

<Card: Program may contain adult subject matter and may be unsuitable for children.>

<Card: Nicole Johnson Baker>

Nicole Johnson Baker: Hello. I'm Nicole Johnson Baker.

<Card: J. Anthony Brown>

J. Anthony Brown: Hi, I'm J. Anthony Brown.

<Card: Jim Turner>

Jim Turner: Hi. I'm Jim Turner.

<Card: Mother Love>

Mother Love: Hello, babies. I'm the even more fabulous Mother Love.

Nicole Johnson Baker: Type 1.

J. Anthony Brown: Type 2.

Mother Love: Type 2.

Jim Turner: Type 1.

J. Anthony Brown: And I'm here to talk about my..

Jim Turner: My..

Mother Love: My..

Nicole Johnson Baker: My dLife.

<Card: dLife; For Your Diabetes Life!>

<Various shots of upcoming guests>

Mother Love Voice Over: Today on dLife, the story of a heroic mom, ways to stop your diabetes from getting you down, a diabetes management program that just says do it, and Broadway legend, Elaine Stritch. Now please welcome your hosts, Nicole Johnson Baker, J. Anthony Brown, Jim Turner, and me, the even more fabulous Mother Love.

<Card: Mother Love, Author & TV Personality>

Mother Love: Welcome to dLife, everybody. You know, it's natural to feel overwhelmed by diabetes, very emotional.

Nicole Johnson Baker: Absolutely.

Mother Love: And it can get really, really difficult.

<Card: J. Anthony Brown, Comedian & Co-Host of the Tom Joyner Morning Show>

<Card: Studies suggest diabetes doubles the risk of depression compared to those without the disease.>

J. Anthony Brown: Well, that's one of the things about uh.. dealing with diabetes is that dealing with diabetes is enough. And so you kind of get into the position sometimes where like I'm dealing with this and I don't want to deal with anything else but this. You sometimes block things out and a lot of times people don't understand. You know, what's wrong with you? Why- I- you've got decisions you've got to make. But sometimes, there are days when I- I just want to deal with just being a diabetic. And that's tough enough.

<Card: Jim Turner, Actor, Bewitched and HBO's Arliss>

Jim Turner: Uh.. oftentimes, I have low blood sugar dreams and dreams when- uh.. when I have low blood sugar are always totally real. And one that is a recurring low blood sugar dream is every wire in the world is broken, cut, disconnected. Every piece of glass is broken. And it's my job to put them all back together. And I wake up, and I'm like uh ah, and it's just- it's the diabetes. It's- that's what- I mean that's what physically causes it, 'cause it's a low blood sugar, but it's- that's what it's doing.

Mother Love: And you can feel that in your sleep?

Jim Turner: Right.

Mother Love: You feel like..

Jim Turner: Oh, I dream that. I dream that. I wake up out of those just panicked and..

J. Anthony Brown: Well, just testing yourself in the morning can just set the tone for your whole day. I mean you never know what those numbers are gonna be when you test, so it's- I kind of call it I mean uh.. diabetic bingo. And that- that can set the mood for the entire day. If it's high, you'll- you know, you'll go, "Oh, my god. What did I do wrong?" And if it's low, you go, "What did I do wrong?" I mean you never can win. You never know what it's gonna be.

Mother Love: But see, now that I dis- I- I-- when I take my blood sugar in the morning when I get up and if it's high from something I've done, then I know that I've done something the night before and I try to monitor myself that day. You know, I really try not to let it get me down, but sometimes, you know, you- it just- it just gets to you and you just got to roll with it.

J. Anthony Brown: Right.

Jim Turner: Nicole has our story of the day. Nicole?

<Card: Nicole Johnson Baker, Author & Miss America 1999>

<Various shots of Bobby and Jesse Pasternak [ph?]>

Nicole Johnson Baker: That's right. Our story of the day is from Barbara Pasternak in Toronto. She writes, "Diabetes has defined my life for more than a decade. My husband and I were about to leave the country when my ten-year-old son, Bobby, was diagnosed. I slept on the floor in Bobby's hospital room that night and kissed the floor realizing I might have been thousands of miles away from him when he needed me most. Just one year later, our son Jesse was diagnosed. For a time, the double whammy left me with morning panic attacks, but in time, we all pulled together to cope with the illness. But I came to learn that others were not as fortunate in a culture that underestimates the needs of people with diabetes. I heard about poor people cutting test strips in half to extend their use. So I began a foundation to help people cope. To date, we have raised almost two million dollars to help young people with diabetes. Bobby and Jesse are now both vigorous young men off in college, but diabetes is still part of our household and it's also an adversary I respect in the work I do every day."

<Shot of audience applauding>

Mother Love: You know, that's really something. You know, I- I really appreciate her letter and what she said that diabetes is an adversary. So many people that are afflicted with this disease do not respect the ramifications and the complications. And, you know, it comes down to okay, you've been diagnosed with diabetes, your children have diabetes, now what you gonna do about it?

Nicole Johnson Baker: You're- you've got to have a game plan. And I often equate it to a game. You know, if you want to be a basketball player, if you say oh, I'm just gonna be in the NBA, but I don't practice, you can't win. And you have to respect the disease, gather the knowledge, and then use the knowledge and use the tools that are available.

Mother Love: And there are so many tools available and you have to take all of that negative energy and transform it into a positive action and say this is my dLife and I am going to take this and I am going to take command of this. When they first told me I had diabetes, I'm like oh, my god. This is- it's- it- you know, it's taken-- you know, half my family has diabetes and I'm like I do not want to have this. I don't want to call anybody, I'm not gonna tell 'em. I'm like okay, now what am I gonna do? I will be proactive. The first thing I had to do was quit smoking.

J. Anthony Brown: That had to be tough.

Mother Love: That was real tough. And when I quit smoking, I could actually taste food and I gained forty pounds. Whoo! I can taste stuff now. You know, we at dLife know

that one of the most positive actions that you can take to control and manage your diabetes is to check your blood sugar and check your blood sugar often. Just as you test before all new activities, eating or taking a long hike, we're going to test before we go any further. Remember, test.

Everybody: Don't guess.

Mother Love: So everybody, let's get testing. When we come back, Elaine Stritch.

<Shot of audience members testing blood sugar>

Nicole Johnson Baker: All right.

<Applause>

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<Applause>

Mother Love: Well, welcome back. Right now, we're very fortunate to have with us a Tony and Emmy award winner. She's talented, she's outspoken, she's been through it all. And she's here to tell us about her dLife. Please help me welcome Elaine Stritch.

<Shot of Elaine Stritch walking on stage>

<Shot of audience applauding>

Elaine Stritch: Hello, sweetheart. How are you?

Mother Love: My love. How are you?

<Shot of Elaine Stritch and Mother Love greeting each other>

Mother Love: Come, sit with me. Well, thank you for joining us. Now, let's get right to it.

Elaine Stritch: Thank you for having me. I think it's uh.. wonderful that this show is on at all. I think it's very important.

Mother Love: It's very timely, don't you think?

Elaine Stritch: What you've all done, yes.

Mother Love: Well, I'd like to talk to you about your diabetes. How does it affect your life?

<Card: Elaine Stritch, Tony & Emmy Winning Actress, Type 1 Diabetes>

Elaine Stritch: In every possible way.

Mother Love: Tell me how so.

Elaine Stritch: Well..

Mother Love: Now, you've been on Broadway, you do all these things, you're very active.

Elaine Stritch: It's a pain in the ass, quite frankly.

Mother Love: Now, do you have control of your diabetes, Elaine?

Elaine Stritch: Uh.. I have- I have control if I pay very rigid attention to it.

Mother Love: Your one-woman Broadway show was called "At Liberty". And in the show, you dealt with it a very brutally honest situation in your life.

Elaine Stritch: Yes, I did.

Mother Love: Let's see. Here's a clip from the show.

<Clip of Elaine Stritch's Broadway show>

Elaine Stritch: You know what helped me a lot? Booze. It's scary up here, you know, so- so you're scared, you drink, you're not scared. What is the problem? So for fifty-eight or nine of those years that I got through all of, I never put a foot on a stage without a drink, or anyplace else come to think of it. But I was very disciplined about all this. I had rules. Up here especially. Anyplace else, who cares? Who's counting? But up here, two drinks. One before the curtain, another at intermission, a little backup and that was it. Well, three maybe.

<Shot of studio audience applauding>

Mother Love: Wow. So you admit that you dealt with alcoholism. How did alcoholism and drinking affect your diabetes?

Elaine Stritch: When I was diagnosed with diabetes, I had been a year sober. Go figure. But I had been a- a real good boozier for all my life, from the time I was-- uh.. well, I had my first drink when I was fourteen years old. And what happened to me is I went on controlled drinking. The doctor said to me, he was a dope, uh.. he said to me, "Do you drink?" And I said, "No." And I was so pleased to be able to say I didn't drink.

Mother Love: Because you had stopped.

Elaine Stritch: Because I had stopped. And I asked him uh.. "What about that? Uh.. if you have diabetes, what do they..?" He said, "Well, you can have a drink or two."

<Card: Studies show even light drinking can increase diabetic nerve damage and make blood glucose control more difficult.>

Mother Love: That was the craziest thing he could have done.

Elaine Stritch: And I'll tell you something. I'm an alcoholic, so two drinks mean nothing to me. And then I went back to having a drink 'cause the doctor said it was okay. So I had two drinks a day, just like I said in the show. Ah, I was so miserable. I can't tell you.

Mother Love: What would you say to someone who was dealing with diabetes and drinking?

Elaine Stritch: Well, uh.. they're- they're gonna die is what's gonna happen to them.

Mother Love: Plain and simple, bottom line.

<Card: Alcohol affects the liver's ability to release glucose and causes erratic blood glucose levels.>

Elaine Stritch: They're- no, I've come too close to dying with the hy- hypoglycemic attacks uh.. sober, sober, you know? You can have..

Mother Love: So imagine what you ha- what would happen.

<Card: Alcoholics with diabetes have a mortality rate 3 times that of alcoholics without diabetes.>

Elaine Stritch: So imagine what would happen because you-- uh.. how- how can you be clear about taking your injections? They're- I mean, you know, this is a- this is a terrific uh.. life and I don't want to lose it. I'm- well, I'm getting up there. I'm getting up to the age where I'm uh.. I'm looking at uh.. leaving the building, you know? I really am. But I'm gonna prolong it as long as I can.

Mother Love: Oh, a- and that's how I am. I am with you. Thank you. Thank you so much, Elaine.

<Shot of audience applauding>

<Martini being poured on bar>

Mother Love: I really, really appreciate you coming and sharing your story with us. Next on dLife, the four Ds, diabetes, depression, drinking, and drugs. Stay where you are. We'll be right back.

<Black screen>

<Shot of audience applauding>

<Card: Jim Turner, Type 1 Diabetes>

Jim Turner: Diabetes is an illness that can get you down. Joining us to talk about depression and the alcohol and drug abuse it can lead to is Joe Solowiejczyk. How is depression connected to diabetes?

<Card: Joe Solowiejczyk, Diabetes Educator and Therapist, Type 1 Diabetes>

<Card: Besides depression, bipolar disorder and anxiety disorders may occur more frequently in people with diabetes.>

Joe Solowiejczyk: It's a sort of chicken or the egg and which came first kind of a question. Uhm.. nobody's really sure. There are not enough studies that have been done in-depth to talk about that. But what we do know is that people with diabetes are at least twice as likely as the general population to suffer from depression. On top of that, with all the medical risks that you face as a person with diabetes, if you have depression, you're four times as likely to suffer from a heart attack down the road.

Jim Turner: Wow.

Joe Solowiejczyk: What we're talking about is a very complex interplay between psyche and soma, body and mind. Many people have talked about having serious bouts of depression and then being diagnosed with type 2 diabetes. The more we investigate mind and body, the more we see that the immune system is a very, very, very potent mediator for what our uhm.. emotional status will be.

Jim Turner: What do you tell people who are depressed about their diabetes? You work with them all the time.

Joe Solowiejczyk: I tell 'em- I tell 'em that you got to be nuts not to be depressed.

Jim Turner: Yeah.

Joe Solowiejczyk: Yeah, because what do you got to do every day with this thing? You have to check your blood sugar, you have to monitor your food. If you're not depressed about-- it's like taking an exam every day or every hour. So I think part of the thing is to let people know that it's okay to be depressed. It's not so much a question of-- the difference between doing it right and doing it wrong is not I am depressed or I'm not depressed, it's how I handle what life presents itself to me as.

Jim Turner: Right.

<Card: A study found that adults with a history of depression have an increased risk of developing type 2 diabetes.>

Joe Solowiejczyk: So if I'm depressed, how do I deal with that? I usually tell the families and the kids and the adults that I work with like I do for myself is to plan my depression days. That takes a little bit of the power out, right? A lot of people are just looking for release and to just sort of say I'm checking out. I don't feel like being responsible. I don't feel like thinking about it. And so that uhm.. there's a higher incidence than we would imagine of drinking alcohol, drugs, and diabetes. The other thing that's important too is just to involve the entire family. If you're working with an adult, to talk about this stuff uhm.. in the context of how it impacts on the family. If somebody has diabetes, it's usually the person who's a family member who brings it to the attention of the person with diabetes that they're having a problem either with depression or drinking. A lot of times, the person with diabetes is the last one to want to acknowledge that I have another thing wrong. Uhm.. I already have enough on my plate. I'm not interested in hearing another diagnosis.

Jim Turner: Exactly.

Joe Solowiejczyk: Yeah. It's important to talk.

Jim Turner: Well, we've got some uh.. questions in the audience I believe.

<Various shots of J. Anthony Brown with audience members>

J. Anthony Brown: Yeah, I'm here with Sam. Uhm.. you have a question for Joe?

Sam: Uh.. yes. Should people with diabetes who suffer from depression get professional help?

Joe Solowiejczyk: Yes, absolutely. And just to take it a- you know, a jump off on that point, I think that in my experience as a nurse and a family therapist, it's one of the areas that has been, in the twenty-nine years that I've been working in the business, the least effectively addressed, but it is how we feel about our diabetes that will determine a lot about how we deal with it medically. And to not deal with the emotional stuff is to sort of set yourself up down the road, and for the healthcare profession to look at rising costs that could be avoided by early intervention and proactive and not making it judgmental. You know, just the way that I have diabetes does- doesn't mean that there's a character flaw. It's another thing that requires help basically, yeah.

Jim Turner: Another question?

J. Anthony Brown: Okay, yeah. I'm here with Sonny.

Sonny: Yeah. You mentioned uh.. that people with diabetes often feel straight jacketed, constrained because of their condition and as a result do drugs, drink to get away from that. Could you expand on that? I mean that sounds like an important point.

Joe Solowiejczyk: A lot of the patients and families that I've worked with have expressed that to me, particularly the ones who are suffering from chemical dependency, either drugs or alcohol, that this is a nice way for them to check out from the anxiety that's associated with having to manage a disease that never goes away. Many of the families that I've worked with over the years have used that expression. That's where I got it from uhm.. about being in a straightjacket, about having to maintain control all the time. And it's a loaded term, be in control, taking control. I want to let go. This is what a lot of them are saying. And so drinking and drugs is a convenient way. It's one thing if you do it once in a while. Everybody does that. But it's another thing if you're doing that all the time as a way of checking out from your life.

Jim Turner: Uhm.. well, thank you. Thank you very much. Everyone stay right there. In a moment, we'll show you a place where people think the best way to take control of your diabetes is just do it.

<Various shots of Joslin Diabetes Center>

<Shot of James Brown>

<Card: James Brown has had 114 entries on the Billboards R&B singles charts..>

<Card: .. and still performs nationwide while managing diabetes.>

<Black screen>

<Shot of audience applauding>

Nicole Johnson Baker: Want to transform your life in just three and a half days? A one of a kind management program run by the Joslin Diabetes Clinic says do it.

<Card: Joslin Diabetes, "Do It" Program>

<Various shots of Joslin Diabetes Clinic>

Man: Good morning, Mary.

Sister Mary Crosby: Good morning.

Man: And how are you today?

Sister Mary Crosby: I'm doing great.

Man: Good. I believe you had a fun evening last night.

Sister Mary Crosby: I did. I went to the Red Sox game.

Man: And- and how was the dinner last night?

Sister Mary Crosby: It was great. My blood sugar at eleven was great and I did not take it at the game this time.

Sister Mary Crosby Voice Over: My name is Sister Mary Crosby and I was diagnosed with diabetes a year ago.

Man: And then what was it when you came back from the game?

Sister Mary Crosby Voice Over: When I first learned I had diabetes, it was overwhelming.

Sister Mary Crosby: 144.

Sister Mary Crosby Voice Over: And I've realized I'm lucky to have a disease that I can control. And so I've made the choice to do something about it.

Man: This is day three of our program.

Sister Mary Crosby: Yes.

Man: So on day one, you had the chance to meet Dr. Cohen and me. You saw the nutritionist, you saw the nurse educator, and you saw the exercise physiologist.

Sister Mary Crosby: Yes.

Man: And today is day three.

Sister Mary Crosby Voice Over: The "Do It" Program is a four-day program of intensive education in diabetes. And it's wonderful because they make recommendations to uh.. help you live a better life.

Woman: All right, Mary. Why don't you tell me what you had for lunch and we'll do the carb counts for it?

Sister Mary Crosby: All right. Okay, I had a piece of chicken.

Woman: Okay.

Sister Mary Crosby: That's free.

Woman: That's free. No- no carbohydrates, yup.

Sister Mary Crosby: My goal before coming was to get rid of insulin and I really realized through Dr. Abramson [ph?] that insulin is the best way to control it and that I haven't failed. It's not that I haven't done everything that I could do.

<Shot of Sister Mary Crosby and woman looking at chart>

Woman: Well, look at this. You're a lot lower than yesterday.

Sister Mary Crosby: Oh, yes.

Woman: Do you ever really have low blood sugar?

Sister Mary Crosby: I've had it maybe three times and that's been be- lately because of the uhm.. dosage of insulin.

Woman: Okay.

Sister Mary Crosby Voice Over: Before diabetes, I'd had all the intentions that all of us have. I'm going to exercise. But I didn't do it.

<Shot of Sister Mary Crosby on stationary bike>

Sister Mary Crosby: After coming here, I realize even more so the uh.. exercise is important. I just turned 60 last year and I have many more years and I wanted them to be good. And you can with diabetes.

Sister Mary Crosby: From this program, the "Do It" Program, you just get a- a new outlook on life in the sense that I have diabetes, but I can live a full life with diabetes.

<Shot of Nicole Johnson Baker and Sister Mary Crosby on stage>

Nicole Johnson Baker: What a wonderful story. That's just great. Joining us now is Sister Mary Crosby who went through the "Do It" Program. Welcome, Sister Mary.

Sister Mary Crosby: Well, thank you.

Nicole Johnson Baker: Thank you for joining us. Now, was there something specific that triggered your decision to go to this intensive program?

<Card: Sister Mary Crosby, Joslin "Do It" Participant, Type 2 Diabetes>

<Card: The Joslin "Do It" Program teaches individuals the skills they need to manage their diabetes.>

Sister Mary Crosby: Well, I was having trouble keeping a level that I should have in my diabetes. Was- the blood sugar level was rising and so uh.. the nurse that we have for the community suggested along with my doctor that maybe the diabetes program at Joslin would be a help to me. And so we looked into it and decided that we would do that week.

Nicole Johnson Baker: And it's a big commitment.

Sister Mary Crosby: Very big commitment.

Nicole Johnson Baker: But so worthwhile.

Sister Mary Crosby: Yes.

Nicole Johnson Baker: Now, in the piece, you said that you- one of the other reasons you went was because you wanted to avoid insulin.

<Card: Among adults with diabetes, 12% take both insulin and oral medications. 19% take insulin only.>

Sister Mary Crosby: Yes, because when I first got diabetes, I was on insulin and medication and I was able to get off. As I learned uhm.. through the program that diabetes is progressive and so Dr. Abramson helped me to realize that it is progressive

and that I wasn't doing anything wrong. That I was doing the things that I should be doing, but that uhm.. I now needed insulin to control and that the best way to control diabetes is through insulin.

<Card: Proper management of diabetes can help prevent many of its complications.>

Nicole Johnson Baker: That's such a great message because so many people are hesitant to use that means of therapy when it could help so many.

Sister Mary Crosby: Yes.

Nicole Johnson Baker: And it does help you control. Now, it almost sounds like you were relieved that your diagnosis was diabetes.

Sister Mary Crosby: Yes, in the sense that I could do something about it and that's what really helped me to take control of it because I realize I do have control and that I can live a very healthy life.

Nicole Johnson Baker: Now, besides helping you to physically manage your diabetes, how did the program help you emotionally?

Sister Mary Crosby: I think the support that was there, uhm.. the doctors and nurses that met with you and gave you encouragement and just gave you ways to deal with it and realizing that uh.. sometimes it gets overwhelming and it's a full-time job. And that uhm.. you- but you can do it with the support of those around you.

<Card: To find diabetes education programs near you, visit the dLife Diabetes Locator at www.dlife.com/locator.>

Nicole Johnson Baker: Exactly. And that's key, that we- we're not alone and we don't ever have to feel alone. So, Sister Mary, thank you so much for being here and sharing your story with us. You can find other education programs around the country that empower you to manage your diabetes by going to the diabetes locator on dlife.com. We'll have more dLife in just a moment. Stay right there.

<Shot of audience applauding>

<Card: Test Your dLife Diabetes IQ. Which of the following is the key to long term control of diabetes? a) Motivation, b) Diet and exercise, c) Emotional support, d) Frequent blood glucose testing, e) All of the above.>

Nicole Johnson Baker Voice Over: But first today's dLife quiz. Which of the following is the key to long term control of diabetes? The answer after these messages.

<Black screen>

<Shot of audience members in Divabetic T-shirts>

Mother Love: These are the Divabetic people. They are from Divabetic.com. And for those of you who want to know, it says whatever sugar can do, I can do better.

J. Anthony Brown: All right.

<Card: Test Your dLife Diabetes IQ. Which of the following is the key to long term control of diabetes? a) Motivation, b) Diet and exercise, c) Emotional support, d) Frequent blood glucose testing, e) All of the above.>

Mother Love: So before we left you, we gave you the dLife quiz. Which of the following is the key to long term control of diabetes? The answer is all of these things are key to long term control of diabetes. So if you guessed e, all of the above, you got it right. Well, that's it for today. Remember, as always, it's your dLife. You're responsible for your diabetes life. We'll see you next week.

<Card: dLife TV on CNBC: next Sunday, 7pm est>

<Card: For tickets call 1-866-dLife-NOW>

<Card: dLife TV is produced by LifeMed Marketing LLC and does not represent the views or opinions of CNBC, Inc.>

<Credits roll>

<Card: Nicole Johnson Baker, Co-Host, dLife TV>

Nicole Johnson Baker: 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 life and there's no substitute for getting control of it.

<Card: Life Med media>

End of Tape 108 Depression