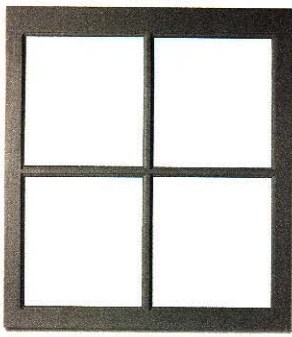


Summer 2004



BARI 2Day & 2Morrow



Message from Study Chair, Dr. Robert Frye

Dear BARI 2D Participant:

Welcome to the inaugural issue of *BARI 2Day and 2Morrow*, the BARI 2D participant newsletter! I'd like to take this opportunity to communicate directly with those of you who are participating in the BARI 2D trial and let you know that the study continues to make good progress. We will complete the recruitment of patients by the end of 2004.

The critical importance of how to best manage patients with Type 2 diabetes and coronary artery disease is reaffirmed almost daily with scientific publications, as well as presentations in the media on the challenge of the worldwide epidemic of obesity and Type 2 diabetes. As a result, I am happy to say that all of our patients can be assured we are dealing effectively with a major public health problem, and their participation is both admired and appreciated.

The recent trends in obesity and Type 2 diabetes are most intriguing and have been a major societal phenomenon over the past 10-15 years. What are the reasons for the increasing proportion of populations to be obese? Fundamentally, it is a balance between what we consume in food and how we burn it up with activity. Generally speaking, more energy in and less used up in our daily lives results in obesity. However, there are also individual differences. Studies have shown that those who gain the

most weight when overeating are those who are less active in their usual daily chores compared to those who maintain usual weight.

One of our major challenges in the BARI 2D trial is to help all of our participants achieve a reduction in weight. We have combined dietary information with the encouragement of regular physical activity tailored as much as possible to each individual's lifestyle and limitations. In addition, we hope to collect more data on "movement" of our patients in BARI 2D with pedometers (instruments that measure how much one walks). You will be hearing more about our continuing efforts to help participants achieve healthy lifestyles, which remains a major challenge.

Finally, I'd like to acknowledge and thank all of the participants in BARI 2D for your contributions. It is a large and critically important effort that we all share, and I express the deepest gratitude to you, whose best interest is the study's only interest.

Sincerely,

BARI 2D Frequently Asked Questions:

Q: Where are the 50 BARI 2D sites located?

A: We're all over the world! Take a look at our *BARI 2D Clinical Site map*. See where others are improving their diabetes and heart disease risks.

Ann Arbor, MI
Atlanta, GA
Baltimore, MD
Birmingham, AL
Boston, MA
Bronx, NY
Burlington, MA
Burlington, VT
Charlottesville, VA
Chicago, IL
Cleveland, OH
Columbus, OH
Detroit, MI
Durham, NC
Flushing, NY
Ft. Lauderdale, FL

Gainesville, FL
Houston, TX
Kansas City, MO
Memphis, TN
México, D.F., México
Minneapolis, MN
Montreal, QC
New York, NY
Ottawa, ON
Pittsburgh, PA
Prague, Czech Republic
Providence, RI
Rochester, MN
Sainte-Foy, QC
San Antonio, TX
San Jose, CA



São Paulo, Brazil
Scottsdale, AZ
St. Louis, MO
Toronto, ON

Valhalla, NY
Vancouver, BC
Vienna, Austria
Washington, D.C.

PATIENT SUCCESS STORIES:

E.W.'s Story

Melissa Hill, MS

Coordinator, University of Chicago
Medical Center

79-year-old E.W. has had Type 2 diabetes for 10 years and has a history of high blood pressure and high cholesterol. In December 2002, E.W. had a mild heart attack.

In February 2003, E.W.'s cardiologist, Dr. James Carter (a BARI 2D investigator at the University of Chicago), sent E.W. for a stress test. The results were positive, so the next step was a trip to the cardiac cath lab. There, E.W. was found to have three-vessel heart disease, but despite his recent heart attack, was not experiencing severe angina. The question then became, what to do next?

The decision was made to approach E.W. and his wife regarding the BARI 2D trial. They were especially interested in the benefits they would receive by participating in the study. His wife stated, "After 50 years of marriage, it will be nice to know I have someone to help me get him in line!"

E.W. was randomized to the medical management and insulin-providing arms of the trial. His diabetes was not at goal after the first couple of months, so insulin was added to his daily medications. The results were amazing. By the time his six-month visit came around, his HbA1c was under 7, his cholesterol levels were at goal and he was feeling pretty good (except for those aches and pains one gets after years of hard work!).

He continued to do well up until his one year stress test in February 2004. After this time he began experiencing more angina, which prompted another visit to the cath lab. This time, his heart disease had advanced and intervention was needed. The decision was made to send E.W. for a heart bypass procedure.

The bypass was successfully completed in mid-April 2004. Slowly but surely E.W. has recovered and is now free from chest pain. His diabetes remains under great control, and he is eager to get home from rehab and get settled into his old everyday routine, or as he says, "keeping his wife out of trouble." As he continues to recover, I think that might be the other way around!

BEATING DIABETES: 10 Ways to Win

Adapted from diabetes.about.com

Jamie Hutchinson, BS, MATS

Coordinator, Boston Medical Center

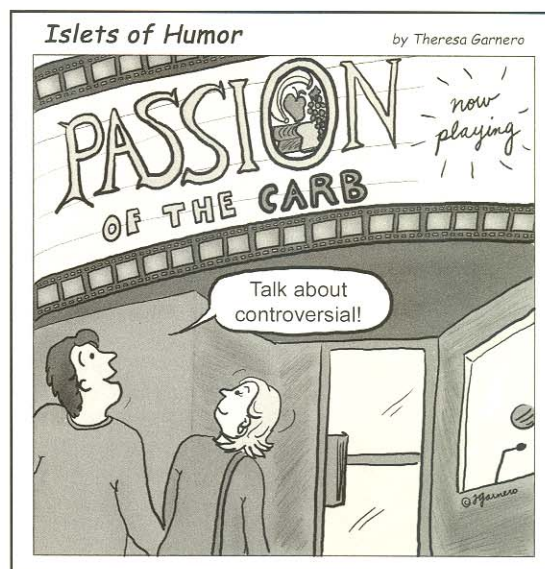
Diabetes.about.com is a great resource for anyone seeking information about diabetes. This Internet site contains a list of 10 ways to slow the progression of your disease and enjoy a better life. Over the next few issues, we will explore what each of these means in terms of managing your diabetes. For now, take a look at the list and ask yourself how you are doing on each one.

10 Ways to Slow Your Progression

1. Lower Your HbA1c
2. Take Care of Your Feet
3. Quit Smoking
4. Engage in Daily Physical Activity
5. Eat Right
6. Stay on Schedule
7. Get Your Immunization Shots
8. Manage Your Mood
9. Take Medications as Directed
10. Get Educated

What shots? Me, moody? Smoking is related to my diabetes? Schedule?

Remember that you're in charge of your own healthcare, and your diabetes care provider is a partner – not a dictator or magician. An educated patient is an empowered patient, so learn all you can about diabetes treatment. Pay attention to how food, physical activity and lifestyle choices impact your glucose levels, and stay focused on the goal of controlling your diabetes instead of letting it control you. Now you know the importance of #10 – Get Educated, which is exactly what this newsletter will help you do.



Defeat Diabetes Foundation
www.DefeatDiabetes.org

To see more of Theresa's work, check out her diabetes cartoon book *DIABETEase* at www.tgarnera.com

BEAT OF BARI 2D: Focus on Blood Pressure

Tammy Touchstone, RN

Coordinator, Memphis VA Medical Center/University of Tennessee

By now you have noticed that we check your blood pressure every time we see you in the clinic. The blood pressure goal we hope to help you achieve is less than 130/80.

To help us measure your blood pressure accurately, **be sure to take your medications before your visit.** If you have been instructed not to eat before your visit, take your heart and blood pressure medications with a small amount of water. This may save you a return trip to recheck your blood pressure after taking your medications. If you have been instructed to check your blood pressure at home, record your readings and bring them with you for clinic visits.

Some factors that influence your blood pressure include: obesity, eating too much salt, alcohol use, smoking, stress, some over-the-counter medications (for example, cold medications), pain and lack of physical activity. These are all risk factors that you can control with decisions you make each day.

Here's a tip: when your family members ask what you want for your birthday or the holidays, tell them a blood pressure machine!

FOOD FOR THOUGHT: Fat Can be Good!

Chris Kwong, RD

Coordinator, University of Minnesota

"You say I should eat more fat?" Yes, modifying the type of fat you eat can actually help lower your cholesterol levels!

All fats have the same number of calories per teaspoon, but differ in chemical structure. Read the nutrition label and try to cut down on foods containing SATURATED fats, the ones that are firm at room temperature, such as canned shortening or bacon fat. These fats are found in many convenience foods. Replace saturated with UNSATURATED fats. Choose oils or margarines that contain no more than two grams of saturated fat per tablespoon. Some healthy fat choices are canola oil, olive oil and many types of nuts.

Enhance your eating by using these oils to:

- Brown meat or pan-fry fish
- Sauté onions
- Make "cream" sauces
- Make popcorn

If you find yourself consuming more fat calories than before, cut back on portions to avoid weight gain. Enjoy the flavor that added fats bring to your meals!

MOVING RIGHT ALONG:

Jump Start Your Physical Activity Routine

Elaine Massaro, MS, RN, CDE

Coordinator, Northwestern University
Feinberg School of Medicine

Summertime provides us with a wonderful opportunity to enjoy the sunshine and keep fit at the same time. To help you along the way, here are some tips from the American Council on Exercise and other fitness experts:

- Write down your goals and how you plan to achieve them. By doing this, you're solidifying your goals and showing that you're serious about them and committed to making these lifestyle changes.
- Review your goals periodically to make sure you're on track, and upgrade them as you make progress.
- Schedule your workout times in an appointment book or calendar just like you would a business meeting or a doctor's appointment.
- Make sure you don't bite off more than you can chew. For instance, don't start out with a goal to work out five days a week if you've never exercised that much before. Twice a week would be more reasonable. You can always add additional days as you become more accustomed to working out.

The idea of losing weight can seem overwhelming, but breaking it into five-pound increments will make it seem much more doable. For example, if you want to lose 30 pounds, try breaking it down into six five-pound increments.

Make sure your goals aren't too general. Goals that are not easily understood and somewhat ambiguous, such as "I'm going to engage in more physical activity" or

“I’m going to become more fit,” tend not to be adhered to because they’re rather vague. The best goals are very specific, such as “I’m going to engage in physical activity by walking briskly for 20 minutes three days a week.”

Remember that a short workout is better than no workout at all. You may decide to split your 20-minute walking time into two 10-minute segments.

Some people hit a plateau when engaging in physical activity for a certain amount of time – say 30 minutes – and it feels like drudgery, so they don’t work out at all. Every little bit of physical activity is beneficial and counts. If you hit this kind of flat spot, cut back on either the intensity or how long you engage in physical activity.

Psych yourself up with positive language. Instead of telling yourself that you’re too tired to engage in physical activity, use “positive self-talk” to remind yourself of the sense of accomplishment you’ll feel and how it can boost your energy and help control stress. It’s a free anti-depressant – a lot cheaper than medication.

Don’t give up just because of a little soreness. When people are feeling sluggish, stiff or achy, often they retreat to the couch when the body really is craving movement.

Cold, wet or windy weather and illness may make it difficult to get out to the gym, so exercise videos and DVDs can be handy. Check out some at ozonefitness.net, including cardio, strength training and abdominal exercises. Also, check your local listings for exercise shows such as *Body Electric* and *Sit and Be Fit*.

Give it a try ... you certainly will reap the benefits of regular physical activity using a method that you enjoy!

Contact:

If you have further questions, please contact your doctor or your local BARI 2D clinical site.

Skinny Chicken

*Bernardo Vargas, BS
Coordinator, NYU School
of Medicine*

1 cup bread crumbs
1/4 cup Parmesan cheese
1 tsp garlic powder
1 tsp onion powder
1 tsp fresh thyme, minced
2 tsp paprika
2 eggs
2 egg whites
1 tsp hot pepper sauce, to taste
1 1/2 lb boneless skinless chicken
breasts, or (6) 4 oz. halves
3 tbsp olive oil
Fresh ground pepper and salt to taste

1. Preheat the oven to 350°F. Combine bread crumbs, Parmesan cheese and spices in a plastic bag.
2. In a shallow bowl, beat eggs and egg whites. Add hot pepper sauce. Dip chicken breasts into beaten eggs. Roll in bread-crumbs mixture.
3. Spread chicken breasts out on a cookie sheet. Drizzle olive oil on each chicken breast. Bake for 30 to 35 minutes, or until no traces of pink remain.

Makes six 3-4 oz. servings.

Each serving contains:

307 calories

15 g carbohydrate

33 g protein

12 g total fat

2 g saturated fat

142 mg cholesterol

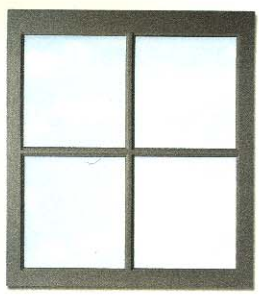
343 mg sodium

Exchanges: 4 lean meat, 1 starch

Best served hot; can be chilled. If transporting, use an insulated container with an ice pack to help maintain a safe temperature. For safe food, don't let cold OR hot food sit in warm temperatures for more than 2 hours.

Hint: Cut up any leftover chicken and add to a salad.

BARI 2D
A Clinical Study



BARI 2Day & 2Morrow

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