

## Diabetes

Newsletter optional point of view: Hi, I'm Janet Barre' sharing "my point of view" concerning a nutritional approach to dealing with numerous and often perplexing health problems. Where does my source material come from?

Personal (-nel) adj. 1. Private; individual 2. Belonging to, pertaining to or affecting a particular person.

Experience (ek spir' e ens) noun 1. The act of living through an event(s) 2. Anything or everything observed or lived through 3. (A) training and personal participation (B) knowledge, skill, etc., resulting from this.

Forty years ago I took a detour from the mainstream procedure to solving health problems and began investigating and applying a nutritional plan instead. I own and operate my own health food store and share my discoveries and observations with my customers. Please examine my real life anecdotes and see if any of them "fit." I trust that this information will do more than entertain you.

Mr. D is our current "celebrity." We'll share his story first. Waiting in the wings is Carol. We'll introduce her later.

Mr. D is a gentleman in his eighties. He's been a customer for thirty years. He's never hesitated to consult a physician whenever he felt it was necessary. However, he always insisted that nutritional supplements be incorporated in his treatments. In view of his age and health status, his approach apparently was successful for him. His one over-riding battle for decades was dealing with Type-2 Diabetes. This was the one area where he hesitated to try any approach other than what his physician recommended, "you must be insulin dependent." Low carbohydrate diets for diabetes have been written about in medical journals since the late seventeenth hundreds, according to an outstanding authority in the field. Although this approach is not the accepted norm today, there are those that are having phenomenal success dealing with diabetes in this manner. Diabetes was almost unknown a century ago. That rascal Napoleon built sugar factories in Europe and voila Refined sugar became big business all over the world. There is a direct connection between sugar consumption and the development of diabetes. The disease can result in all sorts of complications and even death. It is the nation's leading cause of kidney failure, amputations, and new onset of blindness in adults. It is also a major factor in heart disease and America's seventh leading cause of death. All this because of an imbalance between blood sugar and insulin.

An excessive amount of sugar in the blood makes the body release and abundance of insulin to control it. If you continually eat too much sugar and refined carbohydrates, your body over-produces insulin. This results in a low blood sugar condition, because the insulin pulls the sugar out of the blood, resulting in exhaustion, irritability, depression, and a host of other symptoms. In some people, the pancreas eventually can't produce enough insulin; in others, the receptors wear out and the insulin can't get through to process the sugar in the blood.

In cultures where there has been absolutely no diabetes reported previously, the introduction of sugar into their diets changed the "report." Within 20 years, they experienced almost as much diabetes as our culture does. If eating too much sugar and refined carbohydrates can create this imbalance, then what is the apparent solution to help bring back the balance? I'll let you think about it.

For years I asked Mr. D to "think about it". Guess what? He finally "thought about it". Guess what else? He investigated all of the available information on making this change from the diet that had been prescribed for him all these years. He stopped eating the foods that evoke high blood sugar and added supplements that help to stabilize the blood sugar balance. Guess what else? There were some who were not happy with the changes he was making. Guess what else? He did it anyway. Guess what else? His 300 and 350 blood sugar readings dropped steadily and held at about 120. Guess what else? He got his energy back and started walking 2-3 miles a day. Guess what else? He didn't need his insulin anymore. It's available if he ever needs it, but that's not the case for now. Guess what else? I'm really happy that Mr. D decided to "think about it". Enter center stage, Carol. This bubbly thirty-ish young lady appeared at my counter one morning looking like a picture perfect movie star, not someone with serious health problems. However...she had been diabetic for years and was getting worse. She had eye problems and circulation problems, the whole gamut. Too often she would pass out and her children would have to watch the ambulance pull up in front of their house and look on helplessly as the attendants worked on their mom or took her away to the emergency room. I reiterated the entire conversation that I had with Mr. D and others in the same situation. She was desperate, but apprehensive. I outlined the program and showed her the supplements, explaining what they would do and why. I gave her a book to read written by a cardiologist who treats not only with insulin if necessary but mainly with diet and supplements.

I told her to "think about it". I told her that I wasn't looking for a sale. I wrote everything down and suggested she buy the supplements at another store if she wanted to, but at least try it. It would either help or do nothing. Guess what? She "thought about it". Guess what else? She tried it. Guess what else? She kept requiring less and less insulin. Guess what else? She would intermittently stuff herself with sugar and carbs and have to increase her insulin. Guess what else? She was so impressed with her "new approach" and its success that she asked me to come and speak at her diabetes support group. Guess what? Every person, except for one said they would be too afraid to change the way they were dealing with their diabetes even though they knew that some of the medications came with a "warning: increased risk of cardiovascular mortality". Even though they knew that their disease can produce complications in small blood vessels in the eyes and kidneys and can result in heart disease and other cardiovascular complications. Even though they were already experiencing some of these complications

Carol was amazed that all but one wouldn't even "think about it". Guess what? The one that "thought about it" decided NOT to try anything new. Guess what else? Mr. D and Carol don't have to worry about that "warning: increased risk of cardiovascular mortality".

Hmmmmmmmm. One thing less to worry about in this challenging world. Think about that

P.S. An update on the eye vitamins: One of my customers is dealing with M.S. She takes a lot of supplements and is holding her own. She mentioned one day that she had lost the vision in one of her eyes. She said, "It's just a black hole". Lesions form in various parts of the body eith M.S. One had formed in her optic nerve and left her with just a tiny bit of peripheral vision. I told her what these "eye vitamins" had been doing for others. I said, "all you can waste is your money. I'll tell you what they are an you can buy them somewhere else." She said, "let me try it." Guess what? The lesion healed Guess what else? She has her vision back. How exciting is that? "Think about it "

Take what you want from this account. I'm not a doctor, and I'm not prescribing. I'm just sharing this personal experience and my point of view.

Thanks for your company, Janet Barre'

\*\*Publisher's Note: Janet is a published author. Her book YOU BETTER NOT CRY, was nominated for a Pulitzer Prize. Janet owns and operates the World of Nutrition On Market Square in Newington, CT 06111.