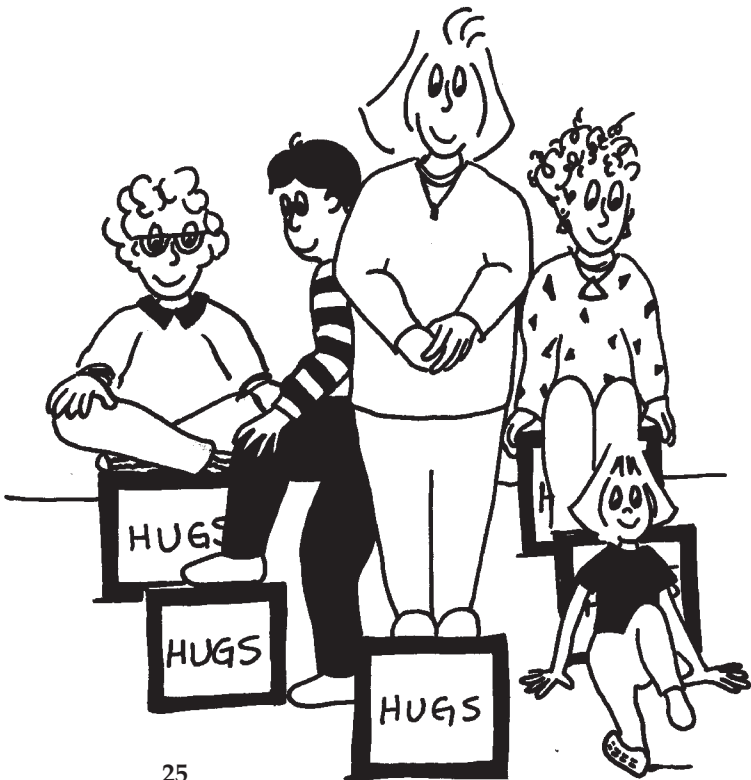


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HUGS™

A Unified Approach for Everyone

*If you want to be a winner
choose the HUGS program*



Refer to the section that describes your situation or area of interest. It will provide you with a focus to make the book work best for your needs.

THE PROBLEM

WHAT HUGS™ CAN DO FOR YOU

New nonsmoker Reduce sugar and fat cravings and the urge to smoke by making a life-style change and eating in a way to reduce blood sugar swings.

Weight concerns Adopt regular eating habits lower in fat content, increase physical activity, adopt a healthier attitude towards food and activity.

High cholesterol Adopt regular eating habits lower in fat content, increase physical activity to help reduce the chance of heart disease.

People with diabetes Balance carbohydrate and protein to stabilize blood sugar, address concerns of weight, acquire a taste for less sweetening foods.

Premenstrual syndrome (PMS) Reduce blood sugar swings that bring on symptoms of PMS. Achieve a balance in eating, physical activity, and decrease caffeine intake to relieve PMS symptoms.

Next generation Principles that apply to adults can be transferred to children. Getting them away from the diet mentality and helping them accept themselves nurtures an environment conducive to improved self-esteem and a healthier life-style.

HUGS™ FOR THE NEW NONSMOKER

"I'm afraid to stop smoking because I'll get fat."

"Smoking helps me keep slim."

"I need cigarettes to curb my appetite."

"I'll quit smoking when I've lost 30 pounds."

Do any of the above statements sound familiar to you? *Do you "jump-start" your body with caffeine and cigarettes, the chemical dynamite that gets you up and running every morning?* Can your body survive this torture?

Myths of Smoking and Weight Gain

At first glance Brent looked like a healthy individual. He appeared to be of ideal body weight and was bright and alert. A few weeks later when I walked into his office, the first thing I noticed was the smell of smoke. He related to me how he was trying to stop smoking and how he was compelled to have a cigarette. He had been trying to go "cold turkey" but





the withdrawal symptoms were unbearable! Yet he was tired of cigarettes having a hold on his life.

Since Brent was also a heavy coffee drinker, understanding the effect that nicotine and caffeine had on blood sugar levels helped him understand why increased hunger was one of the withdrawal symptoms he was experiencing. Caffeine, like nicotine, can temporarily mask hunger feelings by stimulating the body to release more glucose from its stores in the bloodstream. After our discussion, he decided to gradually wean himself off cigarettes to minimize withdrawal symptoms. At the same time, he would start eating more regularly to combat the increased hunger cravings, and use the appropriate balance of foods to sustain his energy level.

Was that cigarette really necessary after the meal or was it purely habit to be used as a reward? Could the renewed taste in the food itself be satisfying on its own as he learned to taste and savor his meal? These were some of the questions that he was answering in his own mind.

Smoking is widely used as a technique to control weight. Female smokers are more apt to use smoking to avoid weight gain. Women will also return to smoking to curb weight gain and increased appetite. In contrast, men return to smoking because of excessive stress and a craving for cigarettes.¹

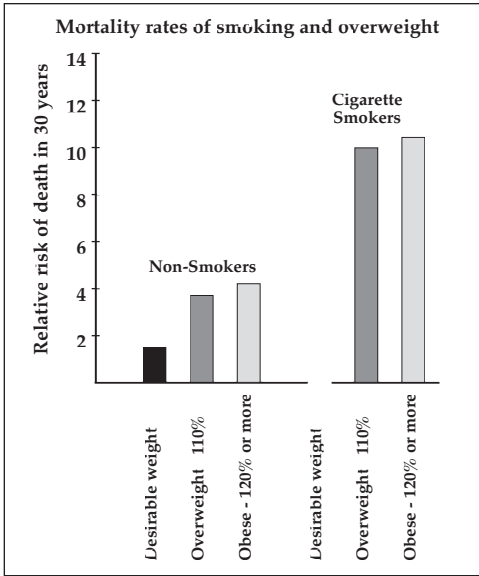
Brent's life-style had been unhealthy. He didn't eat breakfast and was proud of it. He had erratic eating habits, and he smoked one pack of cigarettes and drank 10 cups of coffee a day. This excessive stimulation made him on edge. His smoking was really more harmful than excess weight. Because of his life-style Brent at 130 pounds had the same health risk as a nonsmoker weighing 210 to 230 pounds.

To use smoking as a method of weight control is clearly an inappropriate choice. If he continued smoking Brent's chance of dying before age 70 was almost twice as great as that of a large individual who was a nonsmoker.² See chart p28.

Nicotine increases metabolism (the number of

YOU COUNT,
CALORIES
DON'T

calories you burn at rest) by about 10 percent for heavy smokers, but it is not a recommended way to burn up calories to keep weight down.



If you use smoking for weight control, remember that not everyone gains weight once they stop smoking. If you make a life-style change, this can decrease the incidence of gaining weight. The decrease in metabolic rate that occurs can be offset by an increase in physical activity. Exercise for enjoyment in order to make it permanent. Experience the “high” that comes from activity.

You should know that even if you smoke this won't keep you from becoming obese. Although smokers weigh an average of only about 7 pounds less than nonsmokers they can gain weight and often put it on in

places that seriously affect their health. Smokers tend to accumulate fat around the waist rather than the hips, and this is associated with a greater risk of heart disease, diabetes, and early death.³ Once you have stopped smoking, diet for weight control is not the answer. Dieting has a negative effect on the metabolic rate bringing it down by 15 to 30 percent within a 24 to 48 hour period.⁴ On the other hand, the immediate health benefits of life-style change will decrease your desire to smoke.



The secret of successfully stopping smoking and not gaining weight depends on life-style change. If you, as Tom does, order salad for lunch but spread 2 packets of salad dressing over it you may as well eat the hamburger your friends are eating. Tom remains hungry, and he is unhappy that he didn't have a hamburger. All he ever talks about is food. His metabolism is being slowed down by a poor way of eating. Since he had used cigarettes to dampen his appetite he was out of tune with his natural hunger signals. Now he is using false impressions about healthy eating and denying himself some of the real pleasures of food. Substitution of lower calorie foods

(salads) don't satisfy unless the person truly enjoys the replacement. Life-style change will show Tom how to rev up his metabolism using food and activity.



When you stop smoking, don't diet. Eat sensibly balanced meals that consist of more substance than simply water, vitamins, minerals, and fiber.

Another point to remember is that as a new nonsmoker you will get hungry more often because your stomach empties more quickly. Smoking keeps food in your stomach longer so that you can go without food and not feel hungry. When you stop smoking, do not turn to water and diet drinks to help fill you up. You may feel bloated and temporarily full, but this will not keep you going. You need to learn how to eat in a way that keeps you satisfied longer by naturally allowing you to keep food in your stomach longer. Soluble fiber and the right balance in your eating can achieve this end.

Some scientists believe that nicotine affects the level of blood sugar (glucose) in the body, so that nicotine withdrawal triggers an increased craving for sweet foods. This may be the result of the lower blood sugar levels that occur when you stop smoking. When your blood sugar levels are low, you feel hungry, especially for something sweet. A balanced life-style will show you how to stabilize your blood sugar levels so that those "highs" and "lows" level out.

The secretion of insulin pushes glucose (all food is eventually broken down to this simple sugar) into cells for energy thus lowering the blood sugar level, and causing hunger. Smoking inhibits insulin secretion causing blood sugar levels to remain higher. This suppresses appetite. Many smokers reach for a cigarette when they are actually physically hungry. Life-style change will help you get back in tune with your body. You will learn to eat when you are physically hungry and stop when you are full.

Another disadvantage of smoking is that it cues the end of a meal. At that time you often crave the oral



gratification of something sweet. Smokers often turn to a cup of coffee. You will learn the effect that caffeine has on your blood sugar. Cutting back on coffee will stabilize your blood sugar and you will begin to rely on food for energy and a state of alertness rather than on caffeine and cigarettes. You can learn how to break the habit of a cigarette and coffee to end your meal and replace these with healthier options that you will enjoy.

ASK YOURSELF THESE QUESTIONS

Do you really want that cigarette or sweet at the end of a meal or is it merely psychologically satisfying? Can it be a habit? If so, you will not feel deprived if you delay smoking the cigarette and confront the urge. Tell yourself that you can have that cigarette later if you still want it.

Breaking the familiar associations and patterns will not give you any anxiety since the real reason you thought you wanted the cigarette is habit, not desire. This is an effective technique for gradually weaning yourself off cigarettes when using them is just part of a routine. Ask yourself if there is enough variety in your meals so that you can turn to food for psychological contentment. Of course you will not want to allow food to replace cigarettes which would result in overeating. You can learn to explore these issues and deal with them.

Smokers often use cigarettes when under stress. When Allison feels pressured, the first thing she does is reach for a cigarette. She says it helps her think. Is it because of that initial high that occurs when nicotine from the first few puffs hits the brain? You can learn how to think clearly without relying on cigarettes. Learning how to be in control of your life, how to adopt a new perspective towards stressful situations, reduces the need to smoke. Changing your thinking and attitude towards the situation can allow you to reduce the number of times you need to turn to smoking or eating to relieve stress. You can learn how to relax naturally. If you opt for life-style change it will give you skills for a lifetime and allow you to get the full enjoyment out of life.

There are extra benefits for becoming a nonsmoker. A

HUGS™
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Approach for
Everyone

recent study showed that by quitting smoking, even long-term smokers can reduce their risk of stroke to the same level as nonsmokers within 5 years.⁵ Within 2 years of quitting smoking, much of the tobacco-related risk of heart disease will also have disappeared.



"I can't lose weight without a diet. The diet sheet tells me what to do."

HUGS™ FOR WEIGHT CONCERNS

If you are concerned about weight and find that food is the center of your attention, you would probably like to find a way to deal with this. You need new skills and a different mind-set to help you take charge. HUGS™ can help you find out why diet sheets have prevented you from taking responsibility for your own health.



"I seem to be able to keep the weight off only if I stay on the diet. I can't imagine being on a diet for the rest of my life."



"I'm losing control. Every time I see food, I want it."

Learning to eat regularly according to your hunger signals will allow you to stabilize your blood sugar level and reduce your craving for sweets. Acquiring a taste for less sweetening and fattening foods will help you to make healthier choices because you no longer crave fats and sugars. HUGS™ will guide you to allow this to happen naturally.

HUGS™ FOR CHOLESTEROL CONCERNS

Each year 40,000 Canadians die from heart attacks. One of the major risk factors for heart disease is high blood cholesterol levels. As the artery openings become narrower, blood cannot pass through to carry oxygen and nutrients to the brain or heart (depending which artery is affected) and a stroke or heart attack will result.

Of the 3 major risk factors—smoking, high blood

YOU COUNT,
CALORIES
DON'T

"HUGS™ meets my needs completely. I'm really beginning to feel like a thin person, and it is becoming more natural to me. I can't believe how little I actually knew about nutrition. I thought of food items only as 'legal' and 'illegal' until HUGS™. The HUGS™ program is truly the best thing to happen to me

"HUGS™ got me to change my attitude. I didn't need self-control, I just needed to think normally. This program has given me the ability to look at my eating as part of my life, not as an all-consuming hobby. I still have lots to work on, but I now have the tools to deal with the



"What a great learning experience! The program helped me to motivate myself without pushing a diet and exercise on me. I now enjoy exercise and meals and do not dread them. HUGS™ helped me tune into my body. Now I know when and why I'm hungry. I eat a healthy breakfast and lunch which means I'm not as hungry

pressure, and high-cholesterol levels, the former two put the individual at a greater risk for heart disease. High level of cholesterol is a risk factor for heart disease for only 2 percent of Canadians. Since a risk factor is not a disease, is cholesterol becoming another word for paranoia?

According to Dr. Corday, President of the American College of Cardiology and Clinical Professor of Medicine at the University of California Los Angeles,

FRAMINGHAM HEART STUDY - CHD RISK PREDICTION WORKSHEET
1. FIND POINTS FOR EACH RISK FACTOR

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Approach for
Everyone



“Every time that I eat something I shouldn’t, I get an argument from my spouse. This low-cholesterol diet is sure stressful. Isn’t there a better way?”



“My cholesterol level is high. I’m not supposed to eat butter but I love it.”

billions of dollars have been spent on studies investigating the link between cholesterol levels and heart disease. Billions more have been spent on campaigns encouraging people to reduce their cholesterol and now people are frightened to eat anything with cholesterol. Dr. Corday states that the issue has made people neurotic about life and he expresses a caution about the effects of restricting the cholesterol intake of children.

Cholesterol is especially important in the development of the nervous system during infancy and childhood. It is required to produce healthy cells in the body and brain, which is why it is particularly important for growing children. Feeding a low-fat milk to children can be harmful for this reason.

There is no evidence that reducing cholesterol will extend life. On the other hand, adopting a healthier

3. LOOK UP RISK CORRESPONDING TO POINT TOTAL

Probability			Probability			Probability			Probability		
Pts	5 yr	10 yr	Pts	5 yr	10 yr	Pts	5 yr	10 yr	Pts	5 yr	10 yr
≤1	<1%	<2%	9	2%	5%	17	6%	13%	25	14%	27%
2	1%	2%	10	2%	6%	18	7%	15%	26	15%	29%
3	1%	2%	11	3%	7%	19	8%	16%	27	17%	31%
4	1%	2%	12	3%	7%	20	8%	18%	28	18%	33%
5	1%	3%	13	4%	8%	21	9%	19%	29	20%	35%
6	1%	3%	14	4%	9%	22	10%	21%	30	21%	37%
7	1%	4%	15	5%	11%	23	12%	23%	31	23%	39%
8	2%	4%	16	5%	12%	24	13%	25%	32	25%	42%

4. COMPARE TO AVERAGE 10 YEAR RISK

Age	Probability		Age	Probability		Age	Probability	
	Women	Men		Women	Men		Women	Men
30-34	1%	3%	45-49	5%	10%	60-64	13%	21%
35-39	1%	5%	50-54	8%	14%	65-69	9%	30%
40-44	2%	6%	55-59	12%	16%	70-74	12%	24%

Keavin Anderson, Ph.D., Framingham Study; Dr. W. B. Kannel, Boston University of Medicine⁶

5. NAME: _____ **PT. TOTAL:** _____ **DATE:** _____

life-style can improve the quality of life. To help put the issue of cholesterol in perspective, several clients were plotted on the chart on the previous page to determine their overall risk for heart disease.

Wayne had a high cholesterol level of 8.58 where 5.2 mmol/L or less is desirable. This 51-year-old man was physically fit with good blood pressure (108/78) and he was a nonsmoker. He also had a healthy waist/hip ratio (more about this in Chapter 2).

Robert, a large, 46-year-old man had an unhealthy waist/hip ratio, and a cholesterol level of 6.34. He did no exercise and smoked cigars. His blood pressure was 125/90 because his heart had to work harder due to his extra weight and poor fitness level. It takes an extra mile of blood vessels to nourish an extra pound of fat.

Allen's only form of activity fit his Type A personality. His day was rush rush, got to get it done. His total cholesterol was 6.7, he had a healthy waist/hip ratio, and he was at a healthy weight for his height. His blood pressure was good at 106/70, but he smoked 1/2 to 1 package of cigarettes a day.

You will notice that Wayne who was more fit than the other two had the highest HDL (a cholesterol carrier that acts as your body's drain cleaner; different from LDL the lazy cholesterol) level of 1.47 which protected him against heart disease and lowered his overall risk. Allen's HDL value was 1.23 with Robert's trailing behind at 1.15.

	Age	Cholesterol	HDL	LDL	Triglycerides	BP	Smoker
Wayne	51	8.58	1.47	6.04	2.37	108/78	no
Robert	46	6.34	1.15	4.23	2.13	125/90	yes
Allen	49	6.70	1.23	4.60	1.92	106/70	yes

Following the above chart and working through Wayne's sum points for all risk factors as per chart based on the well established Framingham Study referred to in more detail later in the book, it would look like this:

$$10 + (-2) + 6 + (-2) + 0 + 0 + 0 = 12$$

This means that even though the average risk for

heart disease for a man Wayne's age within the next 10 years is 14 percent, the probability of his getting heart disease in that time frame is 7 percent. His healthy blood pressure and high HDL value and the fact that he is a nonsmoker make his high-cholesterol level insignificant.

On the other hand Robert's probability of getting heart disease within the next 10 years is 12 percent, 2 points higher than the average of 10 percent. Even though his cholesterol level is lower, his high blood pressure, minimal activity which would reflect on a lower HDL value, as well as the fact that he is a smoker are higher risk factors for heart disease.

Allen is also a smoker, one of the major risk factors for heart disease. His risk of heart disease within the next 10 years is about average at 9 percent while the average for his age is 10 percent.

Focus on overall health rather than one contributing factor, such as cholesterol.

These case studies show that it is better to focus on overall health rather than on one contributing factor, such as cholesterol. Yet too much misleading information on this subject has become a great concern for many people. You might like to consider the following facts.

- Blood cholesterol is a wax-like material produced in the liver and is used to make hormones, bile acids, and cell walls. HDL known as the "good" cholesterol and LDL known as the "bad" cholesterol are among the different types of cholesterol that are produced to make up the total cholesterol.

- Dietary cholesterol is found in all foods from animal sources, such as meat, eggs, and dairy products. However, *dietary cholesterol has a very small effect on blood cholesterol levels.*^{7,8,9}

- "I use 100 percent whole wheat bread with no cholesterol and no fat and add butter to it." In this case the client's wise choice of bread is negated by the fact that he loads the bread with butter, the real culprit in raising cholesterol levels. Saturated fat is a key factor in raising blood cholesterol levels.

Saturated fat can be defined as any fat that is hard at room temperature such as butter and lard. Other examples of hidden saturated fat could be processed



meats such as sausages, luncheon meats, hot dogs, and dairy products such as cream, whole milk, cheese, and ice cream.

- Processing foods (e.g., peanut butter) can change a healthy kind of fat into one that will raise blood cholesterol levels. Convenience foods often contain palm and coconut oils, which are saturated fats that improve the shelf-life of the product but also raise blood cholesterol levels. Peanut butter naturally contains the monounsaturated fat peanut oil which will not affect blood cholesterol levels. These types of fats are now being shown to possibly lower cholesterol levels.^{10,11}

**NO ONE FAT IS
BETTER THAN
ANOTHER.**

A fat

- low in saturated fat,
- high in trans fatty acids, and
- containing hydrogenated vegetable oil,

is the same as a fat that is

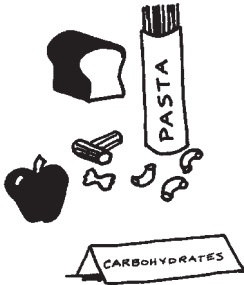
- high in saturated fat,
- having no trans fatty acids, and
- containing no hydrogenated vegetable oil.

As a guide to your buying you could read the label! As soon as hydrogen is incorporated into the product to maintain shelf-life (that is, keep it on the shelf without going rancid), it becomes hard at room temperature and is saturated. Therefore, hydrogenated peanut butter will raise your cholesterol level. *Note* Buy the natural peanut butter, stir it around, and keep it in the fridge. Some of my clients prefer to get rid of the fat on the surface altogether and add a little jam to it for moisture.

- Oils do not contain cholesterol. Cholesterol is made by the liver of an animal and since vegetable oils do not have livers, they cannot have any cholesterol! “No cholesterol” could be featured on the label of all vegetable oils.

- Oat bran has some effect in lowering blood cholesterol levels. The exact mechanism by which the reduction occurs is uncertain. Recent studies suggest that incorporating oat bran or oatmeal into one’s meal plan reduces the overall saturated fat content of meals.¹²

- Polyunsaturated fats (corn oil, sunflower oil, and safflower oil) and monounsaturated fats (olive oil, peanut oil, canola) help to lower blood cholesterol levels. More recently, there has been a shift to the monounsaturated fats (olive, peanut, and canola or rapeseed oils) due to their affect on lowering LDL (“bad” cholesterol) without affecting the HDL (“good” cholesterol) that protects you from heart disease.¹³



But remember that it is not only a simple matter of switching the type of fat that you use, but *to decrease your total fat intake*. Using a generous amount of olive oil to make pancakes makes this food higher in fat content. Vary the types of fat you use from monounsaturated sources, but at the same time follow the suggestions presented to *reduce the total fat in your cooking*.

Eating a balance of more carbohydrates and less protein while including more sources of soluble fiber such as legumes (peas, beans, and lentils), fruits, and vegetables will help to lower cholesterol levels.

If you make a gradual change in your eating habits this will allow you to lower your blood cholesterol levels. Strict avoidance of certain foods only leads to cravings for those “forbidden” items. In fact, the increased stress may offset any lowering of cholesterol levels that you are trying to effect by avoiding certain foods. You can lower your cholesterol level naturally by learning how to acquire a taste for less fattening foods so that you can choose lower fat foods because you like them. Adding physical activity that you enjoy will help to increase the type of cholesterol (HDL) that will actually protect you from heart disease.

You can learn how to modify recipes during food preparation and baking to lower fat content without removing the “punch” in the meals. For example, gravy is great for adding flavor, moisture, and color to your meal but is the fat really necessary?

You can learn how to read labels. If you know the real meaning of the word “light” you can purchase products that are actually “lighter” or lower in fat content rather than simply lighter in color, taste, or texture. Read the label for the M.F. (milk fat) or B.F. (butter fat) content and gradually acquire a taste for those foods with a lower fat content. “Gradual” is the key in order to make a lower fat way of eating permanent.

Increasing aerobic activity increases HDL¹⁴ which carries cholesterol out of the arteries to the liver

YOU COUNT,
CALORIES
DON'T



where it is excreted from the body. This protects you against heart disease. On the other hand, life-style habits such as smoking can increase LDL (the lazy, sticky cholesterol carrier) which has the effect of plugging up your system by depositing cholesterol in the arteries. This adds to the risk of heart disease.

Your positive outlook on life in combination with a healthier life-style can improve your health status and lower your risk for heart disease.

HUGS™ FOR PEOPLE WITH DIABETES

A person with diabetes maintains blood sugar control through the way of eating. Fortunately, the prescribed diabetic way of living is a healthy life-style. You can make the routine more “normal” and flexible by making gradual life-style changes so you can begin to think like a nondieter.

“It’s supper time and I have to count out my exchanges to have the right balance according to my meal plan or diet sheet. I have to do this, not because I want to but because it’s something that’s controlling me. But some days I’m hungrier and some days I’m not. There’s no flexibility.”



If you’re on a diet, you may still want sweets but you try to say “no” and you feel deprived. By

learning to acquire a taste for less sweetening foods, the power of choice rather than the diet sheet is the controlling mechanism. The blood sugar control will be achieved.

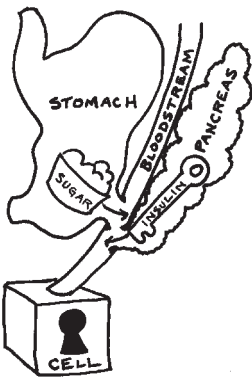


I have observed in the diabetic clinic over the past 5 years that those who adopt a more positive attitude are more relaxed with diabetes. They handle stress more positively and stabilize their blood sugar better than those who are worried and preoccupied with food and weight, portion control, and the “magic” diet that they believe is the perfect way of eating.

Life-style changes are less stressful and more positive than diets. They are for life!

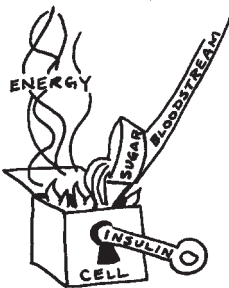
Even the person with diabetes who is on insulin can benefit from a healthier way of thinking, can normalize eating and activity habits, and can work on skills to improve overall well-being. Consistency of carbohydrate intake and scheduled meals and snacks will be required to account for the action of insulin, but empowering yourself to focus on health instead of diet details will make the process easier. You can make healthy living a choice that you desire!

Fluctuations in body weight are less healthy than if you stabilize at a higher weight.¹⁵ Yo-yo dieting where weight is lost and then regained seems to be associated with more fat being distributed around the stomach area.¹⁶ Increased risk of obesity-related diabetes has been associated with fat in the stomach area rather than fat in the hips and thighs.¹⁷



As many as 80 percent of all people who have diabetes and are not on insulin are significantly overweight. By losing even a modest amount of weight, these patients may lower their insulin resistance to the point where the insulin their pancreases produce is sufficient to keep blood sugars down. A modest goal of a 5 or 10 pound weight loss will often provide good results.^{18,19}

Encouraging research indicates that physical training, even without weight loss, seems to increase the body's sensitivity to insulin, making the available insulin work better. Aerobic exercise may improve the fit between insulin (key) and the cell receptor site (lock) allowing better control of blood sugar levels.



Improvement can be noted in as little as one month after beginning a regular exercise program. Within one year of doing this activity, aerobic exercise may even increase the number of receptor sites. Adjustment of diet also improves the insulin action within several days of initiation even if body weight or body fat have decreased only slightly.²⁰

Despite the benefits of an improved diet and exercise program, estimates suggest that one third to one half of the people with diabetes have difficulty following these programs for any length of time. Once blood

YOU COUNT,
CALORIES
DON'T



sugar levels have been brought under control, old eating and exercise habits often return, along with the former life-style. Diet and exercise programs treat diabetes but make little attempt to address the emotional response people have to food. Difficulties faced by people with diabetes are similar to those faced by other people who diet to try to lose weight:

- frequent feelings of hunger,
- feelings of restriction and deprivation due to elimination of some favorite foods,
- feelings of awkwardness at mealtimes because of eating differently from friends and family or because of having forced sudden changes in eating habits on the family,
- feelings of guilt when “cheating,” which inevitably occurs and often leads to going off the diet, and
- a feeling of total dependence on the diet sheet resulting in a total preoccupation with food.

Dieting for anyone is usually viewed as a stressful sacrifice. For people with diabetes, dieting is more stressful because of the consequences if they go off the diet. If persons with diabetes add exercise that may be at too high a level resulting in pain, discomfort, and stiffness, they may give up and return to a former life-style. It's very important to find the balance that allows proper eating and appropriate activity for each individual.

For diabetics on insulin, this approach can be used together with the individual's diabetic meal plan. Check with your registered dietitian.

For those people who have a genetic predisposition to diabetes, the disease will develop into Type II diabetes only if an abnormal weight gain occurs. People with diabetes who lead healthy life-styles with regard to eating and exercise habits not only make their diabetes less severe and reduce the probability of complications, but also set an example of prevention for their children. For a person with diabetes, a minimal weight loss, especially early in the course of Type II diabetes, can cause diabetes to be reversed. A weight loss of 5 to 10 kg (11 to 22 lbs) is sufficient for diabetic control to be restored.²¹

One of the ingredients of quality of life is to be in control of your life. The ability to direct the course of events in your life and being able to do what you

SPECIAL NOTE

For those with diabetes, where regular products are mentioned in this book, low-sugar products need to be substituted. However, the key to long-term success is to acquire a taste for foods lower in sugar. Use skills and techniques presented to help you achieve this goal.



"The week before my period, I am absolutely driven to eat sweets and junk food. I don't understand it because I usually have a lot of self-control."

want to do is challenged by having diabetes. HUGS™ life-style approach to diabetes, leading to permanent adjustments in life-style through progressive gradual change, now offers the person with diabetes hope for less stressful and more lasting control of diabetes. It provides the individual with confidence to adopt a new life-style rather than continue with the perception that food controls you.

HUGS™ FOR PREMENSTRUAL SYNDROME

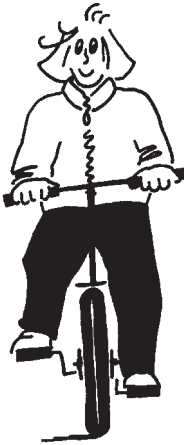
PMS is brought on by high progesterone levels in the body during the second half of the menstrual cycle. High progesterone levels can cause the body's cells to be resistant to insulin. This means that even though there are normal to high levels of glucose in the blood the glucose is not able to enter the body's cells. This causes cravings for sweets and increased appetite—a roller coaster effect.

- Well-balanced eating helps to avoid premenstrual bingeing. You may be hungry more frequently during this time because the hormone progesterone reduces the amount of glucose your body's cells receive. Bingeing can produce higher levels of insulin which may increase the cell's resistance to insulin. Then a roller coaster effect may occur where bingeing can result in increased hunger.
- Eat more carbohydrates that are complex or lower on the glycemic index (see Ch 4). Eating sweets or refined sugars may give symptoms of low blood sugar.
- You can stabilize blood sugar swings and reduce symptoms of irritability by a balanced way of eating.
- If you experience premenstrual abdominal bloating choose less salty foods.
- If you experience symptoms of anxiety or irritability, choose foods and beverages lower in caffeine content.
- Stay physically active and partake in regular aerobic activity to increase your sense of well-being, decrease fluid retention, and help relieve depression. This lessening of symptoms may be linked to the rise in endorphins during physical activity which have a relaxing effect.
- Be aware that alcohol, a mood-altering drug, can

YOU COUNT,
CALORIES
DON'T

cause depression and feelings of hopelessness. If these suggestions don't work you may have a relative deficiency of vitamin B₆. This is common among oral contraceptive users. Vitamin B₆ is involved in the production of serotonin, a brain chemical related to mood. A relative deficiency of B₆ results in reduced synthesis of serotonin and a resulting depression.

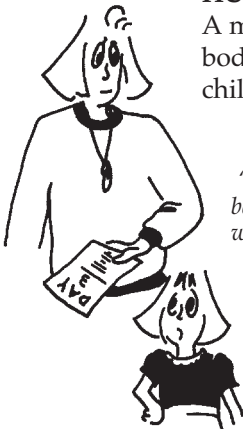
Note The literature on B₆ is controversial at this time. Many articles state that 100 mg of B₆ (pyridoxine) taken daily one week prior to the onset of your period is beneficial. However, a recent study indicates that women who take B₆ supplements for long periods of time can develop neurological symptoms even with dosages previously thought safe. The minimum dosage that can cause trouble is unknown but is less than the amount commonly prescribed for premenstrual tension.²² The women in this study had taken vitamin B₆ in quantities from less than 50 mg to over 200 mg daily for a period of anywhere from 6 months to over 5 years. If you are using this supplement, do not use it on a daily basis but only one week prior to the onset of your menstrual period.



Cuing into the enjoyment of exercise is a natural and healthy way to relieve symptoms of depression. Satisfied HUGS™ clients have related that symptoms of PMS have decreased when they follow the HUGS™ philosophy.

HUGS™ FOR THE NEXT GENERATION

A mother's constant dieting and discontent with her body often sends messages to the child that he or she is not okay



"Mommy, will I have to be on diets all the time when I grow up?"



"Better watch what you eat unless you want to become like me."

and needs to go on a diet. Our society's preoccupation with perfection whether it's the "perfect body," or being the best in school or in sports, can lead a child into a constant struggle of trying to keep up.

Studies indicate that an important factor in adolescent depression and low self-esteem is poor body image. Up to two-thirds of young women between the ages of 12 to 23 are unhappy with their weight. The astonishing fact is that most of those who wanted to lose weight were not even overweight. Both boys and girls desire flat abdomens and hard bodies more than they desire health. This fuels the diet industry and produces bestsellers and gimmicks. Ironically, the nation continues to gain weight.²³

Childhood and adolescence are critical stages in the development of behaviors and attitudes that foster wellness for daily living. Nutrition and exercise habits established prior to adulthood are most likely to persist as an integral part of life-style! A sedentary child becomes a sedentary adult. Yet even though parents generally recognize the importance of establishing healthy life-style habits, a positive role model can set a good example. As well, optimal growth, fitness, and feeling good need to be emphasized as goals in order to translate into improved life-style for the adults of the 21st century.²⁴



Preschool is the time when influences by parents have the greatest impact. If parents foster the attitude that activity is an important part of everyday life and focus on physical movement rather than sedentary games and television watching they can encourage children toward a healthy life-style.

Because of working parents, today's children are more responsible for household duties including meal preparation and grocery shopping. They tend to fend for themselves, and eat convenience foods more frequently. Yet, sufficient nutrients are particularly important for the child's health and well-being in the growth process. For the adolescent who has limited experience, supervised involvement in food preparation and the purchasing of food can help

make the learning more meaningful. The focus could be on the immediate benefits of healthy living such as energy to keep the child increasing his or her desire for health and wellness.

As parents go through the process of self-discovery by tuning into their bodies for signals of hunger, appropriate levels of activity, time for themselves, and basic needs for happiness, they will notice how these positive attitudes transfer to their children.

Some Suggestions to Consider

- Think twice before asking your child to clean his or her plate before having dessert or in order to be considered a good child.
- Avoid using food as a reward for good behavior or to comfort a child when he or she is not feeling well.
- Try not to establish erratic eating habits where everyone fends for himself instead of cultivating a special family mealtime.
- Avoid taking the enjoyment out of eating by controlling the child's food intake rather than allowing the child to tune into his or her internal hunger signals for a feeling of fullness.
- Accept the child as he or she is. Don't instill a feeling of not being good enough.
- Think twice before introducing diets as a form of control rather than adopting positive life-style habits that become a way of life for the family.
- Avoid centering the focus of holiday occasions on food alone rather than the occasion itself and its meaning, including friendship and conversation, as well as the activities of the event.
- Try not to make the child rely on diet products (i.e. diet drinks) that do not allow him or her to acquire a taste for less sweetening foods.

The bonus gained in living a healthy life-style is that there is a sense of inner satisfaction when you take responsibility for your own health. It can help to create a better balance in family life.