matavuvale. Sa rawa tikoga ni ko marautaka na veisoqo namaki me vaka na solevu ni matavuvale, veitokani, koronivuli kei na lotu. Tukuna vua na nomu vuniwai ni kakana, qasenivuli ni matenisuka kei koya na vuniwai, na kakana o dau kania kei na kena gauna. E rawa ni veisautaki na kemu kakana kei na kena wainimate me ganita na nomu itovo ni bula kei na bula ni vuvale ena veisiga. Ia ena dodonu mo veisautaka nai tovo ni nomu kana me maroroi kina na nomu matenisuka ka rawa ni ko bulabula tikoga kina.

Na cava e bibi kina na kania na kakana bulabula?

Edua vei ira na tikina bibi ena qaravi ni matenisuka, aya na kakana bulabula.

Na kana donu tiko, ena vukea na qaravi ni levu ni suka, na levu ni uro kei na tubu ni dra. Na kana donu ena vukea talega na qarauni ni bibi ni yago. E dredre na manidiataki ni matenisuka kevaka sa rui levulevu na yago. Sa ka bibi kina me bulabula na kemu kakana me vukei iko mo vakalutu yago ka vakavinakataka na qaravi ni nomu matenisuka.

Sa ka bibi me veiganiti nai vakasala ni kakana kei na nomu bula. Na vanua oya e yaga kina na nomu vuniwai ni kakana.



What is healthy eating for diabetes?

Healthy eating for diabetes is the same as healthy eating for everyone. A healthy eating pattern encourages:

- High fiber cereals including wholegrain breakfast cereals, wholemeal or grainy breads, rot and naan bread made from wholemeal or chickpea flour, wholemeal pasta and brown rice
- Two serves of fruit and five or more serves of vegetables every day (e.g. bananas, paw paw, mangoes, duruka (asparagus-like vegetables), breadfruit, pineapple, kumara, cassava and taro). Include legumes such as baked beans, kidney beans, lentils, chick peas and split peas
- One to two serves of lean meat, fish, skinless poultry or alternatives each day. Some great examples include fresh fish and seafood such as sashimi and shellfish. Alternative proteins include legumes, tofu, eggs, nuts and seeds
- Dairy foods (e.g. milk, cheese and yoghurt) that are low fat or skim for everyone over the age of two. Soy products fortified with calcium are a good alternative for those who cannot have dairy
- Limit saturated fat. Coconut cream or coconut milk based dishes or sauces contain a large amount of saturated fat such as miti (thick coconut cream dressing for most seafood), kokoda (spicy fish served with coconut cream), palusami (baked parcels of taro or dalo leaves enclosing with coconut cream and meat), coconut based curry and soup, and coconut chutney. Other common examples include are cakes (i.e. cassava cake), pastries, corned beef, mutton flaps, cheese sauce, pork crackling, fatty meats and fast food
- Have a low–moderate fat intake
- Avoid adding salt to food. Choose low salt or reduced salt foods. Limit salty foods such as corned beef and soy sauce
- Eat only moderate amounts of sugars and limit or avoid foods high in added sugars (e.g. sweet pies, sweet scones, puddings, ice cream, sweets, soft drinks and fruit juices)
- Drink plenty of water
- If you drink alcohol, limit your intake to 2 standard drinks a day. It will also be a good idea to include alcohol free days each week.

How can I keep my blood glucose (sugar) levels in the healthy range?

It is very important that people with diabetes aim to keep their blood glucose levels in target range with regular physical activity, healthy eating and appropriate treatment (medications and/or insulin if required).

You can help to do this by spreading your food intake out over the day, not overdoing your serve sizes and choosing mostly high fibre, low fat and lower glycemic index carbohydrates.

Regular reviews with your dietitian are important to help you get the balance right between your blood glucose levels, the food you eat, exercise and your diabetes medication, if you take them. A dietitian may suggest you make changes to the types of food you eat and how much you eat to help keep you healthy. Your dietitian will try to work within the foods and cooking methods that you traditionally use.

Na cava na kakana bulabula ni matenisuka?

Na kania na kakana bulabula ni matenisuka e tautauvata saraga kei na keda kakana bulabula kece. Na kena vakamuri nai tuvatuva ni kakana bulabula ena vukea:

- Na kakana vaka-wa (fibre) okati kina na kakana sila dau katalautaki, madrai sila se madrai vakasorena (grainy), na madrai roti se naan mai na sila se falawa chickpea, pasta sila kei na raisi sila
- 2 nai vakarau na vuanikau ka lima se sivia nai vakarau kakana draudrau e na veisiga (me vaka na jaina, weleti, maqo, duruka, uto, painapiu, kumala, tavioka, kei na dalo). Okati kina na vuvale vakapini me vaka na baked beans, kidney beans, lentils, chick peas kei na split peas
- Dua se rua nai vakarau na bulumakau sega na kena uro, ika, toa sega ni vakulina, se dua tale na kena mataqali ena veisiga. Eso na mataqali e uasivi, wili kina na ika bulabula kei na kakana ni waitui me vaka na sashimi kei na vivili. Eso tale ena mataqali oqo e wili kina na legumes, tofu, yaloka, pinati kei na sorenikau
- Na kakana sucu (me vaka na sucu, jisi kei na yogurt) ka lailai na kena uro se sucu skim me medra o ira kece sa sivia na yabaki rua. E daumaka na kakana mai na soy ka waki vata kei na calcium me kenai vakaukauwa, e kakana vinaka vei ira era tabu ena sucu
- Me vakarauta ga na uro veicurumaki. Na kakana vakalolo se sauce e levu kina na uro me vaka na miti (dau sosoko na kena lolo na kakana ni waitui), kokoda, palusami, kari kei na su vakalolo, chutney niu. Eso tale na kena mataqali aya na keke tavioka, corned beef, mutton flaps, cheese sauce, kuli ni vuaka caquru, lewe ni manumanu uro kei na kakana voli. (fast food)
- Kania vakalailai na kakana uro
- Tovolea mo kakua ni vakamasimataka na kakana. Digitaka na kakana e lailai na kena masima. Kania vakarauta ga na kakana vakamasima me vaka na corned beef kei na soy sauce
- Kania vakarauta na suka ka vakarauta se kakua na kakana e vakalevutaki kina na suka (na pai kamikamica, sikoni kamikamica, vakalomavinaka, ice-cream, loli, didivia kei na wai ni vuanikau)
- Gunu wai vakalevu
- Kevaka o gunu yaqona ni vavalagi, me 2 ga na bilo ena dua na siga. Daumaka me tiko eso na siga ni veimacawa mo vakatabui iko kina ena gunuva.

Au na rawata vakacava me tikoga na levu ni noqu suka e na lomanibai vinaka?

Sa ka bibi vei ira na matenisuka mera sasagataka me tiko ga na nodra suka e na matanivika taketetaki, ena nodra vakaukauwa yago, kania na kakana bulabula kei na kena veiqaravi (wainimate kei na/se na inisulini kevaka e gadrevi).

E rawa ni ko veivuke kina ena nomu veiyawakitaka na nomu kana ena dua na siga, me kakua ni sivia nai vakarau ni kemu kakana ka dau digitaka vakawasoma na kakana vaka-wa, uro lailai kei na kakana yabia ena boto ni lower glycemic index.

E ka bibi na la'ki raici vakawasoma vua na nomu vuniwai ni kakana me vukea me veisotari donu tiko na nomu suka, na kakana ko kania, vakaukauwa yago kei na memu wainimate, kevaka e tiko. Ena rawa ni vakatura o koya mo veisautaka na mataqali kakana ko kania kei na kenai vakarau, mo bulabula kina. Ena tovolea na nomu vuniwai ni kakana me digidigi ena loma ni kakana kei na kenai saqasaga e matau vei iko.

7

What's in food?

You may have heard about:

- Carbohydrates
- Fibre
- Protein
- Fat
- Vitamins and Minerals.

These are called nutrients and they help your body to work properly and stay healthy. A nutrient is a substance found in food. You can find more information on each of these nutrients below.

Carbohydrates

Carbohydrates are the best energy source for your body. When they are eaten they breakdown to form glucose in the bloodstream. Eating regular meals and spreading your carbohydrate foods evenly over the day can help to maintain your energy levels without causing blood glucose levels to go too high or too low. It becomes more difficult to manage your blood glucose levels if you only have one or two large meals a day. Try to have small frequent meals to spread out the intake.

Carbohydrate foods include:

- Breads and cereals (e.g. bread, rice, noodles, pasta, porridge, naan and roti).
- Milk and yoghurt including soy milk and yoghurt (e.g. dahi (yoghurt) and natural yoghurt).
- Fruit (e.g. banana, pineapple, paw paw, papaya and breadfruit)
- Starchy vegetables and legumes (e.g. taro, cassava, potato, yam, kumara, sweet potato and corn).
- Sugar and sugary foods (e.g. soft drinks, coconut puddings, tapioca puddings, sweet pies, and cakes).

Most of these foods, except sugar and sugary foods, also provide other important nutrients to help keep you healthy. It is important to include these foods every day.

Eating a large serve of carbohydrate (e.g. a plate dahl or potato curry with rice, or have more than 2 naan bread in a meal) may cause your blood glucose levels to rise too high. Also, eating too much food all the time, even if it is healthy food, will cause you to put on weight. Being overweight makes it harder to manage your blood glucose levels.

As everyone is different, talk to your dietitian about the amount of carbohydrate food you need to eat.

Sometimes testing your blood glucose level 2 hours after a meal can help you to work out if you ate too much carbohydrate at a meal. If this happens a lot speak to your dietitian or diabetes educator who can give you advice on what to do. Cutting down carbohydrates is not always the answer.

Glycemic Index

All carbohydrate foods will breakdown to form glucose. Some carbohydrates break down to glucose fast and some break down slowly. The Glycemic Index (GI) is a way of measuring how fast or slow a carbohydrate food affects blood glucose levels.

Low glycemic index foods raise your blood glucose levels more slowly than high glycemic index foods. Eating mostly low glycemic index foods may help people with diabetes to reduce average blood glucose levels, lower blood fats and raise healthy cholesterol. They may also help you feel fuller for longer which may help with weight control. It is still important to not overdo your serve sizes.

Not all low glycemic index foods are healthy. You still need to consider if the food fits into the healthy eating recommendations listed earlier. Try to eat mostly high fibre low fat and lower glycemic index foods. Including a lower glycemic index food at every meal is a good start.

Some healthy lower glycemic index foods include pasta, legumes (dried beans and lentils), sweet corn,

Na Cava e tiko ena kakana?

O sa na rogoca beka na:

- Na Kakana Yabia
- Na kakana vaka-wa
- Protein
- Na Uro
- Vitamins kei na Minerals.

Era vakatokai oqo me kakana yaga ni yago se nutrients ka ra vukea na yagomu me cakacaka vakavinaka ka tiko bulabula. Na nutrient e dua na ka e kune ena dra. Eso tale na kenai vakamacala e tiko ena kedrai ulutaga e ra.

Na Kakana Yabia

Na yabia ei vurevure ni kaukauwa uasivi duadua ni yagomu. Ena gauna e laukana kina sa na la'ki qaqi sobu ka vuki me suka ena salanidra. Na nomu kana vakawasoma ka veiwareyaka na kakana yabia vakatautauvata ena dua na siga ena vukea mo maroroya nai vakatagedegede ni nomu kaukauwa me kakua kina ni tubu cake se lutu sobu na nomu suka. Sa dau la'ki dredre me manidiataki na nomu suka kevaka o kana ga vakadua se vakarua ena dua na siga. Tovolea mo kana vakalalai vakawasoma mo wasea kina na kenai vakarau.

Na kakana yabia e okati kina:

- Na madrai kei na cereals (me vaka na madrai, raisi, noodles, pasta, poreti, naan kei na roti)
- Sucu kei na yogurt wili kina na sucu soy kei na yogurt (me vaka na dahi (yogurt) kei na yogurt dina)
- Vuanikau (me vaka na jaina, painapiu, weleti, maoli kei na uto)
- Kakana yabia kei na legumes (me vaka na dalo, tavioka, pateta, uvi, kumala, kei na sila)
- Suka kei na kakana kamikamica (me vaka na didivia, vakalolo, vakalolo tavioka, pai kamikamica kei na keke).

E vuqa vei ira na kakana oqo, vakavo na suka kei na kakana kamikamica, era solia talega eso nai kuri ni kakana me vukea mo bulabula. Sa ka bibi mo kania na veikakana oqo ena veisiga.

Kevaka ko kania vakasivia na kakana yabia (me vaka edua na veleti dahl se kari pateta kei na raisi, se me sivia e 2 na madrai naan ena dua na kana) e na rawa ni vakatubura na suka ena nomu dra. Kenai kuri ga, na nomu kana vakalevu ena veigauna kecega, veitalia ke mani kakana bulabula, ena vakavuna mo levulevu. Na yago levulevu e vakadredretaka na qaravi ni nomu suka.

Baleta ni da duidui, vosa vua na nomu vuniwai ni kakana me baleta na levu ni yabia e dodonu mo kania.

Ena so na gauna, ena vukei iko mo cakacakataka se a sivia na yabia ko a kania, ena nomu vakarautaka na levu ni nomu suka ni oti e 2 na auwa mai na gauna ni nomu kana. Kevaka e yaco vakawasoma oqo vei iko, vosa vua na nomu vuniwai ni kakana se nomu qasenivuli ni matenisuka me vakasalataki iko ena ka mo cakava. Na nomu musuka sobu na levu ni yabia ko kania e sega ni kenai wali ena so na gauna.

Glycemic Index (G)

Na kakana yabia taucoko ena vuki me suka ni sa qaqi oti. Eso na yabia e na vuki vakatotolo me suka ka so e berabera na kena qaqi sobu. Na Glycemic Index (GI) e sala me vakarautaki kina na totolo se berabera ni kena la'ki veisautaka na yabia na levu ni suka ena dra.

E na vakatubura vakamalua na nomu suka na kakana ka lailai kina na glycemic index mai na kakana e levu kina na glycemic index. Na nomu kania vakalevu na kakana ka lailai kina na glycemic index ena rawa ni vukei ira na matenisuka me latusobu na nodra suka, vakalailaitaka na uro ena dra ka vakatubura cake na cholesterol bulabula. E rawa talega ni vukea mo kakua ni via kana vakatotolo ka rawa ni vukea mo kua ni levulevu. Sa ka bibi tikoga me kakua ni dau vakarau lelevu na kemu kakana.

Era sega ni kakana bulabula kece na kakana glycemic index ka toka e ra. E dodonu mo vakasamataka se na veidonui kei na kakana bulabula sa tuvani oti mai.

What's in food? - *continued*

kumara, taro, cassava, low fat milk and yoghurt, most fruit and many high fibre grainy breads.

Rice is usually a high glycemic index food. However, there are some varieties of rice that have a lower glycemic index. These include Basmati rice and Doongara rice.

What about sugar?

Sugar is also a carbohydrate. Eating small amounts of sugar will not affect your diabetes, e.g. 1 teaspoon of sugar in your cup of tea or a thin spread of jam on your toast.

Some foods that contain sugar are also healthy foods. For example fruit and milk naturally contain sugar. Other healthy foods have had small amounts of sugar added to them (e.g. some high fibre breakfast cereals and yoghurts). We know these foods are good for us so we can include them in our diet.

However eating or drinking large amounts of foods that are very high in sugar (e.g. tea or coffee with more than 2 teaspoons of sugar, soft drinks, cordials, fruit juices, flavoured milk, and drinks made up with sugar and coconut milk) can cause your blood glucose levels to rise too high. They can also cause you to put on weight. These foods are best eaten in small amounts. Choose diet soft drinks and cordials instead of standard varieties.

If you are using sugar in recipes, think about how much sugar you will end up eating. If the recipe is very high in sugar and you will be having a large serve, try reducing the amount of sugar, have a smaller serve or replace some of the sugar with an alternative sweetener (such as Equal™, Splenda™ and Sugarine™). Try to choose recipes that are low in fat (particularly saturated fat) and contain some fiber.

Fibre

Fibre is important for everyone, including people with diabetes. Fibre can help keep your digestive system healthy and prevent constipation.

Fibre is also very useful for people with diabetes. It can help to lower "bad" cholesterol which helps to keep your heart healthy. Also many foods that are high in fibre have a low glycemic index. This is because some types of fibre can slow down digestion of the food. Eating foods high in fibre can also keep you feeling fuller for longer so may help with weight control.

High fibre foods include whole fruits (not juice) (e.g. paw paw), vegetables (e.g. cassava and taro), legumes, nuts and seeds, grainy and wholemeal breads (e.g. roti and naan made from wholemeal or chick pea flour) and high fibre cereals.

Fat

Fat is an essential nutrient. However many of us eat too much fat or eat the wrong types of fat.

Fat is high in kilojoules. Eating too much fat can cause you to put on weight or make it harder for you to lose weight.

Some fats (saturated fats and trans fats) can increase your risk of heart disease and make it harder to manage your diabetes. Avoid these types of fats (e.g. full fat dairy foods, butter, coconut products, fatty meats and fried foods).

Polyunsaturated fats (e.g. oily fish, seafood, safflower and sunflower oils) and monounsaturated fats (e.g. avocado, canola and olive oils) can help reduce your risk of heart disease. They are better choices than saturated fat. Both of these fats have benefits for your health so vary between them. These fats are still high in kilojoules, so if you are overweight, eat them in moderation.

To help you get the right type of fat and avoid eating too much fat;

Na cava e tiko ena kakana – *kenai kuri*

Tovolea mo kania ga vakalevu na kakana e vutuniyau ena kakana vaka-wa, lailai na uro ka toka e ra e na kakana glycemic index. Ena tekivu vinaka ni ko vakacuruma edua na kakana e toka e ra ena glycemic index ena veikana taucoko.

Eso na kakana bulabula e toka e ra ena glycemic index ka wili kina na pasta, legumes (pini kei na lentils mamaca), sila kamikamica, kumala, dalo, tavioka, sucu e lailai kina na uro kei na yogurt, vuqa vei ira na vuanikau kei na levu na madrai vakasorena vaka-wa.

Ena vuqa na gauna, na raisi e okati me toka e cake ena glycemic index. Ia, eso na mataqali raise e toka e ra e na glycemic index. Okati kina na raisi Basmati kei na raisi Doongara.

Vakaavei na Suka?

Na suka e okati me kakana yabia. Ena sega ni la'ki vakaleqa na nomu matenisuka kevaka o gunuva vakalalai na suka, me vaka me 1 nai taki lailai na suka e na memu bilo ti se me vakajamu vakalailai na kemu madrai.

Eso na kakana kamikamica era kakana bulabula talega. Me kenai vakaraitaki; na vuanikau kei na sucu, e tiko vei rau na suka. Eso tale na kakana bulabula sa dau biu kina vakalailai na suka (me vaka eso na high fibre breakfast cereals kei na yogurts). Eda kila na kakana vakaoqo era daumaka vei keda ka rawa ni da kania.

Ia na noda kania se gunuva vakasivia na kakana ka levu kina na suka (me vaka na ti, kofi ka sivia e 2 nai taki lailai na suka, didivia, wainigunu kamikamica, wai ni vuanikau, sucu vakamikamicataki, kei na gunu vakasukataki kei na lolo ni niu) e rawa ni vakatubura vakalevu na nomu suka. E rawa talega ni vakalevulevutaki iko. Sa daumaka me laukana vakalalai na kena vakaoqo. Digitaka na didivia kei na wainigunu kamikamica ni vakalutu yago mai na kena e volitaki tu.

Kevaka o vakayagataka na suka ena nomu vakasaqa, vakasamataka na levu ni suka ko na kania. Kevaka e gadrevi me levu na kena suka ka o na kania edua na tikina levu, tovolea mo vakalailaitaka na suka, kania edua ga na tikina lailai se vakaisosomitaka eso na suka ena so tale na mataqali suka (me vaka na Equal, Splenda kei na Sugarine). Tovolea mo digitaka nai saqasaqa ni kakana ka lailai kina na uro (vakabibi na uro veiwaki) ka tiko kina eso na kakana vaka-wa.

Na Kakana Vaka-wa (Fibre)

Sa ka bibi na kakana vaka-wa vei keda kece, okati kina o ira na matenisuka. Na kakana vaka-wa e rawa ni vukea me bulabula na keteda ka tarova na kaukauwa ni kete.

E veivuke vakalevu na kakana vaka-wa vei ira na matenisuka. E rawa ni vakalutuma sobu na cholesterol ca ka vukea me bulabula na utomu. Qai kenai kuri ga ni vuqa na kakana ka levu kina na kakana vaka-wa, era toka e ra e na glycemic index. Oqo e baleta ni so na mataqali kakana vaka-wa, e rawa ni ra vakaberaberataka na qaqi ni kakana. Na nomu kania na kakana e levu kina na kakana vaka-wa ena vukea mo mamau vakadede ka mo kakua ni bibi.

Na kakana vaka-wa sa oka kina na vuanikau (sega na kena wai) (e.g. na weleti), draudrau (e.g. na tavioka kei na dalo), legumes, pinati kei na sorenikau, madrai sila ka vakasorena (e.g. na roti kei na naan mai na falawa sila se falawa chick pea.) kei na high fibre cereals.

Na Uro

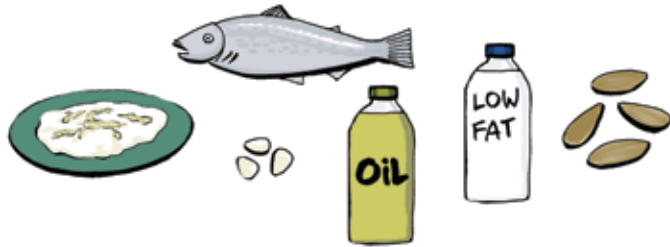
Na uro, edua na tikina bibi sara ena kakana. Ia e vuqa vei keda sa sivia na uro e kania, se, e cala na mataqali uro e kania.

E levu na kilojoules ena uro. Na nomu kania vakasivia na uro ena vakavuna na levulevu se ena vakadredretaka mo vakalutu yago. Eso na uro (uro veiwaki kei na trans fat) e rawa ni vakarawarawataka mo tauvi mateniuto ka vakadredretaka na qaravi ni nomu matenisuka. Mo vakuwai iko mai na veimataqali uro vakaoqo (e.g. na kakana mai na uro ni sucu, bata, kakana mai na niu, leweni manumanu uro kei na kakana tavuteke).

What's in food? - continued

Choose:

- Meat trimmed of fat or leaner meat
- Chicken trimmed of fat and skin
- Low fat cooking methods such as lovo (earth oven that a fire made on in a pit in the ground lined with heat-resistant stones), barbequing, grilling, dry frying, baking, steaming or poaching



- Low fat dairy foods or soy alternatives
- To eat more fish including oily fish (e.g. tuna, salmon, mackerel, herring, sardines)
- Olive, canola, sesame, peanut, safflower or sunflower oils for cooking, marinades and dressing
- Margarines made from olive, canola, safflower or sunflower oils
- Alternatively, use a plant sterol enriched margarine (i.e. Proactive™ and Logicol™), but speak to your dietitian and/or doctor about it before you decide to use it
- To include small amounts of avocado, unsalted nuts and seeds in your diet.
- Use healthier alternatives such as light evaporated milk with coconut essence to replace coconut cream or milk
- Use low fat yoghurt in curry instead of cream
- Choose oven-baked bread (e.g. oven-baked samosas) instead of fried bread.

Limit/avoid:

- Fatty or processed meats (e.g. mutton flap, sausages, salami, corned beef and pork cracklings)
- High fat cooking methods such as frying or roasting in fat
- Full fat dairy foods
- Butter, ghee, lard, vegetable shortening, cream, coconut milk and coconut cream
- Fast food, fried foods such as deep fried chicken or crumbed fish, cakes, sweet pies, coconut dessert and puddings, pastries, biscuits, crisps and high fat crackers.

Protein

Protein is essential to your body everyday to repair old or damaged parts. Most people living in Australia already eat enough protein and do not need to eat more.

Choose protein foods that are also low in fat. Foods that are a good source of low fat protein are lean meat, poultry without the skin, fish and seafood, eggs, low fat dairy products, unsalted nuts, legumes (dried beans, dried peas and lentils) and soy products such as tofu.

Speak to your dietitian if you are not sure if you are eating enough protein.

Vitamins and minerals

Vitamins and minerals are important for a healthy body. Eating a wide variety of foods from all five food groups will help you get all the vitamins and minerals your body needs.

The food groups are:

- Breads and cereals
- Vegetables
- Fruit
- Dairy foods
- Meat or meat alternatives (e.g. poultry, seafood, eggs, legumes, nuts and seeds).

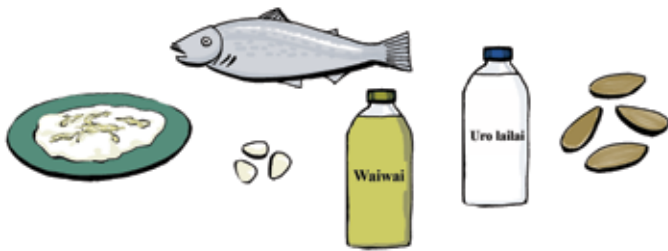
Na cava e tiko ena kakana – *kenai kuri*

Polyunsaturated fats (e.g. ika uro, kakana ni waitui, waiwai ni safflower kei na sunflower) kei na monosaturated fats (e.g. na avocado, canola kei na olive oils) e rawa ni vakalailaitaka na nomu rawa ni tauvi mateniuto. Era sa vinaka cake ga mai na saturated fat. E tiko na kedrau yaga na uro oqo ki na nomu bula, o koya gona mo veilutuitaka na nomu vakayagataki rau. Sa levu tikoga na kilojoules ena uro oqori, o koya gona kevaka e sivia tiko na kemu bibi ia mo kania vakarauta ga.

Me vukea na nomu vakayagataka na mataqali uro vinaka ka tarova na kana uro vakasivia;

Digitaka:

- Leweni manumanu sa biu laivi na kena uro se e sega na kena uro
- Toa sa biu laivi na kena uro kei na kulina
- Na mataqali vakasaqa ka lailai kina na uro me vaka na lovo, tatavu, tavuteke mamaca, vavavi, vakacawa se vakasaqa ena wai
- Kakana mai na sucu ka lailai kina na uro se kakana soy
 - Kania vakalevu na ika oka kina na ika uro (me vaka na tuna, samani, mackerel, herring, sardines)
 - Olive, canola, sesame, pinati, waiwai ni vakasaqa mai na safflower se sunflower, marinades kei na dressing
 - Margarines mai na olive, canola, waiwai ni safflower se sunflower
 - Se, vakayagataka edua na waiwai mai na plant sterol enriched margarine (aya na Proactive kei na Logicool, ia mo vosa mada e liu vua na nomu vuniwai ni kakana kei na /se na nomu vuniwai ni bera ni ko vakayagataka
- Vakayagataka vakalalai na avocado, pinati/sorenikau sega ni vakamasima
- Vakayagataka na kakana bulabula me vaka na sucu waicala kei na niu vakaboi me sosomitaka na lolo
- Vakayagataka na yogurt ka lailai na kena uro ka kua na lolo ena saqa kari
- Digitaka na madrai vavi ena ovani (e.g. na samosa vavi ena ovani) ka kakua ni madrai tavuteke.



Tarova/Me Vakarauta:

- Na leweni manumanu uro se qaqi (me vaka na mutton flap, soseti, salami, corned beef kei na kuli ni vuaka caquru)
- Na vakasaqa ka vakayagataki vakalevu kina na uro me vaka na tavuteke se vavavi ena uro
- Kakana mai na uro ni sucu
- Bata, ghee, lard, vegetable shortening, cream, niu se lolo
- Kakana volitaki vakabutari totolo me vaka na toa se ika vuruki tavuteketaki vakatitobu, keke, pai kamikamica, vakalolo, pastries, bisikete, crisps and high fat crackers.

Na Protein

Sa ka bibi me tiko na protein ena yagomu ena veisiga me vakavinakataka na yago sa makawa se sa mavoa. E vuqa era tiko e Ositerelia era sa kania vakarauta tiko na kakana protein ka sa rauti ira oya.

Digitaka na kakana protein ka lailai na kena uro. Na kakana ka tiko kina na protein vinaka ka lailai na kena uro, aya, na leweni manumanu tawa uro, toa ka sega na kulina, ika kei na kakana ni waitui, yaloka, kakana mai na sucu ka lailai kina na uro, pinati sega ni vakamasima, legumes (dried beans, dried peas kei na lentils) kei na kakana soy me vaka na tofu.

Vosa vua na nomu vuniwai ni kakana kevaka e sega ni matata se sa rauta tiko na levu ni protein o kania.

Vitamins kei na minerals

Na vitamins kei na minerals e rau tikina bibi me bulabula kina na yago. Na nomu kana mai na vuqa na veimataqali kakana mai nai wasewase e lima ni kakana, ena vukea me tiko kece na vitamins kei na minerals ka gadreva na yagomu.

Oqo nai wasewase ni kakana:

- Madrai kei na cereala
- Vuanikau
- Leweni manumanu se kenai sosomi (e.g. na toa, kakana ni waitui, yaloka, pinati kei na sorenikau).
- Kakana draudrau
- Kakana mai na sucu

8

Common Questions about Food and Diabetes

How often should people with diabetes eat?

It is important for all people with diabetes to eat regular meals over the day. This helps to spread food intake out and prevent blood glucose levels going too high or low.

Some people with diabetes take tablets or insulin to help manage their diabetes. These medications may mean that you need to eat at certain times, eat a small snack between meals or have a snack before bed. Discuss with your dietitian, diabetes educator or doctor whether you need to eat at certain times or need to eat snacks.

If you eat irregular hours (or you do shift work) it is important to discuss this with your dietitian, diabetes educator or doctor as your medications may need to be adjusted to fit in with when you are able to eat. It is important that you do your best to have a regular eating pattern from day to day.

Why is it important to manage my weight?

Being overweight can make it harder to control your blood glucose levels. Carrying too much fat around your middle is especially bad for diabetes and heart disease. If you are overweight, ask your dietitian for advice on how to adjust your food intake to lose weight. Also speak to your doctor or an exercise physiologist about exercise.

Can I eat fruit? What type of fruit can I eat and how much?

Yes, people with diabetes can eat fruit. Fruit is an excellent source of fibre, vitamins and minerals. All fruit can be included as part of a healthy diet for people with diabetes. Fruit contains natural sugar therefore it is important to spread fruit over the day. Fruit also contains kilojoules, and it can cause weight gain if you eat too much. It is important not to over eat fruit but aim for 2-3 serves a day.

The recommendation for fruit is the same as the general population. That is, two servings of fruit each day. 1 serve of fruit equals:

- 1 medium piece of fruit (e.g. 1 apple or 1 orange or 1 pear)
- 2 smaller pieces of fruit (e.g. 2 plums or 2 kiwifruit)
- 1 cup chopped or canned fruit (not in syrup)
- 1½ tablespoons of sultanas or 4 dried apricots*
- 1 small mango
- 1 cup pineapple, watermelon or rockmelon
- 1 ½ cups diced papaya or pawpaw
- 1 small banana.

Fruit juice is high in kilojoules and does not contain fibre. It is much better to eat the whole fruit rather than drink the juice. Drinking too much juice raises blood glucose levels and may contribute to weight gain. If you must drink juice, limit to a maximum of 1 small glass a day.

*Dried fruit contains a lot of natural sugar. If you eat dried fruit limit to a small quantity e.g. 1½ tablespoons of sultanas or 2 dates or ½ medium spear of dried paw paw or ½ a pineapple ring.

8

Taro Wasoma me baleta na Kakana kei na Matenisuka

Mera kana vakavica na tauvi matenisuka?

Sa ka bibi vei ira kece era tauvi matenisuka mera dau kana wasoma ena loma ni siga. Oqo me vukea na kena veiwaseiyaki na kakana e kania ka tarova na tubu se lutusobu ni suka ena dra.

Eso na matenisuka era gunu vuanikau se era taura na inisulini me vukea na yadravi ni nodra matenisuka. E rawa ni kenai balebale ni dodonu mo dau kana ena kena gauna sa virikotori, kania e dua na tikini kakana lailai ena tadrui ni kana se kana vakalailai ni bera ni ko moce. Veitalanoataka na tikina oqo vata kei na nomu vuniwai ni kakana, na gasenivuli ni matenisuka se nomu vuniwai se dododu mo kana ena kena gauna se mo kana vakalalai.

Kevaka o dau duidui na nomu gauna ni kana (se e dau duidui na gauna ni nomu cakacaka) sa ka bibi mo veivosakitaka na tikina oqo vata kei na nomu vuniwai ni kakana, gasenivuli ni matenisuka se na vuniwai de mani vinakati me veisautaki na memu wainimate me ganita na gauna o rawa ni kana kina. Sa ka bibi mo sasagataka me davo edua nai tuvatuva ni gauna mo na dau kana kina ena veisiga.

Na cava e bibi kina me'u qarauna na kequ bibi?

Na levulevu e rawa ni vakadredretaka na kena tarovi na levu ni suka ena nomu dra. Ena leqa vakalevu kina na nomu matenisuka kei na mateniuto kevaka o kauta voli e levu na uro e toloomu. Kevaka o sa rui levulevu, kere ivakasala vua na nomu vuniwai ni kakana se me veisautaki vakacava na nomu kana me lutu kina na yagomu. Vosa talega vua na nomu vuniwai se vua edua na vuniwai ni vakaukauwa yago me baleta na vakaukauwa yago.

E rawa ni'u kana vuanikau? Na mataqali cava meu'u kania ka vakacava na kena levu?

Io, e rawa ni kana vuanikau o ira na matenisuka. Na vuanikau sai vurevure uasivi ni kakana vaka-wa, vitamins kei na minerals. E rawa ni laukana kece na vuanikau ena kakana bulabula vei ira na matenisuka. E tawa tu na vuanikau ena suka dina ka sa ka bibi kina me veiwaseiyaki na vuanikau ena kana ena veisiga. E tu talega na kilojoules ena vuanikau ka rawa ni vakavuna na levulevu kevaka ko kania vakasivia. Sa ka bibi mo kakua ni kania vakasivia na vuanikau ia mo kania e 2-3 nai vakarau ena dua na siga.

Nai vakarau ki vuanikau mo kania e tautauvata vei keda kece na lewenivanua. Aya, me rua nai vakarau na vuanikau ena veisiga, 1 nai vakarau ni vuanikau e tautauvata kei na:

- 1 na tiki ni vuanikau lailai (e.g. 1 na apolo se 1 na moli se 1 na pea)
- 2 na tikini vuanikau lailai (e.g. 2 na plum se 2 na kiwifruit)
- 1 na bilo na vuanikau tikitikina se kava vuanikau (kakua ena kena syrup)
- 1 veimama nai taki levu na sulatana se 4 na apricot mamaca*
- 1 na maqo lailai
- 1 na bilo painapiu, meleni se rockmelon
- 1 veimama na bilo weleti se maoli tikitikina
- 1 na jaina lailai.

Na wai ni vuanikau e levu kina na kilojoules ka sega kina na kakana vaka-wa. E vinaka cake me laukana na vuanikau kece mai na gunuvu ni kena wai. Na kena gunuvi vakasivia na kena wai e rawa ni vakatubura na suka ka vakalevutaka na kemu bibi. Kevaka ko gunuva na kena wai, me rauta ga e 1 na bilo lailai ena dua na siga.

*Na vuanikau mamaca e levu kina na suka. Kevaka o kania na vuanikau mamaca, mo kania ga vakalailai e.g. 1 veimama nai taki levu na sulatana se 2 na dates se veimama na weleti momoto mamaca se veimama edua na tiki ni painapiu momokiti.

Can I eat unlimited vegetables?

Vegetables provide an excellent source of fibre, vitamins and minerals. Recommendations for vegetables are five or more servings a day. One serve of vegetables is equal to ½ cup cooked vegetables or 1 cup salad or 1 medium potato* or ½ cup cooked legumes*. Most vegetables have very little impact on blood glucose levels and weight. These vegetables are referred to as free foods and can be included in unlimited quantities (e.g. eggplants, capsicums, tomatoes and cucumbers).

*Starchy vegetables (that is, potato, sweet potato, corn, taro, cassava, sweet potato, kumara and legumes) do contain carbohydrate. This means they are broken down into glucose to provide the body with energy. Starchy vegetables can be included as part of a healthy eating plan in moderate amounts to help manage blood glucose levels.

Are “diet” foods suitable?

Not all diet foods or foods marked “suitable for people with diabetes” are useful for people with diabetes. Often they can be quite high in kilojoules or may have a lot of fat in them. Also they can often be quite expensive.

Diet foods that you should avoid are:

- Diabetic chocolate. These are usually high in fat
- Diet or low carbohydrate beer. These beers are still high in alcohol. It is the alcohol that is more of a problem than the carbohydrate content.

Some diet foods are fine for people with diabetes. These are foods that normally may be high in added sugar. Replacing the sugar with a sweetener such as Equal™, Splenda™ and Sugarine™ means you do not have to worry that they will raise your blood glucose level too high. These include:

- Diet soft drinks
- Diet cordials
- Diet jellies.

What foods can I eat if I am always hungry?

If you are often hungry, make sure you are not overly restricting how much you eat just to keep your blood glucose levels down. This is especially important for children, adolescents and the elderly. Speak to your dietitian about what is the right amount of food for you.

If you are eating the right amount of food and are still hungry, try to include high fibre, low fat and low glycemic index foods in your meals and snacks. They can help to keep you feeling fuller for longer.

Some foods can be eaten without affecting your blood glucose level or body weight. These are the kind of foods you should aim to eat if you are still hungry. These foods are often called “free” foods. They include:

- Most vegetables except the starchy vegetables (taro, cassava, kumara, potato, sweet potato, corn, legumes), avocado and olives
- Some fruits e.g. lemon, lime, cumquats, loquats, passionfruit, berries and rhubarb.
- Black or green tea* (without milk or sugar)
- Herbal teas
- Coffee* (without milk or sugar)
- Water including soda water and plain mineral water
- Diet soft drinks and cordials
- Clear broth

E rawa ni'u kania na levu ga ni kakana draudrau au via kania?

Na kakana draudrau sai vurevure uasivi ni kakana vaka-wa, vitamins kei na minerals. Na levu ni kenai vakarau me lima se sivia ena dua na siga. Edua nai vakarau e tautauvata kei na veimama na bilo na kakana draudrau buta se dua na bilo na salad se 1 na pateta lailai se veimama na bilo na legumes buta. E vuqa na kakana draudrau e sega ni la'ki tara ka vakaleqa na suka kei na bibi ni yago. Era vakatokai na veidraudrau oqori mera kakana galala ka rawa ni vakayagataki ena kena levu ga o via kania (e.g. na baigani, capsicums, tomato kei na kiukaba).

Na draudrau vakayabia (aya na pateta, pateta kamikamica, sila, dalo, tavioka, kumala kei na legumes) era tawa ena yabia. Kenai balebale era na lauqaqi me suka me solia na kaukauwa ki na yago. E rawa ni vakacurumi na kakana draudrau yabia me tiki ni tuvatuva ni kakana bulabula ia me vakarauta ga me vukea na yadravi ni suka.

E veiganiti li na kakana ni vakalutu yago (diet foods)?

Eso na kakana ni vakalutu yago se eso na kakana e volai kina 'veiganiti' kei ira na matenisuka, e vinaka vei ira na matenisuka. Ena vuqa na gauna, e sivia sara ga na kilojoules e tiko kina se sa rui levu na kena uro. E rawa talega ni ra sa rui sau levu.

Oqo na kakana ni vakalutu yago mo kakua ni volia:

- Na jokiliti ni vakalutu yago. Sa dau levu kina na uro.
- Na bia ni vakalutu yago se na kena e lalai kina na yabia. Na bia vakaoqo, e sa levu ga kina na yaqona ni vavalagi. Na yaqona ni vavalagi e tiko kina e vakavuna na leqa ka sega ena levu ni yabia e tiko kina.

Eso na kakana ni vakalutu yago e daumaka vei ira na matenisuka. Na kakana oqori e rawa ni levu kina na suka. Na nomu vakaisosomitaka na suka enai vakamikamica ni kakana me vaka na Equal™, Splenda™ se Sugarine™ e kenai balebale ni ko sa na sega ni leqataka de ra na la'ki vakatubura na suka ena nomu dra. Era okati eke na:

- Didivia ni vakalutu yago
- Wainigunu kamikamica ni vakalutu yago
- Na jelly ni vakalutu yago.

Na kakana cava me'u kania kevaka au dau viakana tu ga?

Kevaka o dau viakana wasoma mo qarauna ni ko sega ni dau vakuwai iko tiko mai na kana me rawa ga kina me kakua ni tubu na nomu suka. Oqo e ka bibi sara vei ira na gonelalai, tabagone qase, kei ira na qase sara. Taroga na nomu vuniwai ni kakana se cava nai vakarau ni kakana e ganiti iko.

Kevaka ko sa kania tiko nai vakarau dodonu ni kemu ia ko sa viakana tikoga, tovolea mo vakacuruma kina na kakana vaka-wa, lailai kina na uro ka lailai na glycemic index ena nomu kana kece. Ena rawa ni vukei iko mo kakua ni viakana vakatotolo.

Eso na kakana o kania ena sega ni la'ki veisautaka na nomu suka se na kemu bibi. Oqori na mataqali kakana mo dau kania kevaka o sa viakana tikoga. Era dau vakatokai na kakana oqori me kakana galala. E okati kina:

- vuqa na kakana draudrau, ka sega na draudrau yabia (dalo, tavioka, kumala, pateta, sila, legumes), avocado kei na olive
- Na ti vakawainimate (herbal teas)
- Kofi (sega na sucu se suka)
- Na wai wili kina na wai sota kei wai mineral
- Wai kamikamica ni vakalutu yago
- Poreti vakawai

-
- Tomato Juice
 - Fresh lemon juice
 - Diet jelly
 - Herbs and spices.

* It is best to limit tea and/or coffee to 4 cups a day.

Should I use coconut cream or coconut milk in my cooking?

Coconut cream or milk contains a large amount of saturated fat, which will raise your bad cholesterol (LDL), increase insulin resistance and increase the risk of having heart diseases. Also, it is very high in energy (kilojoules) which can cause an undesired weight gain. So, it is the best to avoid or limit food or drink containing coconut cream or coconut milk. There are a few healthier alternatives you can try in your cooking to replace the regular coconut cream or milk:

- low fat natural yoghurt with a little coconut essence or desiccated coconut
- light evaporated milk with coconut essence
- Carnation™ light and creamy coconut flavoured evaporated milk
- 1 cup of low fat milk or evaporated skim milk with 2 teaspoons cornstarch, 1 teaspoon coconut essence and a sprinkle of sugar can replace 1 cup of coconut milk.

What can I add to food to give it more flavour?

It is important to limit salt and foods containing salt. This is because a high salt intake can cause high blood pressure.

Herbs, spices, chilli, garlic, lemon, lime and vinegar can all be used to add flavour to food without affecting blood glucose levels or blood pressure. Use your traditional herbs and spices (e.g. curry leaves, curry powder, basil, shallot, ginger, turmeric, cumin, mustard seed and coriander) to maintain the traditional flavour of meals.

Why should I see a dietitian?

An Accredited Practising Dietitian is a health professional who can help you manage food and diabetes. Make an appointment to see a dietitian when you are first diagnosed with diabetes. You will need a referral from your doctor. When you are first diagnosed, your dietitian will need to see you a few times. Continue to see a dietitian once or twice a year from then on.

Your doctor might also suggest you see a dietitian if you are prescribed with medications or change your medications. This is because medications can affect the balance between food and your blood glucose levels.

Call Diabetes NSW & ACT on 1300 342 238 for more information.

If you cannot speak English well, call the free Telephone Interpreter Service (TIS) on 131 450 and ask them to help you to speak to a dietitian from Diabetes NSW & ACT.

- Eso na vuanikau, e.g. molilime, cumquats, loquats, passionfruit kei na rhubarb
- Ti loaloa se drokadroka (sega na sucu se suka)
- Wai ni tomata
- Wai ni moli karo vou
- Jeli ka suka lailai
- Herbs and spices.

* Uasivi mo gunuva ga e 4 na bilo ti kei na/se kofi ena dua na siga.

E dodonu li me'u vakayagataka na lolo ni niu e na noqu vakasaqa?

E tiko vakalevu ena lolo ni niu na uro sosoko ka na vakatubura na cholesterol ca (LDL), ka na vakalevutaka na meca ni inisulini ka vakarawarawataka na mateniuto. E rui levu talega kina na kaukauwa (energy) ka rawa ni vakavuna na levulevu.

O koya gona, sa uasivi ga me kakua se me vakarauta na kakana se gunuvi ni kakana e tiko kina na lolo ni niu. E tiko eso na kenai sosomi vinaka ka o rawa ni tovolea ena vakasaqa me vakaisosomitaka na lolo o dau vakayagataka wasoma:

- yogurt dina sega ni urolevu ka vakalailai nai vakaboiboi ni niu se niu qaqi
- sucu mamada vakacawataki kei nai vakaboiboi ni niu
- Sucu Carnation mamada kenai vakaboiboi na lolo ni niu se vakacawataki
- 1 na bilo na sucu ka lailai kina na uro se sucu skim vakacawataki kei na 2 nai taki lailai na yabia sila, 1 nai taki lailai nai vakaboiboi ni niu ka vakamiraki kina na suka me vakaisosomitaka e dua na bilo lolo ni niu.

Na cava au rawa ni biuta ena kakana me vakuria na kenai kanakana?

Sa ka bibi me vakarauta na masima kei na kakana vakamasima. Ni sa rui levu na masima, ena rawa ni vakatubura na dra.

E rawa ni vakayagataki na herbs, spices, rokete, garlic, moli, lime kei na vinika ena kakana ka ra na sega ni vakaleqa na suka kei na tubu ni dra. Vakayagataka na herbs kei nai vakaboiboi ni nomu vanua (me vaka na drau ni kari, kari pauta, basil, varasa balavu, ginger, turmeric, cumin, vua ni mustard kei na coriander) me tiko kina nai kanakana ni nomu vanua.

Na cava me'u raica kina na Vuniwai ni Kakana?

Na Vuniwai ni Kakana Vakaivola, o koya e kenadau ka rawa ni vukei iko mo yadrava na kemu kakana kei na nomu matenisuka. Veivosakitaka edua na gauna mo raica kina na vuniwai ni kakana ena gauna ga sa laurai kina vei iko na matenisuka. Me na dua na nomui vola mai vua na nomu vuniwai. Ni sa qai laurai vou vei iko na matenisuka, mo na la'ki raica vakavica na vuniwai ni kakana. Oti, mo qai la'ki raici koya tale na vuniwai ni kakana vakadua se vakarua ena veiyabaki.

Ena rawa talega ni vakasalataki iko na nomu vuniwai mo la'ki raica na vuniwai ni kakana kevaka e soli na memu wainimate se me veisau na wainimate. Na vuna, ni rawa ni veisautaka na memu wainimate nai vakatagedegede ni nomu suka.

Qiria na Diabetes NSW & ACT ena 1300 342 238 ke o gadreva eso tale nai vakamacala.

Kevaka e ca na nomu vosa Vakavavalagi, qiria, sega ni saumi, na Telephone Interpreting Service (TIS) ena 131 450 ka kerea mo veitalanoa kei na dua na vuniwai ni kakana mai na Diabetes NSW & ACT.

9

Diabetes and Alcohol

Too much alcohol is harmful for everyone, including people with diabetes. However, people with diabetes may still drink some alcohol. If you drink alcohol, drink in moderation and be aware of the following:

- Alcohol can increase body weight, blood pressure and some blood fats. This can make it harder to manage your diabetes and increases your risk of heart disease
- People who use insulin or take some diabetes tablets can have a very low blood glucose level (hypoglycaemia) after drinking alcohol. Always eat carbohydrate food when drinking alcohol. Ideally drink alcohol with a meal but if this is not possible snack on carbohydrate foods like low fat crackers, pretzels or bread.
- The symptoms of drunkenness and hypoglycaemia are similar. People may not offer you help if they think that you are just drunk. Let the people with you know that you have diabetes and what to do if you have hypoglycaemia.

Drink alcohol in moderation



Moderate drinking means no more than 2 standard drinks for both women and men per day. A standard drink is a 285 ml of full strength beer, 375 ml mid-strength beer, 425 ml of light beer (less than 3% alcohol), 100ml wine or 30ml spirits. It's a good idea to include alcohol free days each week.



To help reduce how much alcohol you drink try diluting it by adding water, soda water or diet soft drink. You could also try alternating between alcoholic and non-alcoholic drinks.

9

Matenisuka kei na Yaqona ni Vavalagi

Ni gunuvi vakasivia na yaqona ni vavalagi ena vakavu leqa veikeda kece, wili kina o ira na tauvi matenisuka. Ia, e rawa vei ira na matenisuka mera gunuva eso na yaqona ni vavalagi. Kevaka o gunuva na yaqona ni vavalagi, mo gunu vakarauta ka mo kauwaitaka na veika oqo:

- Na yaqona ni vavalagi e rawa ni vakabibitaka na yago, na tubu ni dra kei na so na uro ena dra. E rawa ni la'ki vakadredretaka na kena manidiataki na nomu matenisuka ka vakalevutaka na kena rawa ni yaco na mateniuto
- E rawa vei ira era taura tiko na inisulini se gunuva tiko eso na wainimate ni matenisuka me lutu sara ki ra na nodra suka (hypoglycaemia) ni oti na nodra gunu yaqona ni vavalagi. Dau kania na kakana yabia ni ko gunuva tiko na yaqona ni vavalagi. E uasivi duadua mo gunu yaqona ni vavalagi ena gauna o kana tiko kina ia kevaka e sega ni rawa oqo, mo kania vakalalai na kakana yabia me vaka na bisikete e lailai na kena uro, pretzels se madrai
- E tautauvata nai vakatakilakila ni mateni kei na lutu ni suka ena dra. Era na sega beka ni vukei iko na tamata kevaka era nanuma ni ko mateni ga. Tukuna vei ira nomui tokani ni tauvi iko tiko na matenisuka ka vakamacalataka na ka mera cakava kevaka e lutu na nomu suka.

Gunuva vakarauta na yaqona ni vavalagi



Nai balebale ni gunu vakarauta aya me kakua ni sivia e 2 na bilo (standard) vei ira na marama vata talega kei ira na turaga ena dua na siga. Nai vakarau ni bilo e 285 ml na bia kaukauwa, 375 ml na bia veimama na kena kaukauwa, 425 ml na bia mamada (lailai sobu ena 3% na yaqona ni vavalagi), 100 ml na waini se 30ml na siviriti. E daumaka mo vakatabui iko ena gunu ena so na siga ena veimacawa.



Me vukei iko mo vakalailaitaka na nomu gunu yaqona ni vavalagi tovolea mo vakawaicalataka ena nomu sovara kina eso na wai, wai sota se wai malumalumu ka suka lailai. E dodonu mo tovolea talega mo veilutuitaka na yaqona ni vavalagi kei na gunu e sega kina na yaqona ni vavalagi.

10 Physical activity

Daily physical activity is an important part of maintaining a healthy lifestyle. Everybody receives great benefits from exercise, but for people with diabetes; there are some extra, more significant benefits as well.

Why it is good for you

Regular physical activity can:



- Lower your blood glucose (sugar) levels and improve your blood glucose control
- Help make your tablets and/or insulin work better
- Help you to manage your weight or reduce your weight
- Lower blood pressure and blood fats such as cholesterol
- Improve the health and strength of your heart
- Reduce stress and anxiety
- Reduce your risk of developing diabetes complications
- Help you sleep better
- Improve your balance and coordination
- Make you feel great!

What should I be aiming for?

Regular physical activity plays a large part in helping you to manage and control your diabetes. The amount of activity you should be doing is the same as everybody else!

Following these four simple guidelines can help put you on the path to good health:

- Think of physical activity as an opportunity, rather than an inconvenience
- Be active in as many ways as you can.
Create opportunities for activity within your day. For example, walk to the shops instead of driving, take the stairs over the lift, or get off the bus one stop early and walk the extra distance.

It is also important to make these changes within the workplace. Try walking the longer way to the photocopier, visiting a colleague rather than emailing, stand up when talking on the phone or going for a walk during the lunch break.



- Put together at least 30 minutes of moderate intensity physical activity every day. Guidelines suggest we aim to do a minimum of 30 minutes every day of physical activity; but remember these don't have to be all at once. 30 minutes can be divided into 15 or 10 minute blocks, and they have the same effect. Try exercises that use your whole body in the movement, such as brisk walking, swimming, dancing or cycling. These activities should be performed at a level that makes you breathe harder but that you can still talk.
- If possible, do some regular vigorous exercise for extra health and fitness. Vigorous means that you are now exercising at a level that makes you huff and puff. Only do this type of activity if you have your doctor's okay and are managing your current exercises well.

10 Na Vakaukauwa Yago

Na vakaukauwa yago ena veisiga sa dua talega na tikina bibi ni kena sasagataki na tiko bulabula. Eda rawata kece na tamata na veika vinaka mai na vakaukauwa yago, ia vei ira era tauvi matenisuka; e tiko tale eso nai kuri ni veika vivinaka vei ira.

Na cava e vinaka kina vei au?

Na vakaukauwa yago wasoma e rawa ni:



- Vakalailaitaka na suka ena nomu dra ka vakavinakataka cake na lewai ni suka
- Vukea me cakacaka vinaka na memu wainimate kei na/se na inisulini
- Vukeyi iko mo manidiatika na kemu bibi se mo vakalailaitaka na kemu bibi
- Vakalutuma na tubu ni dra kei na uro ena dra me vaka na cholesterol
- Vakavinakataka na bula kei na kaukauwa ni nomu uto
- Vakalailaitaka na lomaocaoca kei na lomataqaya
- Vakalailaitaka na kena rawa ni levu ka bibi sara na nomu matenisuka
- Vukeyi iko mo moce vakavinaka
- Vukea na nomu tu vakadodonu ka me rawa ni cakacaka vata na yagomu
- Vukeyi iko mo vakila ni vinaka na nomu bula!

Na cava me'u taketetaka tiko?

Na vakaukauwa yago wasoma e vukea vakalevu mo manidiatika ka lewa na nomu matenisuka. Na levu ni vakaukauwa yago mo kitaka tiko, e tautauvata vei keda kece sara!

Vakamuraia nai dusidusi e va oqo me vukea na nomu sala ki na bula vinaka:

- Mo nanuma ni vakaukauwa yago e dua na gauna vinaka, ka sega ni ka ni vakaosooso walega

- Tovolea mo dau yavavala voli ga ena vuqa na veika Vakatora eso na ka mo cakava ena loma ni nomu veisiga. Me va'qo, taubale ki na sitoa ka kakua ni kauta na motoka, kabata nai kabakaba ka kua ni vodo enai kabakaba livaliva, se dau sobu vakayawa toka ena basi qai taubaletaka na vo ni sala ki vale.

E ka bibi talega mo veisautaka na veika oqo ena nomu vanua ni cakacaka. Tovolea mo muria na sala balavu ki na misini ni tabaivola, taubale vua na nomui tokani ka kakua ni email, tucake ni ko sauma na talevoni se taubale ena gauna ni vakasigalevu.

- Tuvana e 30 na miniti ena veisiga mo vakaukauwa yago vakarauta kina.

E tukuna tiko nai tuvatuva na noda via rawata e 30 na miniti ni vakaukauwa yago ena veisiga; ia mo nanuma tiko ni sega ni kainaki me rawa kece ena dua ga na gauna. Na 30 na miniti e rawa ni wasei me 15 se 10 na miniti dua na gauna ia ena tautauvata ga na ka e rawati. Tovolea na kena e vakayagataki kina na yagomu taucoko, me vaka na taubale vakatotolo, qalo, meke se vodo basikeli. Na vakaukauwa yago e dodonu mo kitaka, aya na kena me vakatotototaki na nomui cegu ia mo sa rawa tikoga ni vosa.

- Kevaka e rawa, kitaka wasoma eso na vakaukauwa yago kaukauwa cake me vakuria na bulabula ni yagomu.
Na vakaukauwa e kenai balebale ni ko sa vakaukauwa yago tiko ena kenai vakatagedegede ni ko sa cegu cegu oca mai. Kitaka walega oqo kevaka sa vakadonuya na nomu vuniwai ka o sa rawata vinaka tiko na levu ni vakaukauwa yago sa tuvani tu vei iko.



What about Resistance Training?

You should also aim to include some kind of weight or resistance training during the week. Resistance training means any exercise or activity where you use your body to lift something or to work against a weight, force or gravity. Resistance training is great for helping you to keep active and independent for longer and has additional benefits for people with diabetes.

Resistance training can:

- Improve the way your body uses and stores insulin
- Increases your muscle mass. This increases how much energy you burn which helps with weight loss/ management and improving blood glucose control.
- Decrease your risk of falling and the risk of fractures
- Improve strength, power, balance and coordination

How much resistance training do I need to be doing for good health?

- Try to lift weights (e.g. cans of food, hand weights) two - three times a week
- Include exercises that target all of your large muscle groups including your arms and legs
- Aim to do each exercise eight - twelve times (repetitions), and perform two - three lots (sets) of each exercise
- Start at a light weight till you learn the correct technique. After you have mastered this weight, try lifting a heavier weight
- Ideally, aim to lift a weight that only allows you to do eight - twelve repetitions each time.



Precautions to take before initiating an exercise program:

If you plan to start an exercise program for the first time, or you are doing something new, visit your doctor for medical clearance before you begin.

It is also important to understand how your medications work together with physical activity. Exercise works like insulin and lowers your blood glucose levels (sugar). In people who are taking insulin or some oral medications the combined effect with exercise can cause hypoglycemia. To avoid this, it is important to regularly test your blood glucose levels (sugars) before, sometimes during, immediately after and again a couple of hours after exercise, so you understand how your body responds to different activities. If you find that your blood glucose is falling too low, you may need to alter your diabetes medication or eat extra carbohydrates to account for this effect. However, consult with your doctor, diabetes educator or dietitian before making these changes.

There are also some times when you should avoid exercise; if your blood glucose levels (sugars) are above 15 mmol/L, if you are feeling unwell or lightheaded (dizzy) or if you are unsure how to perform an exercise correctly.

Most important!

Enjoy the activities you chose. Be active in as many ways as you can, every day and remember you don't have to take it seriously, just regularly.

Always speak with your doctor before beginning a new physical activity program. If you require more guidance or advice about exercising with diabetes, speak with an accredited exercise physiologist.

E vakacava na Vakaukauwa Yago Veisaqasaqa?

E dodonu mo vakacuruma eso na lave ka bibi ena veimacawa. Na vakaukauwa yago veisaqasaqa e kenai balebale na vakaukauwa yago cava ga o vakayagataka kina na yagomu mo laveta edua na ka se mo veisaqasaqa kei na dua na ka bibi, se dua na kaukauwa tani. E vinaka na vakaukauwa yago veisaqasaqa oqo me vukei iko mo rawa ni yavavala tiko vakaiiko vakabalavu ka yaga sara talega vakalevu vei ira na tauvi matenisuka. Na vakaukauwa yago veisaqasaqa e rawa ni:

- Vakalevutaka na sala e rawa kina ki na yagomu me vakayagataka se maroroya kina na inisulini
- Vakalevutaka na nomu viciko. E levu cake na kaukauwa (energy) e vakamai ka vukea na lutu ni yago/ na kena qaravi kei na kena vakavinakataki na yadravi ni suka
- Vukea mo kakua ni lutu vakarawarawa se ramusu na nomu sui
- Vakalevutaka na kaukauwa, nai gu, mo kua ni bale vakarawarawa (balance) ka me ra veirogoci na yagomu (coordination)

E vakacava na levu ni vakaukauwa yago veisaqasaqa me'u kitaka me'u bulabula kina?

- Tovolea mo lavekabibi (e.g. na kava kakana, na kaukamea laveti ena liga) vakarua-vakatolu ena dua na macawa
- Me curu eso na lavelave ka taketetaka na nomu viciko lelevu wili kina na ligamu kei na yavamu
- Nakita mo lavelave vakawalu-vaka12 (veitarataravitaka), ka cakava vakarua-vakatolu na veimataqali iwasewase ni lavelave
- Tekivu ena kaukamea mamada me yacova ni ko sa vulica na kenai walewale. Ni ko sa matau kina, tovolea mo laveta edua na kena e bibi cake
- Na kena e uasivi, na nomu nakita mo laveta ga na kaukamea ka rawa ni solia vei iko e walu-tinikarua na lave veitarataravi ena dua ga na gauna.



Na veika me qarauni ni bera ni tekivu na porokaramu oqo:

Kevaka ko via tekivutaka na vakaukauwa yago va'qo enai matai ni gauna, se ko via cakava edua na kenai walewale vou, la'ki raici vuniwai taumada me vakadonuya.

E ka bibi talega mo kila na nodrau cakacaka vata na memu wainimate kei na vakaukauwa yago. Na vakaukauwa yago e vaka na inisulini ka dau vakalutuma na levu ni nomu suka. Ena so na matenisuka ka taura tiko na inisulini se wainimate, ni qai la'ki vakuria na vakaukauwa yago, ena rawa ni vakavuna me lutusobu sara na suka ([hypoglycemia](#)). Me tarova oqori, sa ka bibi mo vakarautaka taumada na nomu suka, ena so na gauna ena gauna vata ga o vakaukauwa yago tiko kina, se ni oti toka ga, ka dikeva tale ni oti ga e vica na auwa, me rawa ni ko kila se dau vakacava na yagomu ni sotava na veimataqali yavavala duidui. Kevaka sa lutu sara ki ra na nomu suka, sa na vinaka me veisau na memu wainimate se mo kania eso tale [na yabia](#). me kilai na cava e yaco. Ia, raica na nomu vuniwai, qasenivuli ni matenisuka se vuniwai ni kakana ni bera ni ko veisautaka edua na ka.

Ena so na gauna ena dodonu mo kakua ni vakaukauwa yago, kevaka e tubu na nomu suka ka sivita na 15 mmol/L, kevaka o sega ni bula vinaka se mamada na ulumu se ko sega ni kila vinaka nai cakacaka ni vakaukauwa yago.

Na ka e bibi taudua!

Mo marautaka na ka ko digitaka mo vakaitavi kina. Dau vakaitavi vakawasoma ena kena levu taucoko, ena veisiga ka nanuma tiko mo kakua ni dau taura sara vakabibi, cakava vakawasoma ga. Vakaraitaka vua na nomu vuniwai ni bera ni ko tekivutaka edua na porokaramu vou ni vakaukauwa yago. Kevaka o gadreva eso tale na veidusimaki se ivakasala me baleta na vakaukauwa yago ni matenisuka, tukuna vua na vuniwai vakaivola ni vakaukauwa yago (exercise physiologist).

11

Oral Medications

Type 2 diabetes is a progressive disease. Even though you can be doing all the right things to manage your diabetes, it may be necessary to start medication to keep healthy blood glucose (sugar) levels.

When starting new medication you need to ask your doctor and pharmacist:



- How many tablets you should take
- How often you should take your tablets
- What time of the day you should take your tablets - whether before food, with food or after food
- How your tablets work
- The side effects
- How your tablets affect or are affected by other medications you are taking.

Over time your medications may not work as well. For this reason it is recommended to have your medications reviewed by your doctor every year.

Your local pharmacist can also help you understand your medications.

Do not stop, decrease or increase your medication without first discussing it with your doctor or diabetes educator.

Do not share your medications with anyone else.

Certain diabetes medication can increase the risk of a low blood glucose level (hypoglycaemia). It is essential to know how to recognise and treat low blood glucose or hypoglycaemia. Ask your doctor, pharmacist or diabetes educator if this applies to you. If you are having frequent episodes of hypoglycaemia it is very important to speak with your family doctor or diabetes health care team.

Further assistance with your medications:

Home Medication Review:

If you are taking five or more different medicines, talk to your doctor about arranging a home medication review by your local pharmacist.

National Prescribing Service:

For information over the phone regarding the expert use of any of your medications you can contact the National Prescribing Service consumer enquiry line "Medicines Line" on 1300 633 424.

11

Wainimate Gunuvi

Na matenisuka Kalasi 2 e mate ka vakaikabakaba cake tikoga. E dina beka ni ko sa cakava kece tiko na ka e dodonu mo kitaka me qaravi kina na nomu matenisuka, ena vinakati beka mo tekivu gunu wainimate me vinaka tiko kina na suka ena nomu dra.

Ni ko sa tekivu gunu wainimate sa dodonu mo taroga na nomu vuniwai kei na kemesi:



- E vica na vuanikau mo gunuva
- Mo gunuva vakavica na vuanikau
- Ena gauna cava mo gunuva kina – ni bera na kana, vata kei na kakana se ni oti na kana
- Na cakacaka ni vuanikau
- Na leqa e kauta mai
- Na cava e rawa ni yaco ni gunuvi na wainimate vata kei na so tale na wainimate ko gunuva tiko.

Ni oti edua na gauna, ena rawa ni sega ni mana vinaka na memu vuanikau. Oqori sara ga na vuna ko sa vakauqeti kina me la'ki dikeva tale na nomu vuniwai na memu wainimate ena veiyabaki.

E rawa talega vua na nomu kemesi me vukei iko mo kila na memu wainimate.

Kakua ni muduka, vakalailaitaka se vakalevutaka na memu wainimate ni bera ni drau veivosaki kei na nomu vuniwai se na qasenivuli ni matenisuka. Kakua ni wasea na memu wainimate ki vua edua tale.

Eso na wainimate e vakalevutaka na kena rawa ni lutu sobu sara na suka (hypoglycaemia). Sa ka bibi mo kila na gauna ena yaco kina kei na ka me caka kina ni lutu na suka se hypoglycaemia. Taroga na nomu vuniwai, kemesi se na qasenivuli ni matenisuka se dodonu me caka talega vei iko. Kevaka e yaco wasoma tiko vei iko na lutu ni suka sa ka bibi mo tukuna vua na nomu vuniwai se vei iratou na timi ka veiqaravi ena matenisuka.

Na veivuke tale eso me baleta na memu wainimate:

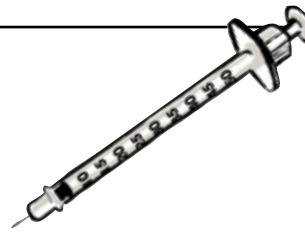
Dikevi mai vale na Wainimate:

Kevaka ko gunuva tiko e lima se sivia na mataqali wainimate, tukuna vua na nomu vuniwai me veivosakitaka me gole yani ki vale na kemesi me dikeva na memu wainimate.

National Prescribing Service

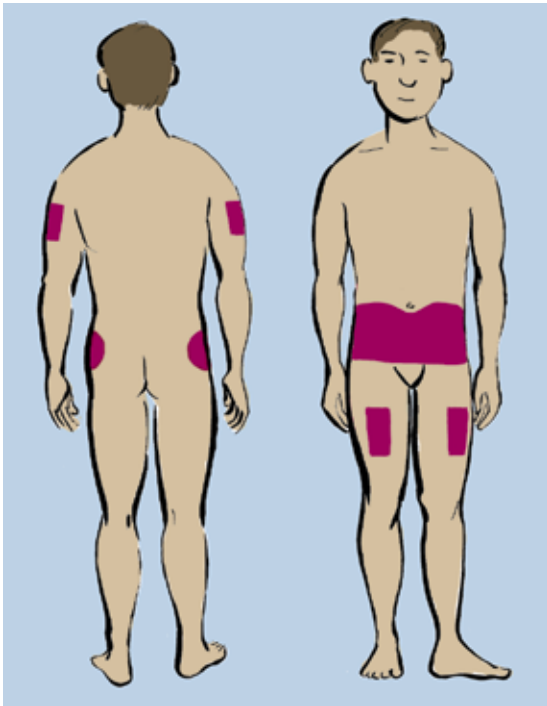
Me baleta eso nai tukutuku ena talevoni ena kena vakayagataki vakadodonu na memu wainimate, sa rawa ni ko veitaratara kei na National Prescribing Service "Medicine Line" ena 1300 633 424.

12 Insulin



The pancreas is a part of the body situated behind the stomach that produces a hormone called insulin.

Without insulin, the cells in our bodies would not be able to use the glucose (sugar) to provide energy.



In type 1 diabetes the pancreas does not make any insulin and glucose levels build up in the blood. Insulin by injection or by insulin pump is required for life. A person with type 2 diabetes or gestational diabetes may also require insulin to keep their blood glucose levels within the recommended range.

Your doctor may decide that insulin is needed as well as oral medications, or that insulin may be better than oral medications. This does not mean that you have failed in your diabetes management. It has been decided that insulin is necessary to maintain good diabetes management.

All insulins lower blood glucose levels. Low blood glucose or hypoglycaemia can be a side effect of insulin treatment. It is essential to know how to recognise and treat low blood glucose or a hypoglycaemic episode.

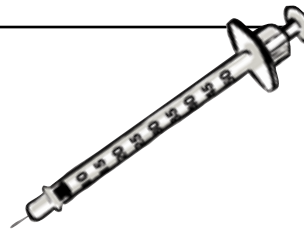
There are many types of insulins available, you and your doctor will discuss which is right for you. If you have any questions or concerns about starting on insulin you can also contact your diabetes educator.

Key points to know are:

- Type and amount of insulin to be used
- Time to take your insulin and when to eat
- The time your insulin has its greatest effect and how long it stays in your body
- When to test your blood glucose (sugar) level
- When to contact your doctor or diabetes health care team.

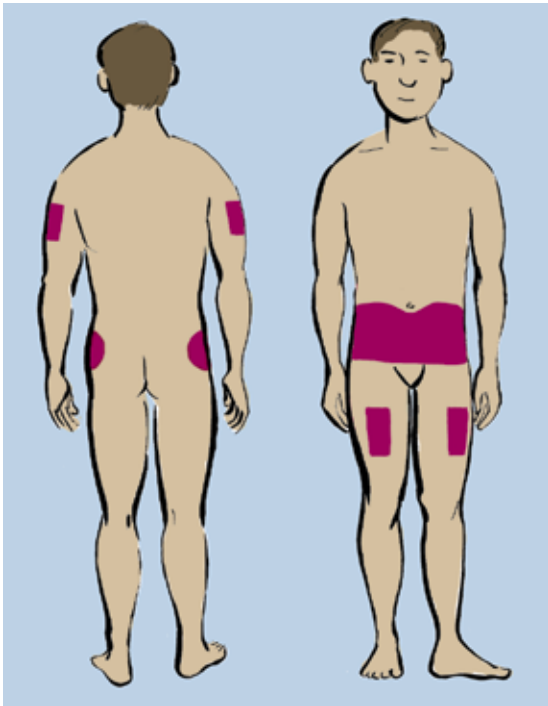
Tell your doctor or diabetes educator of any changes in your lifestyle, working hours, physical activity or meal times. They will advise you if you need to change your insulin treatment .

12 Inisulini



Na pancreas edua na gacagaca ni yago ka koto ena daku ni kete ka bulia na hormone ka vakatokai na inisulini.

Kevaka ena sega na inisulini, ena sega ni rawa kin a yago me vakayagataka suka me solia na kaukauwa.



Ena matenisuka Kalasi 1, e sega ni bulia rawa na pancreas edua na inisulini ka sa mani bini kina na suka ena dra. Na inisulini ka soli enai cula se pamutaki, ena caka tiko vakaoqo ena vo ni bula taucoko. Na matenisuka Kalasi 2 se matenisuka o sa sucu vata kaya mai, ena rawa ni soli vua na inisulini me vakadeitaka ni tiko donu na levu ni suka ena dra.

Ena rawa talega vua na nomu vuniwai me vakadonuya me vakayagataki na inisulini kei na vuanikau, se, de na vinaka cake beka na inisulini mai na gunu wainimate. E sega ni kenai balebale oqo ni sa sega ni vinaka na qaravi ni nomu matenisuka. Sa vakatulewataki ni yaga ga me vakayagataki na inisulini me qarauna vinaka na nomu bula.

Na inisulini taucoko e vakalutuma na suka ena dra. Na lutu sobu ni suka se hypoglycaemia e rawa ni vu mai na kena vakayagataki na inisulini. Sa ka bibi mo kila na gauna e yaco kina kei na kenai wali.

E vuqa na mataqali inisulini, ka na rawa vei iko kei na nomu vuniwai mo drau veivosakitaka na kena e ganiti iko. Kevaka e tiko na nomu vakatataro me baleta na kena tekivutaki na nomu vakayagataka, e rawa talega ni ko veitaratara kei na nomu

qasenivuli ni matenisuka.

Na veitikina bibi mo kila:

- Na mataqali kei na levu ni inisulini me vakayagataki
- Gauna mo taura kina na inisulini kei na gauna ni kana
- Na gauna e cakacaka vakavinaka duadua kina na inisulini kei na balavu ni gauna e tiko kina e yagomu
- Na gauna mo dikeva kina na nomu suka
- Na gauna mo veitaratara kina kei na nomu vuniwai kei na timi ni vei qaravi.

Tukuna vua na nomu vuniwai se qasenivuli ni matenisuka na veisau kece e yaco tiko ena nomu bula, na gauna ni nomu cakacaka, vakaukauwa yago se na gauna ni nomu kana. Eratou na vakasalataki iko kevaka me veisau na nomu inisulini.

Sharps disposal

What are “community sharps”?

Community sharps are medical devices that penetrate the skin and are used in the home.

They include:

- Needles – used to give injections, draw blood or insert insulin pump tubing
- Syringes (even if needle removed)
- Pen needles for insulin pens
- Blood glucose or finger pricker lancets.

Your used sharps must be secured in a strong puncture resistant container, Australian Standard Sharps containers (available from the Diabetes NSW & ACT and some pharmacies) or a puncture resistant plastic container with a screw top lid are suitable.



Sharps must NOT be placed in any rubbish or recycling bins.

How do I dispose of my community sharps?

Place sharps in an appropriate container. Dispose of containers only into community sharps disposal facilities found at:

- Public hospitals
- Participating pharmacies
- Community sharps disposal bins
- Needle and syringe program outlets.

For a list of sharps disposal facilities in your area contact your local council or phone the Diabetes NSW & ACT on 1300 342 238.

Na kena biu laivi nai cula

Na cava na “community sharps”

Oqo nai yaya ni cakacaka vakavuniwai me culai kina na kulida ka dau vakayagataki e vale.

E okati kina:

- Nai cula – vakayagataki ena veicula, domici ni dra se ena kena vakacurumi na paipo palasitika ni inisulini
- Nai pamu (syringes) (veitalia ke sa biu laivi nai cula)
- Na cula peni me peni ni inisulini
- Nai tavatava ni qaqalo ni liga me baleta na suka.

Na nomu icula kece e dodonu me maroroi vinaka ena loma ni dua na kava ni benu kaukauwa ka sega ni rawa ni botei vakarawarawa, na kena mataqali e veiganiti aya na Australian Standard Sharps ka tiko vei iratou na Diabetes NSW & ACT kei na so na kemesi, se dua ga na dramu palasitika kaukauwa ka vakaisogo vinaka.

Me KAKUA ni biu nai cula ena loma ni kava ni benu se ena benu me vakayagataki tale (recycling bins).

Au na biuta laivi vakacava na noqu icula?

Biuta nai cula ena kena vanua dodonu. Sovara walega na kava ni benu ena kena vanua vakarautaki ena:

- Valenibula ni matanitu
- Ena kemesi era vakaitavi kina
- Ena kava ni benu e vakarautaki vakatabakidua me baleta nai cula
- Ena veivanua e tiko kina na porokaramu ni icula kei na kenai pamu.

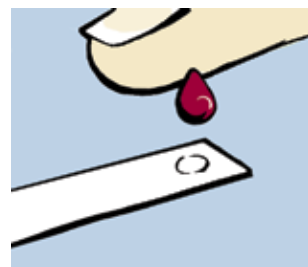
Me baleta na vanua ni ibenubenu me biu kina nai icula sa vakayagataki oti ena nomu yasani koro, qai veitaratara kei na nomu Council se talevoni ki na Diabetes NSW & ACT ena 1300 342 238.



13 Blood Glucose (Sugar) Monitoring

Monitoring blood glucose levels is important to help you manage your diabetes. Self blood glucose testing is a way of measuring how much glucose is in your blood.

A drop of blood is obtained by pricking the finger with a needle called a lancet. The blood is applied to a test strip, and inserted into a blood glucose machine (meter). The blood glucose(sugar) level is then displayed.

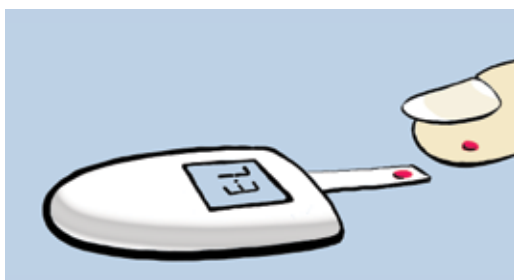


There are many types of meters available. Ask your doctor or diabetes educator which meter suits you. You will also need to be shown how to use your meter.

Why you should monitor your blood glucose (sugar) level

Blood glucose levels respond to food, particularly carbohydrates. Other factors like physical activity, diabetes medication, changes in your daily routine, stress and illness will also cause blood glucose levels to go up or down.

Visits to a doctor or health professional may be weeks or months apart. It is important to know and understand the readings/blood glucose levels and make some self-management decisions in between doctors visits.



The benefits of using a meter include:

- Seeing if your blood glucose level is too high or too low
- Gives you a picture of your day to day diabetes management
- Shows you whether your blood glucose levels are within your recommended target range
- Shows you the effects of food, physical activity and medication on your blood glucose (sugar) level
- Gives you confidence to self-manage your diabetes.

This gives you and your diabetes health care team the information needed to help you manage your diabetes.

When you should monitor your blood glucose (sugar) level

Blood glucose monitoring is usually done before meals or two hours after the start of a main meal. Ask your doctor or diabetes educator for advice on when and how often you need to check your blood glucose level.

It is safe practice to check your blood glucose level before driving and on long journeys, especially for those people who are at risk of hypoglycaemia.

Monitor your blood glucose level more often:

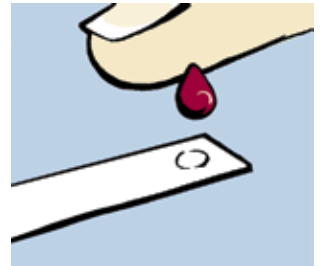
- If you are sick
- When adjusting tablets or insulin doses
- When blood glucose levels are high -for example over 15 mmol/L
- After exercise
- After alcohol intake.

13

Dikevi ni Suka (Glucose) ena Dra

Sa ka bibi me yadravi na levu ni suka ena nomu dra me vukea na kena manidiataki na nomu matenisuka. Na nomu vakarautaka vakataki iko na nomu suka sa sala ni nomu kila se sa vakacava tiko na levu ni nomu suka.

Edua nai turu ni dra ena tauri ni ko cula na nomui qaqalo ena kenai cula. Ena domica na dra edua na tikini pepa, oti ena qai vakacurumi ena kena misini (mita). Ena qai laurai mai na levu ni suka e tiko ena dra.

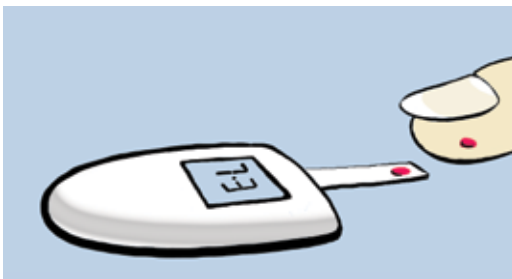


E vuqa na mataqali mita e tiko. Taroga na nomu vuniwai se qasenivuli ni matenisuka na mita cava e ganiti iko. Me na vakaraitaki talega vei iko na kenai vakavakayagataki.

Na cava mo yadrava kina na levu ni suka ena nomu dra?

Na kakana ena yavalata na suka e tiko ena dra, vakabibi na yabia. E rawa talega ni tubucake se lutusobu na nomu suka mai na veika me vaka na vakaukauwa yago, wainimate ni matenisuka, veisau ni nomu bula ena veisiga, lomaocaoca se tauvimate.

Na veisiko ki vua na vuniwai se vei ira na dauveiqaravi vakavuniwai e rawa ni vakamacawa se vakavula na kena veiyawaki. Sa ka bibi mo rawa ni wilika na levu ni nomu suka ka vakatulewataka eso na ka bibi me baleta na nomu bula ena tadruga ni veisiko vua na vuniwai.



Na veika vinaka e rawa mai na kena vakayagataki na mita, era wili kina oqo:

- Ko na raica kina ni sa tubucake se lutusobu na nomu suka
- Solia vei iko nai rairai ni nomu yadarava na nomu matenisuka ena veisiga
- Tukuna vei iko se sa donu tiko nai vakatagede ni nomu suka e dodonu mo tiko kina
- Vakaraitaka vei iko na ka e yaco ki na nomu suka mai na kakana,

yavavala ni yago kei na wainimate

- Solia vei iko na yalodei mo qarauna vakataki iko na nomu matenisuka.

Oqo ena solia vei iko kei iratou na timi ni dauveiqaravi ni matenisuka nai tukutuktu e gadrevi mo vukei kina ena yadravi ni nomu matenisuka.

Na gauna mo wilika kina na levu ni suka ena nomu dra

Na tikina oqo edau vakayacori vakalevu ga ni bera na kana se ni oti e rua na auwa mai na gauna ni kana vakalevu. Taroga vua na nomu vuniwai se qasenivuli ni matenisuka na gauna mo wilika kina na nomu suka kei na kena wasoma.

E ka vinaka mo wilika na nomu suka ni bera ni ko draiva se draiva vakabalavu., vakabibi vei ira e dau lutu sobu vakarawarawa na nodra suka se hypoglycaemia.

Dau wilika vakawasoma na levu ni nomu suka, ka qai vakawasoma cake:

- Kevaka ko tauvimate
- Ni veisau na memu wainimate se na levu ni inisulini
- Ni sa tubucake na suka ena dra – me sa sivia na 15 mmo/L
- Ni oti na vakaukauwa yago
- Ni oti na gunu yaqona ni vavalagi.

What my blood glucose levels should be?

For most people with type 2 diabetes the recommended range for blood glucose levels is 6 to 8 mmol/L fasting/before meals and 6 to 10 mmol/L two hours after the start of a main meal.

Your doctor will advise you on what blood glucose level will be best for you.

The Glycated Haemoglobin (HbA1c) Blood Test

Blood glucose monitoring with a meter gives you a picture of your day to day diabetes management. There is another important blood test called glycosylated haemoglobin – more commonly known as HbA1c. This blood test gives you a picture of your blood glucose control over the last two to three months and is arranged by your doctor.

The generally recommended HbA1c target level in people with type 2 diabetes is 7% or less. Your HbA1c should be checked at least every 6 months.

If your HbA1c is greater than 7% it should be checked every three months. You will need to speak to your diabetes health care team about your diabetes management goals and possible changes to your diabetes management and treatment.

Na levu ni noqu suka ena dra e dodonu me'u yacova

Na levu ni suka ena dra vei ira na Matenisuka Kalasi 2 e dodonu me 6 ki na 8 mmol/L ni sa sega mada ni kana, ka 6 ki na 10 mmol/L ni oti e rua na auwa ni oti na kana vakalevu.

Ena vakasalataki iko na nomu vuniwai enai vakatagedegede ni suka e veiganiti kei iko.**Na Dikevi ni Dra se Glycated Haemoglobin (HbA1c) Blood Test**

Ena solia vei iko ena kena vakayagataki na mita nai rairai ni nomu qarava tiko na nomu matenisuka ena veisiga. E tiko tale edua na mataqali vakadikevi ni dra bibi, ka vakatokai na glycosylated haemoglobin – na yacana rawarawa na HbA 1c. Na kena oqo ena solia vei iko nai rairai ni nomu yadrava tiko mai na nomu suka ena loma ni rua se tolu na vula ka na veivosakitaka mai na nomu vuniwai na kena caka.

Na levu ni HbA 1c e vakasalataki me tiko vei ira na matenisuka Kalasi 2 e 7% se lailai.

Na nomu HbA 1c e dodonu me dikevi ena veiya-ono na vula.

Kevaka e sivia na 7% na nomu HbA 1c e dodonu me dikevi tiko ni oti e veiya-tolu na vula. Ena dodonu mo raici iratou na timi eratou dau qarava na nomu matenisuka me baleta na veika me taketaki mo rawata kei na veisau e rawa ni yaco ena nomu qaravi.

14 Short Term Complications – Hypoglycaemia

Hypoglycaemia (low blood glucose levels)

Hypoglycaemia is when the blood glucose (sugar) level drops below 4 mmol/L. It can happen very quickly.

Hypoglycaemia can occur in people who take certain oral diabetes medication or use insulin.

Ask your doctor or health care team if this applies to you.

It is essential to know how to recognise the signs and symptoms of having low blood glucose (sugar) and how to treat it.



Blood glucose levels can be low because of:

- Delayed or missed meals
- Not enough carbohydrate in the meal
- Extra activity or more strenuous activity
- Too much diabetes medication
- Alcohol.

Signs and Symptoms

These can vary from person to person and may include:

- Dizziness/light headedness
- Sweating
- Headache
- Weakness, shaking
- Tingling around the lips and fingers
- Hunger
- Mood changes, irritable/tearful
- Confusion/lack of concentration.

If you feel any of these signs and symptoms, test your blood glucose level if possible.

Treatment for low blood glucose levels (hypos) in a person who is conscious, cooperative and able to swallow.

If you are unable to test, treat anyway.

Treatment for low blood glucose levels (Hypos)

Step 1

Take quickly absorbed carbohydrate such as:

- Half a glass of juice OR
- 6 to 7 jellybeans OR
- Half a can of regular (not diet) soft drink OR
- 3 teaspoons of sugar OR honey.

Retest the blood glucose level after 10 - 15 minutes.

If still below 4 mmol/L repeat Step 1

Na Veileqa Bibi Leleka – Hypoglycaemia

Hypoglycaemia (lutusobu ni suka ena dra)

Oqo ni sa lutusobu sara na levu ni suka ena dra ki na 4 mmol/L. Ena rawa ni yaco vakatoto. sara na ka oqo.

Na Hypoglycaemia ena rawa ni yacovi ira era gunuva tiko na wainimate ni matenisuka se era vakayagataka na inisulini.

Taroga na nomu vuniwai se o iratou na nomu timi ni veiqaravi se ena rawa li ni yaco vei iko na ka oqo.

Sa ka bibi mo kila nai vakatakilakila ni sa lutusobu na suka kei na ka mo na cakava kina.



Ena rawa ni lutusobu na levu ni suka ena dra baleta na:

- Vakaberabera taki na kana se calati na kana
- Sega ni veirauti na yabia ena kakana
- Sa sivia na cakacaka se sa sivia na yavavala ni yago
- Sivia na inisulini se na wainimate ni matenisuka
- Yaqona ni vavalagi.

Na Veivakatakilakila

Ena rawa ni duidui oqo mai na dua ki na dua tale ka rawa ni wili kina:

- Via matabuto/ mamada na ulu
- Buno
- Mosi ni ulu
- Malumalumu/ninini
- Culacula wavokita na gusu kei nai qaqalo
- Viakana
- Veiveisau ni yalo, cudrucudru rawarawa/tagi rawarawa
- Veilecayaki/berabera na noda vakasama.

Kevaka e yaco vei iko edua nai vakatakilakila oqori, la'ki dikeva sara na suka ena nomu dra kevaka e rawa.

Kevaka ko sega ni rawa ni dikeva, ia mo qarava ga.

Na Veiqaravi me soli ni lutu na suka ena dra (Hypos)

Kalawa e 1

Kania vakatoto na yabia qaqi rawarawa me vaka:

- Veimama na bilo waimoli SE
- 6 se 7 na loli jellybeans SE
- Veimama edua na kava gunu (soft drink) (me kua na ka ni vakalutu yago) SE
- 3 nai taki lailai na suka SE na de ni oni.

Dikeva tale na levu ni suka ni oti e 10 -15 na miniti.

Kevaka e sa lutusobu sivita tikoga na 4 mmol/L, vakaruataka nai matai ni kalawa.

Step 2

If your next meal is more than 20 minutes away, follow up with more slowly absorbed carbohydrate such as:

- 2 plain biscuits e.g. 2 Arrowroot or 2 milk coffee biscuits OR
- 1 slice of bread OR
- 1 glass of milk or soy milk OR
- 1 piece of fruit
- 1 tub of low fat yoghurt.

If not treated the blood glucose levels can continue to drop, resulting in:

- Loss of coordination
- Confusion
- Slurred speech
- Loss of consciousness/fitting.

THIS IS AN EMERGENCY !!

Instructions for the person present during this emergency:

If the person having a hypo is unconscious they must not be given anything by mouth.

- Place the person in the 'recovery position' or on their side
- Make sure the airway is clear
- Ring 000 or if using a mobile ring 112 for an ambulance stating "diabetic emergency"
- An unconscious person must NOT be left alone
- If you are able and trained, give a Glucagon injection



Important points for the person at risk of hypoglycaemia

- Always carry 'hypo' food with you if you are on insulin or at risk of hypoglycaemia. Ask your doctor if this applies to you.
- Carry identification to say you have diabetes
- Test before driving, before and after exercising and after alcohol intake.



Kalawa e 2

Kevaka e sa vo tiko e 20 na miniti mai na gauna ni nomu kana, kania vakamalua na yabia me vaka: e:

- 2 na bisikete mamaca e.g. 2 na Arrowroot se 2 na bisikete sucu-kofi SE
- 1 na tikini madrai SE
- 1 na bilo sucu se sucu soy SE
- 1 na tikini vuanikau
- 1 na tavu lailai na yogurt.

Kevaka e sega ni qaravi na suka, ena rawa ni lutosobu tikoga, ka rawa ni yacova na:

- Segga ni cakacaka vata rawa na yagomu
- Veilecayaki
- Kaka na vosa
- Segga ni vakilai koya/manumanusoni.

OQO NA LEQA VAKATOTOLO!!

Nai dusidusi vua e tiko ena gauna ni leqa vakatotolo:

Me kakua ni soli vua e tauvi hypo ka sega ni vakilai koya tu, edua na ka e gusuna.

- Vakaduri koya toka se me duri vakatatiki
- Qarauna me galala na nonai cegu-cegu
- Qiria na 000 se na ambulance ena 112 kevaka e vakayagataki na talevoni veikauyaki ka kaya "diabetic emergency"
- Me KAKUA ni biu duadua tu kevaka e sa sega ni vakilai koya
- Kevaka walega ko sa vulica oti, culai koya ena Glucagon.



Veika bibi vei koya e lutu vakarawarawa na nona dra

- Kauta voli na kakana ni lutunidra kevaka o tauri inisulini se dau tauvi iko vakarawarawa na lutunidra. Tarogi vuniwai se dodonu mo vakayacora oqo
- Kauta voli nai vakadinadina ni ko tauvi matenisuka
- Dikevi iko ni bera ni ko vakau motoka, ni bera, se ni oti na vakaukauwa yago kei na gauna e gunuvi oti kina na yaqona ni vavalagi.



15 Short term complications – high blood glucose (sugar) level (hyperglycaemia, DKA, HONK/HHS, and sick days)

Hyperglycaemia or high blood glucose levels is when the blood glucose (sugar) levels are much higher than recommended – above 15mmol/L.

Blood glucose levels go high because of:

- Eating too much carbohydrate
- Not taking enough insulin or oral diabetes medications
- Sickness or infection
- Emotional, physical or mental stress
- Certain tablets or medicines, (including cortisone or steroids)
- A problem with your blood glucose meter, strips or testing technique
- Lumps present at the injection site (if on insulin)
- Fingers not clean when testing your blood
- Testing too soon after eating. (Check your blood glucose two hours after the start of a main meal).

Signs and Symptoms

You may feel:

- Tired
- Thirsty
- Pass urine more frequently
- Blurred vision
- Generally unwell.

If feeling unwell

- Test your blood glucose levels more often: at least every 2 – 4 hours
- Drink fluids and continue to eat normally if possible
- Treat the cause of the illness
- Tell someone and have them check on you.

Test for ketones if advised to do so by your doctor

When do I need to call my doctor?

Contact your doctor for advice during illness if:

- You can't eat normally
- You are not well enough to monitor your blood glucose levels
- Your blood glucose level is higher than 15 mmol/L for more than 12 hours
- Vomiting or diarrhoea continues for more than 12 hours
- You continue to feel unwell or become drowsy.

It is important to have a written sick day management plan prepared before you get sick or unwell. Talk to your diabetes health care team to arrange this.

Ketone Testing and Diabetic Ketoacidosis (DKA)

Ketones are chemicals in the blood which are produced from the breakdown of fat. If the body has no insulin present, glucose (sugar) can't be used for energy. Therefore the body makes ketones to provide a different source of energy. This may occur due to poor control of diabetes, not enough insulin or missed insulin doses, illness or infection.

15 Na Veileqa bibi leleka – tubu ni suka (glucose) ena dra (hyperglycaemia, DKA, HONK/HHS, kei na siga ni tauvimate)

Na **Hyperglycaemia** se na tubusivia ni suka ena dra, oqo na gauna sa tubu sivita kina nai vakatagedegede ni suka e dodonu me tiko vei iko – sivia na 15 mmol/L.

E dau tubusivia na suka ena dra baleta na:

- Kania vakasivia na yabia
- Sega ni veirauti na inisulini se na wainimate ni matenisuka gunuvi
- Tauvimate se infection
- Lomaocaoca ni yalo, yago se na vakasama
- Eso na vuanikau se wainimate (oka kina na cortisone se steroids)
- Leqa na nomu mita ni vakarau suka, se kena pepa se na kenai walewale
- Vuce na vanua e dau culati (ke o tauri inisulini)
- Duka na liga ni vakarautaki na dra
- Sa rui totolo na kena dikevi. (Dikeva na nomu suka ni oti e rua na auwa mai na gauna o tekivu kania kina edua na kakana levu).

Nai Vakatakilakila

Ena rawa ni ko vakila na veika oqo:

- Oca
- Suasua wasoma
- Sega ni vinaka nai tuvaki ni yago.
- Viagunu
- Buwawa na rai

Kevaka e sega ni vinaka nai tuvaki ni yagomu

- Dikeva vakawasoma na levu ni nomu suka: ena veiya 2 – 4 na auwa
- Gunu wai ka kana tiko me vaka na kenai vakarau ke rawa
- Qarava na vu ni tauvimate
- Tukuna vua edua me mai dikevi iko.

Dikevi iko se tiko vei iko na ketones kevaka e vakarota na vuniwai.

Ena gauna cava me'u kaciva kina na noqu vuniwai?

Veitaratara kei na nomu vuniwai ni ko tauvimate me vakasalataki iko, kevaka:

- E sega tiko ni ko kana vinaka
- E sega ni ko bula vinaka ka sega ni rawa mo dikeva na nomu suka
- Sa tubusivita na 15 mmol/L na nomu suka ka sa sivia e 12 na auwa
- Lualua se coka ka sa sivia e 12 na auwa
- Ko sega tikoga ni bula vinaka ka sosovu mai.

Sa ka bibi me tiko rawa edua nai tuvatuva volai ena ka mo qaravi iko kina ena siga ni nomu tauvimate ni bera ni yaco vei iko. Kaya vei iratou na nomu timi ni vei qaravi me ratou vakarautaka mai nai tuvatuva oqori.

Na Kena Dikevi na Ketone kei na Diabetic Ketoacidosis (DKA)

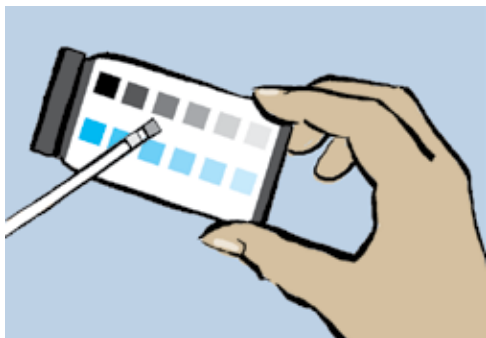
Na ketone sai koya na wainimate ena dra ka buli mai ena kena qaqi na uro. Kevaka sa sega na inisulini ena yago, ena sega ni rawa ni vakayagataki na suka mei vurevure ni kaukauwa. Sa qai vakavuna vua na yago me bulia edua tale na mataqali kaukauwa. E rawa ni yaco oqo ni sega ni qaravi vinaka na matenisuka, sega ni veirauti na inisulini se a sega ni tauri na inisulini ena kena gauna se ena tauvimate.

A build up of ketones can lead to a condition called ketoacidosis, requiring urgent medical attention. Diabetic ketoacidosis (DKA) is a life threatening condition that usually only occurs in people with type 1 diabetes. It causes dehydration and a buildup of acids in the blood. This results in vomiting and increased drowsiness.

DKA IS AN EMERGENCY AND REQUIRES URGENT MEDICAL ATTENTION

In very rare cases ketoacidosis can occur in people with type 2 diabetes and is usually caused by a serious infection.

With type 2 diabetes it is not usually necessary to test for ketones. Discuss with your diabetes health care team if you need to check for ketones.



There are two methods of testing for ketones – testing urine and testing blood:

Urine Ketone Test

Urine test strips are available to check for ketones. Ask your pharmacist about the types of urine ketone strips available and carefully follow the directions for testing. Urine ketone tests must be timed exactly using a watch or clock with a secondhand.

Blood Ketone Test meter

There are meters available to test blood for ketones. The same drop of blood to be tested for glucose can be used to test for ketones. Different test strips are used for testing glucose and ketones. Ketone test strips are not subsidised by the [National Diabetes Services Scheme](#) at present.

Seek URGENT medical attention if:

- The urine ketone test shows medium or high levels of urine ketones.
- The blood ketone test result is higher than 0.6 mmol/L.

Hyperosmolar Hyperglycaemic Syndrome (HHS) - previously known as Hyper Osmolar Non Ketotic coma (HONK)

HHS is a complication of type 2 diabetes that involves extremely high blood glucose (sugar) levels without the presence of ketones. This medical emergency occurs in anyone with type 2 diabetes, regardless of treatment.

When blood glucose levels are very high, the body tries to get rid of the excess glucose (sugar) in the urine. This significantly increases the amount of urine and often leads to dehydration so severe that it can cause seizures, coma and even death.

The main causes of HHS/ HONK are:

- Undiagnosed type 2 diabetes
- A current illness or infection e.g. pneumonia and urinary tract infection
- Other major illnesses e.g. stroke, heart attack
- Persistent physical or emotional stress
- Certain medication. This is another reason you need to talk to your diabetes health care team about the medications you are taking.

Signs and Symptoms include:

- Severe dehydration
- Shock
- Changes in consciousness
- Coma.

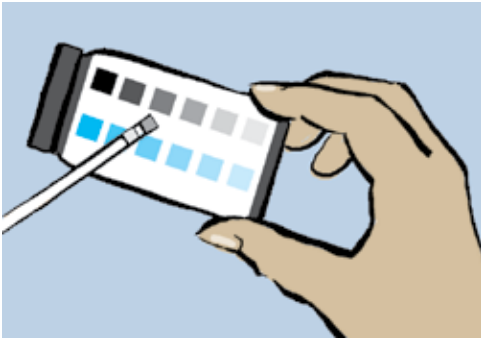
HHS/HONK requires URGENT medical attention.

Na kena sa rui levu na ketones e rawa ni vakavuna na mate e vakatokai na ketoacidosis, ka gadrevi vakatotolo kina na veiqaravi vakavuniwai. Na mate na Diabetic ketoacidosis (DKA) e leqa bibi sara ka dau yaco vakalevu ga vei ira na matenisuka Kalasi 1. E la'ki vakavuna na mamaca ni yago kei na kena kumuni na wainimate kaukauwa (acids) ena dra. E la'ki vakavuna sara na lualua kei na sosovu.

NA DKA E LEQA BIBI KA ME QARAVI VAKATOTOLO VAKAVUNIWAI

Ena tu-tu yadudua sara me tauvi ketoacidosis edua na matenisuka Kalasi 2 ka vu mai ena dua na mate veitakavi bibi.

Vei ira na matenisuka Kalasi 2, e sega so ni dau gadrevi mo vakadikevi se tiko vei iko na ketones se sega. Veitalanoataka kei na nomu timi ni veiqaravi kevaka mo dikevi kina.



E rua nai walewale ni kena dikevi na ketones – dikevi na suasua kei na dra:

Na Dikevi ni Suasua

E tiko na kena pepa me dikevi kina na ketone. Taroga na nomu kemesi se na mataqali pepa cava e tiko ka qai vakamuria vakavinaka na kenai dusidusi. Na vakadidike ogo e dodonu me tauri ena kena gauna dodonu ka me vakayagataki kina na kaloko ni liga se na kaloko e vakasekodi na ligana.

Na Mita ni Dikevi ni Ketone.

E vuqa na mataqali mita e tiko me dikevi kina se tiko na ketones ena dra. Se sega. Nai turu ni dra vata ga e vakayagataki ena dikevi ni suka e rawa ni dikevi talega kina na ketone. Ia, e duidui na pepa e vakayagataki vei rau. Na pepa ka vakayagataki ena ketone e sega ni veivuke mai kina na [National Diabetes Service Scheme](#) ena gauna ogo.

Vakaqara VAKATOTOLO na veivuke vakavuniwai:

- Kevaka e laurai ena vakadidike ni levu se sivia na ketone ena suasua
- Kevaka e sivia na 0.6 mmol/L.

Hyperosmolar Hypoglycaemic Syndrome (HHS) – yacana makawa na Hyper Osmolar Non Ketone coma (HONK)

Na **HHS** aya ni sa bibi ka vereverya na matenisuka Kalasi 2 ka vinakati vakalevu kina me levu na suka ena dra ia me kakua ni tiko kina na ketone. Na leqa bibi ogo e rawa ni yaco vua edua ena Kalasi 2, veitalia na mataqali veiqaravi cava e caka tiko vua.

Ni sa sivia na suka ena dra, ena tovolea na yago me kauta laivi na suka sa bini yani ena suasua. Ena la'ki vakavuna sara ni tubu me levu na suasua ka vakavuna me levu na mamaca ni yago ka rawa ni yaco vua na laquiqui, cibati koya se mani mate sara.

Na veika e vakavuna vakalevu na HHS/HONK aya:

- Ni sega ni a sa laurai ni tiko na Matenisuka Kalasi 2
- E tauvimate tiko se tiko edua na mate veitauvi e.g. ni umonia se tauvimate na salanisuasua
- Mate bibi tale eso e.g. na stroke, mateniuto
- Oca ni yago kei na bibi ni yalo ka sega ni yali rawa
- Eso na mataqali wainimate. Ogo talega edua na vuna mo tukuna kina ki na nomu timi ni veiqaravi na ka e baleta na wainimate ko gunuva tiko.

Na kenai Vakatakilakila e wili kina na:

- Mamaca vakasivia ni yago
- Kidacala
- Veiveisau na nomu vakilai iko
- Sa sega ni vakilai iko.

Na HHS/HONK e gadrevi kina na veiqaravi VAKATOTOLO vakavuniwai.

16 Chronic complications

Blood glucose (sugar) levels that remain high for long periods of time can cause diabetes related complications such as eye disease, kidney disease, nerve damage as well as heart disease and circulation problems. High blood glucose levels also increase the risk of infection and slow down recovery from infection. For these reasons it is very important that you try and keep your blood glucose levels within the ranges recommended by your doctor or diabetes health care team.

Diabetes and eye disease:

Damage can occur to the back of the eye (retina) where there are very fine blood vessels important for vision. This is called diabetic retinopathy. The development of retinopathy is strongly related to how long you have had diabetes and how well the blood glucose levels have been controlled.

High blood pressure, high cholesterol levels and kidney failure can also affect the severity of diabetic retinopathy.

Vision loss or blindness is preventable through early detection and treatment. The treatment for diabetic retinopathy can be laser therapy or surgery.

Glaucoma and cataracts can occur at an earlier age and more often in people with diabetes. Cataracts affect the eye's lens causing it to become cloudy with a loss of vision. The treatment for cataracts is surgery.

Glaucoma occurs when the pressure inside the eye becomes very high, causing damage to the optic nerve. The treatment for glaucoma can be eye drops, laser therapy or surgery.

Diabetes and kidney disease:

Your kidneys help to clean your blood. They remove waste from the blood and pass it out of the body as urine.

Over time diabetes can cause damage to the kidneys. If the kidneys fail to work properly, waste products stay in the body, fluids build up and the chemical balance is upset. This is called diabetic nephropathy.

You will not notice damage to your kidneys until it's quite advanced, however early signs of kidney problems can be detected through a urine test.

Finding out about early kidney damage is simple and painless and should be checked every year from the time of diagnosis of diabetes. Treatment at this time can prevent further damage.

In severe kidney disease dialysis treatment or a kidney transplant may be needed.

People with diabetes are also at increased risk of infection of the bladder, kidneys and urinary tract.

The good news is that the risk of developing kidney problems can be reduced by: stopping smoking if you smoke, managing your blood glucose levels, having regular kidney and blood pressure checks and leading a healthy lifestyle.

16 Sa Bibi Vakalevu Sara

Ni sa tiko vakabalavu na levu ni suka ena dra sa na rawa ni vakavuna tale mai na matenisuka eso na leqa bibi me vaka na mate ni mata, mate ni ivi, mavoa ni nave vakatalega kina na mateniuto kei na kena sa sega ni cowiri vinaka na dra. Na levu ni suka ena vakarawarawataka na mate veitauvi ka vakaberaberataka na vakalesui ni bula ni oti na mate veitauvi. Ena tikina oqo sa ka bibi kina mo tovolea me tiko ga nai vakatagedegede ni nomu suka ena kena levu e vakasalataki iko kina na nomu uniwai se na nomu timi ni veiqaravi.

Na Matenisuka kei na mate ni mata:

Ena rawa ni mavoa na daku ni mata (retina), na vanua e koto kina na salanidra mamare ka ka bibi na nodrai tavi ena rai ni mata. E vakatokai oqo na retinopathy ni matenisuka. Na kena tubu me levu na retinopathy e kunei ni rau veiwekani kei na balavu ni gauna ni tauvi matenisuka kei nai vakatagedegede ni kena qaravi tiko mai na suka ena dra.

Na tubu ni dra, na levu ni uro ena dra kei na mate ni ivi e rawa ni la'ki ca vakalevu kina na retinopathy ni matenisuka.

Na buwawa ni mata kei na mataboko e rawa ni tarovi kevaka e kunei vakatotolo ka qaravi sara. Me qaravi vakavuniwai na mate oqo na retinopathy, ena rawa me sele se me qaravi ena leisa (laser therapy).

Na mate ni mata na glaucoma se na seila ena rawa ni yaco ena gauna ni gone ka vakabibi ga vei ira na tauvi matenisuka. Na Seila e tauva na loa ni mata ni mata ka vakavuna me kabukabu ka buwawa na rai. Na kenai wali ga me sele.

Na Glaucoma e yaco ni sa tubu me levu nai vakarau ni kaukauwa ena loma ni mata ka vakavuna me mavoa na nave ni rai ni mata. Na kenai wali ni rawa ni vakayagataki na wai turu ni mata (eye drops), na leisa se me sele.

Na Matenisuka kei na mate ni ivi:

Na ivi e vukea me vakasavasavataka na nomu dra. Ena kauta laivi na duka mai na dra ka vagolea me biu mai tautuba ena suasua.

Ni sa toso na gauna ena rawa ki na matenisuka me vakamavoataka na ivi. Kevaka sa sega ni cakacaka vinaka na ivi, sa na tao na duka, tubucake na levu ni wai sa tiko ka sa na veicalati nai tuvaki ni yago. E vakatokai oqori na nephropathy ni matenisuka.

Ko na sega ni kila ni sa mavoa tiko na nomu ivi me yacova ni sa ca vakalevu sara, ia e rawa ni kunei totolo na leqa ni ivi ena dikevi ni suasua.

E ka rawarawa ka sega na kena mosi na kena dikevi taudonu na mavoa ni ivi, ka dodonu me dikevi ena veiyabaki me vakatekivu mai na gauna sa kunei kina vei iko na matenisuka. Na kena qaravi ena gauna oqori sa na tarova na kena ca vakalevu.

Ni sa ca vakalevu sara na ivi, sa na vakasavasavataki na dra (dialysis) se me sa soli edua na ivi vou (kidney transplant).

Vei ira na matenisuka, e rawarawa ni dau tauvimate vakatotolo (infection) na nodra kato ni suasua, na ivi kei na sala ni suasua.

Nai tukutuku vinaka aya ni rawa ni vakalailaitaki na kena veitauvi na mate ni ivi ena veisala oqo: muduka na vakatavako kevaka o dau vakatavako, qarauna me tu vinaka na levu ni suka ena nomu dra, me dau dikevi vakawasoma na nomu ivi kei na tubunidra ka mo tiko bulabula.

Diabetes and nerve disease:

Diabetes over time can cause damage to nerves throughout the body. This damage is referred to as diabetic neuropathy.

Neuropathy leads to numbness, changes in sensation and sometimes pain and weakness in the , feet, legs, hands and arms. Problems may also occur in the digestive tract, heart and sex organs.

Diabetic neuropathy also appears to be more common in people who have:

- Problems controlling their blood glucose levels
- High levels of blood fat
- High blood pressure
- Excess weight
- An age greater than 40
- Had diabetes for a long time.

Signs and symptoms of nerve damage may include:

- Numbness, tingling, or pain in the toes, feet, legs, hands, arms, and fingers
- Muscle wasting of the feet or hands
- Indigestion, nausea, or vomiting
- Diarrhoea or constipation
- Feeling dizzy or faint due to a drop in blood pressure when standing
- Visual problems
- Problems with urination
- Erectile dysfunction (impotence) or vaginal dryness
- Sweating and palpitations
- Weakness
- Dry skin
- Dry mouth, eyes, nose.

Neuropathy can also cause muscle weakness and loss of reflexes, especially at the ankle, leading to changes in the way the person walks. Foot deformities may occur. Blisters and sores may appear on numb areas of the foot because pressure or injury goes unnoticed, leading to the development of an ulcer. If foot injuries or ulcers are not treated quickly, the infection may spread to the bone, and in extreme circumstances, may result in amputation. Due to neuropathy and its effect on daily living the person may lose weight and is more likely to suffer with depression.

The best way to minimise your risk for developing neuropathy is to keep your blood glucose

levels as close to the recommended range as possible. Daily foot care is of great importance to reduce complications.

Treatment of neuropathy includes pain relief and other medications as needed, depending on the type of nerve damage. Discuss the options with your health care team.

Diabetes and heart disease/stroke:

People with diabetes are at increased risk of heart disease and stroke. Higher than recommended blood glucose and cholesterol levels and high blood pressure over long periods of time damage the large blood vessels. This can lead to heart disease (coronary artery disease), damage to the brain (cerebral artery disease) and other blood vessel disease (peripheral artery disease).

Blood vessel disease is progressive and causes hardening and narrowing of the arteries due to a gradual build up of plaque (fatty deposits).

Na Matenisuka kei na mate ni nave:

Ni sa toso tiko na gauna, sa na rawa ki na matenisuka me vakacacana na nave ena yago taucoko. Na vakacaca oqo e vakatokai na neuropathy ni matenisuka.

Na Neuropathy ena vakavuna na nunu, veiveisau ena nomu vakila na ka, ena so na gauna ko na vakila na mosi kei na malumalumu ena yavamu kei na ligamu. E rawa talega ni yaco na leqa ena gacagaca ni kana, na uto kei na gacagaca ni veiyacovi.

Edau kune talega na Neuropathy ni tauvi ira vakalevu na:

- Dau leqa na kena qarauni na levu ni nodra suka
- Levu na uro ena dra
- Tubunidra
- Levulevu
- Sivi na yabaki 40
- Tauvi matenisuka vakabalavu.

Nai Vakatakilakila ni mavoa ni nave e rawa ni wili kina na:

- Nunu, cucula, se momosi ni qaqalo ni yava, yava, liga, kei na qaqalo ni liga.
- Lila na yava kei na liga
- Sega ni dei na kete, lomalomaca, se lualua
- Coka ni kete se kaukauwa na kete
- Cowiri ni ulu se matabuto ka vu mai na lutu ni dra ni ko tucake
- Leqa na rai ni mata
- Leqa ni suasua
- Malumalumu na tikina vakatagane se mamaca na tikina vakayalewa
- Buno kei na tatatukituki ni uto
- Malumalumu ni yago
- Mamaca na kuli ni yago
- Mamaca na gusu, mata kei na ucu.

Na Neuropathy e rawa talega ni vakavuna na malumalumu ni viciko kei na berabera ni yavalati ni nave (reflexes), vakalevu ena qurulasawa, vakavuna me veicalati na nonai lakolako edua. E rawa ni basika eso tale na leqa ni yava. E rawa ni bubura mai na yava ena vanua e nunu baleta ni sega ni dau laurai na mavoa se vuvuce, ka la'ki vakavuna na bo (ulcer). Kevaka e sega ni qaravi vakatotolo na mavoa ni yava se na bo, ena rawa ni tete ki na sui, ka rawa ni musu na yava kevaka sa mani vuvu-ca sara.

Ena vu ni matenisuka ni nave (neuropathy) kei na leqa ni veisiga e la'ki vakavuna, ena rawa ni lutu na yagona ka vakabibitaka na yalo.

Na sala uasivi mo vakalailaitaka kina na kena rawa ni tauvi iko na neuropathy, aya mo qarauna na nomu suka me toka enai vakatagedegede e gadrevi mo toka kina. Sa ka bibi me qarauni na yavamu ena veisiga me kakua ni la'ki bibi kina na mate. Na qaravi ni mate ni nave oqo e wili kina na wainimate ni mosi kei na so tale na wainimate ka gadrevi, vakatau ena mataqali leqa ni nave cava. Veitalanoa kei iratou na nomu timi ni veiqaravi se wainimate cava e ganiti iko.

Na Matenisuka kei na mateniuto/stroke:

Ko ira na tauvi matenisuka e rawarawa cake ni ra tauvi mateniuto. Era na vakacacani na sala ni dra lelevu kevaka e sivia tiko na levu ni suka kei na cholesterol kei na tubunidra ena dua na gauna balavu. Oqo e rawa ni la'ki vakavuna na mateniuto, vakacacana na mona kei na so tale na salanidra. Na mate ni salanidra edau tubu tikoga ka na la'ki vakavuna na vavaku kei na qiqo ni salanidra levu ena uto, ka vu mai ena kena veibinibini cake na mata ni uro.

Na mataqali mateniuto ka veitauvi duadua vakalevu aya na kena e tauva na salanidra levu ena uto. Na dra e kauta na cagi bulabula kei na kakana vinaka eso ki na nomu uto. E rawa ki na matani uro me latia tu se vakataotaka taucoko na salanidra ki na uto. Sa dau yaco na mosi

Chronic complications - *continued*

Coronary artery disease is the most common form of heart disease. Blood carries oxygen and other important nutrients to your heart. Blood vessels to your heart can become partially or totally blocked by fatty deposits. Chest pain (angina) or a heart attack occurs when the blood flow supplying oxygen to your heart is reduced or cut off.

Over time, coronary artery disease can weaken the heart muscle and lead to heart failure preventing the heart from pumping blood properly to the rest of the body. This can also lead to abnormal beating rhythms of the heart.

A stroke occurs when blood supply to part of your brain is interrupted and brain tissue is damaged. The most common cause is a blocked blood vessel. Stroke can cause physical problems such as paralysis, problems with thinking or speaking, and emotional problems.

Peripheral artery disease occurs when blood vessels in your legs are narrowed or blocked by fatty deposits causing reduced blood flow to your legs and feet.

Many people with diabetes and peripheral artery disease do not have any symptoms.

Other people may have the following symptoms:

- leg pain, particularly when walking or exercising, which disappears after a few minutes of rest
- numbness, tingling, or coldness in the lower legs or feet
- sores or infections on feet or legs that heal slowly.

Certain exercises, such as walking, can be used both to treat peripheral arterial disease and to prevent it. Medications may help relieve symptoms. In advanced cases treatment may involve surgical procedures.

You can lower your risk of blood vessel damage by keeping your blood glucose, blood pressure and cholesterol in the recommended range with healthy eating, physical activity, and medication. Quitting smoking is essential to lower your risk.

Diabetes and infection:

High blood glucose levels can lower your resistance to infection and can slow the healing process.

Oral health problems and diabetes

When diabetes is not controlled properly, high glucose levels in saliva may increase the amount of bacteria in the mouth and may also cause dryness of the mouth. Blood glucose (sugar) levels that stay high for long periods of time reduces the body's resistance to infection, and the gums are likely to be affected.

Periodontal diseases are infections of the gums and bones that hold your teeth in place. Even if you wear dentures, you should see your dentist at least once a year.

Signs and symptoms of oral health problems include:

- Gums that are red and swollen, or that bleed easily
- Persistent bad breath or bad taste in the mouth
- Any change in the fit of dentures.

Fungal infections /Thrush

Thrush is the term used for a common infection caused by a yeast-like fungus.

Yeast infections are often associated with diabetes, especially when the blood glucose level is very high. Persistent cases of thrush may sometimes be an early sign of diabetes.

Thrush can occur in the mouth, throat, digestive tract, vagina or on the skin. It thrives in the moist areas of the body.

ni sare (angina) se na mateniuto ni sa lailai se sa sega ni drodro na dra ka kauta tiko na cagi bulabula ki na utomu.

Ni sa toso tiko na gauna, sa na rawa kina mateniuto me vakamalumalumutaka na viciko ni uto ka vakavuna sara me mate na uto ka yaco sara me tatatukituki na yavala ni uto.

Over time, coronary artery disease can weaken the heart muscle and lead to heart failure preventing the heart from pumping blood properly to the rest of the body. This can also lead to abnormal beating rhythms of the heart.

Na stroke edau yaco ni sa leqa na drodro ni dra ki na dua na yasani nomu mona ka sa la'ki vakamavoataka na kena viciko. E vakavuna vakalevu ni sa tao na salanidra. Na mate ogo e rawa ni vakavuna na leqa ni yago eso me vaka na paralase, leqa na vakasama se na vosa, kei nai vakarau ni yalomu.

Na matenisuka ni **salanidra ena tutu ni yago** ena yaco ni sa qiqo na salanidra ena yavamu se sa vakataotaki tu ena uro ka vakavuna na lailai ni drodro ni dra ki na yavamu.

E vuqa na matenisuka vakaoqo e sega ni dau dua na kenai vakatakilakila. Eso, ena rawa ni laurai vei ira nai vakatakilakila ogo:

- mosi ni yava, vakalevu ga ena gauna ni vakaukauwa yago se ena gauna ni taubale, ka vakilai mai ni oti ga e vica na miniti na nomu vakacegu
- nunu, cucula, se e batabata na yavamu mai ra
- mavo berabera na mavo ena yavamu.

Eso na mataqali vakaukauwa yago me vaka na taubale, e rawa ni vakayagataki me qarava se tarova na peripheral arterial disease. E rawa ni vakayagataki na wainimate me vakamalumutaka na kenai vakatakilakila. Kevaka sa yaco me bibi sara, sa na rawa ni sele vakavuniwai.

Sa rawa ni ko vakalailaitaka na kena rawa ni vakacacani na nomu salanidra ena nomu qarauna me vinaka tiko nai vakatagede ni nomu suka, na tubunidra kei na cholesterol ena nomu kana kakana bulabula, vakaukauwa yago, ka gunu wainimate. Sa ka bibi mo muduka na vakatavako me kakua ni tauvi iko vakarawarawa kina.

Na matenisuka kei na mate veitauvi totolo

Ni levu na suka ena dra, sa na vakamalumalumutaka na yago me valuta na tauvimate (infection) ka rawa talega ni vakaberaberataka na mavo ni mavo.

Na leqa ni bati kei na matenisuka

Ni sega ni qarauni vinaka na matenisuka, na levu ni suka ena weli sa na rawa ni levu kina na manumanu dau vakavuna na tauvimate ena gusu ka la'ki vakavuna na mamaca ni gusu. Ni levu tikoga na suka ena dua na gauna balavu, sa na vakamalumalumutaka na sotia ni yago, ka rawa ni vakaleqa na gadroda.

Na mate na Periodontal, aya na mate ni gadroda kei na sui ka vesuka vata na batimu ena kenai tutu. Kevaka ko bati sui, e dodonu mo raica na nomu vuniwai ni bati vakayadua ena veiyabaki.

Nai vakatakilakila ni mate ni gusu ka wili kina na:

- Damudamu se vuvuce na gadroda, se dau dra totolo
- Boica wasoma na nomui cegu se e kana ca na weli e gusumu
- Vakilai ni luluqa na batimu sui.

Milamila mai na Faqasi/ Thrush

Na milamila (thrush) ogo edua na mate veitauvi ka vu mai na dua na faqasi (fungus) ka rairai vaka na isi Na mataqali milamila vakaoqo edau veiwekani vakalevu kei na matenisuka,

Chronic complications - *continued*

Oral thrush, a fungal infection in the mouth, appears to occur more frequently among people with diabetes including those who wear dentures. Thrush produces white (or sometimes red) patches in the mouth. It may cause a painful, burning sensation on your tongue. It can affect your ability to taste foods and may make it difficult for you to swallow.

In women, vaginal thrush is a very common infection. A common symptom is itching and soreness around the vagina.

Urinary tract infections are more common in people with diabetes. They are caused by micro-organisms or germs, usually bacteria.

Signs and symptoms include:

- Wanting to urinate more often, if only a few drops
- Strong smelling and cloudy urine
- Burning pain or a 'scalding' sensation on urination
- A feeling that the bladder is still full after urination
- Blood in the urine.

It is important to see your doctor immediately if any infection is suspected.

Sa bibi vakalevu sara – *kenai kuri*

vakabibi kevaka e dau levu na suka ena dra. Ni ka-kana wasoma na milamila oqo, ena so na gauna, oya sai vakaraitaki ni sa tekivu mai na matenisuka.

Na milamila oqo e rawa ni tauva na gusu, nai tilotilo, na sala ni kakana, na yagodra tabu na marama se ena kulidra. E dau ka-kana ena vanua e dau suasua vakalevu ena yagoda.

Na milamila ni gusu, na kena tutubu e loma, e laurai vakawasoma vei ira na matenisuka wili kina o ira na bati sui. Edau tutubu ena loma ni milamila, eso na ka vulavula (se damudamu) ena loma ni gusu. Ena rawa ni mosi ka tauvi katakata mai na yamemu. Ena rawa ni yali kina nai kanakana ni kakana ka vakadredretaka na nomu tilo.

Vei ira na marama, na milamila ni yagodra vakamarama, e veitauvi vakawasoma vei ira . Na kenai vakatakilakila edau laurai wasoma, aya ni milamila se wadadamu wavokita na yagodra vakamarama.

Na milamila ni isala ni suasua e dau yaco wasoma sara vei ira na matenisuka. E vu mai na manumanu ka dau vakavuna na tauvimate (bacteria).

Nai vakatakilakila e wili kina na:

- Via suasua wasoma, e rawa ni vica ga na tuturu
- Boi kaukauwa na suasua ka kabukabua nai rairai ni suasua
- E mosi se vaka me kama ni ko suasua
- E vaka ni ko sa vakila ni sa sinai tikoga na kato ni suasua
- Dra mai na suasua.

Sa ka bibi mo raica vakatotolo sara na nomu vuniwai kevaka ko kaova ni tiko vei iko na milamila.

17 Diabetes and your Feet

Diabetes may affect the feet in two ways.

Firstly, nerves which allow you to feel pain, temperature and give an early warning of possible injury, can be damaged.

Secondly, the blood supply to the feet can be reduced due to blockage of the blood vessels. Damage to the nerves and blood vessels is more likely if you have had diabetes for a long time, or if your blood glucose (sugar) levels have been too high for too long.

It is recommended that people with diabetes should be assessed by a podiatrist or doctor at least every six months. They will advise a common sense, daily care routine to reduce the risk of injuries and complications.

It is also essential to check your feet every day for any problems.

Caring for your feet

- Maintain blood glucose levels within the range advised by your doctor
- Help the circulation to your feet with some physical activity like walking
- Know your feet well
 - Look at your feet daily. Use a mirror if you need to. Check between your toes
 - Wash your feet daily in warm (not hot) water, using a mild soap. Dry gently and thoroughly
 - Never soak your feet
 - Use a moisturiser to avoid dry skin
 - Only cut your toenails if you can do so safely. Cut straight across – not into the corners – and gently file away any sharp edges.
- Choose footwear which is appropriate for your activity. Smooth out wrinkles in socks
- Check your shoes regularly for excess wear on the outside and for any rough spots on the inner lining
- Avoid foot injuries by wearing shoes or slippers around the house and footwear at the beach or pool
- Avoid contact with very hot or cold items, such as hot water bottles, heaters, electric blankets, hot sand/pathways and hot bath water
- Wear insulated boots to keep feet warm on cold days
- Corn cures and medicated pads can burn the skin. Do NOT treat corns yourself - see your podiatrist
- Get medical advice early if you notice any change or problems with your feet.



17

Matenisuka kei na Yavamu

Na Matenisuka e rawa ni vakaleqa na yavamu ena rua na sala.

Ai matai, sa na rawa ni mavoia tiko na nave ka dau vukei iko mo vakila na mosi, na katakata, ka dau tukuna totolo mai vei iko ni tiko na mavoia.

Ai karua, na dra e dau vakania na yava e rawa ni sa vakalailaitaki baleta ni sa vakataotaki tu na kena salanidra.

E na ka rawarawa sara na kena vakacacani na nave kei na salanidra (kevaka ko sa matenisuka tiko mai vakadede), se kevaka e levu vakabalavu mai na suka ena nomu dra. Era vakasalataki na tauvi matenisuka me ra dikevi mai vua na vuniwai ni yava se vua edua na vuniwai ena veiya-ono na vula. Era na solia nai vakasala ni kena vakatulewataki vakamatau na bula ka qaravi vakavinaka na bula ena veisiga me vakalailaitaki kina na mavoia se na kena yaco me ca vakalevu na tauvimate.

Sa ka bibi talega mo dau dikeva na yavamu ena veisiga de tiko na leqa.

Na kena qaravi na yavamu

- Dau raica me tikoga na suka ena kenai vakatagedegade e navuca na vuniwai
- Vukea na drodro ni dra ki yavamu ena so na vakaukauwa yago me vaka na taubale
- Kila vinaka na yavamu
- dikeva na yavamu e veisiga. Ena rawa ni ko vakayagataka na iloilo. Dikeva na maliwa ni qaqalo ni yavamu
- Savata na yavamu ena veisiga ena wai tunutunu, vakayagataka na sovu malumu. Vakamamacataka vakamalua, vakavinaka
- Kakua ni tonia na yavamu
- Lumuta me kakua ni mamaca na kulimu
- Kotiva nai qaqalo ni yavamu kevaka ko rawa ni qarauna vinaka. Kotiva vakadodonu - kakua ni kotiva na tutuna – ka faeletaka laivi na vanua momoto.
- Vakayagataka nai vava e ganita na ka o cakava tiko. Vakayagoyago vinakataka na sitokini.
- Dikeva wasoma na nomui vava, na yasana e tuba de sa mamare mai se sa vavaku na lomana.
- Qarauna me kakua ni mavoia na yavamu ena nomu dau vakaivava ena loma kei na yasani vale se mai matasawa se ena tobu ni sisili.
- Qarauna mo kakua ni tara na ka katakata se ka batabata me vaka na tavaya ni wai katakata, nai vakatakata, nai tutuvi livaliva, na nuku se gaunisala katakata se ena toni ena wai katakata
- Darama nai vava ni katakata me katakata tikoga na yavamu ena siga batabata
- Na wainimate ni somuna ni qaqalo ni yava (corns) kei na kena palasita e rawa ni vakama na kuli. Kakua ni vuniwaitaka vakataki iko na somuna ni qaqalo ni yavamu – kauta vua na nomu vuniwai ni yava
- La'ki vaqara vakatotolo nai vakasala vakavuniwai kevaka ko raica edua na ka se dua na leqa e yavamu.



18 Diabetes and Pregnancy



The key to a healthy pregnancy for a woman with diabetes is planning. Before you become pregnant discuss your target blood glucose levels or other pregnancy issues with your doctor or diabetes educator.

Note: the target blood glucose levels are tighter during pregnancy. You will need a diabetes management plan that balances meals, physical activity and diabetes medication (usually insulin). This plan will change as your body changes during your pregnancy.

If your pregnancy is unplanned it is important to work with your medical team as soon as you know you are pregnant.

Why you need to keep your blood glucose levels within the recommended range for pregnancy

Having good blood glucose management reduces the risk of the baby having any abnormalities when all of its organs are being formed in the first 12 weeks of pregnancy. As your pregnancy progresses, it is very important that you maintain good blood glucose levels otherwise extra sugar in your blood will pass to the baby who can then become big. Delivery of big babies can cause problems.

Who will help you before, during and after your pregnancy?

Apart from your diabetes health care team, other health professionals that will support you are:

- an obstetrician (a specialist doctor that looks after pregnant women)
- a neonatal paediatrician (a specialist doctor that looks after babies)
- a midwife (a nurse, who assists women in childbirth).

Exercise, especially for people with type 2 diabetes, is a key part of diabetes management before, during and after pregnancy.

Discuss your exercise plans with your diabetes health care team.

In general, it's not a good idea to start a new strenuous exercise program during pregnancy. Good exercise choices for pregnant women include walking, low-impact aerobics or swimming.



18 Matenisuka kei na Bukete



Na ki ni tiko bulabula ena gauna ni bukete vua edua na marama tauvi matenisuka, aya me tuva-ka. Ni bera ni ko bukete, veitalanoataka kei na nomu vuniwai se na nomu vuniwai ni matenisuka, na levu ni suka me taketetaki kei na veika tale eso mo qarauna.

Qarauna: na taketetaki ni vakatagedegede ni suka, sa dau dredre sara ena gauna ni bukete. E dodonu me tiko edua na nomu tuvatuva me vakasotara vakavinaka na kana, na vakaukuawa yago kei na wainimate ni matenisuka (vakalevu ga na inisulini).

Ena veisau nai tuvatuva ni sa yaco tiko na veisau ena gauna ni nomu bukete.

Kevaka o bukete vakacala-ka, sa ka bibi mo cakacaka vata kei iratou na nomu timi ni vuniwai ena gauna ga o sa kila kina ni ko sa bukete.

Na vuna e dodonu kina mo qarauna me tiko ga nai vakatagedegede ni nomu suka ena kena levu a vakaroti mo tiko kina ena gauna ni bukete.

Kevaka e qaravi vinaka tiko na levu ni suka ena nomu dra, ena rawa ni tarova na nona rawa ni buli vakaca na gone enai matai ni 12 na macawa ni buketetaki tiko. Ni sa toso tiko ga na veivula, sa ka bibi mo qarauna me vinaka tiko nai vakatagedegede ni nomu suka, kevaka e sega, ena rawa ni dewa na kena caca mai na nomu dra ki vua na luvemu ka rawa ni vakalevulevutaka na gone. Na vakasucu vei ira na gone lelevu e rawa ni vakavu leqa.

Ko cei e rawa ni vukei iko ni bera, se, ena gauna oqo, kei na gauna ni vakasucu oti?

Sa tiko o iratou na nomu timi ni veiqaravi vakavuniwai, kei ira tale na kenadau me vukei iko, aya na:

- Vuniwai me qaravi ira na marama ena gauna ni bukete
- Vuniwai me qaravi ira na gone lalai
- Nasi me vukei ira na marama ena gauna ni vakasucu.

Na vakaukauwa yago, vakabibi vei ira na matenisuka Kalasi 2, sa tikina bibi duadua ena kena qaravi ni matenisuka ni bera, se ena gauna oqo, kei na gauna ni oti na bukete.

Veitalanoataka nai tuvatuva ni nomu vakaukauwa yago kei iratou na nomu timi ni veiqaravi vakavuniwai.

E sega ni vakasama vinaka me tekivutaki e dua nai tuvatuva ni vakaukauwa yago kaukauwa sara, ena gauna ni bukete. Na mataqali vakaukauwa yago e vinaka vei ira na marama bukete, e wili kina na taubale, na vakaukauwa yago malumu (aerobics), se na qalo.



19 Diabetes and your emotions



Chronic diseases such as diabetes can have a major impact on your emotions because they affect every aspect of your life. The physical, mental or emotional reactions to the diagnosis of diabetes and the ability to cope may impact on your diabetes, your family, your friends and your work colleagues.

When a person is diagnosed and living with diabetes there can be many emotions that may be experienced. These include:

- Guilt
- Frustration
- Anger
- Fear
- Anxiety
- Depression.

Many people do not like the idea that they may have mental or emotional problems. Unfortunately, they find it embarrassing or

view it as a weakness. Having diabetes increases your risk of developing depression. Tell your doctor how you feel. If you feel you are more comfortable talking with other members of your diabetes health care team such as a diabetes educator or podiatrist, talk to them.

You need to tell someone. Then you will be referred to the right person who can help you move in the right direction.

Recommended websites:

www.diabetesnsw.com.au
www.beyondblue.org.au
www.diabetescounselling.com.au
www.blackdoginstitute.org.au
www.as1diabetes.com.au



19 Matenisuka kei na Yalomu



Na tauvimate lelevu me vaka na matenisuka ena rawa ni vakayavalata vakalevu nai vakarau ni yalomu baleta ni tara tiko na veitiki ni nomu bula taucoko.

Na kena la'ki tara na yago, na vakasama kei na yalo na dredre ko sotava tiko, ena rawa ni la'ki tara talega na nomu vuvale, o ira nomui caba kei ira na nomui tokani vakacakacaka.

Ni dua sa kune vua na matenisuka ka sa bulataka tiko, sa na rawa ni sotava tiko e vuqa na mataqali ivakarau ni yalo. E okati kina na:

- Na yalobibi ni'u sa kitaka edua na ka cala
- Na lomaocaoca
- Na cudru
- Na taqaya
- Na nuiqawaqawa
- Na yalobibi.

E vuqa na tamata era sega ni via ciqoma ni rawa ni leqa tiko na nodra vakasama se na yalodra. E ka ni rarawa, ni ra maduataka se era okata me nodra malumalumu. Na matenisuka e vakatubura vakarawarawa na bibi ni yalo. Tukuna vua na nomu vuniwai na ka e tara tiko na yalomu. Kevaka e vinaka cake vei iko mo veitalanoa kei ira tale eso na lewe ni nomu timi ni veiqaravi vakavuniwai me vaka na qasenivuli ni matenisuka se na vuniwai ni yava, tukuna vei ira.

E dodonu mo tukuna vua edua. Me rawa kina me ratou vakadewataki iko ki vua e rawa ni vukeyi iko mo vagolei vakadodonu.

Na websites e vinaka mo vakayagataka:

www.diabetesnsw.com.au
www.beyondblue.org.au
www.diabetescounselling.com.au
www.blackdoginstitute.org.au
www.as1diabetes.com.au



20 Diabetes and driving

High or low blood glucose (sugar) levels in people with diabetes can affect their ability to drive safely. People with diabetes may have developed complications such as vision problems, heart disease or nerve damage, which also can affect driving ability. It is vital that people with diabetes know what to do in order to keep themselves and others safe while on the road.



Austroads, the road transport and traffic safety authority for Australia and New Zealand, has developed guidelines for doctors to help assess their patient's fitness to drive. Diabetes and cardiovascular disease are just two of the many conditions for which there are specific medical standards and guidelines which must be met for licensing and insurance.

The main concern when driving is a low blood glucose (sugar) level. It can affect a driver's ability to react and concentrate. Low blood glucose can also cause changes in consciousness which could lead to losing control of the vehicle. People who are taking certain diabetes medication and/or insulin are at risk of hypoglycaemia.

Ask your doctor or diabetes educator if you are at risk.

Hyperglycaemia or high blood glucose levels can also affect driving ability as it can cause blurred vision, fatigue and decreased concentration.

Medical Standards for Licensing

Private and Commercial – People with diabetes who are managed without medication do not need to notify the Drivers Licensing Authority and may drive without license restriction. However, they should be reviewed regularly by their doctor for progression of the disease.

Private Licence – People with diabetes who are managed with medication, but **not insulin**, and do not have any diabetes complications do not need to notify the Drivers Licensing Authority. They need to be reviewed every five years (meeting all other Austroads criteria). If you do have any acute or chronic complications a conditional licence may be granted after review by your treating doctor.

Commercial Licence – People with diabetes who are managed with medication, but **not insulin**, need to notify the Drivers Licensing Authority in person. A conditional driver's licence may be granted subject to the opinion of the specialist, the nature of the driving task and at least an annual review (meeting all other Austroads criteria)

20 Matenisuka kei na draiva

Na tubu se na lutu ni suka vei ira na matenisuka, ena rawa ni vakatau kina se rawa ni ra vakau motoka vakavinaka se sega. Vei ira na matenisuka, sa na rawa ni tiko oti vei ira na leqa bibi me vaka na buwawa ni mata, mateniuto se na mavoia ni nave, ka rawa sara talega ni vakaleqa nai vakarau ni nodra vakau motoka. Sa ka bibi sara vei ira na matenisuka mera kila na ka mera cakava mera taqomaki ira kina kei ira na tani, e gaunisala.



Na Ausroads , na tabana e nonai tavi na kena qarauni na veitosoyaki e gaunisala e Ositerelia kei Niusiladi, sa vakarautaka edua nai vola dusidusi vei ira na vuniwai me kilai kina na nona rawa ni vakau motoka vinaka edua na draiva. Na matenisuka kei na mateniuto e rua vei ira na mate ka sa tiko na kenai vakatagedegede kei na kenai dusidusi me rawati ni bera nira vakalaiseni se vaka-inisua.

Na leqa e kauwaitaki vakalevu duadua ena vakau motoka, aya na lutusobu ni suka ena dra. Ena rawa ni vakaleqa na nona kila na ka me cakava kei nai tuvaki ni nona vakasama. Na lutu ni suka ena rawa talega ni vakavuna na veiveisau ni vakasama ka rawa ni ko sega ni taura dei kina na motoka. O ira era gunuva tiko na

wainimate ni matenisuka ka/se inisulini, o ira oqori e rawa ni lutu na nodra suka.

Taroga na nomu vuniwai se na nomu qasenivuli ni matenisuka, se, o iko beka edua vei ira oqori. Na lutu se na tubu ni suka ena dra ena rawa talega ni vakaleqa na vakau motoka baleta ni rawa ni vakavuna na buwawa ni mata, oca kei na yali ni vakasama.

Nai Vakatagede Vakavuniwai kei na Laiseni

Vakaitaukei se Bisinisi – O ira na matenisuka ka ra sega ni gunu wainimate tiko, era na sega ni tukutuku ki na Drivers Licensing Authority, ka rawa ni ra vakau motoka ka sega ni vakaiyalayala. Ia e dodonu mera dikevi wasoma mai vua na nodra vuniwai me kilai se sa yaco evei na toso ni mate.

Na Laiseni Vakaitaukei – O ira na matenisuka ka ra gunu wainimate tiko, ia era sega ni taura na inisulini, ka sega ni sa bibi na mate vei ira, era na sega ni tukutuku ki na Drivers Licensing Authority. E dodonu mera dau dikevi ena veiya-lima na yabaki (ka rawata talega na nodratoui vakatagedegede kece na Ausroads). Kevaka e sega ni bibi na nomu matenisuka, ena rawa walega ni soli vei iko na laiseni vakaiyalalayataki ni sa dikevi iko oti na nomu vuniwai.

Na Laiseni ni Bisinisi – O ira na matenisuka ka gunuva tiko na kena wainimate, ka sega ni taura tiko na inisulini, e dodonu mera lako sara ga ka la'ki tukuna ki na Drivers Licensing Authority. Ena rawa ni soli walega na laiseni vakaiyalalayataki kevaka sa vakaio kina na vuniwai ka raici iko tiko, sa na raici vata kei na mataqali cakacaka ko na vakau motoka kina, ka mo na dikevi ena vei yabaki (ka rawata talega nai vakatagedegede mai na Ausroads).

Diabetes and driving - *continued*

Private Licence – People with diabetes who are managed **with insulin** need to notify the Drivers Licensing Authority in person. A conditional licence may be granted subject to the opinion of the specialist/treating doctor, the nature of the driving task and at least a two yearly review (meeting all other Austroads criteria)

Commercial Licence – People with diabetes who are managed **with insulin** need to notify the Drivers Licensing Authority in person. A conditional licence may be granted subject to the opinion of the diabetes specialist, the nature of the driving task and annual review (meeting all other Austroads criteria).

Other factors can affect your driver's licence. Ask your doctor. Otherwise contact the Drivers Licensing Authority in your State:

- Australian Capital Territory - Department of Urban Services
Phone: (02) 6207 7000
- New South Wales - Roads and Traffic Authority NSW
Phone: (02) 9218 6888
- Northern Territory - Department of Planning and Infrastructure
Phone: (08) 8924 7905
- Queensland - Queensland Transport
Phone: 13 23 80
- South Australia - Department of Transport, Energy and Infrastructure
Phone: (08) 8343 2222
- Tasmania - Department of Infrastructure Energy and Resources
Phone: 13 11 05
- Victoria - VicRoads
Phone: (03) 9854 2666
- Western Australia - Department for Planning and Infrastructure
Phone: 13 11 56
(08) 9427 8191

If you require further information access the Austroads website
<http://www.austroads.com.au/aftd/index.html>

Na Laiseni Vakaitaukei – O ira na matenisuka ka ra taura tiko na inisuli, mera lako vakadodonu ka tukuna ki na Drivers Licensing Authority. Ena rawa walega ni soli na nomu laiseni kevaka sa vakadonuya na kenadau vakavuniwai/se na vuniwai e qaravi iko tiko, raici vata kei na mataqali cakacaka ko na vakau motoka kina, ka mo dau raici ena veiya-rua na yabaki (ka rawata kece nai vakatagedegede mai na Ausroads).

Na Laiseni ni Bisinisi – O ira na matenisuka ka soli tiko vei ira na inisulini, e dodonu mera la'ki tukuna ki na Drivers Licensing Authority. Ena rawa walega ni soli na laiseni vakaiyalalataki kevaka sa vakadonuya na vuniwai ni matenisuka, ka raici vata kei na mataqali cakacaka ko na vakau motoka kina, ka dikevi ena veiyabaki (ka rawata kece na nodratoui vakatagedegede na Ausroads).

Eso tale na ka e rawa ni vakalatilati ena kena soli na laiseni ni vakau motoka. Qai taroga vua na nomu vuniwai. Se mo veitaratara kei na tabana ni Drivers Licensing Authority ena nomu yasana (state):

- Australian Capital Territory - Department of Urban Services
Phone: (02) 6207 7000
- New South Wales - Roads and Traffic Authority NSW
Phone: (02) 9218 6888
- Northern Territory - Department of Planning and Infrastructure
Phone: (08) 8924 7905
- Queensland - Queensland Transport
Phone: 13 23 80
- South Australia - Department of Transport, Energy and Infrastructure
Phone: (08) 8343 2222
- Tasmania - Department of Infrastructure Energy and Resources
Phone: 13 11 05
- Victoria - VicRoads
Phone: (03) 9854 2666
- Western Australia - Department for Planning and Infrastructure
Phone: 13 11 56
(08) 9427 8191

Kevaka ko vinakata tale eso nai vakamacala, raica na website ni Ausroads

<http://www.austroads.com.au/aftd/index.html>

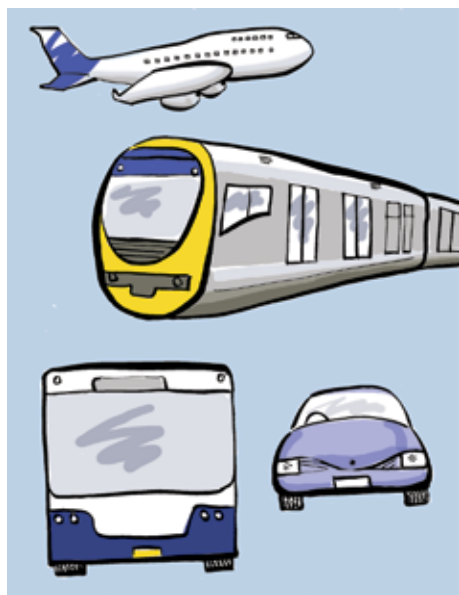
21 Diabetes and travel

Having diabetes does not mean your travelling days are over. To ensure you have a safe and enjoyable trip, be sure to plan ahead. Good preparation may seem time consuming but it will help to ensure you get the most out of your holiday.

- Discuss your travel plans with your doctor or diabetes educator. Also discuss medication adjustments for situations you may encounter such as crossing time zones, or when experiencing diarrhoea and/or nausea
- Carry several copies of a typed, signed letter from your doctor outlining your diabetes management plan, medications, devices you use to give medication (if applicable) and equipment needed to test your blood glucose level. You will also need to carry scripts for all medications (clearly detailing your name), doctors contact details, and both the name and type of medication, emergency contacts and your [National Diabetes Services Scheme card](#)



- Always wear some form of identification that says you have diabetes
- Pack more test strips, insulin, syringes, pens and other diabetes equipment than you will need for the trip. If possible, pack a spare meter in case of loss or damage
- Depending on your journey and destination, you may need to consider taking an insulated travel pack for your insulin
- Take a small approved sharps container for used lancets and syringes. Some airlines, hotels and airports offer a sharps disposal service
- Keep insulin, syringes/pens and testing equipment in your hand luggage. Do not place insulin in your regular luggage that will be placed in the cargo hold because it is not temperature controlled. The insulin may be damaged or lost



- When flying, check with the airline in advance for specific security guidelines as these are subject to change
- Customs regulations vary from country to country so it is advisable to contact the embassy of the country you're visiting before travelling
- When visiting some countries certain vaccinations are recommended. Information in regard to vaccinations can be obtained from your doctor
- The anticipation/stress of a trip or changes in routine may affect your blood glucose (sugar) levels, so you may need to check your blood glucose level more often
- Contact your airline about meal times and food available during your flight. It is also recommended that you carry your own supply of portable carbohydrates in case of unexpected meal delays or if

21 Matenisuka kei na veilakoyaki

Ni sa tiko vei iko na matenisuka e sega ni kenai balebale ni sa na mai oti na nomu veilakoyaki. Me rawa ni marautaki ka maroroi na bula, mo qarauna sara mo dau tuvatuva yani ki liu. E rawa ni da nanuma ni ka oqo edau kania na noda gauna ia ena vukea mo marautaka dina na nomu gade.

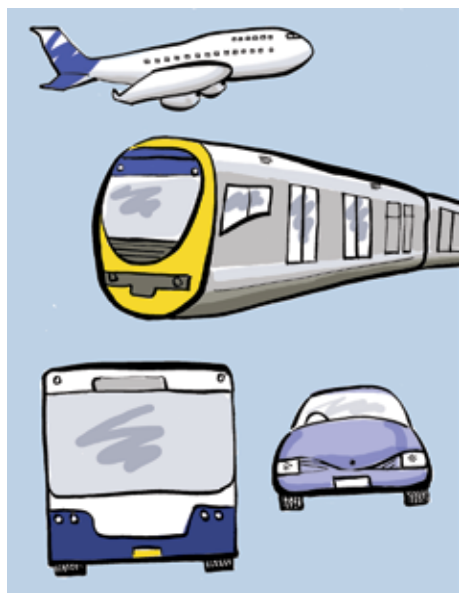
- Veitalanoataka na nomu lalawa kei na nomu vuniwai se na nomu gasenivuli. Veitalanoataka talega na veisau ni wainimate me sotava na draki duidui me vaka na veisau ni gauna, se, ni sotavi na coka ni kete kei/se na lomalomaca

- Kauta vata tiko kei iko e vica nai lavelave ni ivola taipataki, saini kina na nomu vuniwai ka tuvani kina nai qaraqaravi ni nomu matenisuka, na memu wainimate, nai yaya me vakayagataki (kevaka e dodonu) kei nai yaya me dikevi kina na nomu suka. E dodonu mo kauta tale tikoga nai vola vakavuniwai ni memu wainimate kece (me volai matata na yacamu), na nona naba ni talevoni na nomu vuniwai, na yaca kei na mataqali wainimate, na yacai koya me tarai vakatotolo ni yaco na leqa kei na nomu tikite ni National Diabetes Service Scheme



- Dau daramaka edua na ka me vakatakilakilataka ni ko matenisuka
- Tawana vakalevu na pepa ni vakadidike (test strips), inisulini, nai pamu ni cula (syringes), peni kei nai yaya ni nomu qaravi. Kevaka e rawa, tawana edua tale na mita de mani la'ki yali se ca na kenai matai

- Vakatau ena balavu kei na vanua o lako tiko kina, ena vinaka beka mo kauta tiko edua na kato ni waililiwa me tawa kina na inisulini
- Kauta tiko e dua na kava dina me biu laivi kina nai cula kei na pamu ni veicula sa vakayagataki oti. Eso na waqavuka, otela kei na rara ni waqavuka era vakarautaka na kena kavanibenu dina me vaka na kena lawa



- Me tiko vata kei iko na kato e tiko kina na inisulini, pamu ni veicula/ peni kei nai yaya ni kena dikevi na nomu suka. Kakua ni biuta na inisulini vata kei na nomu kato lelevu baleta na vanua ni kako ena waqavuka, e sega ni vakaliliwataki. Ena rawa ni yali na inisulini se vakacacani
- Kevaka ko na vodo waqavuka, tarogi iratou rawa ena kena valenivolavola na nodratou i tuvatuva ni veitaqomaki matata, baleta ni dau rawa ni veisautaki
- Na Lawa ni kasitaba e duidui ena veimatanitu; ena vinaka mo veitaratara rawa kei na 'embassy' ni matanitu ko na sikova tiko ni bera ni ko biubiu
- Ena so na matanitu ko na gade kina, e tiko nai cula mo cula rawa kina. E rawa ni ko taura nai vakamacala ni veimataqali icula mai vua na nomu vuniwai

Diabetes and travel - *continued*

you dislike the meal offered. If you take insulin with meals, do not give your insulin until your meal arrives.

- To help prevent blood clots move about the cabin at regular intervals and do chair based exercises. Drink plenty of water. Your doctor may advise you to wear support stockings
- If you are driving long distances make sure you stop regularly and take your blood glucose levels before and during your trip
- Carry a small first aid kit with you in case of minor illness or injury.

Useful websites are **www.dfat.gov.au** and **www.health.gov.au**

Travel insurance is highly recommended. Make sure it covers situations which may arise in relation to diabetes. The Australian Government has arrangements with some countries providing benefits similar to Medicare, if needed. Remember to take your Medicare card with you.

For more information, call Medicare Australia on 132 011 or visit: www.medicareaustralia.gov.au

At your destination

- Differences in activity, routines, food and stress may affect your blood glucose levels, check your blood glucose levels more often
- Food options may differ from home. It is important to maintain carbohydrate intake. If you are going to a different country do some research before you leave to help you make appropriate food choices
- Take care with food and drink choices, particularly in developing countries where food hygiene may not be adequate. Bottled water is preferable even for brushing teeth
- Protect your skin from sun burn
- Do not go barefoot. Be careful of hot sand and pavements. Check feet daily.

Matenisuka kei na veilakoyaki- *kenai kuri*

- Na nomu nanamaki/lomaocaocataka na nomu vakavakarau tiko kei na veiveisau o sotava tiko, ena rawa ni la'ki tara na nomu suka, sa na gadrevi kina mo dikeva wasoma na nomu suka
- Taroga na valenivolavola ni waqavuka me baleta na gauna ni kana kei na mataqali kakana cava e tiko. Ena daumaka kevaka ko kauta tiko na kemu kakana yabia de mani lakolako e bera na kana, se, o sega ni taleitaka na kakana e vakarautaki mai. Kevaka o dau taura na inisulini vata kei na kakana, kakua ni taura na inisulini me yacova ni sa yaco mai na kemu kakana
- Me tarovi na kena rawa ni tao na dra, mo veilakoyaki ena loma ni waqavuka vakawasoma ka kitaka eso na vakaukauwa yago enai dabedabe. Gunuwai vakalevu. E na rawa ni vakasalataki iko na nomu vuniwai mo daramaka na kena sitokini
- Kevaka o gole sara tiko vakayawa, qarauna mo kele wasoma ka wilika na nomu suka ni bera, se, ena gauna o lako tiko kina
- Kauta tiko edua na kato ni veiqaravi vakavuniwai lailai (first aid kit) de mani yaco na tauvimate se mavo.

Eso na website yaga, na **www.dfat.gov.au** kei na **www.health.gov.au**

Ko sa vakasalataki vakabibi mo volia na nomu inisua ni veilakoyaki. Qarauna ni curu tiko kina na veika e rawa ni basika ka tara na matenisuka. Na matanitu ko Ositerelia sa tiko na nona veidinadinati kei na so tale na matanitu ka solia na veiqaravi ka via via tautauvata kei na Medicare, kevaka e gadrevi. Nanuma mo kauta tiko na nomu Medicare.

Kevaka ko gadreva eso tale nai vakamacala, qiria na Medicare Australia ena 132 011 se lako ki na: www.medicareaustralia.gov.au

Nomu Yaco Yani

- Na veisau ni bula, nai tuvatuva, na kakana kei na osooso ni lomamu, ena rawa ni veisautaka na nomu suka, ka mo wilika wasoma tiko na nomu suka
- Na mataqali kakana ena dui dui. Sa ka bibi mo kania na kakana yabia me yacova rawa tiko nai vakatagedegede e vinakati vei iko. Kevaka o gade ki vanua tani, mo vakatataro ni bera ni ko biubiu me vukea na nomu na la'ki digia vakavinaka na kemu kakana
- Qarauna na nomu digitaka na kakana kei na wainigunu, vakabibi ena veimatanitu lalai, ka ni rawa ni sega ni dau vakarautaki vakasavasava kina na kakana. E vinaka cake na gunu mai na wai tawa-i-tavaya ka sava talega kina na bati
- Maroroya me kakua ni kama na kulimu ena katakataka ni siga
- Kakua ni lako ka sega ni vakaivava. Qarauna na nuku kata kei na simede katakata. Dikeva na yavamu ena veisiga.

22 Need an Interpreter?

A free telephone interpreter service is available for people who may have difficulty in understanding or speaking English. This service is available through the Translating and Interpreting Service (TIS) of the Department of Immigration and Multicultural and Indigenous Affairs (DIMIA).



TIS have access to professional interpreters in almost 2000 languages and dialects and can respond immediately to most requests.

Accessing an interpreter:

Simply ring the Translating and Interpreting Service on 131 450.

Explain the purpose for the call e.g. wanting to talk to an educator/dietitian at Diabetes NSW & ACT.

The operator will connect you to an interpreter in the required language and to an Diabetes NSW & ACT health professional for a three-way conversation.

This free service has been set up by the Diabetes NSW & ACT and will be promoted with assistance from the Australian Government Department of Health and Ageing.

22 Gadreva na Vakadewavosa?

E tiko na vakadewavosa ena talevoni ka sega ni saumi, vei ira e dredre na nodra kila se vosataka na vosa Vakavavalagi. Na veiqaravi ogo e tiko ena tabana na Translating and Interpreting Service (TIS) ena ruku ni Tabana ni Curuvanua na Department of Immigration and Indigenous Affairs (DIMIA).



Ena veitaratara na TIS kivei ira era vakaivola ena vakadewavosa ena 2000 na veimataqali vosa ka rawa ni ratou solia na veivuke ki na levu na kerekere e yaco yani vei iratou.

Na Veitaratara kei na dauvakadewavosa:

Qiria na Translating and Interpreting Service ena 131 450.

Vakamacalataka nai naki ni nomu qiriqiri e.g. o gadreva beka mo vosa vua edua na qasenivuli/ vuniwai ni kakana ena Diabetes NSW & ACT.

Ena semati iko na daunitalevoni kei na dua na dauvakadewavosa ena vosa e gadrevi, vata kei na dua mai na Diabetes NSW & ACT, mo dou veivosaki na lewe tolu.

Na veiqaravi ka sega ni saumi ogo, eratou vakatora na Diabetes NSW & ACT ena nodratou veivuke na Australian Government Department of Health and Ageing.

23 National Diabetes Services Scheme (NDSS)

The NDSS is a federal government funded program, administered on behalf of the government by Diabetes NSW & ACT.

The NDSS provides free syringes and needles for those requiring insulin, as well as blood and urine testing strips at subsidised prices to those who are registered. Registration is free and you are only required to register once unless your treatment changes to require insulin.

You do not need a doctor's prescription to purchase NDSS products for diabetes management.

Registering for the NDSS

Once you have been diagnosed with diabetes, your doctor or credentialled diabetes educator can register you with the NDSS. If you are not sure whether you are registered with the NDSS, or want more information, call Diabetes NSW & ACT on 1300 342 238.

Where to buy NDSS products

You can buy products at Diabetes NSW & ACT offices or through pharmacy sub agents. You can also order your products from Diabetes NSW & ACT by phoning 1300 342 238 or visiting www.diabetesnsw.com.au.

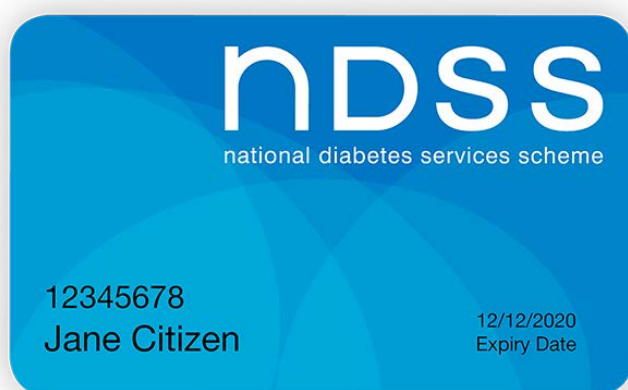
Your products will be mailed to you free of charge.

Who should register for the NDSS?

Australian residents that have been diagnosed with diabetes by a doctor and who hold a current Australian Medicare card or Department of Veteran Affairs file number should register.

If you are a visitor to Australia and from a country with a Reciprocal Health Care Agreement, you may be entitled to temporary registration to the NDSS.

Please call Diabetes NSW & ACT on 1300 342 238 for further information.



23 National Diabetes Services Scheme (NDSS)

Na NDSS e vakailavotaka na matanitu levu, ka cicivaka na Diabetes NSW & ACT ena vukuna na matanitu.

Na NDSS e solia wale nai cula kei nai pamu ni veicula vei ira era gadreva na inisulini, ka vakatalega kina na kena soli na pepa ka dau vakayagataki ena kena dikevi na dra kei na suasua enai sau rawarawa sara vei ira era rejisita tu. Na kena vakacurumi na yacamu ena sega ni saumi ka o na rejisita ga vakadua vakavo kevaka sa veisau na veiqaravi e soli tiko vei iko ka me sa soli vei iko na inisulini.

Ena sega ni vinakati nai vola ni vuniwai mo qai rawa ni la'ki volia kina nai yaya mai na NDSS me qaravi kina na nomu matenisuka.

Rejisita ena NDSS

Ni sa kune ga vei iko na matenisuka, sa na rawa sara vua na nomu vuniwai se o koya na qasenivuli vakaivola ena matenisuka, me rejisitataki iko e na NDSS. Kevaka e sega ni matata vei iko se ko sa rejisita oti ena NDSS, se o gadreva eso tale nai vakamacala, qiria na Diabetes NSW & ACT ena 1300 342 238.

Na vanua me'u volia kina nai yaya ni NDSS

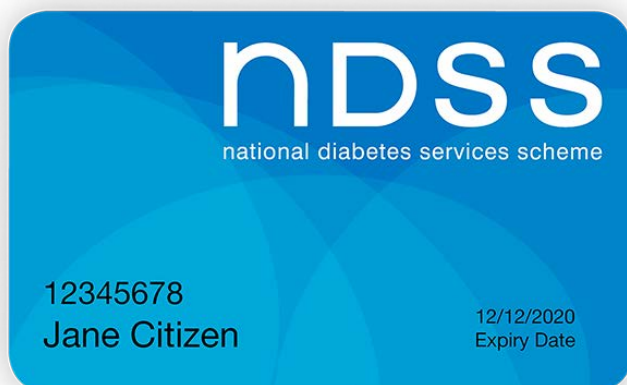
E rawa ni ko volia na kenai yaya ena valenivolavola ni Diabetes NSW & ACT se ena kemesi era kenai itini. E rawa talega ni ko solia na nomu ota vei iratou na Diabetes NSW & ACT ena nomu qiria na 1300 342 238 se sikova na www.diabetesnsw.com.au. Ena vakau wale yani na nomui yaya ena meli.

O cei e dodonu me rejisita ena NDSS?

O ira na kai Ositerelia era tauvi matenisuka ka sa vakadinadinataka mai na vuniwai ka sa tiko na nodra Australian Medicare, se, era vakanaba ena Department of Veteran Affairs; o ira oqri e rawa ni ra rejisita.

Kevaka ko vulagi mai ki Ositerelia ka o gole mai ena dua na matanitu ka sa tiko oti na nona veidinadinati kei Ositerelia ena ruku ni Reciprocal Health Care Agreement, ena rawa beka ni soli vei iko mo rejisita vakalekaleka ena NDSS.

Yalovinaka ka qiria na Diabetes NSW & ACT ena 1300 342 238 kevaka o gadreva eso tale nai vakamacala.



24 Diabetes NSW & ACT Diabetes Council

Diabetes NSW & ACT is a non-profit, non-government charity dedicated to helping all people with diabetes. It provides:

- education programs
- conducts public awareness campaigns
- funds research into diabetes management and the search for a cure
- advocacy, (protecting the rights of people with diabetes).

Diabetes NSW & ACT has a network of branches and support groups to provide support and encouragement for people affected by diabetes.

Our Customer Care Line has diabetes educators, dietitians and exercise physiologists available to provide personalised and practical assistance to benefit people with diabetes and their carers.

To find out about all the benefits of becoming a member of the Diabetes NSW & ACT contact 1300 342 238.

24 Australian Diabetes Council

Na Diabetes NSW & ACT ei soqosoqo ka sega ni kena yavu me vakatubu ilavo, e sega ni soqosoqo vakamatanitu, ia sa musuki koya me vukei ira na lewenivanua kecega era tauvi matenisuka. E solia na veiqaravi oqo:

- Na porokaramu ni vuli
- E vakacicivaka na porokaramu ka rawa ni vakarabailevutaka na nodra kila na lewenivanua na mate oqo
- Vakailavotaka na kena vaqarai na sala me qaravi vakavinaka cake kina na matenisuka ka vaqarai nai wali ni mate oqo
- Me veitokoni vei ira na matenisuka (maroroya na nodra dodonu o ira era tauvi matenisuka).

Na Diabetes NSW & ACT e tiko na nodratou ilawalawa ni veivukei ena veitabana kei na veisoqosoqo, me ra solia na veitokoni kei na veivakayaloqataki vei ira era tauvi matenisuka.

Ena neitou tabana ni veiqaravi na Customer Care Line, era tiko kina na qasenivuli ni matenisuka, vuniwai ni kakana kei ira na vuniwai ni vakaukauwa yago ka rawa ni ra solia na veivuke yaduadua kei na veivuke yaga me ra vukei kina na tauvi matenisuka kei ira era veiqaravi vei ira.

Mo vakasaqara nai tukutuku kece ena yaga vei iko kevaka ko sa lewe ni Diabetes NSW & ACT, vetaratara ena 1300 342 238.

*a Shared
Voice*
FOR DIABETES

For more information call us on

1300 DIABETES
1300 342 238

australiandiabetescouncil.com



ABN 84 001 363 766 CFN 12458

STREET ADDRESS
26 Arundel Street
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