



# IMAGE AWARENESS WELLNESS INSTITUTE

## *Fiber and Blood Sugar*

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## INTRODUCTION

No one understands the details of a health problem more completely than someone who suffers with the problem. In this issue of the newsletter we have an article which details Heather Foster's discoveries and experiences with Type I or Juvenile Diabetes.

One of Heather's most important discoveries has been the tremendous value of soluble fiber (GR<sup>2</sup> Control Appetite Reducer #3820) in regulating her blood sugar and insulin requirements when she is consuming carbohydrates. Heather has found that taking this product with carbohydrates such as rice protects her from the wild swings in blood sugar she would otherwise experience.

Most of us are not Type I diabetics, but the powerful ability of a high quality fiber to stabilize blood sugar and reduce insulin requirements and secretion for the average person should not be overlooked. With many creatures the insulin gene is the aging gene. The harder we work

the insulin producing machinery of the pancreas the shorter our lives will tend to be. Excess insulin promotes inflammation in the body. This is the first stage in the development of many degenerative diseases.

A lower insulin production generally means a higher energy level, weight loss rather than weight gain, and reduced risk of inflammatory and wear and tear diseases. Heather's experience follows:

## DIABETES 101

...TO PREVENT 911!

*By Heather Foster  
September 26, 2006*

If you are a diabetic, or know a diabetic, you should be able to understand how the blood sugar levels in the body work and how hard it is to just consume a piece of bread without having to suffer all night long because your blood sugar levels are out of control. There are a few things I have learned since becoming diabetic and working with Jim regarding how to control my diabetes and the general nature of diabetes.

I was diagnosed with Type 1 diabetes at the end of last October at the age of 22 (2005). I knew nothing about the disease, except that it had something to do with food and the body rejecting the food. Now I

know the differences between the types of diabetes, and what can help make living with diabetes easier.

Type 1 diabetes, often called "juvenile diabetes" or "insulin dependent diabetes" is the least common form of diabetes worldwide. WebMD.com states "Type 1 diabetes occurs when the body's own immune system destroys the insulin-producing cells of the pancreas (called beta cells)." It also states that "Although the disease usually starts in people under the age of 20, type 1 diabetes may occur at any age. The disease is relatively uncommon, affecting 1 in 250 Americans. The condition is more common in whites than in blacks and occurs equally in men and women."

Type 2 diabetes is the most common. WebMD.com describes Type 2 diabetes as "... often called



non-insulin dependant diabetes, is the most common form of diabetes, affecting 90% - 95% of the 18.2 million people with diabetes."

There is also gestational diabetes, which only develops at pregnancy and then usually goes away, but sometimes can develop into Type 2.

Usually when you develop diabetes you have very specific extreme symptoms. For me it was the following: extreme thirst (drinking about 2 gallons of water a day and still having a dry throat), extreme hunger (out-eating my husband by about 3 times), right-leg started thumping the last couple weeks (lack of potassium), dry throat, dry lips, dehydration EVERYWHERE (skin and body), fuzzy eye-sight, impaired hearing, and more.

So what happens with diabetes? Basically, to put it in easy terms; a normal healthy person's body is able to take in food, and then their body knows how much insulin to let out of their pancreas to distribute the blood sugar amongst the blood cells, feeding the nutrients to the blood stream.

In a diabetic person's body, it either can't distribute the amounts of insulin properly with the food consumed, or in my case, does not produce any insulin at all. As a result, I have to give myself a shot of insulin before every meal. And since I don't produce any insulin at all, I also have to take a "night-time" shot of background insulin that works as a slow-release insulin for even when I don't eat food.

In theory, one would think that the synthetic insulin should work just as good as human insulin, right? Nope. Because the human body knows precisely how much insulin to distribute with anything you eat. So if a normal person consumes a candy bar or juice, the body lets out just enough insulin to distribute the "sugar" to the blood cells.

But with a diabetic person, we have to guess. We have to say, okay,

this piece of bread has 20 carbs per slice; that means I need to take approximately this much insulin which will take care of it in 3 hours. But this doesn't always work! Although we have a "calculated method" of how much insulin to take for each carbohydrate consumed, sometimes the specific carbohydrate eaten may last longer in the body than the insulin does, which means long nights of taking "correction shots" of more insulin to try and keep the body at the levels it should be at. You see, a normal body should always be between 80 to 90 blood sugar level.

But the way a diabetic works is that, you eat a piece of bread, take



your insulin you think should cover it, but still after about 30 minutes your blood glucose level can be at 250 to 300 (called "hyperglycemia"). This effects the large blood vessels in the long-term; things such as your heart or kidneys. And it can stay in that range ALL night long, even with correction shots.

Or, if you take too much insulin, you can go into "hypoglycemia" which is low blood sugar (under 70) in which case you get shaky, irritable and feel sick. With low blood sugars, the small blood vessels can be at risk for damage... things like losing your feet (amputa-

tion) and eye-sight at an early age.

So what do you do? I have learned to eat better, and to avoid high-carb meals. Things like pasta, rice, beans, breads, potatoes and all sugar are completely out of my diet. If I do eat them, I eat a small amount, or the recommended "serving" size on the back of the box or listed in diabetic serving sizes in different books you can get on nutrition.

Now I eat more vegetables, meat, cheeses and drink a LOT of water. Yes, there are diabetic sodas and low-carb meals out there. But the sodas are usually full of aspartame or splenda, and those are just not that great for you. The low-carb "meals" such as frozen or canned meals are full of sodium and preservatives which are not at all good for the common person, let alone a diabetic! And also, a diabetic person should try not to eat too many fats or excess sodium.

But there are a lot of good snacks out there now for the diabetic that actually taste good! So for a treat, every once in a while, I will get a carb-select smoothie by Dannon. I haven't seen any by Yoplait yet. Yoplait yogurts may taste good, but they are FULL of sugar! About 45 grams! And about 5 grams of sugar (1 teaspoon) can raise the blood sugar levels to about double. So when I have a low blood sugar, I have to consume about 5 grams of sugar to get it up to where it should be.

Other good snacks are low-carb chocolate ice-cream bars. The healthiest natural sweetener to use is Stevia (sold at Image Awareness) because it is made from a plant, and does not have any sugar alcohols or un-natural or artificial ingredients in it that the body does not understand. It does taste bitter if you use too much, but Jim makes really good rhubarb sauce (garden strawberries, raspberries and stevia) and natural sodas with raspberries using stevia that I would highly recommend trying!



Things like one small cracker or a half a piece of fruit would send my blood sugar levels to about 280 and stay there thru a couple correction shots! My husband would ask, "did you forget your fiber tablets?" AHHH! Yes, I did forget. I am amazed at how essential it is to take the fiber tablets; especially seeing that it is important for the body to get some natural carbs such as whole wheat and grains.

So how do you control the blood sugar levels? I have learned a couple of things really work well. Drinking a protein shake like our GR2 Chocolate or Vanilla meal replacement protein shakes helps keep you feeling full for a good while, and helps give you long-term energy for about 6-8 hours. Protein is much better long-lasting energy, rather than quick carbohydrates like Gatorade or Energy bars. And it's much better for your body to have the vitamins and minerals that are in the GR2.

The other thing I found is that taking the GR2 Appetite Reducer, a slow-release fiber tablet, helps the blood sugar stay level. *It's amazing! I can take 2 tablets before eating a regular portion of pasta, and my blood sugar levels stay normal! I still have to take insulin, but I don't have to take correction shots, and I don't have to worry about feeling sick because my blood sugar was high for 12 hours, even with correction shots.*

When Jim recommended fiber to me, he told me how it keeps the blood sugar levels from getting to high or too low. I wasn't really sure how it would work, so I just tried 2 tablets once a day. On days I would forget my fiber tablets, I noticed that I had a very hard time controlling my blood sugar levels.

So then I decided to experiment. Last week I tried a serving size of some homemade macaroni and cheese (1/2 cup) and took my insulin that would normally not cover me, but should in theory cover me. I took my fiber tablets and ate. And to my surprise, my blood glucose level actually got low!

The insulin that normally wouldn't have worked, worked too well with the fiber! I am very surprised at how well it worked. So now I know how crucial fiber is for a diabetic. And it has to be in its pure form; eating 16 cups of broccoli won't do what the fiber tablets have done for me.

So here's my advice to you if you are a diabetic or know a diabetic: Don't eat high carbs. Avoid them. Eat things like vegetables (fresh, or if cooked, steamed is best), cheeses for snacks, low-fat meats, and low-sugar fruits like apples, pears, strawberries that aren't very ripe, plums are okay, a half of a banana doesn't usually do too much.

High sugar fruits are: pineapples, grapes, watermelon, very ripe cherries, and especially exotic fruits are usually really sugary. Buy yourself a diabetic cookbook to help

you learn how to make foods taste good with natural spices and herbs. Stay away from canned or salty foods as much as possible. Avoid sugar; get rid of your caffeinated sodas and high sugar foods as much as possible.

Beware of "blended sugars" like the brown sugars that say "lower sugar"... they still have sugar in them. My husband's grandma was using low-carb brown sugar thinking it had no sugar in it. It does! It's just half Splenda, which isn't that good for you to consume because it is still under observation as to what the side effects of it are.

Try to keep your blood sugar levels at 80 to 100 instead of the "diabetic range" of 70 to 150 (or whatever your range is). It's best to keep your levels more at that of a normal persons to avoid problems down the road. Read *Dr. Bernstein's Diabetes Solution* for more details on the importance of maintaining stable blood sugar levels.

And for nutritional products, try a protein shake, like the GNLD GR2 protein meal replacement shake to keep energy levels high as well as supplying important vitamins and minerals. And try the fiber tablets when consuming high-carb meals. They really work for me.

And finally, for a good supplement, Jim recommends the Active 40 plus, because there are a lot of enzymes and other things in the







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Active 40 plus that are VERY good for the diabetic. We just can't hold onto the nutrients like the normal person can! It is now my understanding, from a lot of research (and more to come), that supplementation is essential to the health of any person, especially diabetics, to stay healthy and live longer.

### A FEW WORDS FROM JIM

The GR<sup>2</sup> Appetite Reducer consists of a number of soluble fibers which form a gel in the stomach. This gel slows the absorption of sugars from the foods we eat reducing the rate at which the body releases insulin. Low insulin levels increase energy production in the body and promote weight loss if one is obese.

More stable energy delivery from the foods we eat provides benefit not only for the diabetic and those who are overweight, but also will benefit those with a tendency to have episodes of low blood sugar or hypoglycemia.

The fiber in the Appetite Reducer, specifically the Konjac fiber, can absorb up to 50 times its volume of water. The product will provide optimal benefit if adequate

water is consumed. This prevents the fiber from dehydrating the digestive tract and also facilitates the formation of the gel in the stomach. All of the fibers in the Appetite Reducer have been shown to have the ability to improve measurements of blood fats and blood sugar.

The GR<sup>2</sup> Meal Replacement is designed to elicit virtually no insulin release. It is an ideal meal replacement or snack for those with blood sugar issues. The product is also nutrient fortified providing approximately a third of an individual's daily nutrient requirements. It also has a wonderful taste.

A third component of the GR<sup>2</sup> is the Thermogenic Enhancer. This product supports thyroid function during weight loss and also aids in

detoxification of the body during weight loss. Toxins released during weight loss have been shown to cause weight loss to plateau. The GR<sup>2</sup> program also includes tasty bars which can function as a mini-meal.

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