

## Objectives

- Illustrate the importance of physical activity and benefits of activity in patients with diabetes
- Discuss the risks associated with insulin dependent students and considerations to prevent hypoglycemia
- Identify pre and intra activity snack options for in range blood sugars and hypoglycemia


## American Diabetes Association Guidelines

## Physical Activity and Exercise

## Recommendations

14.5 Physical activity is recommended for all youth with type 1 diabetes with the goal of 60 min of moderate- to vigorous-intensity aerobic activity daily, with vigorous muscle-strengthening and bone-strengthening activities at least 3 days per week
14.58 Youth with prediabetes and type 2 diabetes, like all children and adolescents, should be encouraged to participate in at least 60 min of moderate to vigorous physical activity daily (with muscle and bone strength training at least 3 days/week) and to decrease sedentary behavior.

## Benefits of physical activity

- Improves metabolic health and reduces cardiovascular risk factors
- Emotional and mental health
- Strength, weight management and conditioning
- Improved insulin sensitivity
- Improved bone density


## Balancing Act

Factors that increase blood glucose:

- Carbohydrates, protein and fats
- Insulin resistance
- Various hormones (growth, stress, counter regulatory)


Factors that decrease blood glucose:

- Insulin
- Muscle contraction
- Insulin sensitivity


## So how do we help our patients with diabetes?

If patients are not on insulin (or other hypoglycemic medications)

- Encourage safe, and regular physical activity

If the patient is on insulin:

- Encourage safe and regular physical activity
- Monitor blood glucose before, during depending on duration and after
- If insulin will be given within 2 hours of activity consider a reduction in insulin dose (if needed)
- Add carbohydrates when appropriate.
- Technology can help us be proactive


## Not all exercise has the same impact

Anaerobic activity is more likely to stabilize or raise blood sugars

- Weightlifting, sprinting, gymnastics, jumping activity, wrestling, volleyball

Aerobic activity is more likely to decrease blood sugars

- Walking, jogging, biking, swimming

Most team sports will have a mixed impact

- Football, soccer, basketball, tennis, field hockey


## Trending arrows help our decision making <br> Continuous Glucose Monitors (CGM)

- Many of our patients will wear a CGM
- Provides estimated glucose
- Trending arrows can help with prevent hypoglycemia
- A single arrow down means a drop in BG of 60-90pts in 30minutes


## Making adjustments

If exercise is planned:

- Consider a reduction of meal time insulin by 0.5-1 unit if within 2 hours of physical activity
- Balanced meals are best for sustained energy
- Refer to school plan/may need updates if frequent lows

If exercise is not planned (injections only):

- Monitor blood sugars and determine if a snack is needed
- If blood sugars are below $130 \mathrm{mg} / \mathrm{dL}$ consider a $10-15$ gram carbohydrate snack
- Depending on the individual different thresholds may be needed

If blood sugars are elevated after activity:

- Consider adrenaline
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## Snack options

If blood sugar is in range, eat:

- Fruit
- Yogurt
- Popcorn
- Crackers with cheese or peanut butter
- Half of a sandwich

If blood sugar is low, eat:

- High glycemic index form of carbohydrate (sugar)
- Juice / soda / sports drinks
- High sugar candy
- Glucose tabs/gels

Both situations:

- Typical starting point is about 15 gram carbohydrates but may need more or less depending on blood sugars and trends (CGM)


## Mindful Messaging - low hanging fruit(juice)

- Carbohydrates are necessary
- Use supportive and encouraging language when talking about foods
- Fast digesting carbs when not treating lows can make problem solving difficult


## Questions?

