

Taking the “Ex-” Out of Exercise

By Gary Scheiner MS, CDE

Starting and maintaining behavior change is rarely easy. If in doubt, think about your last three New Year’s resolutions. How many are you still keeping?

Engaging in regular physical activity is desirable for virtually everyone with diabetes. It improves insulin sensitivity, helps to control weight, reduces cardiovascular risks, and brings a number of mental health gains. However, for those who are new to exercise, it usually takes a month or more for those new behaviors to become “engrained” in one’s lifestyle. How, then, are we to motivate ourselves to start exercising, and maintain the increased activity long enough for it to take root?

Even though true motivation comes from within, there are many tactics that we can employ to increase the odds that we’ll stay with it for the long haul.

Focus on one good reason.

Even though there are a multitude of benefits produced by regular exercise, it is best to focus on one that has meaning to you personally. Are you looking to reduce (or avoid) insulin or other diabetes medication? Lower your blood pressure or cholesterol? Lose weight? Improve your physical performance in a certain area? Improve your appearance? Feel better emotionally? Just have some fun?

Come up with a detailed plan.

Even the best intentions will go to waste without a good plan. Planning will help to overcome initial obstacles and avoid many of the common pitfalls that keep people from maintaining their workout routine. You may find it helpful to work

with your physician, diabetes educator, or an exercise physiologist to develop an “exercise prescription” – a specific set of recommendations regarding:

- ✓ activity type
- ✓ frequency
- ✓ duration
- ✓ timing (in relation to meals)
- ✓ intensity
- ✓ progression
- ✓ insulin/medication adjustments (to prevent hypoglycemia)

Challenge yourself.

Setting short-term and long-term goals helps you to gauge your progress while keeping an “eye on the prize”. It’s great to have an “ultimate goal” to aim for (the “good reason” described above), but getting there requires lots of small, manageable steps. Perhaps you’ll try to get to the gym three times this week, or increase your walking to 30 minutes by the end of the month. Once you’ve met your short-term goal, set a new one. And there’s nothing wrong with rewarding yourself for each small goal that is met: time to yourself, a trip somewhere, a new clothing item, even handing off small jobs to others (my wife has me do the dishes every day she exercises).

Publicize your goals.

Let your doctor, friends and family know your intentions. Not only does this help to generate some support, it also creates a sense of accountability on your part. (*Now that everyone knows, I’d better not back out!*) You may find that others have similar intentions, and you can pair up or form a small group to help motivate each other.

Make use of daily activity.

Thirty minutes of solid exercise each day may go to waste if you spend the other 23 ½ hours sitting on your duff. In fact, “daily activities” can be considered exercise if you do them for long enough and at a high enough intensity. This includes walking pets, shopping, housework, yardwork, running errands, or taking a job that requires a great deal of movement.

Use the time wisely.

For most people, lack of time is a major obstacle to maintaining a regular workout routine. For those with limited time (honestly, who *doesn't* have limited time?), look for ways to accomplish two things at once. Stationary exercise equipment allows for reading, TV watching, net surfing, or listening to music while exercising. You can also talk on the phone, spend time with friends/family/business associates, or just enjoy some solitude while exercising. For those with erratic schedules, carving out workout times in a calendar (written or electronic) at the beginning of each week helps ensure that other activities won't get in the way.

Take it easy.

Becoming sore and exhausted will not motivate you to continue exercising. Pain is also discouraging. For those who are new to exercise, it doesn't take much to get the heart rate up, and that is perfectly fine. Start out with short, easy bouts of activity, but progress gradually (such as adding a minute each day until you reach your desired “duration”, then begin to pick up the pace a bit). Eventually, those short, light activities will morph into a more challenging exercise sessions.

Make it fun.

Not everyone likes to walk, bike or swim. Ask yourself, what do you *like* to do, or what did you *used* to like to do. Even if you can't match what you did as a teenager due to physical or access limitations, find something similar, or start moving them in the direction of what you really enjoy. For most people, variety adds a bit of spice. It also provides more well-rounded fitness, and less risk for overuse injuries. Two or three different types of activities performed on a rotating basis are ideal for most people. Try to include indoor as well as outdoor activities to accommodate for climate and weather conditions.

Manage your medications.

Fear/risk of hypoglycemia keeps many people from partaking in exercise. And there is no reason for that, because insulin and oral medications that can cause hypoglycemia (sulfonylureas and meglitinides) can be reduced, or pre-exercise snacks can be used, to prevent the lows entirely. Talk to your diabetes team, or send me an e-mail if you would like some assistance with blood glucose management during exercise.

Note: Gary Scheiner is a Certified Diabetes Educator and Exercise Physiologist with a private practice near Philadelphia. He and his staff provide diabetes self-management education and blood glucose control consulting for individuals throughout the U.S. and abroad through his web site (www.integrateddiabetes.com) and toll-free hotline (877-735-3648).