

<show opener>

<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 segments>

Mother Love Voice Over: Today on dLife, get ready to transform yourselves with a diabetes makeover, dispel some dangerous diabetes myths, and learn about some fast and inexpensive meals with diabetic chef, Chris Smith. But now, please welcome your hosts, Nicole Johnson Baker, Jim Turner, J. Anthony Brown, and me, Mother Love.

<Card: Mother Love, Author & TV Personality>

Mother Love: Welcome to dLife everyone. Are you feeling like you're in a rut with your diabetes, feel out of control? Well, this show is about transforming your current state of diabetes management and getting a fresh start. We're talking about a whole makeover and that's not easy.

J. Anthony Brown: Not at all.

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

Nicole Johnson Baker: It sure isn't. In truth it- oftentimes it happens when you reach a crisis point and that's what happened in my life when I had this crisis situation of a comatose episode and figured I can't be lax about my diabetes anymore. I have to be as aggressive as possible and I went to insulin pumps instead of injections. Uh.. but it- also makeovers need to happen all the time for us, don't they?

Mother Love: Yeah. I agree. We were talking one day about uh.. I had to reinvent myself and learn to makeover exercise. I got to get up and you have to get up and you got to move.

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

J. Anthony Brown: You have to do it. You have to push yourself. The hardest part is making yourself do it and staying on a r- uhm.. a schedule of doing it every day or every other day for me.

<Card: 30 to 60 minutes of exercise can affect glucose levels for 24-72 hours.>

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

Jim Turner: My ultimate makeover was when I first was diagnosed in 1970 and I'd felt so horrible for so long and the first time they gave me a shot of insulin it was like an hour later I went, "Oh, my God. What- whatever that was, I want that." I- I know what that other f- I re- really remember that old feeling.

Mother Love: And you never want to feel that again.

Jim Turner: No, I do not.

Mother Love: Well, we have a makeover story today. Nicole, who is it from today?

<Nicole standing in front of bulletin board>

<Various shots and clips of Carlos Lazaloo [ph?]>

<Card: 28% of Native Americans in Southern Arizona have diabetes.>

<Card: Regular exercise lowers triglyceride levels and blood pressure.>

Nicole Johnson Baker: Today's letter comes from Carlos Lazaloo from Zuni, New Mexico. "You would think as a healthcare provider I would know better than to take diabetes lightly, but I did. I am a nurse and a Native American, a religious priest in the Zuni tribe. Diabetes has been a major cause of health problems for my family and my tribe, but even after I was diagnosed, I had a hard time being well controlled. I wanted some help so I volunteered to be in the BD diabetes makeover. I got help on a number of issues and now I'm eating better and exercising every morning. My 13-year-old son and I try to keep doing different exercises and sports just to keep it fun. My glucose levels are down 27 percent and I'm now in my target range. My goal is to maintain my

sugar levels, keep exercising, and keep losing weight. I feel better and I have more energy for my hobbies, silversmithing, fishing, and hunting with my son.” And that’s from Carlos Lazaloo.

<Shot of audience applauding>

Mother Love: Wow, what a powerful story. Thank you, Nicole. You know, that kind of sounds like you, J.

J. Anthony Brown: Definitely. For me, it was uh.. a breakup. When you break up with somebody, the best thing to do is look good the next time you see them. <Laughter> So I was determined to lose weight. I haven’t seen ‘em yet, but by the time they see me, I’m looking good, baby. I changed my attitude and it helped a lot, so..

Jim Turner: And you actually do it.

J. Anthony Brown: Oh yeah, now I do it. Now I really work out. It gives you more energy. I’ve got control of everything so it’s working out much better.

Jim Turner: What, you know, got you to do this?

J. Anthony Brown: Well, I just wanted- I really had to do it. I mean I just- I would see my- well, I saw some of the shows and like whoa, who is that big guy in the middle there? <Laughs>. So- and it- it gave me a lot of incentive to turn- to try to lose weight.

Mother Love: Well, we have a before picture of J.

J. Anthony Brown: Oh, no.

<Shots of J. Anthony Brown before losing weight>

Jim Turner: That’s from your Tuesday night club.

J. Anthony Brown: Yeah, it is Tuesday night thing. Yeah.

Mother Love: So now ho- how are you eating better because you were like a junk food..

J. Anthony Brown: It was about more and less, meaning working out more and eating less along with the help of my nephew who also has a health degree. So the little comments he would make by walking by me was a lot of incentive for him to tease me and- and kind of help me get on the right road.

<Card: A family approach to diabetes management improves glucose control.>

Nicole Johnson Baker: That- that's such a key though 'cause you have to have support. You can't makeover yourself by yourself.

J. Anthony Brown: No, you got to get somebody to help you, you know?

Nicole Johnson Baker: Yeah.

Mother Love: It's great to see that you are taking control of your dLife and you're taking it serious.

J. Anthony Brown: Yeah.

Jim Turner: 'Cause you used to just joke about it. "You know, you're supposed to do this, supposed to do this. I tried." Uh.. and now you just- I- I can see, you just- you're doing it.

<Card: Exercise decreases insulin resistance and burns glucose.>

J. Anthony Brown: Well, I mean uh.. I did take a- a note from you. I mean you work out like four or five times a week and so I mean and Mother Love was working out and you were working out and uh.. I was the only one not working out so I said, "This ain't working out. I need to work out." <Laughs>.

Mother Love: You've come a long way, J., yes you have.

<Shot of audience applauding>

Nicole Johnson Baker: Your attitude can help or hurt you. Now you might not feel like testing, but we know good health is within reach. How?

<Card: Test! Don't Guess.>

Everybody: Test, don't guess.

<Shot of audience members testing blood sugar>

Nicole Johnson Baker: And that's what we're gonna do right now is test our blood sugars. When we return, the BD diabetes makeover. You don't want to miss it so stay tuned.

<commercial break>

<Shot of audience applauding>

<J. Anthony Brown and Dr. Katzeff seated on stage>

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

<Card: This dLife makeover segment is sponsored by our partner, BD.>

J. Anthony Brown: Welcome back, everybody. Today's show is all about taking control of your diabetes and transforming yourself. With me is Dr. Harvey Katzeff, the Chief Endocrinologist at North Shore LIJ who is part of the BD diabetes makeover team. Welcome, Dr. Katzeff.

<Shot of audience applauding>

Dr. Harvey Katzeff: Thank you for having me, J.

J. Anthony Brown: Okay, let's get this out of the way. What makes a successful makeover?

<Card: Dr. Harvey Katzeff, MD, Chief Endocrinologist, North Shore LIJ>

Dr. Harvey Katzeff: What makes a successful makeover is knowledge, support from family, and the tools in which you needed to do this makeover.

J. Anthony Brown: Um hmm. What are some of the things that make people fail?

<Card: People with type 2 in group education show significant improvement.>

Dr. Harvey Katzeff: Okay, unfortunately fear is the major problem for failure and lack of knowledge. If people don't have the tools and don't know what to do they cannot change their life and they cannot change their diabetes management.

J. Anthony Brown: What helps motivate people?

Dr. Harvey Katzeff: Well, look what motivated you.

J. Anthony Brown: A breakup. <Laughs>.

Dr. Harvey Katzeff: Okay. It has to be something more than just wanting to look good. It- it has to be- that you really need to change your life because otherwise you may develop complications which don't have to occur.

J. Anthony Brown: What makes a good support team?

<Card: Good blood glucose control prevents complications.>

Dr. Harvey Katzeff: As you well know, in taking care of your diabetes it's not just one issue, it's the whole lifestyle. It's exercise so we have an exercise physiologist as part of our team; nutrition, we have a dietician, we have a diabetes educator, and a physician, usually an endocrinologist. And we also have a lifestyle coach because for many patients it's their lifestyle that interferes with their ability to help themselves control their diabetes.

<Card: Type 2 risks: Overweight, family history, inactivity and hypertension.>

J. Anthony Brown: Now one of the things, sometimes when you start an exercise program or a diabetes to- to transform yourself, you have family members who are not supportive. How do you get them on board of your support team?

Dr. Harvey Katzeff: That's very true. Many times family members may sabotage.

J. Anthony Brown: They don't have diabetes. They're eating cake. You know what I'm saying?

Dr. Harvey Katzeff: Right. Exactly. They're bringing the food into the house.

J. Anthony Brown: Right.

Dr. Harvey Katzeff: You have to explain to them that it is not helpful and you really have to teach the family how to manage the diabetes, not just the patient themselves.

J. Anthony Brown: How long before you start to see some results?

Dr. Harvey Katzeff: Well, certainly within one to two months, the three-month blood sugar average, the A1c should start to come down.

<Card: The AACE recommends a hemoglobin A1c of 6.5% or lower.>

J. Anthony Brown: What's the most frequent issue that you come across in terms of a makeover candidate?

<Card: Endocrinologists/diabetologists should be the most up-to-date on diabetes treatment.>

Dr. Harvey Katzeff: Okay. Uh.. patients are really afraid of doing the right thing, of being more aggressive, and in some cases, that may need insulin therapy. And people have this inappropriate fear that insulin therapy is bad for you. They fear that insulin will promote complications. That's not true. So we need to intervene more aggressively, whether it takes medication, diet, exercise, and insulin, all of those ne- are needed together.

J. Anthony Brown: Can you do it by yourself?

<Card: Tight blood glucose control lowers the risk of heart disease by 35%.>

Dr. Harvey Katzeff: It's hard to do by yourself.

J. Anthony Brown: It is.

<Card: To find diabetes specialists near you, visit dLife.com/locator.>

Dr. Harvey Katzeff: You need to learn specific knowledge, you need the support, but you can develop your own diabetes dream team if you don't have one available by you. In most metropolitan areas there are physicians, there are dietitians, there are diabetes educators who are available.

J. Anthony Brown: So the information is out there, it's definitely out there.

Dr. Harvey Katzeff: The information is there, correct.

J. Anthony Brown: Thank you, Dr. Katzeff.

Dr. Harvey Katzeff: Thank you.

<Shot of audience applauding>

J. Anthony Brown: We at dLife believe in taking control of your diabetes and now we're working with BD to share the diabetes makeover with you, the audience. Today, we're eager to introduce to you our first patient. Here she is.

<Rachel Jones segment starts, video of Rachel>

Rachel Jones V/O: The BD makeover program is a program where diabetics meet with health professionals to help them get in control of their diabetes.

<Card: Rachel Jones, dLife Makeover Participant>

Rachel Jones: The moment I realized that I had to take control of my diabetes was several months ago.

<Shot of Rachel Jones talking to Andrea Zaldivar>

Rachel Jones: When I did my A1c, I think it was in May, it was really higher than I expected it to be and I couldn't un..

Andrea Zaldivar: Do you remember what it was?

Rachel Jones: It was like an 11 or something like that.

<Various shots of Rachel Jones with Dr. Harvey Katzeff>

<Card: Dr. Harvey Katzeff, MD, Dream Team Endocrinologist>

Rachel Jones: I need h- help in controlling my diabetes. I was diagnosed in 1974 when I was pregnant with my daughter as a diabetic. Once my daughter was born, the diabetes disappeared. It reappeared in 1986. From that time, I've taken different types of medication for my diabetes from tablets. I am now on insulin where I inject myself twice a day. My mother had diabetes and she died from it. Uh.. my sis- I have sis-sisters and brothers and they have diabetes also. One of them is blind because of diabetes. I have not experienced any of the known complications. That's the main motivation, to avoid the complications, the strokes, the amputations.

<Shot of Rachel Jones talking with Ann Fittante>

Rachel Jones: It looks good, but it's not good to me. <Laughs>.

Ann Fittante: Oh, I know it.

Rachel Jones: The potatoes, ooh. I'll skip that. This will be it for me.

<Card: More than 86,000 amputations are performed annually due to diabetes.>

<Card: A low-carb diet promotes weight loss and lowers blood glucose.>

Rachel Jones: Maybe one thing that I hate most about my diabetes is that it sort of limits in a way some things that I like to eat. My eating habits has to change.

<Shot of Rachel Jones talking to Andrea Zaldivar>

<Card: Andrea Zaldivar, RN, ANP, Dream Team Diabetes Educator>

Andrea Zaldivar: Okay, so your sugars have gone up in the last couple of hours.

<Various shots of Rachel Jones with Ann Fittante>

<Card: Ann Fittante, RD, CDE, Dream Team Nutritionist>

Rachel Jones Voiceover: What I hope to get out of this program is a better control of my diabetes and lifelong learning as to how to keep it under control. I do feel that I am completely committed to this program and working with the professionals that I have worked with, they have sort of instilled something in me that I can do this. The expert that makes me the most nervous is uhm.. Paul, the exercise expert.

<Card: Paul Frickman, Dream Team Fitness Expert>

<Shot of Rachel Jones talking to Paul Frickman>

Paul Frickman: You could do uhm.. thirty minutes six times a week or you could do an hour three times a week.

Rachel Jones: That may be a challenge. It has been in the past, so it may be a challenge.

Paul Frickman: I just want to have you sign this now and it says "I will to the best of my ability perform these exercises on a regular basis."

Rachel Jones: Okay.

Paul Frickman: Okay?

<Card: Studies show hemoglobin A1c levels improve with regular exercise.>

Rachel Jones: I feel a little nervous about taking on everything, you know, and this is what I want to do, but will I be able to stick to the program? Will I be able to apply all that I have learned here? But I am hopeful that I will and I uh.. I will, you know, reach the goal that we- we have set for me today and there will be a difference when we meet again. I'm taking it one day at a time.

<Shot of audience applauding>

<J. Anthony Brown seated on stage>

J. Anthony Brown: We'll keep you up to date of the progress of the makeover on future episodes here on dLife TV and on the web at dLife.com so keep watching. Now when we return, we'll share some common myths and misconceptions about diabetes. We'll be right back.

<Shot of audience applauding>

<commercial break>

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

<Card: Betty Brackenridge, Author, Diabetes Myths and Misconceptions and Big Fat Lies>

Jim Turner: Less than half of people with diabetes ever get diabetes education. No wonder so many diabetes myths are alive and well. And they can be very misleading and some even downright dangerous. Well, here to demystify some common diabetes myths is author of "Diabetes Myths and Misconceptions and Big Fat Lies", Betty Brackenridge.

<Shot of audience applauding>

<Card: Fact or Myth? You are cured from diabetes.. if you are able to go off your meds.>

Jim Turner: Uh.. number one, fact or myth, you are cured from diabetes if you are able to go off your meds.

Betty Brackenridge: Ooh, that's wrong. <laughs>

Jim Turner: Really?

Betty Brackenridge: That's just plain old wrong.

Jim Turner: Oh, I can't just stop?

Betty Brackenridge: No, you can't just stop. Uh.. there are times when people with diabetes do stop medicines. Someone newly diagnosed with type 1 may go into a honeymoon in the first year after diagnosis for a while.

Jim Turner: I did.

Betty Brackenridge: Most people do.

Jim Turner: I was very excited about it.

Betty Brackenridge: <laughs> I'll bet. Uh.. disappointing when blood sugars start going back up again.

Jim Turner: Yes.

<Card: Diet and exercise are "medication" for both type 1 and type 2 diabetes.>

Betty Brackenridge: In type 2, that can happen as well. People change how they're treating their diabetes. They lose a little weight, they become more active, and what that does is help their body get by better on the amount of insulin they're still making. But the thing is diabetes is a chronic disease. It doesn't go away and eventually you're going to

require that medicine again. It wasn't cured; it was just well treated in the case of type 2 diabetes with something other than medicine.

<Card: Fact or Myth? People with type 2 diabetes.. don't have to take insulin.>

Jim Turner: All right, number two, people with type 2 don't have to take insulin.

Betty Brackenridge: Yeah, that's a really common myth. Uh.. you know, they used to call it non-insulin-dependent diabetes and that's why <laughs> they changed the name to type 2 because it got people all confused.

<Card: Fact or Myth? Kids only get type 1 diabetes.>

Jim Turner: Number three, kids only get type 1 diabetes.

Betty Brackenridge: Boy, you know, I've been at this so long that I actually remember when that was almost true. <laughs> It used to be.

Jim Turner: When- 'cause when I got it, it was called juvenile onset.

<Card: In some populations, 45% of new type 2 cases are kids.>

Betty Brackenridge: Juvenile diabetes. You know, old terminology like, you know, now type 1. Uhm.. it used to be that only about one to two percent of kids diagnosed with diabetes had type 2 diabetes. Now the number's like 45 percent of the kids newly diagnosed with diabetes that have type 2. That number varies on the population. So if you're in an area where you have a lot of people of color, where a lot of adults get type 2 diabetes, uh.. African Americans, Latinos, Native Americans, then there's going to be a higher incidence in the youngsters as well.

Jim Turner: Uh huh. Well what about adults getting type 1?

<Card: Type 1 diabetes is typically diagnosed in childhood, but can develop at any age.>

Betty Brackenridge: Oh sure. That happens too. I think uh.. the oldest person that I've cared for newly diagnosed with type 1 was 67.

<Card: Fact or Myth? People with diabetes.. should only eat sugar-free foods.>

Jim Turner: People with diabetes should only eat sugar-free foods.

<Card: Count carbs, not sugar. Sugar-free foods can raise blood sugar.>

Betty Brackenridge: Boo. No, there's- there's carbohydrates in many sugar-free foods as well. And one of my favorite examples is chocolate bars because, you know, everybody likes chocolate. <Shows labels of 2 chocolate bars.> Now these folks know me well. <laughs> They say a serving is a bar. They know I'm not gonna share, right? The- the people that are <laughs> selling the- the sugar-free chocolate, they have a much better opinion of my nature and- and they think that I'm gonna break it in half and give the other half to somebody else. But if I were actually that kind of person and I only ate half of this one versus the whole one of the real chocolate bar, guess what the difference in carbohydrate intake is in between the two.

Jim Turner: Oh, well this one must have s- many, many fewer carbs.

Betty Brackenridge: Well then you need to buy my book, Jim. Uhm.. there's actually one gram of carbohydrate difference between the two and you'll find that's the case with many, many sugar-free foods. There's very little difference in total carbohydrate between the regular food that the sugar-free food seeks to replace. They're different carbs, but the only way you can really tell what effect they have on your blood sugar is you don't guess, you test.

Jim Turner: Yes. So it's- it's all about the carbs and it's not about the sugar. Sugar-free just means..

Betty Brackenridge: Sugar-free is a- it's a labeling term and there are folks that will say, "Well, we only call- you know, those are carbs. They don't raise blood sugar," but many of 'em do. The only way you can tell is with testing.

<Card: Fact or Myth? No matter what I do.. I will get complications.>

Jim Turner: Number f- five, no matter what I do, I will get complications.

Betty Brackenridge: Complications are far from inevitable and we've got great research that shows us that. For the- the person living with diabetes, for you and me, what we do is take into our hands the things that protect us and that's great blood sugar control and that's great control of blood pressure, and that's watching our lipids and getting the tests done, uh.. getting into the doctor every year. With those things in hand, no one can guarantee you that you're not gonna get complications, but your odds are very, very small if you can take those things in your hand and you monitor what's going on.

<Card: Managing diabetes is about attitude. Choose to manage your diabetes.>

Jim Turner: Yeah, 'cause I- I talk to a lot of people who think that, y- you know, what difference does it make? You know, they're- they're already depressed that they have this and, you know, I'm gonna- I'm gonna lose a leg anyway so who- who cares? But it's- it's not. It's about tight control.

Betty Brackenridge: It's- it's not inevitable. We can do better.

Jim Turner: Good. Thank you very much for uh.. sharing s- the truth about diabetes today.

Betty Brackenridge: Thanks, Jim.

<Shot of audience applauding>

Jim Turner: Well, you are hungry for something so easy to make and so easy to enjoy? Then stay with us. We'll be right back with a great meal from diabetic chef, Chris Smith.

<Card: dLife>

<Shot of Anne Rice>

<Card: Anne Rice, known for such works as Interview with a Vampire & Exit to Eden was diagnosed with diabetes in 1998.>

<commercial break>

<Shot of audience applauding>

<Card: Mother Love, Author & TV Personality>

Mother Love: Welcome back, everybody. Our next guest, diabetic chef Chris Smith, will show us how to prepare some yummy low-carb wraps.

<Card: Chris Smith, The Diabetic Chef>

<Shot of Mother Love, J. Anthony Brown, and Chris Smith on stage in kitchen>

Chris Smith: You know, as a chef, I love food.

Mother Love: Okay.

Chris Smith: I love- how many of us love food?

<Everyone raises hands>

Chris Smith: I'm telling you. So loving food and being a person affected with diabetes, carbohydrates is an essential component. We need to be aware of that and this today, we are talking low-carb.

J. Anthony Brown: Low-carb.

Mother Love: This is- this is low-carb.

J. Anthony Brown: Low carbs.

<Card: Fish is high in omega-3 polyunsaturated fatty acids.>

Chris Smith: What I'm starting out with is some fresh tuna, beautiful tuna, and I've got a quick and simple recipe. We want to add a little bit of mayonnaise to that and that is a low sodium, low fat.

J. Anthony Brown: Low sodium. All right, okay.

Chris Smith: All right, so you want to be aware of that. I wanted to add a little bit of Dijon. It gives a little bit of flair, but it gives a little bit of punch to that too. We also added some capers. Yeah, absolutely. You have to have a little bit of citrus in there so the lemon goes in there. This is easy enough for anybody to do and prepare. Now we're gonna work with the wraps.

Mother Love: Okay.

<Card: Visit dLife.com/recipebox for these recipes.>

Chris Smith: Now what's interesting about wraps, you have to be careful because we're looking at carbohydrates. This is actually a low-carb wrap.

J. Anthony Brown: What type is this? What is it?

Chris Smith: Thirteen- well this is spinach.

Mother Love: Thirteen grams in the wrap?

Chris Smith: So let's mix this up. And actually a little trick I just learned today, when you have this and you want to even lower your carbs more, how about you cut a little bit of that off.

Mother Love: Oh, okay.

Chris Smith: Something as simple as that. You don't need it.

J. Anthony Brown: Throw that away. You don't need that.

Chris Smith: And now we're gonna wrap it up. Think of cigars.

Mother Love: Okay.

<Card: Fiber, fat, and protein impact how carbs affect blood sugar levels.>

Chris Smith: What we want to do is take a little bit of lease- leaf lettuce, okay? I- I love tuna. I love tuna. I'm just gonna make this nice and simple with a little bit of that leaf lettuce and then just use a little bit. I'm te- is that good?

Audience: Yeah.

Mother Love: Okay.

Chris Smith: You're getting hungry, aren't you?

Mother Love: Okay.

Chris Smith: All right, and very simply just cut it up and you've got something that's <inaudible>.

Mother Love: Look at that.

J. Anthony Brown: Oh man, look at that.

<Shot of audience applauding>

Mother Love: Okay?

<Card: It is essential to consult with an experienced dietician to learn meal planning for diabetes.>

Chris Smith: Now let's expand on that concept because we've got the tuna. If you don't want carbs at all, we've got a salad here. I've got some corn here. This is actually grilled corn. I just put the whole cob on there, marked it so it's cooked. Zucchini, I put a little bit of zucchini stripes in there. I've got some olives, kalamata olives in there.

J. Anthony Brown: That's the same?

Chris Smith: Same stuff, same tuna.

Mother Love: Now you got a salad.

Chris Smith: And now I got a salad. I add a little bit of vinaigrette and something that is great.

Mother Love: Is that fresh made? That dressing, did you make that?

Chris Smith: Fresh made.

Mother Love: Okay.

Chris Smith: But again, you can find things locally in your grocery store. You want to have that accessibility, you want great flavor and you've got it right there, so it's really, really fun.

Mother Love: Right there. That's beautiful.

Chris Smith: This is the fun part and I love this.

J. Anthony Brown: Tomato. A little bit off.

Chris Smith: We've gonna do tomato. We'll do a little different.

J. Anthony Brown: Okay.

Chris Smith: But I want to do a vegetarian.

Mother Love: Okay.

<Card: Visit dLife.com/recipebox for these recipes.>

Chris Smith: Now this is where you want to have a little bit of prep time in advance because if you can do that then you can really start to expand on flavor. And we are all about flavor here.

Mother Love: Okay.

Chris Smith: We've got that as a base. I'm gonna add- how about grilled Portobello?

J. Anthony Brown: Portobello, all right, yes.

<Card: Portobellos are low calorie and high in niacin, potassium and selenium.>

Mother Love: And you can just experiment and put whatever kind of vegetables.

Chris Smith: It's all about choices. I've got a fresh pesto, beautiful basil.

J. Anthony Brown: I like that.

Chris Smith: Pine nuts, a little bit of garlic, and olive tapenade. You can get this in a jar and we're gonna grab this.

Mother Love: This is what I want to know about.

Chris Smith: I know. We talked earlier about this. This is actually a red pepper puree. So think of it like a vinaigrette in that..

Mother Love: Oh, this is off the chain.

J. Anthony Brown: From the bottom.

Mother Love: That's off the chain.

Chris Smith: There you go.

J. Anthony Brown: Thank you.

Chris Smith: I'm gonna finish- I'm gonna finish. We've got whole yellow peppers. We add this and we're gonna wrap this guy up. Just think of cigars and you wrap this guy up. How's that?

<Shot of audience applauding>

Mother Love: You know, that is like off the hook.

J. Anthony Brown: Oh man, we're supposed to be working, but uh..

<Nicole Johnson Baker joins group on stage>

<Everybody talks>

Nicole Johnson Baker: That looks a little bit too good. All right, thank you.

Mother Love: Give me some of that. Okay, how is it?

J. Anthony Brown: Is it good?

Nicole Johnson Baker: Mm. Um hmm.

<Card: Visit dLife.com/recipebox for these recipes.>

Chris Smith: With low carbs, this gives you choices and that's the key with food. You want to have choices, but you want to have high flavor.

J. Anthony Brown: I'm supposed to be working, but, you know, hey. Maybe it's a good time for a commercial. We'd like to that uh.. Chef Chris for being here and we'll be right back.

<Shot of audience applauding>

<Card: dLife>

<Question segment video of man in glasses>

Man in Glasses: My older brother was just diagnosed with diabetes. He was told to lose weight, start exercising, and change his diet. He's overwhelmed by the amount of choices to make. I want to help him out. Where do we start?

<Card: dLife. What steps should I take to start a diabetes makeover?>

<Card: Joy Pape, RN, CDE, Diabetes Expert>

<Shot of Joy Pape>

Joy Pape: All these changes can be overwhelming. Pick one thing, do well at that, and then go on to something else. For me, it was exercise. Get a pedometer, check your steps, see about how many steps you get a day for about three or four days and then start increasing that. More will always be better. To learn more about you and your steps, go to dLife.com.

<Card: dLife>

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

<Card: Hear more from today's guests and hosts with dLife Backstage Podcasts at dLife.com/podcasts.>

Nicole Johnson Baker: That's all the time we have. Thanks to our guests Dr. Harvey Katzeff, Betty Breckenridge, and Chef Chris Smith. And thanks to you for being with us. Remember, as always, it's your dLife. You're responsible for your diabetes life. See you next week.

<Shot of everyone applauding>

<Card: dLife TV on CNBC: Sunday Nights 7PM ET, 4PM PT>

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

<Shot of audience applauding>

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

<Credits roll>

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 Episode #120 11/13/05