

TIMECODE	VISUALS	AUDIO
	<p><b>GFX Center</b></p> <p><b>dLife</b></p> <p><b>For Your Diabetes Life!</b></p>	<p><b>VO Jim Turner</b></p> <p><b>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.</b></p>
	<p><b>Various shots of upcoming segments.</b></p>	<p><b>VO Nicole Johnson Baker</b></p> <p><b>Overwhelmed by numbers, what they all mean, and how to keep track of them? dLife clears up the confusion. And the carbohydrate debate. What's the best approach for you? Plus more real stories about real people.</b></p>
	<p><b>Lower Third:</b></p> <p><b>Nicole Johnson Baker</b></p> <p><b>Shot of Missy Porteous.</b></p>	<p>Nicole Johnson Baker</p> <p>There are so many ways that tests and numbers help us manage diabetes and our health; A1c, cholesterol rates, blood pressure, and that's just the beginning. Sometimes it's hard to keep track of what all those numbers mean. To help us make some sense of them, I'm joined by Missy Porteous who is a certified diabetes educator, a registered dietician, and a fitness instructor. Missy was also the winner of dLife's 2005 CDE casting call, our nationwide search for certified diabetes educators who embody the dLife spirit of informing, inspiring, and connecting others. So congratulations, Missy.</p>
		<p>Missy Porteous</p> <p>Thank you so much, Nicole. It's such a great pleasure to be here with you today.</p>
	<p><b>Shot of Nicole Johnson Baker interviewing Missy Porteous.</b></p>	<p>Nicole Johnson Baker</p> <p>Well we're happy to have you. All right. Let's get into this numbers game. Let's start with the importance of getting tested and knowing numbers. Explain to us why that's so important for people with diabetes.</p>
	<p><b>Lower Third:</b></p> <p><b>Missy Porteous, RD, CDE</b></p>	<p>Missy Porteous</p> <p>Knowing your numbers is a very important managing tool for your diabetes. It's part of managing just like exercise, eating correctly, taking your medication, testing your blood sugar. All of</p>

TIMECODE	VISUALS	AUDIO
		these tests are valuable in knowing how you can reduce your risk for complications. Your numbers will tell you what more that you need to do.
		Nicole Johnson Baker  Well I know one of the tests is the A1c, but not everybody understands what an A1c is.
	<b>Lower Third:  ABCs of regular testing: A1c, Blood pressure &amp; Cholesterol</b>	Missy Porteous  Overall, it's a 3-month weighted average of what your blood sugars are doing. And that's great because when you test your blood sugar at home you only know what your blood sugar is at that moment. You have no idea what's going on at any other times of the day that you're not testing, you don't know what's happening while you're asleep, and so the hemoglobin A1c will give you your result to give you an average of how things are going.
		Nicole Johnson Baker  Now how often should people have that test done?
	<b>Lower Third:  An A1c of less than 6.5% is recommended to reduce risk for complications.</b>	Missy Porteous  Well most people should have that test done about twice a year, but if your diabetes isn't very well controlled, you probably would want to have it every 3 months.
		Nicole Johnson Baker  Okay. Another number is cholesterol.
	<b>Shot of Missy holding up representation and doing demonstration.</b>	Missy Porteous  Well cholesterol is a fatlike, waxy-like substance that travels through our bloodstream. Our liver makes most of the cholesterol that we need, but we also receive cholesterol from the foods that we eat. And if we have a buildup of cholesterol traveling through our bloodstream, what happens is it starts to develop plaque-like formations on the inside lining of the arteries. And actually, I brought something to show you what that might look like. This is an example. This plastic round portion is a representation of a blood vessel or an artery and all of this yellow section here is what cholesterol buildup might look like on the inside lining of an

TIMECODE	VISUALS	AUDIO
		<p>artery. Obviously, this one's been built up quite a bit, &lt;laughs&gt; right? And then here at the top, you see these little uh... plastic red items and they're s- they're to represent red blood cells or blood running through. And it's supposed to travel to and from the heart, all the different parts of the body to keep us functioning well. Well, if for some reason the plaque builds up so much that the blood can't get through very well, you see how it's struggling, struggling to get through like that, and so the circulation is compromised. Look, some of even this has stopped. This is the type of a situation, a blood clot that can't get through, you know, the blood vessel will develop into a heart attack or if the blood was going to the brain into a stroke.</p>
		<p>Nicole Johnson Baker</p> <p>So then tell me the numbers. What are the good cholesterol numbers, the HDL and the LDL?</p>
		<p>Missy Porteous</p> <p>Well, your total cholesterol number should be less than 200.</p>
		<p>Nicole Johnson Baker</p> <p>Less than 200, okay.</p>
		<p>Missy Porteous</p> <p>Then there is the LDL which is the low-density lipoprotein.</p>
		<p>Nicole Johnson Baker</p> <p>Now is that the good cholesterol or the bad cholesterol?</p>
	<p><b>Lower Third:</b></p> <p><b>LDL deposits cholesterol in arteries, while HDL removes it.</b></p> <p><b>Lower Third:</b></p> <p><b>Statins are the most commonly</b></p>	<p>Missy Porteous</p> <p>Well, LDL, which is the bad cholesterol and the way that you can remember this is if you remember that L stands for lousy; lousy, you don't want any part of it. That's the LDL. You do not want that number to go up. And that cholesterol number should be less than 100. However, if you already have established cardiovascular disease, you want the number to be less than 70. On the other hand, the HDL is a great thing and we- we relate the HDL to happy because</p>

TIMECODE	VISUALS	AUDIO
	<p><b>prescribed drugs for high cholesterol.</b></p> <p><b>Side of Screen:</b></p> <p><b>Cholesterol Targets</b>  <b>Total: less than 200</b>  <b>HDL (good):</b>  <b>men: above 45</b>  <b>women: above 55</b>  <b>LDL (bad):</b>  <b>less than 100</b>  <b>Triglycerides:</b>  <b>less than 150</b></p> <p><b>Lower Third:</b></p> <p><b>People at risk for heart disease may consider low-dose aspirin therapy.</b></p>	<p>we want this number to be as high as we can get it. What LDL does is it deposits, you know, this cholesterol on the inside lining, whereas the HDL, it actually comes along and picks up the cholesterol from the bloodstream and takes it back to the liver. If you're a man, you want your HDL to be higher than 45, but if you're a woman, you want your HDL to be above 55. For many, many years, we have known that heart disease is a great risk factor, leading cause of death for men, but it's also a great leading cause of death for women, especially if you're in the menopause age range. And so I think a lot of organizations right now , like the American Heart Association, are really trying to make an effort to educate people and let them to know even if you're a woman, you really need to be concerned and that's why we have higher HDL goals.</p>
		<p>Nicole Johnson Baker</p> <p>How is the cholesterol measured? How is it done? What type of test?</p>
		<p>Missy Porteous</p> <p>Again, it's a blood test. You go to your doctor's office, they do a blood draw, they send it to a lab. And you really should always do a cholesterol test fasting, probably do a lot of tests that way, but this one in particular because if you had eaten, say, you know, you got up for a midnight snack in the middle of the night, it could really alter, you know, some of your cholesterol-type numbers, especially if they're measuring your triglycerides also.</p>
		<p>Nicole Johnson Baker</p> <p>Blood pressure plays a big role in diabetes and diabetes management. Can you explain that a little bit?</p>
	<p><b>Lower Third:</b></p>	<p>Missy Porteous</p> <p>Yes it does. Well, people with diabetes do have a higher risk of getting high blood pressure and of course high blood pressure is a leading risk factor for heart disease and stroke. And people with diabetes do have 2 to 4 times' increased risk for heart disease. If you have a consistently high blood</p>

TIMECODE	VISUALS	AUDIO
	<p><b>High blood pressure is a leading risk factor for heart disease and stroke.</b></p>	<p>pressure, well what's happening there is that your heart has to pump harder to push blood through your blood vessels and then your blood vessels are taking that pressure on. And over time, they become weak, they start to widen, and then one serious end result is that that blood vessel could actually rupture and become an aneurysm so there would be bleeding. And so that's what we're trying to avoid. We're trying to avoid vascular disease by controlling our blood pressure.</p>
		<p>Nicole Johnson Baker</p> <p>Now, what's the recommended blood pressure numbers?</p>
	<p><b>Lower Third:</b></p> <p><b>ACE inhibitors and diuretics are commonly prescribed for high blood pressure.</b></p>	<p>Missy Porteous</p> <p>For a person with diabetes, we want to keep our blood pressure below 130 over 80. Now 130, the top number is the systolic number and the systolic number is a representation of your heart beating. The bottom number is the diastolic and that's a representation of your heart at rest.</p>
		<p>Nicole Johnson Baker</p> <p>Now, what other tests are important for a person with diabetes?</p>
	<p><b>Lower Third:</b></p> <p><b>People with type 1 diabetes are at risk for other autoimmune disorders.</b></p> <p><b>These include thyroid and celiac.</b></p> <p><b>Microalbumin should be tested annually.</b></p>	<p>Missy Porteous</p> <p>Well, you should be getting of course an eye exam every year, dilated eye exam to look for any retinopathy that could be occurring. You also want to make sure that you have a foot exam at every doctor's visit because you want to make sure you're noticing any changes that may be occurring and reduce your chance of nerve disease. And then of course there are many other tests that your doctor may choose to do also. Many people with diabetes can also have a thyroid condition, so having thyroid checked would be, you know, very essential for that. It would be helpful also to always have a microalbuminuria test. This is a urine test that tests the kidney function. If your kidney function starts to decline, you're going to end up with some high blood pressure and if your blood pressure is high, it can affect the kidneys as well. So it's interesting</p>

TIMECODE	VISUALS	AUDIO
		how these are all very much related. Even the high blood sugars can actually cause damage to the inside lining of the blood vessels. So all of these tests are really, really important.
		Nicole Johnson Baker  All these numbers. My goodness, they're confusing, but they're so important and we have to know them to stay healthy and well with diabetes. Thank you for all of that information, Missy.
		Missy Porteous  Thank you so much for having me.
		Nicole Johnson Baker  Up next, how many carbs should you be eating for good control? I recently sat down with two experts to debate that question.
	<b>GFX Center</b>  <b>dLife</b> <b>For Your Diabetes Life!</b>	
	<b>Shots of various food items.</b>  <b>Shot of Dr. Richard Bernstein.</b> <b>Shot of Dr. Bernstein's books.</b>  <b>Shot of Hope Warshaw.</b> <b>Shot of Hope Warshaw's book.</b>  <b>Various shots of food items.</b>	<b>VO Nicole Johnson Baker</b>  <b>Handling carbs is critical for someone with diabetes. Dr. Richard Bernstein, diabetologist and author of <i>Diabetes Solution and the Diabetes Diet</i> holds the opinion that a low carb diet is the way to go. Well, also joining us is Hope Warshaw, author of the <i>Complete Guide to Carb Counting</i> and a registered dietician who thinks that people with diabetes need to eat a moderate amount of healthy carbohydrates.</b>
	<b>Shot of Nicole interviewing Dr. Bernstein and Hope Warshaw.</b>	Nicole Johnson Baker  So we want to find out what your viewpoint is of the nutritional needs of a person with diabetes.
	<b>Lower Third:</b>  <b>Hope Warshaw, MMS, RD, CDE</b> <b>Author, <i>The Complete Guide to Carb Counting</i></b>  <b>Shot of Hope Warshaw pointing</b>	Hope Warshaw  Okay. I want to make three quick points. Number one, the research shows that low-carb diets don't work. People can't stay on them long-term and they're simply not a healthy way of eating. Number two, people with diabetes deserve to eat healthy and enjoy food. Number three is the carb issue today is not a quantity issue; it is a quality of

TIMECODE	VISUALS	AUDIO
	<b>out various food items.</b>	carbohydrate issue. What we're eating too much of is added sugars, regular soda, fruit drink and sweets. So what Americans need to do, I believe, is that they need to move those calories into healthier carbs.
		Nicole Johnson Baker  And that's what we have here, the fruits, the vegetables.
		Hope Warshaw  That's right.
		Nicole Johnson Baker  Well, this is very different from your point of view, Dr. Bernstein. What do you think about this?
	<p><b>Lower Third:</b></p> <p><b>Richard Bernstein, MD            Diabetologist &amp; Author            Diabetes Solution &amp; Diabetes Diet</b></p> <p><b>Shot of Dr. Bernstein doing bread demonstration.</b></p>	<p>Dr. Richard Bernstein</p> <p>Well, first of all, to say that low-carb is untested is false. Humanity evolved eating flesh. That's why we have canine teeth. Our ancestors had managed to get a little bit of leafy vegetables here and there, but not forty percent of their diet. A diabetic needs to have normal blood sugars or they get the complications of diabetes. You don't have to overwhelm yourself with carbohydrate and send your blood sugars sky-high. Here's a whole grain bread, for example, which I'm just going to do a little demonstration and show how you instantly convert this to glucose.</p>
		Nicole Johnson Baker  Uh huh. Uh oh.
	<p><b>Shot of Dr. Bernstein showing glucose testing stick.</b></p> <p><b>Various shots of food items.</b></p> <p><b>Lower Third:</b></p> <p><b>Carbohydrates directly impact blood glucose levels.</b></p> <p><b>One unit of fast-acting insulin</b></p>	<p>Dr. Richard Bernstein</p> <p>This stuff turns from pink to blue in the presence of glucose. And look what's happened instantly. I've made instant glucose just by chewing the bread. If I do it with the corn, if I do it with an apple, the same thing is going to happen. My blood sugar would go sky high if I ate this whole piece of bread. And then Hope might say, "Oh, take some insulin to bring it down." Well, you don't want to be up and then down. Large doses of insulin don't work in a predictable fashion and this certainly applies to the</p>

TIMECODE	VISUALS	AUDIO
	<b>covers 10-15 grams of carbs.</b>	use of insulin in carbohydrate.
		Nicole Johnson Baker  How do you respond to what Dr. Bernstein just said?
		Hope Warshaw  The vast majority of people with diabetes need medication. I mean what we know today about diabetes management is that it is good blood glucose control, good lipid control, and good blood pressure control that keeps people healthy long term. And I feel that people need a realistic way of eating.
		Nicole Johnson Baker  Well, let's make it practical for the people who have diabetes. Dr. Bernstein, if someone wanted to do the low-carb diet that you're suggesting, what are the top five foods that they should be eating?
		Dr. Richard Bernstein  Well, any protein food, fish, meat, chicken, eggs, cheese, and vegetables. In my book, there's a list of about thirty some odd vegetables that I can think of that are low in carbohydrate.
		Nicole Johnson Baker  Okay. Now, Hope, give me some of your top five recommendations then on the types of foods people with diabetes should eat as well.
		Hope Warshaw  Well, I think that people need to eat balanced meals. I mean certainly we've already talked about that we think that- I think that whole grains that have some fiber, fruits, vegetables, and certainly lean meats, and we've got some liquid vegetable oil out there. As much oil as possible should be liquid.
	<p><b>GFX Center</b></p> <p><b>dLife</b> <b>For Your Diabetes Life!</b></p> <p><b>Lower Third:</b></p>	<p>Nicole Johnson Baker</p> <p>You can learn more about carbohydrates and diabetes control at <a href="http://dLife.com/carbs">dLife.com/carbs</a>. When we return, a rodeo champ takes on diabetes.</p>

TIMECODE	VISUALS	AUDIO
	<b>www.dLife.com/carbs</b>	
	<b>GFX Center dLife For Your Diabetes Life!</b>	
	<b>Lower Third: Nicole Johnson Baker</b>	<p>Nicole Johnson Baker</p> <p>A horse, a rope and a bottle of insulin; Luke Branquinho relies on those three things when he wrestles one thousand pound steers to the ground. As a rodeo cowboy who has diabetes, Luke has had to chart his own course and his strategies have worked. In 2004, he won the World Steer Wrestling Championship and he says he's just getting started. We visited Luke on the road in California.</p>
	<b>Various shots of Luke Branquinho at rodeo.</b>	<p>Luke Branquinho</p> <p>I'm Luke Branquinho, world champion steer wrestler and I have type 1 diabetes.</p>
	<b>Lower Third: Luke Branquinho Rodeo Star, Type 1 Diabetes</b>  <b>Various shots of Luke at rodeo.</b>	<p>Luke Branquinho</p> <p>Growing up, I was born a cowboy, grew up on a ranch in Los Alamos, California. It was just a way of life, youknow? My parents rode horses, worked cattle, and that's what I had to do when I got older. The first rodeo I went and saw was Santa Maria, California and I got to watch some of the greatest cowboys in the world compete on our animals. And, you know, that lit a fire under me. Right then and there, I knew, hey this is what I want to do. When I first got to the hospital the day I was diagnosed, my blood sugar level was 950. They said, you know, within 12 hours if I'd have took a nap or went down, they said I probably wouldn't have woke up and it'd have been the end &lt;laughs&gt; of me. And my life's over. I'm not going to get to do what I love. I'm not going to get to rodeo. You know, I'm going to be sitting behind a desk doing paperwork and stuff. But they gave me, you know, a healthy diet which I wasn't used to just getting back from college. They taught me how to give myself a shot with a needle. And growing up on a ranch, you think that'd be easy. I told them, "Nah, I'm not going to have no problem with it." Well, sure enough, it's hard to give yourself a shot. And, you know, it took me a couple</p>

TIMECODE	VISUALS	AUDIO
	<p><b>Various shots of Luke at McDonalds.</b></p>	<p>days to learn how to do it. Eating on the road is really tough especially you're traveling so much. You come to McDonalds and look on the menu and everything's either fried or, you know, a lot of carbs in it. It's nothing like being at home and getting a good, home-cooked meal. We're on the road probably 250 days out of the year so what I like- what I like to do is, you know, come to McDonalds, eat a burger without the bun. Anywhere you go if you could cut out the carbs, obviously cut out, you know, some of the cholesterol, but, you know, salad and fruit salad, that's about the best way for me to maintain a healthy diet. It took a while before I got used to hey, I got diabetes. I can still compete.</p>
	<p><b>Various shots of rodeo.</b></p>	<p><b>VO Rodeo Announcer</b></p> <p><b>Tell you something else about him; this man is a diabetic. You talk about a fight for life on the road.</b></p>
	<p><b>Shot of Luke removing pump.</b></p>	<p>Luke Branquinho</p> <p>In December of 2004, I got on the pump right after the national finals. I'd just won a world's championship. When I compete, I disconnect the pump, put it on suspend, put it in my bag. I have a knee brace bag I have to carry with me. Maybe 45 minutes to an hour I have it off.</p>
	<p><b>Shot of Luke Branquinho testing blood sugar.</b></p>	<p>Luke Branquinho</p> <p>Us cowboys do it a little different. We don't use cotton swabs. 121's a good number.</p>
	<p><b>Various shots of Luke at rodeo.</b></p>	<p>Luke Branquinho</p> <p>My blood sugar when I compete, I like to keep it about, you know, 120, right around there. If I get below 70, I can start feeling a little shakiness coming on. But I'll test before, see where it's at, and I always carry sugar with me, like Gatorade or something like that. And as soon as I get that in my system and I need it, I feel great. Steer wrestling's when you leave a box. The animal gets a head start and you have a helper on the other side called your</p>

TIMECODE	VISUALS	AUDIO
		hazer. You run them down the arena, crawl onto the steer's back off a 35 mile an hour running horse and try wrestling the steer to his side. You know, and momentum and leverage, you know, it's all key factors in fast time wins.
	<b>Shot of Luke wrestling steer at rodeo.</b>	<b>VO Rodeo Announcer</b>  <b>He's back in the top 10; Big Luke. Let's go. Wow. It's slam dunk time, Lukey.</b>
	<b>Various shots of Luke at rodeo.</b>	Luke Branquinho  As far as being a professional cowboy, you know, nobody likes to show their pains or weaknesses. To me, it's not a weakness. I think everybody should know about it and I'll tell people about it. I'm not ashamed of it or scared to talk about it. I still live my life the way I want to and actually, it's made me a stronger person. You know, it makes you realize live one day at a time and don't take life for granted. And that's how I've been living my life ever since and it's been working out great for me.
	<b>Shot of Luke at trailer door.</b>  <b>Shot of sign on outside of trailer, 2004 World Champion Steer Wrestler.</b>	Luke Branquinho  It's been a long night. You guys have a good one and good night.
		Nicole Johnson Baker  Up next, dLife's Jim Turner on how he deals with cravings.
	<b>GFX Center</b>  <b>dLife</b> <b>For Your Diabetes Life!</b>  <b>Lower Third:</b>  <b>Nicole Johnson Baker</b> <b>A dLife minute with Jim.</b>	Nicole Johnson Baker  All of us with diabetes face constant temptations to abandon our diets. dLife's own Jim Turner talked with others about how to deal with cravings.
	<b>Shot of man testing blood sugar.</b> <b>Shot of car driving down street.</b>  <b>Cravings</b>  <b>Shot of Raul in car.</b>  <b>Raul</b> <b>Type 2</b>	Jim Turner: What have you got?  Raul: Mexican food.

TIMECODE	VISUALS	AUDIO
	<b>Shot of Sasha in car.</b>  <b>Sasha Type 1</b>	Sasha: Hi. How are you? <laughs>.
	<b>Shot of Jim interviewing Susan.</b>  <b>Susan Type 2</b>	Susan  My friend, ice cream, I love it. Any flavor, anyplace, anywhere, anytime. <laughs>.
	<b>Shot of Jim interviewing John.</b>  <b>John Type 2</b>	John  This I grew up eating. It's called <inaudible>. It's delicious. It's- it's custard, it's got honey in it, it's got phyllo on the bottom and on the top.
	<b>Shot of Jim at Raul's car.</b>	Jim Turner: And so what do you do now? You just eat it out of there?  Raul: I don't. I don't go there. <laughs>.
	<b>Shot of Sasha.</b>	Sasha: I'm not just tempted; I give into temptation. <laughs>.  Jim: Okay, excellent.  Sasha: I mean what's better than cookie dough?  Jim: Exactly.
	<b>Regina Type 2</b>	Regina  I'm craving my Reese's peanut butter cups, but if I give it to someone else to eat it, I'm okay with that. I'm fine. That'll help me.
	<b>Shot of group sitting at table outside with Jim discussing cravings.</b>	Sasha  I don't think mine is so much the actual watching someone else have it that satisfies me, but it's getting it out of my- <laughs> getting it away from me.
		John  If I'm out to dinner with my wife, I can satisfy certain cravings by having a little bit of what she's eating,

TIMECODE	VISUALS	AUDIO
		you know, which she doesn't really like, but I'll do it. You know, I mean because she's tired of the fork coming over to her plate all the time, you know?
	<b>Jim Type 1</b>	Jim Turner  I occasionally binge and I feel guilty about it.
		Susan  Some days I'm able to shut the door and walk away and some days I'll open up the lid and, you know, take a few spoonfuls and hopefully only stop at a few.
		John  When I do think of bingeing, I'll start and then whatever it is, if it's yogurt or ice cream or anything, I throw the rest away.
		Regina  And if I do take a bite, then, what I usually do is take the rest of it and I have to go throw it away because I want to eat the whole pack.
		Susan  So you start learning that the occasional binge isn't so bad as long as it's not a daily everyday binge.
		Jim  I have a question about alcohol.
		Raul  It's the only version of grape that I can have. Raisins, no more grapes, but wine.
		Jim  Do you crave alcohol?
		Sasha  I have wine frequently, yeah. I would say I crave it.
		John  I'm like anyone who craves a cocktail early evening, you know? And I will have bourbon. I too like bourbon.
		Sasha  Like I would think more about having these cookies

TIMECODE	VISUALS	AUDIO
		than I would about, you know, going to a bar and having a vodka and soda.
		Raul  And diabetes is like a daily, hourly thing with everybody and I don't think people really understand what that is.
		Susan  It doesn't go away.
	<b>The preceding statements are personal viewpoints and don't necessarily reflect the opinions of dLife.</b>	
	<b>GFX Center  dLife For Your Diabetes Life!</b>	
	<b>Photo of Catfish Hunter.  CATFISH HUNTER  Lower Third:  Legendary pitcher Jim "Catfish" Hunter was diagnosed with type 1 diabetes on March 2, 1978.</b>	
	<b>GFX Center  dLife For Your Diabetes Life!</b>	
		Nicole Johnson Baker  Now another tip to help you manage your diabetes life.
	<b>Lower Third:  Sheldon Gottlieb, MD Johns Hopkins Medical Center</b>	Dr. Sheldon Gottlieb  If you have diabetes and you snore, it's no laughing matter. People who snore and have a neck size greater than 17 1/2 inches almost certainly have a condition called obstructive sleep apnea. If you think that that describes you, then you ought to get attention for this problem and have a sleep test and there is definitely treatment for the problem.
	<b>GFX Center  dLife For Your Diabetes Life!  Lower Third:</b>	Nicole Johnson Baker  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.

TIMECODE	VISUALS	AUDIO
	<p><b>Hear more from today's guests on dLife Backstage Podcasts at <a href="http://www.dLife.com">www.dLife.com</a>.</b></p> <p><b>dLife TV on CNBC next Sunday 7 p.m. ET/4 p.m. PT</b></p> <p><b>To order a copy of any dLifeTV episode, visit <a href="http://www.dLife.com/orderdlivetv">www.dLife.com/orderdlivetv</a>.</b></p>	
	<p><b>GFX Center</b></p> <p><b>dLifeTV is produced by LifeMed Media and does not represent the views or opinions of CNBC, Inc.</b></p>	
	<p><b>Credits roll.</b></p> <p><b>Shot of Nicole Johnson Baker at right side of screen.</b></p>	<p>Nicole Johnson Baker</p> <p>Remember, we are not role models. We are 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 caretaker to find out what is best for you. Remember, it's your dLife and there is no substitute for getting control of it.</p>
	<p><b>GFX Center</b></p> <p><b>Life Med media</b></p>	