

You Can
**ACHIEVE
NORMAL
BLOOD
SUGAR**

DENNIS POLLOCK



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You Can Achieve Normal Blood Sugar

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My Story

I should be a full-scale, flaming, raging diabetic by now. And I would be if it were not for certain interventions I employed as I searched desperately to find answers to the terrible disease that devoured my mother's health and quality of life in her last years, and eventually shortened her life. Three major factors led me out of the morass of runaway blood sugar and into the place I am today—a place of relatively normal blood sugar and freedom from those symptoms and complications that diabetics routinely suffer. Those three factors are: 1) prayer and God's grace, 2) reading and research, and 3) an obsession to test my blood sugar after eating various meals and foods to determine precisely which foods were safe, which were “iffy,” and which were dangerous for me.

My experience is personal to me, of course. It isn't my place to tell you which direction you must go in your quest to quell the raging fires of diabetes in your body. But I can share my experiences and the answers I found in the hope that, at the very least, you can be inspired that there are answers and solutions to diabetes. If you find some things that might help you in the pages of this book, share them with your diabetes doctor, and ask if any of them could work for you. I receive emails from people asking me to tell them what changes they should

make in their lifestyles and diet, and I never give specific advice. Again, I am not a doctor, and I am not going to tell anyone to treat themselves. But one thing I know: I was headed for full-scale diabetes, and now I am not. I have staved off diabetes for the last 17 years, and at this point it looks as though I will live out my life without ever crossing the demarcation line that separates nondiabetics from diabetics. I am grateful.

I have written two previous books about blood sugar. The first one, *Overcoming Runaway Blood Sugar*, was an overview of what I discovered and the answers I found that enabled me to get my blood sugar back down into the normal range. The second book, *60 Ways to Lower Your Blood Sugar*, was primarily a collection of some of the dietary tips and tricks I have learned along the way as I have battled to keep my blood sugar low. After writing the second book, I was sure I had said all there was for me to say. But over time I realized that, despite all the diabetes books available, there was one approach I almost never saw. This had to do with demonstrating the effects of various foods, particularly carbohydrates, on blood sugar. Plenty of people have written about this, but almost nobody has written an entire book, loaded with overwhelming evidence through scores of blood sugar tests, that showed conclusively and irrefutably the simple truth that carbohydrates raise blood sugar like nothing else.

It has long been apparent to me that the greatest need for most diabetics and prediabetics is not so much knowledge—there is a mountain of knowledge about diabetes available today and it is constantly growing. The diabetic's ultimate need is motivation—he or she must somehow find the “want-to” to make the necessary sacrifices, substitutions, modifications, and lifestyle changes that will keep runaway blood sugar at bay and result in a long, healthy, and complication-free life. I believe that this book can be useful in supplying that motivation. We must have more than mere diabetic “sermons” preached to us; we must see with our eyes and really get the fact that our blood sugar is essentially in our hands. We can change our ways and drive blood sugars down, or we can stay on the same reckless, unhealthy, intemperate, uninformed path that has brought us to the precipice of diabetic disaster. As we read

of test after test that confirm and reconfirm the folly of high-refined-carb, high-sugar living, and the efficacy of a low-carb lifestyle, we will hopefully begin to find the resolve to make the necessary changes and watch our blood sugars transformed from erratic and out of control to reasonable and very close to normal. And that is a wonderful thing.

Why I Am the Perfect Test Subject

Most of the tests you will read about in this book involve me. I have included a number of results from guest “guinea pigs,” but I primarily conducted the tests on myself. The reasons for this are several. First, I was always available. No need to ask permission. Second, unlike many diabetics who have seen the light and slashed their diet to match their condition, I am not afraid to occasionally eat foods that I know will drive my blood sugar wild. I don’t like to do it, and I never do this for the pleasure of eating, but for the purpose of writing this book I have eaten foods I never would have eaten otherwise—not in a thousand years.

But the most important reason I am such an ideal test subject is that I have a significant degree of insulin resistance, although my pancreas seems to work just fine. If I eat a food or a meal that I shouldn’t, my blood sugar test will reflect it. If I were using young, healthy, normal subjects, they might eat a sugary food or drink a large soda, and still come out with good numbers an hour later. This doesn’t really prove much, except that they are blessed with a pancreas that works beautifully and they have zero insulin resistance. And while that is very good news for them, it is not the slightest bit instructive for those of us who are diabetic or prediabetic.

I saw a YouTube video where someone stuffed himself with fruit and then tested himself at the time when his blood sugar should peak. His blood sugar score was excellent—something like 120—which led him to conclude that fruit is no problem when it comes to raising blood sugar levels. But it proved no such thing. Just because he could gorge himself with fruit and still have good numbers doesn’t mean that this applies to everyone. This would be like an Olympic swimmer

jumping off a ship five miles from land and then easily swimming to shore. He makes a YouTube video about his experience and declares there is no danger to being in a similar situation. He tells us that if we ever fall off a cruise ship several miles from shore, we can just do as he did. That may work beautifully for the swimmer, but for most of us, being out in the ocean miles from shore would be a death sentence. What works for the goose may not always work for the gander.

Chances are, if you are reading this book, you are either fully diabetic or at the least have significant insulin resistance, which normally leads to diabetes. *I am one of you!* In taking these tests, I represent diabetics and prediabetics everywhere who cannot eat the way other folks eat and expect to keep their blood sugar in check. When you read my scores and see my response to sugars, starches, and carbs, you will probably get a pretty accurate glimpse of how your body may respond. The good news is that in spending a few hours reading this book, you will gain insight into what has taken me many years and many hundreds (probably thousands) of blood sugar tests to discover. My admittedly biased opinion is that you cannot help but gain knowledge through walking with me and my guests as we use a simple blood sugar monitor to give us vitally important information about how our bodies process foods, and which foods serve as gasoline to the flaming torch of diabetes.

A Simple Example: When You Can Increase Your Carbs

Let me give you an example of how I have learned to judge whether a particular meal is acceptable and safe for me. For a long time after I got the point that the major culprit that drives high blood sugar is carbohydrates, I gave up on beans. Even though they have more protein than many plant-based foods, they are still relatively high in carbs. But as I did some research I realized that beans have a pretty significant amount of fiber. One day I went through the bean section of a grocery store and checked the nutrition information on every single bag of dry beans on the shelves. I found two things. First, most

beans have about the same amount of carbs per $\frac{1}{4}$ cup. There is not much difference. Second, beans have widely varying amounts of fiber. Some have far more fiber than others. Knowing that fiber was my friend, I decided to try a couple of the beans that were highest in fiber: small red beans and lentils. I had my wife, Benedicta, make a soup with them, and sure enough, using these high-fiber beans I found I could enjoy a small to medium bowl of bean soup and still keep my blood sugar at reasonable levels.

Beans reentered my life. But knowing that I would be taxing my blood sugar more than with really low-carb foods, I was a little nervous about what I could have with them. Somehow a bowl of beans seemed incomplete by itself. I knew that some version of low-carb bread would probably work. A stick of celery with peanut butter seemed to have little effect on my blood sugar, so that would probably be okay too. But what about an apple with peanut butter? A full-sized, entire apple was out of the question, having around 25 grams of carbs. But what about half an apple with some peanut butter on it?

On two successive days I did two tests on myself to see the effect of beans plus these two additional foods: one celery stick with peanut butter and one half of an apple with peanut butter. I normally test my blood sugar one hour after my last bite of food. In this case I waited an hour and 15 minutes (beans take slightly longer to peak your blood sugar, thus the longer wait time), and tested again. To my great delight, both of these foods proved okay for me.

With the lentil soup plus celery and peanut butter, my blood sugar peaked at 112. No problems there. And with the lentil soup plus apple with peanut butter (I ended up eating three-fourths of the apple because it was a very small apple), my blood sugar peaked at 119. That was exciting! I now had evidence that here were two meals I could eat for lunch or dinner that would not offend my pancreas or cause my blood sugar levels to rise so high they would be doing serious damage to my organs.

| LENTIL SOUP TEST | | |
|---|--|---|
| | Soup Plus Celery with Peanut Butter | Soup Plus $\frac{3}{4}$ Apple with Peanut Butter |
| Before Eating | 94 | 96 |
| After 1 Hour | 112 | 119 |
| Total Blood Sugar Rise | 18 mg/dl | 23 mg/dl |
| <p>Summary: I do not have to give up on beans! What a blessing it is to know that moderately high-carb beans are back on the menu, although in moderate portions. Even with three-fourths of a small apple, my blood sugar behaved itself. Now I had a couple of lunches I could enjoy guilt-free in the future!</p> | | |

What I'm talking about here are two key factors that empower us to overcome runaway blood sugar: *knowledge* and *motivation*. After tests like these, I receive knowledge I did not have before. By continually testing myself an hour or an hour and a half after eating, I learn what is safe and what is dangerous, what I can and should be eating, and what I cannot and should not ever touch. In this case I added two meals to my "repertoire" of recipes that I can pull out at any time and enjoy without guilt and without harm. Of course, no one wants to live on bean soup and celery or apples with peanut butter. But this is just one example. When you do this again and again, you begin to collect meals and categorize them in your mind. One test is probably not enough, so I would test myself several times to make sure. If after several times your numbers are good, you can be pretty sure that these meals make up a part of your "approved" list.

And seeing those numbers provides incredible motivation as well as information. High numbers make me sick! I hate them! And when I see certain foods giving me consistently high, unsafe numbers, I instinctively avoid those foods or meals. I know that if I eat them, the story will have a sad ending. How different this is from those who never test themselves, or only test themselves occasionally in the mornings. They have no information, no motivation, and no clue as to what is going on in their bodies. And so they continue in the same, miserable dietary habits that got them into the mess in the first place.

How I Entered the World of Runaway Blood Sugar

Although I didn't know it at the time, I began experiencing symptoms of blood sugar problems while I was in my early thirties. One of the first signs that I was headed for trouble was a jittery, nervous, uneasy feeling I would get near noon after eating a big pancake breakfast. The pancakes were swimming in a sugary syrup, and I was probably loading my system with nearly 100 grams of carbs, but in those days I knew nothing of such things. All I knew was that when I had those big pancake breakfasts I would usually feel funny a few hours afterward. Often, I would get shaky to the point that my handwriting, never very good, would deteriorate. I didn't think about diabetes; I just assumed it was "one of those things."

Within a few years I started to have episodes when I felt lightheaded and close to passing out. It was always in connection with eating sugary, high-carb meals. Once I ate a personal-sized packaged fruit pie, which I now know is one of the highest carb snacks you can eat—around 60 grams of carbs. Don't ask me why, but after eating the fruit pie I then ate about half of a giant-sized chocolate bar. Shortly after that, while sitting at my desk, my head began to spin. I felt as though I was about to faint. The feeling passed in a couple of minutes, but it was scary and made me wonder what in the world was going on.

In my late thirties through my forties, these experiences increased. It was never an everyday thing, but it was often enough to really bother me. Once, after eating a lot of pizza and washing it down with Coke, I went with my family to our local Walmart. While walking through the store, I had a strong feeling that I was losing it, that I would soon pass out. I immediately left the store and sat in my car while my family shopped. It was unnerving.

I responded to these scares by increasing my exercising and cutting back on sugary sweets. It bought me a few years and I felt better. But by my late forties the episodes began coming back and getting worse. What really grabbed my attention was an incident at church. That morning I had eaten a large bowl of raisin bran-type cereal (which most people would assume to be a healthy cereal but is in fact loaded

with carbs). Just before church was over I got out of my seat, intending to go by the church bookstore before I left. As I walked I suddenly felt terribly weak and faint. I headed for the bathroom, thinking I could recover in there. I never quite made it to the bathroom. As I got close, knowing I about to pass out, I put my back up against the wall and slid down to the floor. This time I really did pass out. I awoke with a nurse cradling my head, and paramedics soon arrived. They tested my blood sugar, and it was so low it didn't give a numerical score. It simply read "LO," which means you are dangerously low—to the point where death is possible. They gave me some snacks and fruit juice and stayed with me until it rose into the 70s. They urged me to go to the hospital, but I was too cheap for that, and instead went home and went to bed. After a nap I felt normal again.

Raisin Bran—Not as Healthy as You Might Think

Let's pause and talk about raisin bran-type cereals. If you bother to look at the nutritional information on Kellogg's Raisin Bran, you will find something like 46 grams of carbs for 1 cup of cereal. Granted, 7 grams are fiber grams, which may be deducted from your "net gram" carb count, but that still leaves 39 grams of carbs for 1 cup of cereal. That's already too much, and then there's the problem that hardly anybody would eat 1 cup of cereal for breakfast. Have you ever measured out 1 cup of cereal and then poured that amount into your bowl? You will have the scrawniest, saddest, most pathetic bowl of cereal imaginable! When I had that large bowl of cereal, I probably ate more than 2 cups. When you add an additional 12 grams of carbs for the milk, I was probably ingesting around 100 grams of carbs that morning in that one "healthy" bowl of cereal. That is more carbs than you would get by eating three regular-sized *Snickers* bars! Thinking I was doing myself a favor by eating a bran cereal, I was in fact challenging my poor, overworked pancreas terribly. And fainting at church was the result.

The Cereal That Nearly Killed Me!

Recently, I tested myself with the same cereal that sent my blood sugar so low it nearly killed me. Pouring the cereal into the bowl, I couldn't help but notice just how "healthy" it looks. The dark-brown color and rough texture of the bran flakes make you feel that you are one with nature as you eat this food. And the raisins are surely an added bonus: you are getting the nutrients of fruit along with the roughage of the bran. It just looks like a wonderfully, crunchy, healthy breakfast. I filled my bowl with cereal using a 1-cup measure. In my large bowl I was able to put a little over 2 cups of cereal and still the bowl wasn't full. Nevertheless, I knew I would be taxing my pancreas in a big way. Those 2-plus cups of cereal, along with the regular milk I poured over it, represented nearly 100 grams of carbohydrates.

I was eating this cereal for the first time in 17 years. Apart from doing the research for this book, I normally would never eat this cereal, and I will probably never touch it again for the rest of my life. But for this one experiment, I would break my own rules. Strange, isn't it, that what I was doing in eating a bowl of cereal would not appear the least bit risky or foolish in probably 99 percent of people's eyes, but for me, I was really going out on a limb. My pre-meal, fasting blood sugar registered 100, a decent number for me. I knew that after eating this meal, my blood sugar would rise significantly. I have tested myself enough to know about how many carbs I can handle at one setting, and 100 grams was way over my limit.

I was eating the same exact breakfast that had nearly killed me. I could not say that I enjoyed the cereal. It tasted great, but the pleasure of the meal was muted by the knowledge that I was ingesting a food that would push my pancreas to the limits and raise my blood sugar far beyond my target boundary of 140. An hour after finishing my breakfast, I tested myself with my trusty blood sugar monitor. I didn't have to wait long to see the results. Within seconds the monitor read 196—surely a sickening number and one that no one would

ever want to see show up on their monitor. *My blood sugar had risen a whopping 96 points in a little over an hour!*

Checking my blood sugar a few hours later, I saw it was starting to dip low. It read 73, which is not dangerous, but that is an unnatural level for me, and it was impossible to tell how much lower it would go. I wasn't going to take a chance on the same thing happening as before, so I ate some cheese and a few peanuts to ease my blood sugar down gradually rather than have it come crashing down way too low. The 196 on my monitor was ugly, nasty, and depressing, but it wasn't a surprise. Whether they come from bread, candy, apple pie with ice cream, or a large hamburger with lots of French fries, 100 grams of carbs is too much. In fact, 50 grams is too much as far as I'm concerned.

A Lower-Carb Cereal

When I test myself, I love to set up contrasting tests to demonstrate the superiority of low carb over high carb. So after bombarding my body with carbs and sugar that morning, I set up another test the next morning. This time I wanted to demonstrate how I learned to eat cereal in a way that does not send my blood sugar into orbit. I have gone through the cereal departments of grocery stores looking for the lowest-carb cereal I can find. The sad truth is that there are no truly low-carb cereals to be had. There used to be one or two you could find about 17 years ago, when low-carb was more fashionable than it is today. The closest I could come to a low-carb cereal was Special K High Protein cereal and the various versions of Cheerios-type cereals (Cheerios itself and the generic versions).

Both of these cereals have around 20 grams of carbs per cup, which is really not low-carb but was the best I could find. Granted, I could order some genuinely low-carb cereals from low-carb internet websites, but they are far costlier, and by the time you include the shipping you are paying perhaps three times the price of grocery store cereal.

The way I keep my cereal from raising my blood sugar through the

roof is threefold. First, I eat less of it. These days I use a small bowl and don't even fill that to the top. Second, as mentioned, I eat the lowest-carb cereals I can find. And third, I make my own milk, using about one-fourth part heavy whipping cream and three-fourths part water. This means cutting my milk carbs from around 12 to perhaps 3. (One key to victory over high blood sugar is to save on carbs every way you possibly can. Every carb you can avoid, do it!).

You may be thinking, *You're not getting too much cereal!* And the answer is no, I'm not. You can't. Cereal is made from grains. There is no cereal made from steak or eggs, or cucumbers. Cereal is all grain, and it is nearly all carbs. There is just no way you can pig out on cereal if you hope to keep your blood sugar under control. Of course, you don't want to leave the table nearly as hungry as you were before eating, so when I have my small bowl of cereal, I always eat a few peanuts. These help to fill me up, and still I get to enjoy the sweet flavor from the cereal. The fat in the nuts also helps reduce the blood sugar spike. You may say, "Why don't you just give up on cereal altogether?" That wouldn't be a bad idea, and many diabetics do just that, but I have loved cereal all my life, and it would be painful to think I could never have the taste of cereal the rest of my days. Besides, it makes for a nice, quick breakfast when I'm in a hurry.

So I ate my small bowl of Toasted Oats (a generic version of Cheerios), had a handful of peanuts, and drank my coffee. Before the meal my fasting blood sugar read 102. One hour after the meal it registered 128. I was satisfied. I had eaten one of my favorite foods in a manner that kept my blood sugar within my prescribed boundaries, and all was well. Life is good!

| HIGH-CARB VS. LOWER-CARB CEREAL TEST (WITH MILK) | | |
|--|-----------------------------|---|
| | Raisin Bran (Large Bowl) | Toasted Oats (Small Bowl) with Handful of Peanuts |
| Before Eating | 100 | 102 |
| After 1 Hour | 196 | 128 |
| Total Blood sugar Rise | 96 mg/dl | 26 mg/dl |
| <p>Summary: With its emphasis on raisins and bran, one might think that raisin bran would be a great food. But for diabetics it just ain't so. Seventeen years after it nearly drove my blood sugar crazy, it's still a serious problem for me. Despite appearances, high carb is high carb! My blood sugar results for the Toasted Oats demonstrate that when it comes to carbs, less is more!</p> | | |

Since the time I did this experiment and wrote about it, I have found a wonderful substitute for regular breakfast cereal. In fact, it's so good that I have pretty much given up on cereal altogether. It involves the lowly chia seed. I take a traditional "chia seed pudding" (type that in the YouTube search box, and you'll find numerous recipes) and then add several different kinds of nuts to it along with a few blueberries and some Stevia. It's good—so good that it has finally given me the will-power to give up on regular cereal.

Getting Worse and Getting Desperate

My blood sugar episodes became more and more frequent. It became obvious that something was seriously wrong with me and that I desperately needed some answers. I happened to run across an article by a man who claimed he had a total cure for diabetes. His "cure" was not at all complicated—just go vegetarian and stay away from meat altogether. He sounded like he knew what he was talking about, so I immediately dropped meat from my diet and went vegetarian. It sounds impulsive to change my diet so radically simply on the basis of a few claims of success, but I was desperate.

No more hamburgers, no more chicken, no more bacon. It was a

radical change, but what I didn't realize was that when most people become vegetarians, they substitute carbs for meat, which is exactly what I did. And, not surprisingly, my high and low blood sugar episodes increased exponentially. One evening when we had relatives over, my brother-in-law bought fried chicken for everyone. Trying to be a good boy, I passed on the chicken and made myself some spaghetti with a meatless sauce. Within a couple of hours, the shaking and all those strange unnerving feelings began. It was worse than usual this time, and I tested my blood sugar to see what was happening. My blood sugar reading was around 40 mg/dl. I knew this was dangerously low, so I chugged a soda immediately. I waited a little while and then tested myself again. This time the monitor read in the 170s. I lay down, but the trembling increased, and while the family enjoyed a movie in the living room, I was in my bed shaking like a leaf and wondering what in the world was wrong with me.

Another terrifying experience happened while I was at work. I don't remember what I had eaten for breakfast that morning, but it must have been loaded with carbs because a few hours later, just before lunchtime, it started happening again. By now I knew the signs and the way my body felt when the bottom dropped out of my blood sugar. The last thing I wanted was to faint at work, so with my office door closed I grabbed a bag of chips I kept around for just such emergencies. In my desperation to get my blood sugar up fast, I stuffed as many chips into my mouth as I could. The problem was, while I was in the process of chewing the huge mouthful of chips, one of my coworkers knocked at my door, telling me it was time for lunch. He often did this, and I always replied to his knock by saying, "I'm coming."

But this time I couldn't say anything—my mouth was still stuffed with the chips, and I could not get them down very quickly. My friend waited patiently to hear my reply, but it took me what seemed like forever to finally chew up the chips and utter a garbled, "Okay, I'll be there in a minute." It would have been funny if it wasn't so scary.

Once I had to go home before lunch just to sleep off my trembling and shaking. After a while I began eating something every few hours to stave off the symptoms of crashing blood sugar. It was a miserable

existence, never knowing when I might be near fainting and not really knowing what to do about it. A combination of a high-sugar and high-carb diet was making my blood sugar bounce up and down like a yo-yo. I now know that my problem was an overreacting pancreas and severe insulin resistance. But in those days I had little idea what was going on.

First Response

Having no health insurance, I resisted going to see a doctor for quite a while, but eventually I broke down and made an appointment with a doctor I picked at random (she was nearby and had a nice name). The problem was, she was a general practitioner and not a diabetes doctor—again my cheapness was shining through! As I recall, she took my fasting blood sugar, which was normal, and asked me a series of questions from a prepared list. She didn't seem to have much of an idea what was going on. However, she did give me a little good advice. Learning I was eating a vegetarian diet, she urged me to eat foods with protein when I was having a meal that was mostly carbohydrates. This I began to do, and my episodes slowed down a bit.

Almost from the beginning of these blood sugar fluctuations, even before I began to test myself, I had a sneaking suspicion that my problem might have something to do with diabetes. My mother had been diabetic in her later years, and it had taken a terrible toll on her. As with so many diabetics, she had poor circulation, especially in her legs and feet. It became painful for her to walk any distance, and even when she was at the mall with my sister, she would have to sit down and rest a while after walking through a few stores. Doctors told her that her veins were collapsing and put in stents and tried different procedures to save her legs, but to no avail. The day came when she was forced to have one leg amputated, and within a couple of years, the other leg was also amputated above the knee. This time there was an infection, and it was necessary for the doctors to cut off even more of her leg. It was a miserable time for her. After her first leg was gone, she used a prosthetic and could still walk, but after the second amputation she was confined to a wheelchair.

Mom tested her blood at times and, as far as I know, she never had

super-high numbers. But the diabetes was merciless, and it spoiled the last ten years of her life. My dad, who was nine years older than her, was faithful to take her wherever she needed to go and to stay with her almost constantly, but when he died, she was forced to stay at home by herself and get along as best she could until my sister came home from work. Mostly she lay in bed. She managed to live to the age of 80, but the last decade of her life was not a very happy season for her. Thank God she is in heaven now, and her struggles are a thing of the past.

As I dealt with wildly fluctuating blood sugar, all of this was in my mind. I feared I was going down the same path as Mom, and I was starting earlier in life than she did. It was not a pleasant prospect. I really needed some answers, and I eventually found them. As I read books about blood sugar and diabetes, I found that there seemed to be two very different approaches to taming the monster. One was a meatless, low-fat diet, and the other was based on significantly reducing carbohydrates in the diet.

At this point I had no biases. I did not favor one approach over the other. I just wanted something that worked. If I had to eat sawdust for every meal and could be assured it would keep me healthy, I would have done it. It was when I began doing pre-meal and post-meal blood sugar tests that the light began to come on. Almost everybody with blood sugar problems tests themselves at times, but many people limit themselves to the standard fasting blood sugar test—the blood sugar level you get when you test in the morning after eating nothing all night. This can give you a general idea about things, but it is not that helpful for two reasons.

Problems with Testing Fasting Blood Sugar

First, testing our fasting blood sugar alone may be misleading. In my case, during all of those early days when my blood sugar was saw-sawing back and forth, my fasting blood sugar was in the normal range. An uninformed doctor, seeing this, might well tell me, “You are okay. Your blood sugar fluctuations are normal.” But I was not at all okay. I was heading for disaster. With certain meals my blood sugar would

skyrocket well out of the normal range, and then a few hours later it would drop precipitously to dangerous levels. I discovered all of this when I began to test myself frequently.

Second, even if your fasting blood sugar is quite high, you gain no information about what is making it high. What foods are driving your blood sugar up so powerfully? Is it cucumbers, or green beans, or potatoes, or chips, or avocados, or steak, or rice, or salad? Who knows? Thankfully, your blood sugar monitor can tell you this, if you have enough sense and enough patience to test yourself frequently and at the appropriate times.

As I researched and learned about another major school of thought that allowed for meat but strongly restricted carbs, I determined to allow my blood sugar monitor to decide for me which version of a diabetes fix I would embrace. I also read somewhere about the importance of obtaining a post-meal blood sugar reading. This involved eating a particular food or meal, waiting an hour to an hour and a half after finishing your meal, and then testing to determine your glucose level as your blood sugar peaked from the meal just eaten. It was this practice of testing my blood sugar peaks that led me out of the darkness and into the light of normal blood sugar.

Beginning of the End—and the Beginning of the Beginning!

My “aha” moment came on a trip when I tested myself after two very different meals. The first was a large hamburger (with a very large bun) along with corn chips. My post-meal number was around 185, which depressed me greatly. I remember going for a walk after I tested myself, hoping that the physical exertion would help get my blood sugar down. I was heartsick over the high number and determined to eat something at my next meal that would give me a better score (sounds sort of like a baseball game, doesn't it?).

The next meal I tested was a chef's salad. I ate almost none of the croutons. This time my post-meal score was somewhere around 118. I was euphoric! I made a change in the food I ate, and my blood sugar monitor

reflected that change in a very positive way. Soon I was bursting with hope and with a very simple thought: *I can do this! I can find out which foods are safe and which drive my blood sugar crazy. And then I'll just start eating the safe foods and passing on the dangerous ones.* This was not a stroke of genius. I do not consider it at all brilliant. It was simply common sense.

It worked beautifully. Within a very short time my fluctuating blood sugar and near-fainting episodes were a thing of the past. I no longer had to eat every few hours just to keep my blood sugar from crashing. And I wasn't experiencing those terrible high numbers that spelled the coming of full-fledged diabetes. This was around 17 years ago, and I am still doing great. Although I read quite a few books on the subject, the ultimate judge, umpire, and dictator for me was my handy-dandy, friendly little neighborhood blood sugar monitor. The monitor cost around \$20, and a package of strips about \$20 more.

Re-Creating Earlier Glucose Tests

Below is a test I did with the help of two dear friends. This was such a contrast from those early tests when I was sick, scared, and desperately seeking answers. What a difference a little knowledge can make. We contrasted a high-carb meal with a low-carb meal. Before we even began, I was already certain of how these tests would turn out. I did not know the exact numbers we would get, but I knew one thing for sure: the high-carb meal would spike our blood sugar significantly, and the low-carb meal would not. I was not surprised.

Recreating Those First Two Enlightening Tests

Recently I invited a couple I knew, Fred and Lynda Lindstrom, to join me in re-creating these two meals that were so illuminating to me. The first meal was the one that depressed me so much: the large hamburger and large helping of corn chips. Fred has been diagnosed as prediabetic, and his wife, Lynda, is essentially normal. She sometimes tests her blood sugar in the mornings and gets readings

in the high 80s and low 90s. They graciously agreed to eat the same meal that drove my blood sugar so high around 17 years ago to see what it did to their blood sugar levels.

Before we ate, we tested our blood sugar to discover our starting point. We all tested at a decent level. Lynda scored an 88 and Fred tested at 101. Mine was at 104, and just for fun we tested our cameraman, Jordan, who is in his late twenties, and he scored 82. Then we had our meal. The Whoppers were good, and I have to admit that the Fritos tasted pretty great as well. Normally I would never touch chips, but for this little experiment I made an exception. It was a big meal, and Fred had a hard time finishing it. We waited until we had all completed our meal, and then set the timer for one hour.

After an hour we began testing ourselves, starting with our cameraman. His blood sugar rose around 60 points, which left us wondering, *If this young man in his twenties can increase that much, how much will our blood sugar rise?* Lynda's blood sugar tested at 159, a 71-point rise. Fred tested at 174, a 73-point rise in about an hour. Mine was a bit of a surprise. It rose to 150, which was a lower peak than that original meal so long ago. It appears that in all these years, my body's blood sugar response is at least as efficient, if not more efficient than it was. That is exciting!

LARGE HAMBURGER AND CORN CHIPS TEST

| | Dennis | Fred | Lynda |
|---|----------|----------|----------|
| Before Eating | 104 | 101 | 88 |
| After 1 Hour | 150 | 174 | 159 |
| Total Blood sugar Rise | 46 mg/dl | 73 mg/dl | 71 mg/dl |
| <p>Summary: There was nothing that tasted sweet in this meal. What raised our blood sugar significantly were the starches: the buns and the chips. Without candy, cake, or pie, we were still over the limits of blood sugar safety. And none of us were true diabetics!</p> | | | |

The American Association of Clinical Endocrinologists has recommended that we keep our blood sugar from rising above 140 in order to avoid diabetic complications.¹ After the hamburger and corn chips, we had all risen above that. Now, if this type of meal was our normal way of eating—that is, if we constantly ate meals loaded with carbs, plus had high-carb snacks here and there, along with sodas, fruit juice, and other sweet drinks (the way many Americans eat and drink)—we would be at diabetic levels much of the day, doing severe damage to our bodies over the course of time.

Here's something worth considering. As I mentioned, none of us are true diabetics. Fred and I have hovered in the prediabetic range for years, and Lynda wouldn't even qualify as a prediabetic. If this meal affected us this way, what do you suppose it would do to a real diabetic, with a fasting blood sugar of, say, 140 or 150? Almost surely he or she would end up over 200 on the post-test. And keep in mind that few Americans would eat this meal the way we did. Most would have a soda with it, adding an additional 40 grams of carbs. Some would want a dessert of some kind at the end of the meal, adding more carbs still and raising their blood sugar even higher.

A Second Test with Fred and Lynda

Fred, Lynda, and I got together a few days later to do a second test. This time I chose a meal that was low in carbohydrates. We went to a pancake restaurant, not to eat pancakes, but to eat a large omelet. Before entering the restaurant, we tested our blood sugar in Fred's car. We all tested in a decent range. Our meal at the restaurant was a large omelet stuffed with beef, bacon, sausage, green peppers, onions, and cheese. After our meal, we went to Fred and Lynda's house, and when one hour had passed after our last bite of omelet, we tested ourselves. The results were a whole lot more pleasant this time.

Now, both meals were extremely filling; we walked away from the table totally stuffed both times. But that is where the similarity ended.

The contrast could hardly have been greater. Fred went up 73 points with the burger meal but dropped 21 points with the omelet. Lynda's blood sugar rose 71 points with the burger meal and dropped 4 points with the omelet. And I rose 46 points eating the burger and chips but dropped 2 points after having the omelet.

| OMELET TEST | | | |
|---|----------|-----------|----------|
| | Dennis | Fred | Lynda |
| Before Eating | 92 | 98 | 87 |
| After 1 Hour | 90 | 77 | 83 |
| Total Blood sugar Rise | -2 mg/dl | -21 mg/dl | -4 mg/dl |
| <p>Summary: What a contrast! In this case each one of us had our blood sugar drop by the one-hour mark. The omelet proved a kinder, gentler food for our blood sugar processing system. If ever there was evidence to choose eggs over chips, this is surely it!</p> | | | |

Low-Carb Intervention

Could it be any plainer? The foods we eat possess three essential types of macronutrients: protein, carbohydrates, and fats. Of these three, the only one that has a major impact on blood sugar are the carbohydrates. Fats do not raise blood sugar at all. Proteins can raise blood sugar, but for most of us, it is a very slight, almost imperceptible rise. But carbohydrates are an entirely different matter. Raising blood sugar is what they do; it is their specialty, their unique domain. And for people with diabetes or prediabetes, the more carbs you eat, the higher your blood sugar will soar (especially when those carbs are refined and processed). It comes down to a very simple formula: Eat a small amount of carbs, get a small blood sugar rise. Eat a medium amount of carbs, get a bigger blood sugar rise. Eat a meal with a large amount of carbs, get a whopping rise in blood sugar. And, sadly, we must also add: Build a lifestyle on eating refined, processed carbs, carbs, and more carbs, and you will have an excellent chance of becoming diabetic and destroying your health, spoiling your latter days, and shortening your life.

But when carbs are restricted, blood sugars will drop. Dr. Sarah

Hallberg, medical director of Virta Health (a successful diabetes center) says in her YouTube lecture, which has garnered millions of views: “Low-carb intervention works so fast that we can literally pull people off hundreds of units of insulin in days to weeks.”²

And while I’m quoting doctors, let me give you one more quote that, while very simple, was incredibly powerful in getting my attention when I was first looking for answers to runaway blood sugar. It is by the late Dr. Robert Atkins, who wrote, “Your blood-glucose level doesn’t sharply rise and fall when you sit down to eat a Cobb salad. But it does just that when you chow down a slice of pie.”³

Now, that’s not profound, it’s not deep, it’s not rocket science. . . but it is unquestionably, indisputably, and incontrovertibly true. But we don’t have to stop there. We could insert all kinds of substitutions into that equation. Your blood sugar won’t sharply rise and fall when you eat an avocado, but it will when you eat a doughnut. It won’t rise and fall when you eat eggs and ham, but it will when you gobble up a bunch of pancakes drenched in syrup. And on and on we could go.

Our Desperate Need for Hope

Do you remember when you were a kid and you had the misfortune to be on a softball team that was totally mismatched against a much better team? At first you probably didn’t realize just how mismatched you were. Maybe after the first inning the score was 6 to 1, and you thought, *Well, we didn’t do so great this inning, but we’ll get it back next inning.* But after the second inning, the score was something like 15 to 2. You realized that you couldn’t possibly win the game. You were beaten from the beginning. But you still had five more innings to play. What did you do? Chances are, you got sloppy. You didn’t try too hard, you goofed around, you got kind of silly. You stopped taking the game seriously, because in your mind you were already a loser.

This is precisely the way many people feel about their lives, and this is how some people feel about this area of blood sugar. They assume they are just unlucky. They have the misfortune to be a diabetic, or they know they soon will be, and they sadly resign themselves to their

fate. They make a few token efforts, but they never really do too much, because in their mind they are already a loser. They have lost hope.

The purpose of this book is to say, in as many ways as I can say it and using many different blood sugar tests, you don't have to be a loser. There is hope for you! And hope is such a beautiful thing. As horrible as diabetes is, there is one really good thing about the type 2 variety. It normally responds quickly and beautifully to the right kinds of behaviors and lifestyle changes. With cancer and emphysema and so many other diseases, all you can do is go to the doctor and hope you are one of the lucky ones who beats the odds. But with type 2 diabetes, or if you are prediabetic, the actions you take and the foods you eat (and refuse to eat) can make a huge difference, and they can determine whether this disease destroys your life, or you end up living a long and healthy life. And just knowing this can turn your tepid, sluggish, listless attempts at overcoming your condition into a raging inferno of motivation and determination that will drastically change and enhance your prospects. Victory tastes a whole lot sweeter than failure, and once you taste some victory in this area of blood sugar, it will be almost impossible to stop you.