

"Live Life First, Be Diabetic Second"

The Secret to My Success with Diabetes

By Sheri Colberg-Ochs, PhD

The secret to my overall success, both professional and personal, is that I have made a conscious choice to live my life by one guiding principle: "Live life first, and be diabetic second." In the beginning, I'm not sure it was even a conscious choice (I was only four years old at diagnosis), but rather just an integral part of my personality. I am not one to let obstacles block me from reaching my goals, at least not without attempting to find a way to overcome them first. Having diabetes has undeniably been one of the greatest challenges to living my life the way I want to, but it has almost never been an insurmountable one.

It is hard to even imagine what life would be like without diabetes when you get it as young as I did. I really don't remember much about being diagnosed with type 1 diabetes. I know we were visiting my grandparents in Kansas the summer I was diagnosed, and I recall feeling kind of sluggish and tired all the time and moping around. My mother had never heard of diabetes before I got it and was pretty clueless about how to manage it.

The biggest irony was that my mother had avoided becoming a nurse because she hated needles, but the doctors wouldn't let me out of the hospital before she learned how to give me shots. In later years, she told me that she practiced for days shooting water into an orange while I was in the hospital during my one-week stay. When she gave me my first shot in my arm, she jabbed the needle in hard enough to get through an orange peel (but way too hard for my skin), and it rebounded back out. I have no recollection of this event, but apparently I said, with tears streaming down my face, "Mommy, go practice on the orange some more."



Actually, I will be the first one to admit that diabetes has, in many ways, been a blessing in disguise. It likely had a positive impact on my family's overall health, mainly because my mother made the decision that all four of us (my parents, my older brother, and me) would eat the same diabetes diet that was prescribed for me at the time—which included a balanced diet of carbohydrates, protein, and fat, lots of vegetables and fruits, and very limited intake of sweets and refined foods.

What bothered me the most at the age of four about having diabetes was not the daily shots, but rather it was the fact that I had to give up my favorite cereal,

Froot Loops™, which contained too much sugar to be on my prescribed “diabetic diet.” As an adult, I can’t stand that cereal and would never eat it, even though now,



I could by taking a shot of rapid-acting insulin to cover it. To this day, I can remember the exact cabinet in the kitchen where we used to store my beloved cereal, even though we moved a year later when I was only five.

Did I miss out on having a “normal” childhood filled with sugary cereal, cake, candy, ice cream, and other sweets because of diabetes? Honestly, I don’t think so. As a consequence of living with me, my own children have a much healthier diet than most

Americans, and they are growing like weeds and seldom ill.

I truly believe that diabetes has been a positive, shaping force in my life when it comes to exercise and physical activity in general. While many people view the current recommendation to exercise regularly for better diabetes control as a punishment, I fully embrace it and use it as an excuse to put my workouts first! I usually schedule work meetings around my workouts instead of during them. In fact, I started exercising regularly way before it was trendy and known to be good for your health (and blood sugar control).

I was always active as a kid, playing in the woods, building forts, and just being a tomboy. I also loved to swim and spent as much time in the pool every summer as I possibly could. When I was a preteen, I began exercising regularly on my own and through organized sports teams because physical activity was the only thing that allowed me to feel like I had any control over my blood sugar way back in the “dark ages” of diabetes, when no one had blood glucose meters (we only had inaccurate urine testing). I instinctively knew by the way I felt physically after workouts that being active helped lower my blood sugars into a more normal range and helped keep them that way.

To this day, I still exercise six to seven days a week, just like I started doing regularly over thirty-five years ago. I don’t ever feel resentful of having to make exercise an integral part of my daily life; on the contrary, I look forward to my daily workouts, vary them to keep working out fun and to keep myself injury-free, and lament the days I am forced to be less physically active. When people ask me how I manage to juggle a full-time career, a happy marriage, and three sons, I tell them simply, “I work out.” Doing so gives me the endurance to do everything I need to get done in a day. (I also enjoy my eight hours of sleep a night



whenever possible.)

You certainly don't have to get a PhD in exercise physiology, like I did, to understand the metabolic changes that occur with exercise, but learning why it is so beneficial can be very motivating. In short, due to its positive effect on metabolism, physical activity is instrumental in the control of your blood sugar and in the prevention of the myriad potential complications related to poorly-controlled diabetes. You can virtually "erase" overeating mistakes with exercise, and you can keep yourself from getting other health conditions (like heart disease). I'm in excellent health because of my lifestyle choices, despite having diabetes for over four decades.

I think that diabetes also gave me an early calling as a healthy lifestyle expert. When I was about twelve years old, I spent a week of my summer vacation in Kansas with my maternal grandmother, who had been diagnosed with "borderline" type 2 diabetes. That week, she was on yet another diet to lower her weight, and I decided to help her with dieting while I was there—sort of like a personal trainer or fitness coach. I weighed her in every morning, helped her measure out her food (like cottage cheese—yuck!) for meals, and made her run laps around her backyard.

At the start of the week, we made a deal that she would pay me \$1 for every pound she lost that week with my help. She lost eight pounds—was I ever a rich kid! Little did I know back then that she probably lost a whole lot less after the first week and then gained it all back over time, leading her to try yet another diet later on. In retrospect, I remember her always being about the same body size and shape every time I saw her.

Back then my grandmother was the only other person I knew with diabetes. Later on, when I was in graduate school working on my Master's degree in exercise physiology, she started suffering from myriad cardiovascular complications of diabetes—including having a heart attack, followed two years later by a major stroke and a series of smaller ones that left her incapacitated during her six remaining years of life. By the time my grandmother died, she had become bedridden. Worse yet, she was unable to communicate or feed herself for most her last six years. She'd also had to have partial amputations of both of her lower legs due to chronic ulcers related to her diabetes. During one visit, I looked at her as she lay in her nursing home bed and thought, I don't want to live like that.¹



¹ Due to the influence that my grandmother unknowingly had on my life, I dedicated one of my earlier books (*The 7 Step Diabetes Fitness Plan: Living Well and Being Fit with Diabetes, No Matter Your Weight*) to her in memoriam.

As a consequence, much of my professional life has focused on how to stay healthy with diabetes to order to avoid complications and maintain my quality of life. I remember reading about all the horrible things that diabetes was potentially going to do to me when I was in high school; at the time, I secretly believed that I was going to die before I got a chance to go to college. Since my thirty-year high school reunion was just held this year, I have made it quite a bit longer than I expected to back then!

To me, it's all about living well while you are alive. That's why as part of my career, I preach about how important a healthy lifestyle is to maintaining your quality of life (whether you have diabetes or not), and that longevity without health is not necessarily a good thing; it should not be your primary focus.

To be honest, the only thing that diabetes has kept me from doing that I really wanted to do was to take a scuba diving class while in graduate school. It turned out that the class was a NAUI (National Association of Underwater Instructors) scuba diving certification course, and as far as I know, that organization still does not certify people with type 1 diabetes, although PADI (Professional Association of Diving Instructors) does. I was kicked out because I have type 1 diabetes after going through a physical as part of the class, and I was devastated by it (at least temporarily).



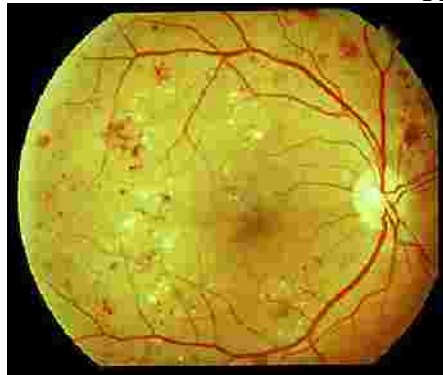
I had never been thwarted by diabetes before, but that time I was. My grandmother had suffered her first stroke around the same time, which led me to think really negatively about diabetes for several months and have a “poor me” attitude.

Since then, I have met some individuals who teach and certify people with type 1 diabetes to scuba dive in the Virgin Islands. Even though I haven't taken the class, simply knowing that I could go scuba diving now if I wanted to is enough to make me happy.

Speaking of feeling devastated or defeated by diabetes, I have only felt that way on two other occasions in my forty-plus years with the disease. One was when I got my first blood glucose meter in my mid-twenties and had to fully face that I actually have diabetes. (What a revelation after twenty years with it, right?) I think that getting it at the age of four kept me from dealing with it psychologically until I was older—at which point, I finally got the tools to try to more effectively control it (i.e., my first blood glucose meter).

I felt frustrated while attempting to get a handle on my blood sugar. In the early years (pre-meters), I did the best that I could and usually followed a good diet, but I never really knew what my blood sugar was doing and could not do anything to lower it when I could feel that it was too high—except for exercising. When I finally got a blood glucose meter while attending a diabetes camp (as an adult

collecting data for my first research study), I found out that my blood sugar was harder to control than I thought. I could do everything right and still wake up in the morning with a blood sugar around the 200 mg/dL range. For a while, I wrote down every morsel of food that I ate, drop of fluid that I drank, and every activity or event in my life, to figure out the effect of various foods, drinks, and activities on my blood sugar levels. It took me several months to fully get my diabetes under control, but I have been on top of it ever since.



The other time I struggled with diabetes was when I developed diabetic retinopathy. Ironically, I likely brought it on myself by going from the worst diabetes control of my life (the couple of years before I got my first meter) to the best control very rapidly, which apparently can precipitate its onset (as I found out later while researching it). I was only twenty-four years old when I saw the first telltale bleed inside my eye while shopping in a mall, and I soon faced the prospect of going blind for the rest of my life, which is a pretty scary thing.

I underwent a series of laser treatments over the course of two years while my eyes were unstable. I was regularly, but unpredictably, having bleeds into the vitreous fluid inside my eyes that would block my vision for days or weeks at a time. I definitely struggled for a while; I took my biochemistry exam for my PhD program with only one eye and I was legally blind for several weeks after having almost simultaneous bleeds in both eyes. I remember wanting to give up and die, but I kept pushing my way through it. I never fully gave up my belief that things would get better.

My eyes have now been stable for over two decades and through three pregnancies, for which I am grateful. I still have problems with night and peripheral vision due to the almost total obliteration of my peripheral retina by the laser treatments, but it's a small price to pay to have my central vision intact.

You would think that with the focus of my professional life and career being on diabetes that I would constantly be thinking about my own condition, but that is really not the case. In my own life, diabetes is in the background, seldom in the forefront of my life or my conscious thought process. Yes, I stop what I'm doing now and then to treat a "low" or test my blood sugar, but doing that is so routine that I rarely give it any thought.

Do I feel deprived because of diabetes? Not at all. I have no problem passing up rich desserts, doughnuts, and other "treats" since I would rather just have a bowl of plain strawberries, blueberries, or other fruit. What and when I eat are not dictated by my diabetes.



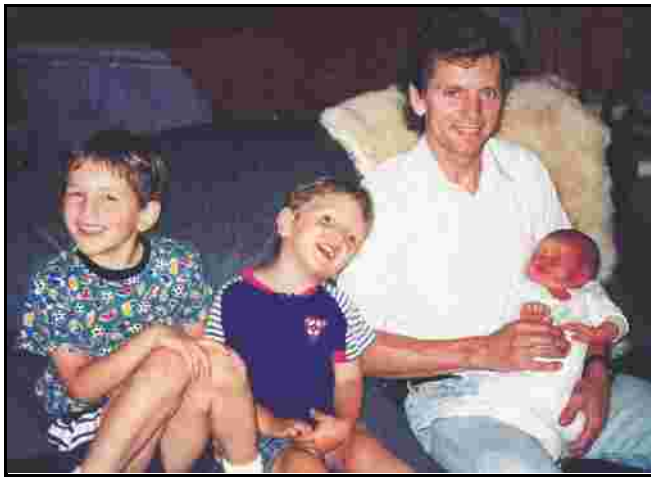
I eat when I'm hungry, and I eat

healthy foods ninety-nine percent of the time because I like them better. Probably my biggest challenge professionally in selling others on a healthy diet is that I really can't understand why they would want to eat a lot of that junk food. I have never eaten a Hostess Twinkie™, but I don't think I'm missing much!

Do I ever eat now any of the foods that I was forced to forego when first diagnosed? Not usually, simply because they're not worth all of the insulin I would have to take to cover them and the potential blood sugar roller coaster they could put me on. Plus, I don't like most of those foods much anyway.

When I eat out at restaurants, my meals invariably require more insulin to cover (due to hidden calories and carbohydrates), and I would rather just fix my own meals than eat out. My biggest complaint about eating out in restaurants is that you can seldom get veggies that have not been slathered with butter, oil, or other unnecessary calories; you can hardly ever get plain fruit to eat, either.

Do I consider myself successful? Well, "success" is a relative term. The personal accomplishment that I am most proud of is bearing three healthy sons



despite having diabetes. I researched my chances of passing along type 1 diabetes before getting pregnant and enrolled in a research study that allowed me to optimize my control before I ever tried to get pregnant with my first child. I am happy to report that I never had any problems related to diabetes during my three pregnancies, and I was able to keep my blood sugar under immaculate control throughout. I even exercised throughout all of my pregnancies,

which helped with my blood sugar control, and enjoyed having a faster delivery and postpartum recovery.

Being pregnant truly made it easier for me to control my diabetes—not harder—because I didn't have to deal with monthly swings in blood sugar due to my monthly menstrual cycle. The hormones released during pregnancy increased insulin resistance and insulin needs, but at least those hormones are relatively stable for nine months. Breastfeeding my three sons for as long as possible also helped with my blood sugar control and with post-pregnancy weight loss, and as an added bonus, it lowered my sons' chances of developing type 1 diabetes themselves. I highly recommend it!

On a professional level, I feel that I have accomplished quite a bit, although it all pales in comparison to delivering three healthy babies! I feel like I'm on a crusade to help the world live a healthier life (not just a longer one), especially given the current, astronomical rise in the number of cases of diabetes and pre-diabetes. I have given hundreds of lectures to community and professional audiences around the country and the world with the hope that more knowledge about diabetes will

empower the people I meet to take better control of it, or perhaps to even prevent it.

I have also had the honor of working closely with the American Diabetes Association (ADA), both as a decade-long funded clinical researcher on exercise and diabetes and as a volunteer, serving on the ADA's Prevention Committee, reviewing ADA research grants, and representing the ADA as a partner with many other national organizations involved in the first-ever United States National Physical Activity Plan. I also know that my scientific research agenda (largely funded by the ADA) has been enhanced by insights that I have had about the effects of exercise on diabetes that one can only understand and capitalize on by having it myself—yet another blessing in disguise.

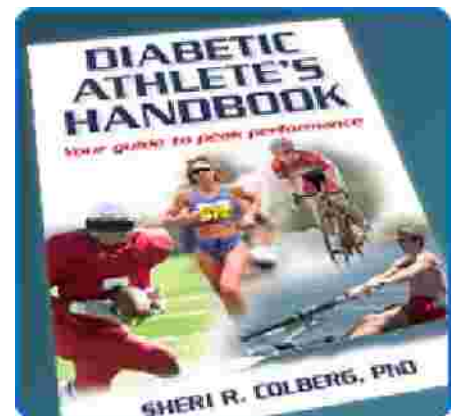
At present, I am working on my ninth and tenth books simultaneously—all of



which are related in some way to healthy lifestyles, diabetes management, and/or successful aging—and I have published a similar number of book chapters. I have also written too many articles to count—several hundred, I think—and volunteered my time at every opportunity to help people learn how to live healthier lives through my personal Web site and other means. I enjoy being interviewed (and have been quoted countless times by reporters for magazines, newspapers, online sites, blogs, radio

shows, and TV programs, including “dLife,” “The 700 Club,” and “Living the Life”) because it allows me to spread the word to the largest possible audience.

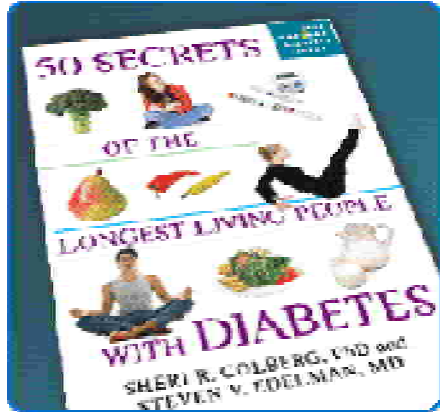
The two books that I've enjoyed writing the most are Diabetic Athlete's Handbook (an enhanced revision of my first book, The Diabetic Athlete) and 50 Secrets of the Longest Living People with Diabetes. The Handbook was fun for me to write because I got to find out exactly how hundreds of other active people living with all types of diabetes manage their blood sugar during exercise and how being active benefits them both physically and emotionally. I am positively inspired when I see how many people are accomplished athletes nowadays, who also manage to succeed with diabetes. Who knew you could be a professional surfer or snowboarder or even an Iditarod dog musher if you have type 1 diabetes?



Back in the “dark ages” when I started exercising without a blood glucose meter, I never let diabetes hold me back, but I didn't excel that much, either. I participated in gymnastics, soccer, swimming, tennis, volleyball, racquetball, hiking, running, skydiving, skiing, football managing, and more without considering that having diabetes might have been an impediment. I only wish I could go back now and try all of those activities over with

a meter to test my blood sugar so I could do and feel my best while doing them. I never let having diabetes stop me from trying, though.

When I set out to write the 50 Secrets book, I wanted to find out if people who had lived longer with diabetes than me (I had lived with it for almost four decades at the time) knew anything that I did not already know. What I found out was that



what you should do to live long and well with diabetes is exactly what allows you to live long and well, period: regular physical activity, a healthy diet, stress management, a positive outlook on life, knowledge about your condition, and using the tools at your disposal to control your diabetes and health as best you can. (Well, that's it in a nutshell—there are fifty secrets, after all!)

I remember interviewing the younger of the two long-lived Cleveland brothers from Syracuse, NY, Bob Cleveland, about what he thought had allowed him to live since 1925 with type 1 diabetes. He said to me, "Well, I think the most important thing is to stay physically active your whole life." Right answer, Bob! (When I heard this answer, I wanted to jump through the phone line and give him a big hug.)

Of course, as an exercise physiologist by training, I am undeniably biased toward the benefits of physical activity, but I actually have a great deal of published research to back me up. Even at the age of eighty-seven, Bob was still riding his bike for twenty miles at a time even though he admitted that walking had become more difficult. His brother, Gerald, had kept the handwritten diet given to him when he was diagnosed with diabetes in 1937; Gerald still had it taped up on the side of his refrigerator as a reminder of how to eat well until he died at the age of ninety-two.

The Cleveland brothers were truly amazing, but so are others who have managed to live their lives first, and put their diabetes second. For example, a few years ago I met a retired podiatrist who had diabetes for over sixty years. He'd just set some new records in the Senior Olympics for the shot put and the long jump in the 95-and-older category. Two years after that, he tried pole vaulting for the first time but had a bit of trouble getting enough lift to get over the bar. That same gentleman drove himself and his new bride to the Virginia Beach courthouse last year to get married; he was ninety-eight at the time, and his "young" bride was ninety. It was written up in the local newspaper because they were the oldest couple to ever get married at that courthouse. It is stories like theirs that I personally find so inspiring. (And, no, you can't attribute his longevity solely to having won the "good genes" lottery!)



At the time I became an exercise physiologist, a diabetes researcher, and a college professor, I had not yet met any of these inspiring people. What drove me to succeed was a desire to make the most of the hand I had been dealt and to reach the goals that I set for myself. I had flirted with the idea of becoming a medical doctor for a while, but after spending some time volunteering in a hospital as an undergraduate, I decided that I hated being around sick people in hospitals. That pretty much ruled out medical school for me.

What I decided to do instead was something that I envisioned when I was back in high school: doing research in diabetes to help cure it. While I have not found the final cure for diabetes or a way to prevent all of its complications, I firmly believe that regular physical activity is about as close to a cure as you can come right now, especially when coupled with a healthy diet and a positive attitude about life.

Meeting other people with diabetes and hearing about their stories has also been unexpectedly cathartic for me. I spent most of my early years with diabetes "in the closet" about my disease, and I never had a chance to share my stories, my fears, and my successes with anyone else struggling to live with the same condition. In interviewing hundreds of people in the past decade with diabetes, I have found that everyone shares some of the same hopes and fears while facing the challenges that diabetes brings.

Finding a diabetes community to share with, and to learn from, is a truly valuable way to keep a positive perspective on your own situation. Talking with others allows you to see that you are not alone in your struggles. We have a lot to share with others, and a great deal to learn from them along the way. I know that I have enjoyed laughing with others about how we may have accidentally stepped on our cats (or small children) because we had to give up some of our peripheral vision to save our central sight.

What is my real secret to being successful with diabetes? It is definitely to keep it all in perspective. We now have tools at our disposal to help effectively manage blood sugar, and at least diabetes is a manageable condition, if not one that can be completely cured. Both of the Cleveland brothers were grateful to be able to test their blood sugar and get a reading in only five seconds (as am I)! My favorite story from Gladys Dull, who lived from 1924 to 2009 with type 1 diabetes, was her reaction to outliving all of her family members (who did not have diabetes) and then watching her last sister suffer through late-stage Alzheimer's disease. After talking about all that her sister had to go through with that terrible and incurable disease, Gladys said to me, "I am sure glad that I have diabetes." I totally agree with Bob, Gerald, and Gladys.



In conclusion, the secret to my success is simple. If I do nothing else, I am grateful for the gifts I have been given (including diabetes), and I strive to live life first and be diabetic second while I live a healthy and hopefully long life. Web site: www.shericolberg.com