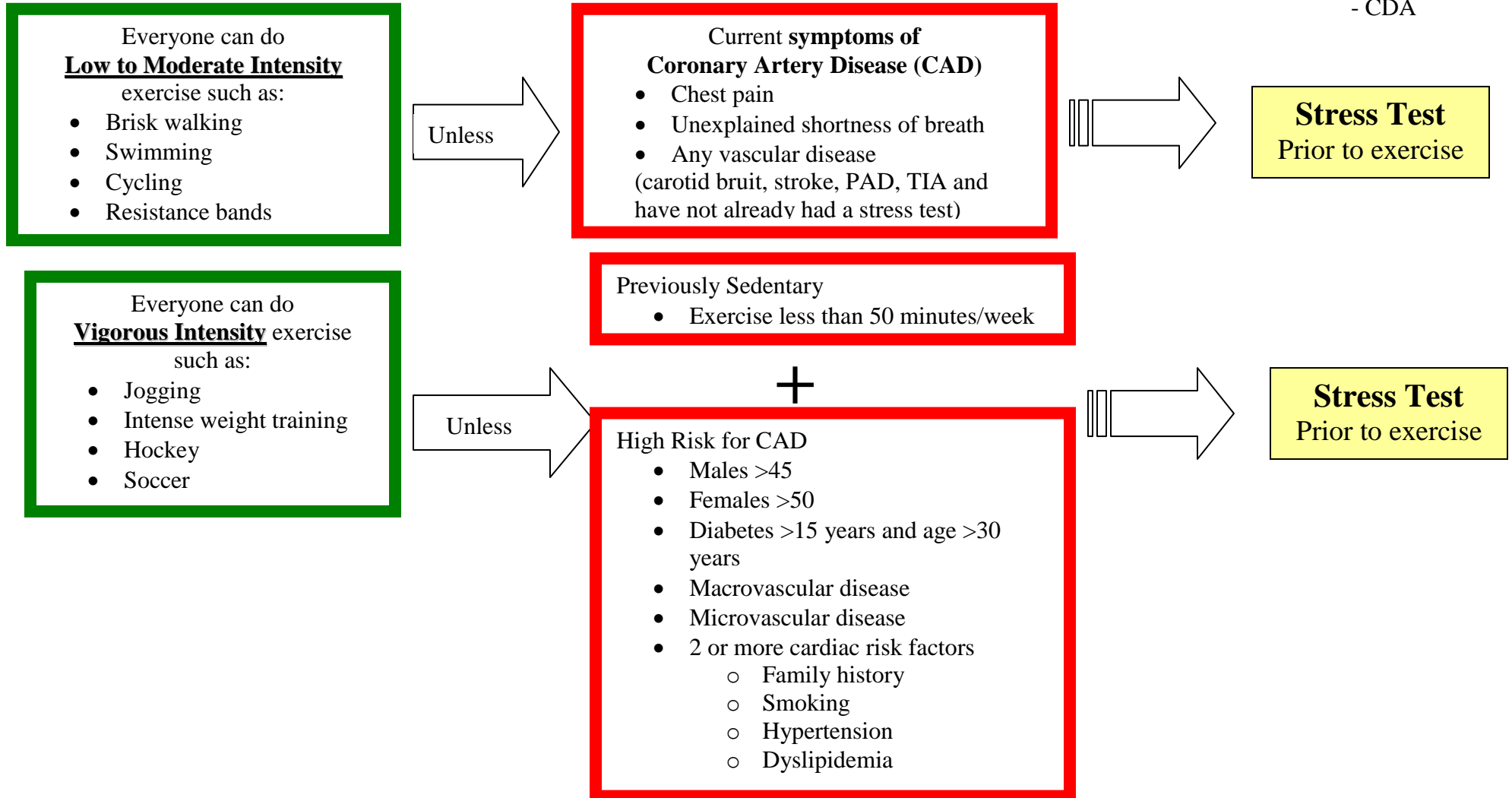




# Everyone Can Exercise Safely

“For most people with diabetes, continuing chronic sedentary living is much more dangerous than beginning exercise”

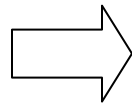
- CDA



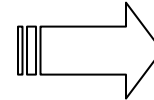


## Cautions with Exercise

Preproliferative  
or proliferative  
retinopathy

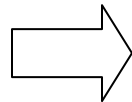


\* Risk of vitreous hemorrhage with increased blood pressure

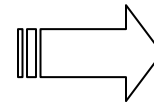


✓ Avoid heavy lifting or vigorous exercise

Severe peripheral  
neuropathy

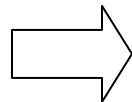


\* Impaired sensation  
\* Prone to ulcers/injuries  
\* Poor balance/risk of falls

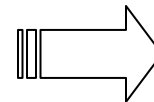


✓ Good footwear  
✓ Check feet regularly  
✓ Referral to balance program if needed  
✓ Seated exercises like cycling, resistance exercises if unsafe for standing

Severe autonomic  
neuropathy

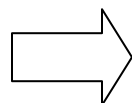


\* Impaired heart rate response  
\* Impaired blood pressure response  
\* Impaired thermoregulation

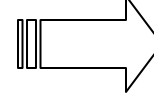


✓ Avoid exercise in extreme temperatures  
✓ Warm up and cool down  
✓ Caution with exercise

Musculoskeletal  
injury

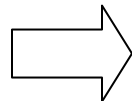


\* Risk of worsening injury  
\* Patient discouragement

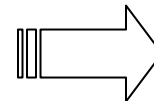


✓ Cycling or pool exercise  
✓ Refer to physiotherapist for treatment and/or alternative exercise recommendations

Hypoglycemia



\* Blood glucose can be lowered for up to 72 hours after activity



✓ Monitor blood glucose before, during, after and 2 hours after exercise  
➢ May need to increase food intake prior to activity  
➢ May need to decrease insulin or medications prior to activity  
✓ Avoid insulin injections in exercising muscles (faster absorption)  
✓ Avoid alcohol after exercise