

A Functional Approach to Type 2 Diabetes

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Diabetes is recognized as one of the top chronic illnesses plaguing our society today. Here are some quick statistics on the prevalence of both diagnosed and undiagnosed diabetes:

- An estimated 30.3 million people of all ages—or 9.4 percent of the U.S. population—had diabetes in 2015.
- This total included 30.2 million adults aged 18 years or older (12.2 percent of all U.S. adults), of which 7.2 million (23.8 percent) were not aware of or did not report having diabetes.
- The percentage of adults with diabetes increased with age, reaching a high of 25.2 percent among those aged 65 years or older.
- Compared to non-Hispanic whites, the age-adjusted prevalence of diagnosed and undiagnosed diabetes was higher among Asians, non-Hispanic blacks, and Hispanics during 2011–2014.¹

What Comes First, the Sugar or the Insulin?

Based on these statistics, one-third of the American population has diabetes and almost one-third of that group hasn't been diagnosed yet. What is causing this epidemic and what can we do to stop it?

We can look to food/chemical sensitivities and lifestyle choices for both causes and solutions. What comes first the sugar or the insulin? The body is designed to break down sugar, send it to the blood stream to be met by the insulin and be chaperoned into the cell for storage or energy. When the body is over loaded with sugar, insulin loses its ability to be effective. Eating a diet high in processed sugar and low in fiber sets the system up for failure.

Got milk? Avoiding cow dairy has been associated with reduced risk of insulin resistance and metabolic syndrome.² Cow dairy has also been associated with an increase in Type 1 diabetes.³ Its not new information that food/chemical tolerance is both clinically important and patient specific. Dr. Jaffe was able to show that by reducing the affects of the immunological load, removing excess and damaging toxins, repletion with patient specific nutrients, glycemic control can be improved.⁴

Five Steps to Health

When first diagnosed, patients can feel overwhelmed and confused by all of the information provided by Dr. Google. Type 2 diabetes is completely reversible.¹ The LRA by ELISA/ACT food/chemical sensitivity test will identify triggers of the immune system. Avoid the sensitivities and help patient's with lifestyle education using these five steps:

1. Cut the sugar - we must help the patient understand the food/lifestyle choices that sets the insulin-resistance-ball in motion. More insulin is not what the body needs. A diet without refined sugar is a great place to start.
2. Exercise - anyone with a high sugar diet can be at risk for Type 2 diabetes, those that are overweight are considered to be at a higher risk. Begin a simple exercise routine even if that

means taking the dog for a 20-minute walk each day.

3. Eat more fiber - fiber slows the release of sugar into the blood stream. Fiber can be found in dark leafy greens, berries, legumes, nuts and seeds.
4. Start the day with protein - encourage a better blood sugar balance by not having starchy carbs for breakfast. Cortisol's job is to break down sugars to provide energy and help balance blood sugar. Starting the day high in starchy carbs doesn't set this process up for success.
5. Plan your meals - be prepared! If there aren't sugar snacks and high sugar foods in the house, they won't be eaten. The same goes for being at work or out and about. If you've planned appropriately the temptation to stop and grab something isn't as strong.

In this practice it is necessary to address other aspects of the patient as a whole. Acupuncture is considered as an option to improve the flow of blood and qi, and facilitate systemic healing. Often I will fall back to Electronic Meridian Imaging as a way to evaluate the overall meridian system, identify imbalances, and treat to balance the overall system. I have found this clean, simple, and very visual for the patient to understand what we are trying to accomplish. On follow-ups I may then also treat condition-specific points to augment the ongoing healing process.

I will also pursue physical evaluation and chiropractic care. As a chiropractic physician I must recognize the mechanical component of a patient's overall wellbeing—if the underlying mechanics aren't right, then that puts everything else in a compromised state. Again, not every patient is treated with the same techniques, or in the same spinal regions—consider what that particular individual needs to move them forward toward optimal health?

Always Document

I have written before that there is a standard of care in this country that is clearly defined. It is dangerous to think that because we are acupuncturists, we do not need to keep records to the same degree as medical doctors do. We must think outside our own bubble, in terms of health care in general. Ultimately, it is the patient that we take care of, not the insurance companies, attorneys or other doctors.

Recording a subjective improvement in pain is good, but documenting objective improvement with your care is necessary. Whether or not you feel obligated to document your case—responsible patient care mandates it. Acupuncture deserves every bit of respect that any other health profession does, but that respect comes with a level of responsibility. Yes, it is a pain and it takes more time, but like it or not, documentation paperwork is part of professional health care.

Thai Veggie Salad (serves 4)

- 1 red bell pepper sliced thinly, lengthwise
- 1 green bell pepper sliced thinly, lengthwise
- 1 medium cucumber, shredded
- 2 cloves garlic, minced
- 1 medium red onion, sliced thinly
- 2 medium zucchini, spiraled
- 1 carrot, shredded
- 1 small bundle cilantro chopped (optional)

Directions: After prepping, put all veggies in a large bowl and mix.

Dressing

- 2 tbsp. peanut butter

- 2 pinches dried red pepper flakes
- 2-4 tbsp. avocado or olive oil

Directions: Briskly stir oil and peanut butter until smooth. Sprinkle in pepper flakes. Toss veggies with dressing and top with cilantro. Add your choice of protein.

References

1. National Center for Chronic Disease Prevention and Health Promotion. National Diabetes Statistics Report 2017. *Diabetes.org*, 2018.
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3. Martin JM, Trink B, et al. Milk proteins in the etiology of insulin dependent diabetes mellitus (IDDM). *Ann Med*, 1991; 23:447-452.
4. Russell J. The Alkaline Way. *DrRussellJaffe.com*, 2018.

JUNE 2018