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	<p>GFX Center</p> <p>dLife For Your Diabetes Life</p>	<p>VO 1</p> <p>dLifeTV, the only show for your diabetes life. Packed with information, insights, cooking, and real stories about real people. dLife brings it all together to help you live a healthy diabetes life.</p>
	<p>Shots of different diabetes treatment options</p>	<p>Nicole Johnson</p> <p>Today on dLife, treatment options for type 2 diabetes. What's available and what's on the horizon.</p>
	<p>Shot of filming TV show</p>	<p>Nicole Johnson</p> <p>He's world famous, he's hosted a popular TV show for more than 40 years, and he lives with diabetes.</p>
	<p>Shot of football coach on the field</p>	<p>Nicole Johnson</p> <p>Plus, a high school football coach tackling diabetes on and off the field.</p>
	<p>Lower Third:</p> <p>Nicole Johnson Type 1 Diabetes, Miss America 1999</p>	<p>Nicole Johnson</p> <p>Welcome to dLife, your source for a healthy diabetes life. I'm Nicole Johnson. 21 million Americans have diabetes. Of those, 19 million have type 2 diabetes. The number of people who live with type 2 diabetes has increased dramatically in recent years. But also on the increase, treatment options. That's our top story. New ways of treating type 2 diabetes.</p>
	<p>Lower Third:</p> <p>Christine Clegg Type 2 Diabetes</p>	<p>I treat my type 2 diabetes uhm.. in a couple of ways. Uhm.. I go to regular doctor's appointments uhm.. to check to make sure that my health is where it should be. Uhm.. I take Glucophage a couple times a day. Uhm.. and I try to exercise and eat a good diet, but I'm new to all of this, so I'm learning as I go along.</p>
	<p>Shots of salad, exercise facility, and medications</p>	<p>VO 2</p> <p>Though diet and exercise remain key components of diabetes treatment, people with</p>

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		type 2 diabetes now also have a variety of options to manage their disease. That wasn't the case 20 years ago, when an overweight Mark August was told his blood sugar was too high.
	Lower Third: Mark August Type 2 Diabetes	Mark August At that time, doctors didn't think that glucose levels that were under 200 were serious enough to take insulin. And at that time, there really weren't very many oral drugs available. You were asked to ah.. watch your carbohydrates and your sugars and ah.. if you were overweight, ah.. they asked you to ah.. try and lose weight. But that was pretty much- at that time, that was the treatment.
	Mark eating Mark talking with his doctor Shots of different medications	VO 3 Mark lost some weight and did the best he could to control his diabetes, but he didn't really get good control until the late 1990s, when Mark and his doctor experimented with several new medications in their search for tighter control and few side effects. Mark was eventually put on a class of oral medication called TZDs, that decrease insulin resistance.
	Mark talking	Mark August It was kind of a trial and error thing until you find the combination that ah.. works.
	Mark taking oral medication and insulin shots	VO 4 Mark was successfully able to manage his diabetes with oral medications. But after 10 years, it was no longer enough, and insulin was added to his treatment.
	Lower Third: Slow-acting insulin is absorbed slowly and consistently over 24 hours	Mark August Well I take two different kinds of insulin. The Lantis is a slow-acting insulin, where the Humalog is a fast-acting insulin.
	Lower Third: Robert Zimmerman, M.D.	Dr. Robert Zimmerman We've now evolved over time where we now like to

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	Endocrinologist, Cleveland Clinic	give multiple shots of insulin over the day so that we can more finely tune control of the blood sugars. And the hope is that by having much better control of blood sugars, we can decrease the long-term complications of diabetes.
	Clarence Davis walking down the street	VO 5 Clarence Davis is a good example. He knew very well about the health risks of diabetes, but still allowed his weight to balloon to 340 pounds.
	Lower Third: Clarence Davis Type 2 Diabetes	Clarence Davis My grandmother, she- she had ah.. diabetes. And her sister, my two- my aunts, her sisters, they died from it. But I didn't, you know, you figure that it's not going to happen to me.
	Clarence Davis walking down the street	VO 6 He didn't even recognize the signs, when chest pains forced him to go to the hospital.
	Clarence Davis talking	Clarence Davis I went to the doctor just to get a doctor's note, because I didn't go to work. Because I was saying that I had pain in my chest. I was just telling the doc. And he just said, "Let me check your sugar." My sugar was so high, they couldn't read the number. I wound up staying in the hospital for ah.. two months.
	Lower Third: Symptoms of complications often appear before type 2 is diagnosed	VO 7 Clarence was given oral medications and sent home.
	Clarence at home with his family	Clarence Davis I started with pills and then I wasn't taking them. I was still in denial and drinking and stuff because I didn't believe it, you know.

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	<p>Clarence walking down the street with his family</p>	<p>VO 8</p> <p>When he really started feeling sick, he went to a class about diabetes and spoke to a peer educator.</p>
	<p>Lower Third:</p> <p>Recebba Sauvey, RN, CDE Cleveland Clinic</p>	<p>Becky Sauvey</p> <p>Education is not handing a booklet to someone. It's not asking them to watch a patient education video. It's literally at that person's side, st- taking them through step by step.</p>
	<p>Becky Sauvey at her job</p>	<p>VO 9</p> <p>Diabetes educator, Becky Sauvey, has spent years teaching patients about diabetes and how to manage it, helping them with food choices, blood testing, medication delivery, and whatever else they might need. She's seen how important education is to successful treatment and how it has changed.</p>
	<p>Becky Sauvey talking</p>	<p>Becky Sauvey</p> <p>Before it used to be, "This is what you'll do." And now it's, "This is why you need to do this." And let's make it work for you.</p>
	<p>Clarence Davis talking</p>	<p>Clarence Davis</p> <p>If somebody tells you it's easy, they're lying. It's very hard to- to change. But I, you know, I have learned to change.</p>
	<p>Clarence preparing food</p> <p>Clarence giving himself shot</p>	<p>VO 10</p> <p>When it finally clicked for Clarence, he talked to his diabetes educator and his doctor. It was suggested that he take insulin. He now gives himself two shots a day.</p> <p>Dr. Robert Zimmerman</p> <p>I think education is the cornerstone of managing patients that have type 2 diabetes.</p>

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	<p>Shots of different diabetes medications</p>	<p>VO 11</p> <p>Today, insulin is regularly used in treating people with type 2 diabetes. And doses can now be measured much more carefully, using various kinds of needles, pens, and pumps to deliver the drug. For those who have trouble taking injections, insulin now comes in a form that can be inhaled.</p>
	<p>Dr. Zimmerman talking</p>	<p>Dr. Robert Zimmerman</p> <p>If you have type 2 diabetes, you might be able to get by with adding this to the oral agents and not having to take any shots.</p>
	<p>Patient with Byetta</p>	<p>VO 11</p> <p>Another new treatment, Byetta, does involve injections. It's not insulin, but is intended to control type 2 diabetes by helping patients lose weight.</p>
	<p>Patient injecting Byetta</p>	<p>Dr. Robert Zimmerman</p> <p>If they can lose weight and have their blood sugars under control, they are sometimes very willing to try this new agent.</p>
	<p>Lower Third:</p> <p>Galvus is not yet FDA approved for sale in the U.S.</p> <p>Shots of people eating</p>	<p>VO 12</p> <p>A new class of therapeutic agents called DPP4 inhibitors include Genuvia and Galvus. DPP4s lower blood glucose by stimulating insulin secretions in response to food intake and have the added benefit of curbing hunger, which helps reduce food intake.</p>
	<p>Lower Third:</p> <p>Robert Zimmerman, M.D. Endocrinologist, Cleveland Clinic</p>	<p>Dr. Robert Zimmerman</p> <p>I think that this new oral agent is going to have ah.. a big potential as possibly being a first or second line agent uhm.. in- in helping people who have type 2 diabetes.</p>

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	<p>Cleveland Davis playing basketball</p> <p>Man on treadmill</p>	<p>VO 13</p> <p>Of course, diet and exercise are still an important part of treatment. They even allows some people with type 2 to control their disease without medication.</p>
	<p>Mark eating</p> <p>Clarence putting on his child's shoe on a park bench</p> <p>Mark with grandson</p> <p>Clarence at home with children</p>	<p>VO 14</p> <p>For Mark and Clarence, the struggle with diabetes continues. Luckily for them, many new treatment options are available and the stakes couldn't be higher. Mark has a new grandson and is looking forward to teaching him how to fish. Clarence is a single parent with a family to support.</p>
	<p>Clarence talking</p>	<p>Clarence Davis</p> <p>I did a lot of damage to myself. I have a lot of health problems but ah.. I'm doing much better, because I'm taking care of them.</p>
	<p>Mark and his wife at the grocery store</p>	<p>Mark August</p> <p>It's a thing that you have to come to grips with.</p> <p><i>One sugar in that one, too. That's great.</i></p> <p>For your family's benefit and for your own benefit, you need to keep it under control. And you just have to do it as if it were a job.</p>
	<p>Shots of Dr. Jackson, outside of Joslin Diabetes Center, and research lab</p>	<p>Nicole Johnson</p> <p>So that's what's available now for people living with Type 2 diabetes. But what's on the horizon? Up next, a discussion with a senior physician from the Joslin Diabetes Center about new treatments already in the works.</p>
	<p>GFX Center</p> <p>dLife</p>	

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	For Your Diabetes Life	
	Lower Third: Nicole Johnson	Nicole Johnson Welcome back. In recent years, we've seen some big breakthroughs in type 2 treatment. So what's next? Well joining me to shed some light on the future of type 2 treatment is Dr. Richard Jackson. He's a senior physician at Joslin Diabetes Center and an assistant professor at Harvard Medical School. Welcome, Dr. Jackson.
		Dr. Richard Jackson Glad to be here, Nicole.
		Nicole Johnson One of the big things that hit the markets here in the last couple of years was Byetta. Can you explain what is Byetta and how does it work in the body?
	Lower Third: Richard Jackson, M.D. Director of Outreach and Sr. Physiian Joslin Diabetes Center	Dr. Richard Jackson Yes. Researchers have been looking at natural hormone, GLP-1, in the body for years and really wanted to give it to people with diabetes. They could and it was effective, but they had to give it intravenously, because it broke down quickly. Some other researchers looking at gila monsters, for reasons we can only suspect, found in the saliva of gila monsters a substance similar to that that didn't break down. So they were able to modify it and we came up with exenatide, which is Byetta.
	Lower Third: Byetta has been available in pharmacies since June 2005	Dr. Richard Jackson And it's ah.. opened up a whole area of promising new medications ah.. called incretions. One of the things they do is when you eat, your gut naturally releases this hormone, GLP-1. And that increases the insulin your own pancreas puts out in response to the meal.
	Dr. Jackson talking at table with Nicole Johnson	Dr. Richard Jackson A second problem in type 2 diabetes is glucagon, which is probably a little too high. Glucagon

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		counteracts the effects of insulin and can make your glucose higher. Exenatide, or Byetta, decreases glucagon.
	Simulation of stomach and digestion	Dr. Richard Jackson In addition, it slows the transit of food from your stomach through your gut. And that sort of delays the effect it has on increasing your glucose and also has effects on appetite. So that one of its interesting side effects is that it is associated with some weight loss.
	Nicole Johnson talking	Nicole Johnson There's this new class of drugs DPP4 inhibitors, which most of us know them by the names of Galvus and Genuvia.
	Lower Third: Galvus is not yet FDA approved for sale in the U.S.	Dr. Richard Jackson Yes.
	Lower Third: Galvus is not yet FDA approved for sale in the U.S.	Nicole Johnson What are they? How do they work, and why does a person need to take them?
	Dr. Jackson talking	Dr. Richard Jackson They're the newest medicines that we have. They work ah.. in a similar way to exenatide or Byetta that we talked about. Your body makes a hormone called GLP-1.
		Nicole Johnson Okay.
	Lower Third: GLP-1 is a natural hormone, which stimulates insulin production.	Dr. Richard Jackson And that's broken down immediately by an enzyme, DPP4. By inhibiting DPP4, you allow your body's own natural hormone, GLP-1, to be around longer and be more effective.

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	<p>Animated diagram of how insulin works in the body</p>	<p>Dr. Richard Jackson</p> <p>It increases your insulin output in response to a meal and suppresses the glucagon your liver makes, which can make your glucose go up. So it does two things that are helpful for your blood sugar. So these two new medicines inhibit this enzyme so that your body's own natural hormone is around longer and can be more effective than lowering your glucose.</p>
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>Now much of the rise in type 2 diabetes is attributed to obesity. What is hitting the market to help with the obesity problem?</p>
	<p>Lower Third:</p> <p>Rimonabant is not yet FDA approved for sale in the U.S.</p>	<p>Dr. Richard Jackson</p> <p>There's a class of uhm.. naturally occurring receptors in your body called ah.. canabanoids. It's sort of ah.. associated with food and mood uhm.. and other things. Rimonabant inhibits the receptor ah.. for one of these canabanoids. So that it decreases ah.. appetite some and also seems to have some effect on ah.. the glucose also.</p>
	<p>Dr. Jackson talking</p>	<p>Dr. Richard Jackson</p> <p>It has side effects that we need to learn more about. Because by affecting the appetite, there's a slight increase in depression and there may be some other concerns. So we need to learn more about it.</p>
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>So with every medication, there's a little bit of a tradeoff.</p>
	<p>Dr. Jackson talking</p>	<p>Dr. Richard Jackson</p> <p>Well with- with medications, probably except for insulin, ah.. which is sort of the most natural medication, and- and probably underused in people with type 2, because of all the myths that have grown up about insulin.</p>

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	<p>Lower Third:</p> <p>Myths include injection pain and excessive weight gain.</p>	<p>Dr. Richard Jackson</p> <p>But, you know, with someone with type 2 who's been in good control, has their A1C on target, ah.. then the disease progresses. And we know that over time, despite what anyone does, the diabetes itself changes and they make less insulin, the type 2.</p>
	<p>Dr. Jackson talking</p>	<p>Dr. Richard Jackson</p> <p>So if it comes a time when their A1C starts to go above their target, if they added insulin at that time, one of the new long-lasting insulins, Lantus or Levimir once a day injection, it could be very easy to do and very successful.</p>
	<p>Dr. Jackson talking</p>	<p>Dr. Richard Jackson</p> <p>Too many people wait until they have troubles or their A1C's really high and then it's complicated and harder to do. So I think we underlook insulin as a very useful medication. Of course, the most successful treatment is exercise.</p>
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>So the bottom line is there's not one pill or one drug that's going to solve all the problems, but it's a combination of behavioral change and medication.</p>
	<p>Dr. Jackson talking</p>	<p>Dr. Richard Jackson</p> <p>Right. And I think that what people need to do is to think about starting early and not be afraid of it. Because when you first get diabetes, it's much easier to find the right path to getting successful treatment.</p>
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>What about the inhalable insulin?</p>
	<p>Dr. Jackson talking while sitting at table with Nicole Johnson</p>	<p>Dr. Richard Jackson</p> <p>So there's ah.. inhalents and there's one form that's available now. And there's some others that are sort of in the pipeline that'll be coming out.</p>

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	<p>Lower Third:</p> <p>Exubera, the first inhaled insulin, was approved by the FDA in 2006.</p>	<p>Dr. Richard Jackson</p> <p>I'm not sure what place they'll have. More choices is always better.</p>
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>Right. They're all such exciting developments. And thank you for helping us understand them just a little bit more.</p>
	<p>Dr. Jackson talking</p>	<p>Dr. Richard Jackson</p> <p>Yes.</p>
	<p>Lower Third:</p> <p>www.dLife.com/type2treatment</p>	<p>Nicole Johnson</p> <p>Well to help you keep track of the latest in type 2 care, dLife has created a handy checklist of information for you to discuss with your healthcare provider. Print it out a dLife.com/type2treatment and bring it along to your next doctor's appointment.</p>
	<p>Shots of Don Francisco</p>	<p>Nicole Johnson</p> <p>Coming up, <i>Sabado Gigante's</i> Don Francisco and how he lives with diabetes.</p>
	<p>GFX Center</p> <p>dLife</p> <p>For Your Diabetes Life!</p>	
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>Welcome back. For more than 44 years, audiences across the United States and Latin America have tuned in every Saturday for <i>Sabado Gigante</i>, the variety show seen in 40 countries by over 100 million viewers. Don Francisco, the show's creator and host, lives with type 2 diabetes. He faces the challenges of diabetes head on.</p>
	<p>Don Francisco in the barber shop</p> <p>Lower Third:</p>	<p>Don Francisco</p> <p>I have to manage my diabetes only with the meter one time a day. That means when I wake up, during the day, what I do only is eating healthy, very</p>

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	<p>Don Francisco Host of <i>Sabado Gigante</i>, Type 2</p>	<p>little carbs, no sugar, no fat, no food. That's what I'm doing for- for five- almost five years, four years.</p>
	<p>Lower Third: Two million Hispanic-American adults have diabetes.</p>	<p>Don Francisco But I knew always that one day I going to have it, because my mother had that, my grandfather had the same problem, and this is part of my- my heritage.</p>
	<p>Don Francisco on his show, <i>Sabado Gigante</i></p>	<p>Don Francisco Well, I have to tell you that I was selected not because I'm handsome, not because I'm intelligent, no because ah.. I'm good. <repeats in Spanish> Eh.. I was selected because I have diabetes. Who here in the audience <repeats in Spanish> For how long you have diabetes? Man: Quatro año.</p>
	<p>Don Francisco on his show, <i>Sabado Gigante</i></p>	<p>Don: You have had diabetes for four years? Man: Yes. Don: What do you do for that? <repeats in Spanish> Man: <speaks in Spanish></p>
	<p>Don Francisco on his show, <i>Sabado Gigante</i></p>	<p>Don: You had a test this morning? Man: Yes. Don: How much? Man: Ah.. 130.</p>

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	<p>Don Francisco on his show, <i>Sabado Gigante</i></p>	<p>Don: 130.</p> <p>Man: Yeah.</p> <p>Don: That's high.</p> <p>Man: Yes, sir.</p>
	<p>Don Francisco on his show, <i>Sabado Gigante</i></p>	<p>Don: What did you eat last night?</p> <p>Man: Uhm.. mashed potato only.</p> <p>Don: That's not good.</p> <p>Man: I know.</p>
	<p>Don Francisco on his show, <i>Sabado Gigante</i></p>	<p>Don: <speaks in Spanish></p>
	<p>Don Francisco at dinner table</p> <p>Don Francisco on his show</p>	<p>Don Francisco</p> <p>And I know that if you don't keep your diet and if you don't keep your diabetes in the common range, you are going to have a lot of problems. I'm now almost 65 and I'm trying to avoid that.</p>
	<p>Nicole Johnson talking</p>	<p>Nicole Johnson</p> <p>Up next, the offense and defense of diabetes in high school football.</p>
	<p>GFX Center</p> <p>dLife</p> <p>For Your Diabetes Life!</p>	

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	<p>Lower Third:</p> <p>Nicole Johnson</p>	<p>Nicole Johnson</p> <p>dLife is about real stories of real people living with diabetes. Today's story is about the football coach of Morgantown High's Mohicans. He manages his diabetes while coaching three players who also have diabetes.</p>
	<p>Shot of coach on football field</p>	<p>Phil Luci</p> <p>Everyone back last. Get your heads down. Set, go!</p>
	<p>Lower Third:</p> <p>Phil Luci</p> <p>Football Coach, Type 2 Diabetes</p>	<p>Phil Luci</p> <p>My name is Phil Luci. I'm a football coach at the Morgantown High School and I'm a type 2 diabetic. The ah.. football program here at Morgantown High School over the past 10 seasons, 110 and 9 ah.. with winning four state championships.</p>
	<p>Phil Luci coaching on field</p>	<p>Phil Luci</p> <p>I was diagnosed with ah.. type 2 diabetes in ah.. March 2006. I had no idea. I was getting some- some back pain. I was having trouble sleeping. So I ah.. ended up going to the ER and ah.. well, my heart rate had- had elevated high enough that the doctor was concerned, drew some blood, came back and says, "Did you know you were a diabetic?" And I said I had no idea.</p>
	<p>Phil Luci talking</p>	<p>Phil Luci</p> <p>When I left the hospital uhm.. we were in- we got under complete control of everything that I did ah.. with my diet, nutritionally and so forth. I probably carried 260 pounds. Uhm.. and we used to lift with the kids all the time. And then when I was diagnosed, I- I thought, you know, I need to take the weight off.</p>
	<p>Lower Third:</p> <p>Phil has lost almost 45 pounds since being diagnosed with type 2 diabetes</p>	<p>Phil Luci</p> <p>Ah.. through the grape vine, the head coach was saying, you know, people are telling me that you're not going to be able to coach. That, you know, it's going to wear you down. Ah.. you know, I'm concerned and so forth. Not over you coaching, but</p>

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		over your health.
	<p>Shot of Phil checking his blood sugar</p> <p>Phil coaching on football field</p>	<p>Phil Luci</p> <p>And- and I said, "I check my blood sugar daily, four to five times a day. But I- I do feel good. Uhm.. I feel good coaching. I- I live as normal as anybody else does.</p>
	<p>Kids working out in gym</p> <p>Kids on football field</p>	<p>Phil Luci</p> <p>There are actually three kids in our ah.. in our system that are diagnosed diabetic. Uhm.. they're all type 1 kids. Ah.. they treat each other as- as normal as the other kids. There's no- no difference between any of them.</p>
	<p>Coach Luci talking</p>	<p>Phil Luci</p> <p>Football and diabetes are very similar, you know. Each and every week, as a football coach, you try to get your kids to do the right things, each and every day to make- take the proper moves on the field. And it's the same way with diabetes. You know, every day that I get out of bed, I want to make sure that I'm eating the right things and getting the right amount of exercise to try to control the things in my life, along with helping ah.. the kids control things in their lives.</p>
	<p>Shots of food</p>	<p>Nicole Johnson</p> <p>Thanks, Coach Luci. When we come back, Chef Michel Nischan with a quick and easy low carb recipe for people with a busy lifestyle.</p>
	<p>GFX Center</p> <p>dLife</p> <p>For Your Diabetes Llife!</p>	
	<p>Lower Third:</p> <p>Nicole Johnson</p> <p>Type 1 Diabetes</p>	<p>Nicole Johnson</p> <p>These days, it's hard to find time in our busy schedules to prepare a good, wholesome meal. If you are living with diabetes, it may be even harder, because many convenience foods are not diabetes friendly. Chef Michel Nischan is here with a time-</p>

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		saving crock pot recipe from our friends at <i>Diabetic Cooking</i> magazine.
	<p>Lower Third:</p> <p>Michel Nischan dLife Chef</p>	<p>Michel Nischan</p> <p>Hi, I'm Michel Nischan and welcome to the dLife kitchen. Now, for a lot of families, cooking a meal can really be a cumbersome chore. I know this, because I have five kids. Two of them have diabetes.</p>
	<p>Lower Third:</p> <p>Pre-packaged and restaurant dishes such as stews, soups & chili may have hidden sugars and salt.</p>	<p>Mischel Nichan</p> <p>Now we have a crock pot Creole chicken and vegetables. And it's gonna be fantastic. The great thing about this recipe is that you can put all your ingredients together in the crock pot and you can let it go for nine hours, even leave it overnight and have a great, wholesome low-carb meal the next day. Now let's talk about some of the ingredients.</p>
	Shot of diced tomatoes	<p>Michel Nischan</p> <p>Here we have some canned diced tomatoes. You can get these in any grocery store. Just make sure when you're reading the label, you're looking to see that there's no added sugar and no added salt.</p>
	Shots of green peppers and herbs	<p>Michel Nischan</p> <p>We also have some frozen okra, fresh chopped green peppers, diced onions, a little bit of celery, and some herbs. I have some fresh parsley and thyme here. I have some dried oregano, a crushed bay leaf, a little bit of ah.. nutmeg, some chili sauce and a little bit of fresh lime.</p>
	<p>Lower Third:</p> <p>Worcestershire sauce can be substituted for lime juice</p>	<p>Michel Nischan</p> <p>These are all good things that spell Creole flavor. We take an insert of about a six to eight quart crock pot and we're going to put all the vegetables in. You don't have to do it in sequence. There's no steps involved. You just kind of put the stuff in. A little bit of low sodium chicken stock.</p>
	Michel Nischan talking in his kitchen	<p>Michel Nischan</p> <p>When you cook with a crock pot, it needs to be at</p>

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		<p>least half full, but not more than two-thirds, or it will affect the cooking time. Now I'm going to place this in my crock pot base on low and cook it for about nine hours.</p>
	<p>Chef Nischan shows us the cooked food</p>	<p>Michel Nischan</p> <p>So here we have an almost finished product. That smells really fantastic. You can see in here all the veggies. They're fully cooked. They're nice and tender. But they're also not falling apart. Now the last step to this really great dish is to get our protein in there.</p>
	<p>Chef Nischan sautéing chicken</p>	<p>Michel Nischan</p> <p>What we're going to do is sauté off a little bit of chicken. I have a little bit of olive oil and I'm going to add my chicken. And I'm going to sauté it just for like about a minute or two, until it turns brown on all sides. Searing brings caramelization to the meat. It makes it a lot more tasty. It also helps cook off some of the excess fat, so that you don't have to do so much skimming. And it takes away those extra added calories from fat, which you want to avoid anyway if you're living with diabetes.</p>
	<p>Chef Nischan cooking</p>	<p>Michel Nischan</p> <p>Now this is what I'm talking about. Take a look at this chicken. It's just beautiful golden brown, really seared everywhere. I'm going to add this to the crock pot. But first, I'm going to sweeten it with ah.. nonsugar sweetener, because we have, you know, a lot of things with acid in here. We have tomatoes, we have peppers, we have the lime juice. So we're just balancing that with a little bit of sweetness.</p>
	<p>Lower Third:</p> <p>Stevia is an herb native to South America</p>	<p>Michel Nischan</p> <p>Another variety on the market. I like to use Stevia, because Stevia is co- a completely natural product made from the herb Stevia and it's completely carbohydrate free. Now we're going to take this chicken and just stir it in. And we're going to just let that sit and simmer, maybe about another 15 to 20 minutes, just to make sure the chicken is cooked all</p>

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		the way through.
	<p>Right half: Shot of stew</p> <p>Left half:</p> <p>Creole Vegetables and Chicken</p> <p>Per ¾ Cup: Calories: 95 Carbs: 9g Fiber: 3g Protein: 10g Total Fat: 3g</p>	<p>Michel Nischan</p> <p>And there you have it, a dish that's low in carbs, low in fat, and very diabetes friendly.</p>
	<p>Lower Third:</p> <p>www.dLife.com/recipebox</p>	<p>Michel Nischan</p> <p>Now for more recipes like this and tips, join us at the website at dLife.com/recipebox, or just come back and see us again here in the dLife kitchen. I'm Michel Nischan. Thanks for joining us.</p>
	<p>GFX Center</p> <p>Shot of Diabetic Cooking magazine</p>	<p>Nicole Johnson</p> <p>Thanks to our friends at <i>Diabetic Cooking</i> magazine.</p>
	<p>Lower Third:</p> <p>Hear more from today's guests on dLife Backstage Podcasts at www.dLife.com</p>	<p>Nicole Johnson</p> <p>That's all the time we have. We'll be back again next week with another edition of dLifeTV, to inform, inspire and connect for a healthy diabetes life.</p>
	<p>GFX Center</p> <p>dLife is produced by LifeMed Media and does not represent the views of opinions of CNBC, Inc.</p>	
	<p>GFX Center</p> <p>creator Howard Steinberg</p>	
	<p>GFX Center</p>	

TIMECODE	VISUALS	AUDIO
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	<p>GFX Center</p> <p>supervising producer Tom Karlya</p> <p>senior producer William Sorensen</p> <p>producer Erik Sorenson</p>	
	<p>Roll credits on left, Nicole Johnson on right</p>	<p>Nicole Johnson</p> <p>Remember, we're not role models. We're people living with diabetes, just like you. What we do and how we manage may work for us, but everyone is different and you have to work with your diabetes care team to find out what works best for you. Remember, it's your diabetes and there's no substitute for getting control of it.</p>
	<p>GFX Center</p> <p>dLife</p>	