

Diabetes

Sex and the Dungeon



Cain Berlinger

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By
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Diabetes: Sex and the Dungeon

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INTRODUCTION

In August of 2006, I ran for the newly minted title of Mr. World Leather. Although someone else took home the sash, I was encouraged to continue my "Diabetic Awareness" platform as it has become a disease that has taken on epidemic proportions and is affecting nearly everyone in the Leather community. In my research, I have come across someone who has diabetes, knows someone who has diabetes, or has a family member who has diabetes. With our current American diet, obesity has become a severe threat and is one of the leading causes of disease breeding.

We tend to celebrate 'size,' encouraging others to be comfortable with their larger bodies. As a result, much of our community consists of brothers and sisters embracing their 'bigness' through euphemisms such as Bears, cubs, mirth, and girthers. The by-products of this are various health issues; foremost among them is diabetes.

When was the last time you attended a Leather event offering diabetic choices at open buffets or sugar-free mixers at open bars?

While diabetes affects people in and out of our community, we are the only community encouraging bad health habits. But as beings of free will, we have a choice.

Sex and BDSM are a significant part of whom we are as members of the Leather community, and awareness, especially in our sex play, whether it is vanilla to kink, is essential; our lives depend on it. Knowing diabetes, what it is, who has it, and how to recognize it is considered other tools in our arsenal for survival.

Including all the information on diabetes would require huge volumes, and still, the data would be incomplete! So much is still not known about the disease that claims over eight million lives a year through related complications. My research focuses on **Diabetes: Sex and the Dungeon** because I am part of this world. I have been a diabetic Leatherman for sixteen years. One of my two boys is also diabetic. Thank goodness for the Internet and research material available at the touch of a keystroke. Oddly, there is little material on diabetes and its effect on our sexual lives.

If you are a doctor or specialist in diabetes and think you can add to what is presented here, please contact me. This is only the first printing of this booklet. As I said before, there is limited information, so any assistance in making this a better source of understanding will be encouraged. While there are many diseases and ailments in our community, this booklet focuses on diabetes, the first step toward your diabetic awareness! The life that you save may be your own.

Cain Berlinger

Diabetes: What is it?

Diabetes (diabetes mellitus): a condition characterized by hyperglycemia resulting from the body's inability to use blood glucose for energy. In type 1 diabetes, the pancreas no longer makes insulin; therefore, blood glucose cannot enter the cells to be used for energy. In type 2 diabetes, either the pancreas does not produce enough insulin, or the body cannot use insulin correctly.

Type 1 diabetes is characterized by high blood glucose levels caused by a total lack of insulin. It occurs when the body's immune system attacks the insulin-producing beta cells in the pancreas and destroys them. The pancreas then produces little or no insulin. Type 1 diabetes often develops in young people but can appear in adults.

Type 2 diabetes: a condition characterized by high blood glucose levels caused by either a lack of insulin or the body's inability to use insulin efficiently. Type 2 diabetes often develops in middle-aged and older adults but can also appear in young people.

Gestational diabetes, which affects up to 14 percent of pregnant women, is defined as having higher-than-normal blood sugar levels during pregnancy.

Who gets it?

While the cause of diabetes is unknown, some factors make people more at risk for diabetes: You may be at risk if you:

Are 45 years old or over; are overweight (especially if you carry most of your weight around

your waist area), are a member of a high-risk group (Aboriginal, Hispanic, Asian, or African descent)

Have a parent, brother, or sister with diabetes, have given birth to a baby that weighed over 4kg (9 lbs.) at birth, or have had gestational diabetes, have high cholesterol or other fats in the blood, have higher-than-normal blood glucose levels have high blood pressure or heart disease For those already diagnosed with diabetes, the condition can be aggravated by stress, excess sugar intake or by developing an infection.

Do you have it?

The four "classic" symptoms of diabetes are:
Increased thirst

1. Increased urination Feeling very hungry
2. Weight loss despite increased eating

Every cell in the body needs energy to live. People get their energy by converting the food they eat into fats and sugar (glucose). This glucose travels in the bloodstream as a component of normal blood. Individual cells then remove some of that glucose from the blood to use for energy. The protein called 'insulin' is the substance that allows the cells to take glucose from the blood.

Insulin is created by beta cells that are located in the pancreas. The pancreas is an organ located next to the stomach.

When glucose in the blood increases, the beta cells release insulin into the bloodstream, distributing it to the cells in the body.

The insulin attaches itself to proteins on the cell surface, allowing glucose to move from the blood into the cell, where it is converted into energy.

A person with type 2 or gestational diabetes either cannot produce enough insulin or is "insulin insensitive," which means that their body can't use insulin properly. A person with type 1 diabetes makes little or no insulin.

Without enough insulin, the cells in the body do not have a way to use the glucose in the bloodstream. As a result, the cells 'starve' while the glucose level in the blood rises.

In response to a lack of energy in the cells, the brain sends signals telling the person to eat more. Meanwhile, other cells in the body try to obtain power by asking the body to break down fat and muscle protein. The liver can convert the muscle protein into glucose. A vicious cycle happens: more glucose is being created, but it cannot be turned into energy because there is insufficient insulin to transfer the glucose into the body's cells.

When too much glucose is in the blood, it 'leaks' into the urine. The urine of healthy people contains no sugar. In diabetes, sugar in the urine draws water like a dry sponge. This person produces large amounts of urine because of all this water. All that urination makes the person thirsty, causing them to drink excessively.

These responses to a lack of insulin lead most people with diabetes to show the four classic symptoms of diabetes: a) they lose weight despite b) an increased appetite, c) they drink excessively, and d) urinate excessively.

Dealing with the complications of Diabetes

Diabetes can lower the average life expectancy by up to 15 years."

The complications of diabetes can be far-reaching, and they can negatively affect your quality of life and not just the sexual aspects. The long-term complications can include:

Eye problems -- High blood sugar and high blood pressure can damage the eye's micro-vessels. About 12,000 new cases of blindness caused by diabetes occur in the United States each year.

Amputations of a foot or leg -- People with diabetes are at risk for serious foot problems. High glucose levels can damage the nerves in your feet, leading to a severe infection or affect blood vessels and result in poor blood flow and a greater risk of infection.

Approximately 20,000 people in the United States have a foot or leg removed yearly.

Kidney disease -- Approximately 4,000 cases of kidney failure occur yearly in the U.S. among people with diabetes. Diabetes is also the leading cause of end-stage renal disease. Another 3 million people, many of whom have diabetes, have stage 3 kidney disease -- which eventually leads to kidney failure.

Heart attack and stroke -- Diabetes can damage the large blood vessels that surround the heart. This causes the heart to work harder to pump blood to all the body parts and increases the risk of heart attack and stroke. We must do much to take charge of diabetes and prevent these devastating

illnesses. Here are some tips to help ensure proper control and decrease your likelihood of becoming a statistic:

1. Regular contact with your family physician and endocrinologist. Keep annual checks on your glucose levels, blood pressure, and lipids. Ask your doctor to do an HbA1c test, which shows how well your diabetes is controlled over two to three months. It will help you be confident that you are doing a good job overall. If you have diabetes and your doctor does not routinely administer this test, consider getting another primary care physician.

2. Test your blood sugar regularly. This will help you judge how well your diabetes plan works and when necessary changes.

Weight loss -- 80 percent of people with Type II diabetes are overweight. Achieving and maintaining ideal body weight is the first line of defense in controlling blood sugar. Follow a sensible and well-balanced and enlist the help of an expert if that has been a struggle for you. An even modest weight loss, as little as 10 percent of body weight, has improved your glucose levels.

Follow a nutritionally adequate meal plan, including three meals daily and a bedtime snack. Ideally, meals should be eaten around the same time each day, with consistent amounts of food at each meal. People with diabetes can still enjoy most foods. However, portion control is significant as the problem is usually one of excess serving sizes. It is also advisable to enjoy small mid-morning and afternoon snacks.

Exercise is essential for people with diabetes. Regular exercise can help control blood

sugar by decreasing the amount of glucose in your blood, burning extra calories and fat, aiding in weight loss, and increasing overall energy levels. Check with your doctor and choose an exercise plan that fits your life.

You play the most crucial role in your diabetes management. With a good team around you of health professionals and loved ones, you can stay well for years to come.

Diabetes and Your Sex life

Obesity can make it challenging to locate the libido, but with diabetes also comes a higher risk of infections, nerve damage that decreases pleasure and sensation, limited mobility, erectile dysfunction; feeling unattractive due to excess weight, being tired from elevated glucose levels; and vaginal dryness, according to the American Diabetes Association.

Being overweight causes anxiety and prevents you from enjoying your sexuality and sex life. Sex may not be enjoyable merely from the physical difficulty of having sex when you are obese, or it could be related to nerve damage.

However, much of the pleasure from sex comes from between your ears -- not just between your legs.

Often, people do not know they have diabetes. Type 2 comes on slowly, so it can be hard to catch, gradually creeping into the bedroom and making a person too tired, feeling too unattractive, and just not interested due to the problems they face between the sheets, not even realizing what's caused this drop in desire.

Many complications of diabetes may occur as a result of high blood glucose levels, high blood pressure, and high blood fats. Neuropathy (an abnormal and usually degenerative state of the nervous system or nerves brought on by diabetes) is known to cause sexual dysfunction in up to 75 percent of men and up to 35 percent of women with diabetes.

Sexual Function

Many men and women, whether they have diabetes or not, have sexual problems. Although diabetes may affect sexual functioning in several ways, there are some things that you can look out for:

Menstruation

Women may find that the menstrual cycle affects blood sugar. You may have some difficulties controlling your blood sugar around your menstrual period. You may find that your blood sugar is higher than usual the week before your period. You may need to exercise more and avoid eating extra carbohydrates. Talk to your doctor about adjusting your insulin or any other medication at this time.

Women should watch out for blood sugar weirdness a few days before and after their periods. If you can find any menstrual-related patterns, you'll know to make adjustments in your diet, exercise, insulin, and sexual robustness.

High blood glucose means more glucose is available in the vagina. This can trigger a yeast infection. Many women discovered diabetes due to recurrent yeast and urinary tract infections.

These problems can be due to an interruption in nervous-system feedback, issues in circulation, or a combination of both. Urinating before and after sex helps decrease the chances of getting urinary tract infections, so going on, your partner will be killing two birds with one stone or stream.

Lubrication

Women with diabetes may also have difficulties with vaginal lubrication. You may also have trouble with a sexual response because of nerve damage or adverse effects of medication used to help control your diabetes.

Impotence

Impotence is the inability to sustain an erection enough to engage in sexual intercourse. Many men have impotence problems at some point during their lives, especially after reaching age 50. For men with diabetes, these problems can arrive 10 to 15 years earlier than for men without diabetes.

Some estimates place the incidence of diabetes-related impotence in men at more than 40 percent.

Most men feel that intercourse is the primary sexual act, and unfortunately, it is the one act that requires an erection. It is commonly understood that the more (psychological) pressure you put on your penis, the less likely it will stay erect.

Sometimes nerve disease related to diabetes causes impotence. When nerves are damaged, blood flow to the penis may be lessened, and an erection can't occur. Blood vessel damage can also cause impotence.

It may be that medications taken for diabetes, high blood pressure, or other conditions can also be the cause. Diabetic-related impotence may be treated successfully, depending on the cause.

After Sex

If you use insulin, be aware that sometimes sex can cause low blood sugar levels. Test your blood sugar before having sex, or consider

eating just before or right afterward as you would for exercise. Also, you may want to have a snack before sleeping at night.

Be Aware in the Dungeon

Overtight?

Are the restraints too tight? Will they put too much pressure on nerves, flesh, and joints if the submissive moves about? Wrists and especially ankles change shape as the limbs move: ankles are bigger on a standing submissive, which can put a lot of pressure on the exposed tendons if restraints are put on tight when the submissive is laid down. Is the bondage so tight that the submissive can't change positions, and there is pressure on a few small areas of flesh?

You can get a pressure sore in as little as two hours. A good rule of thumb is that you can always get a finger in between each restraint and the flesh of your submissive without you helping your submissive to shift their weight or otherwise moving your submissive about.

Extremities

Wrist, ankles, knees, and elbows are suitable for bondage because they are narrower points on the body that make bonds challenging to slip. But this also leads to the risk of circulation being cut off too, producing numbness and, in extreme cases, damage to tissue deprived of oxygen and even blood clots that may travel to the heart, brain, or lungs.

You can reduce this risk by avoiding putting pressure anywhere you can feel a pulse: those are the points where arteries are vulnerable

because they cross bone just under the skin. Also, you can monitor extremities by checking for numbness, feeling the temperature of the limb, and seeing if the captive can still feel sensations there.

Sidebar

Piercing: If you can't live without getting your 'love parts' pierced (labia, Prince Albert, frenums....etc.), the chances of getting an infection are higher when your blood glucose levels are elevated. Infections will increase the scarring around piercing sites, making your glucose levels shoot even higher. Also, a tongue piercing will make your tongue swollen and sore, which will inspire you to skip meals, which can lead to a hypoglycemic episode.

Caution: You might want to hold off on wearing a metal cock ring. Decreased circulation and numbness can be a problem with diabetes, and why risk making it worse? If you must wear a cock ring, especially to maintain an erection (see above), be sure and get one that fits. If you cannot insert an index finger between your penis and cock ring, it is

a fair indicator that your cock ring is too tight, and an erection may be painful and have difficulty residing.

As for aerobic activity, no rule says exercise can't be done while you are naked at home rather than at a gym.

Exercise that is sexercise needs a diabetic caveat or two. For instance, one acquaintance had a bad experience while performing oral sex on her boyfriend. It was her first time, so she assumed the funny feeling she had was from being nervous. She kneeled over the boy when she fainted from low blood sugar, almost choking on his penis.

Safe Sex for people with diabetes includes keeping a pack of Lifesavers next to the condoms and lube. Although not a fashion must, wearing a medical ID tag or bracelet when you are traveling or just picking up in the bars, parks, etc.

Diabetes doesn't mean you can't be as good or bad as anyone else in bed. It means you've got to plan and jump through a few more hoops.

Checking your blood sugar before, during, and after sex is the last thing anyone feels like doing. But until you understand your body's reactions while making love, especially with a new partner, taking frequent readings is the only way to learn.

You will want to learn about your body's reactions in the minutes and hours after sex. The muscles in a horny pelvis eat up extra glucose, especially when it's been rocking back and forth. And hormones like adrenaline, non-adrenaline, and prolactin are released during orgasm. They can change your blood sugar, sometimes dramatically.

A healthcare provider or diabetes educator can help you with lovemaking and its management strategies. Should you adjust your insulin downward? Is it a good idea to inject yourself in the abdomen instead of your thigh before a love-making marathon, or does the jack-hammer thrusting of hips cancel any slow-down in the insulin absorption rate you might hope to gain? Should you eat something other than your partner before, during, or after sex?

It's usually best to avoid strenuous lovemaking whenever you aren't feeling well or if you have high blood sugar. If you have diabetes, it is essential to try and educate your partner about diabetes, how they can recognize your hypoglycemic episodes and other blood sugar needs, and the hazards of poor eating habits. Your partner needs to know how to be in charge, what to do, when, and how.

They need to know that orange juice, six raisins, and a packet of lifesavers should be nearby in case of an incident, which can save your life.

BDSM

BDSM is anything that involves consensual power dynamics between partners in a caring relationship who share intimate fantasies and sexual desires. This can be as simple as a light spanking or a more intense and severe expression of power exchange. BDSM may be an occasional pastime or a lifestyle involving a deep 24/7 relationship. People are into BDSM for the joy of sadomasochistic pleasure, the dynamics of dominance and submission for fetish gratification, or to dabble on the sexual fringe.

There are situations to be aware of for people with diabetes in dungeon play: Emergency locks should be in place, which is especially important for those experiencing low blood sugar. They need to be immediately released and given a glucose source. When possible, emergency play/space should also be specially adapted. The Dom should be aware of medical/first aid protocols.

DO NOT PANIC! Beyond sterility and bondage awareness, there is not much involved in securing safety in your play. Although attention is critical, we are not medics but can easily prevent a situation from getting more out of hand by following simple rules.

“My previous Master developed extensively ritualistic sterile behaviors in our needle play after I was diagnosed. He used sterile field procedures throughout the scene, adding a layer of intensity for us and those who watched. We are more cautious with needles and things that may cause infection; we always have something to bring my glucose level back to normal if it.

Drops. We ensure that I have eaten and had all my meds before we play.

I have to admit; we don't play as much with me standing. Impact play sometimes lasts for an hour or two, and it can't help when my feet and ankles swell or my knees collapse.” boi toby.

In mainstream society, sexual mores can be devastating to a man's ego if news of his erection problems becomes public. A man will avoid embarrassment by not sharing this information or by denying it.

Fortunately, the leather, fetish, and BDSM community have found a cornucopia of things to do to activate their partner that not only enhances the sexual experience physically, spiritually, and emotionally but makes the penis more of an ensemble member than the star performer.

Diabetic Awareness plays a very active part in the lives of 'normal' sex activity. The hazards are few. Rarely is the need to use a safe word because your partner has reached their limits. In the BDSM community, the diversity of play requires more awareness. In BDSM, sex can include restraints, many toys, the use of equipment, and often even psychological play.

Before people with diabetes play hard, they must be sure they are carbohydrate loaded. Be sure to check your sugars before you play. People with diabetes need to be aware, as well as their partners that any percussion play, flogging, or anything that will leave a mark or a bruise will take longer to heal. After the play, infections can be avoided with a sterile cleansing of toys and wounds.

When it comes to bondage, some serious decision-making needs to be made as well as some seriously close monitoring. People with diabetes are

Prone to issues of circulation. Handcuffs, mummification, and suspension scenes can provoke some severe health issues.

Have your partner check regularly for coolness and numbness in the extremities. Suspension scenes are especially troublesome, as is tight binding! In upside-down suspension scenes, anything that pushes the blood towards the eyes,

which is one place serious things can happen, is a health risk.

Anyone claiming to be a Master or Dom must take care of Their subs or slaves and need to be sure that their 'charges' are not in restraints at the time they may need their medications and be prepared to be called upon to administer proper dosages of food or insulin as required. Masters need to be especially cognizant in monitoring their slaves during extreme play.

If your partner has diabetes and living with you, their medical plan should cover disposable needles and alcohol swabs. If not, help them find a plan that covers these essentials.

Alcohol, Recreational Drugs, and Diabetes

The drug ecstasy can make you think you have boundless energy when your body is on its way to a blood sugar low, and blood sugar lows from alcohol are the most dangerous of all. Remember that when you have been partying, others around you will assume that any unusual behavior is from being drunk or stoned.

What's worse for you, drinking alcohol or staying up all night dancing and snacking?

Those occurrences can be managed if you indulge in liquor in moderation and occasionally party into the late hours. If you take insulin, you need to adjust your dosing, test and readjust your dosing, and then test and readjust your insulin or your food or both. Remember that dancing is aerobic exercise, so you have to test and adjust your insulin accordingly.

Alcohol blocks your body's ability to respond to low blood sugar, so you will want to avoid exercised-induced hypoglycemia (abnormal blood sugar decrease). You also need to ensure that your next day's routine isn't disrupted; you want to stay on schedule with insulin and not sleep so late that you miss a shot.

After a straight shot of any liquor, the liver begins processing the alcohol. In some ways, explicit photos are better than beer or a sweet mixed drink. With beer, there is the added effect of carbohydrates.

The carbohydrate effect lasts for two to six hours, raising sugar levels. The impact of the alcohol on your system does not hit until 6-12 hours after you drink it. So you will have high blood sugars for four to six hours after drinking beer. Then overnight, toward dawn, when you may be asleep, the high carbohydrate effect goes away. You become in danger of hypoglycemia, something you could sleep through if you are drunk or just tired without a safe way for your body to boost the low blood glucose level. If you drink ten beers, you could go to sleep, pass out at night, and not wake up in the morning!

If you have a mixed drink with a sugary mixer like cola, you will get a faster and higher spike than beer. Six to sixteen hours later, you hit a low that may be risky if you are not paying attention. Use a diet mixer or club soda, so you do not have to figure out the first few hours of high glucose spikes.

So, should people with diabetes altogether avoid wine?

Alcoholic beverages are a standard part of our social lives.

Each adult must decide whether or not to use alcohol. When making this decision, you should understand what the potential effects of alcohol are on your health. Although alcohol has little effect on blood glucose control, it may worsen other medical problems.

As a general guideline, two alcoholic beverages may be used in addition to their regular meal plan for people using insulin. No food should be omitted in exchange for an alcoholic drink. Alcohol is best substituted for fat choices and, in some cases, extra bread/starch choices.

Some alcoholic beverages contain higher amounts of sugar and carbohydrates, including sweet wines, sweet vermouth, and wine coolers. Use these drinks sparingly as they may increase your blood sugar levels excessively. During fermentation, most sugar in wine converts to alcohol, minimizing the risk to diabetics.

The treatment of diabetes before the era of insulin consisted of various dull and unpalatable diets. One of the diets was designed by the French physician Bouchard, who replaced dangerous foods (starch and sugar) with other foods like protein and fat. His "animal food" diet consisted mainly of fatty meat; however, this French Doctor encouraged the patients to wash their "animal diet" down with red wine. Dr. Bouchard's book "De la diabetes Sucre" recommended 1-4 liters of Claret or Burgundy of proper maturity at least four years old per day. The ample supply of wine served its purpose as an essential carbohydrate-free source of energy with the bonus of making the meals tolerable for thousands of diabetic patients.

How much alcohol should diabetes drink?

A maximum of two standard drinks per day (14 drinks per week) for women and three standard drinks per day (21 drinks per week) for men.

Diabetes and Recreational Drugs

This section is necessary to deal with how many participants in the sex and BDSM world deal with recreational drugs. In many cases, medications are introduced into extensive scenes and often to stimulate intense play. I DO NOT ADVOCATE drug use or the abuse of any substance used to produce or dull the senses. Besides killing the purity of the scene, drugs interfere with the body's natural endorphins. They can impair good judgment in a situation that is often life-threatening in nature, and injuries can occur. Some medications also tend to block specific pain receptors that alert the player that something is wrong.

That being said. Adults will make their own decisions. My purpose here is to inform you of the options, dangers, and possible side effects of recreational usage for people with diabetes during sexual activity.

There has been very little research on drugs' effects on individuals with diabetes. Many people with diabetes, despite the risks, will indulge in recreational drug use.

Like everything, moderation and awareness are the keys to long and healthy lives, not abstinence or just saying 'no.' What is good for us is not always the best thing for us.

Remember, drugs have a varied effect on different types of people, and experiences may vary.

The most crucial consideration to observe while under the influence of any drug is that you must be aware and conscious that your body is still functioning correctly.

You should never forget that if the bad times outweigh the good ones (or the bad ones outweigh the good ones), GIVE IT UP!

Marijuana

Users will feel typical 'stoned' sensations - documented heavily in pamphlets/films/documentaries, etc. You may feel drained and need food - try not to overindulge and check your sugar levels.

What side effects could marijuana have on your condition?

Smoking in any way, shape, or form is bad for people with diabetes & non-diabetics; It can cause everything from heart conditions to cancer, circulation problems, and lung difficulties. If you smoke, exercise & take vitamins regularly, try not to become addicted. It is particularly bad for older diabetics.

Heavy smokers sometimes lose weight through inadequate diabetic control. Regular smokers have a loss of motivation - a typical side effect.

Smoking dope sometimes makes you excessively worry about your diabetic condition - worrying unnecessarily can be bad for your state of mind. Being diabetic, you should have sweets or food to combat sugar levels in any situation. You are still in complete control of your body functions while under the influence of Marijuana!

What precautions to take when anything goes awry (low blood sugar)

Sweets are essential pocket material. Carry something sweet at all times. If you feel giddy or dizzy or feel a hypoglycemic episode, come on, DON'T PANIC. Have a piece of a chocolate bar or orange juice, and you should feel fine in a few minutes.

If you get paranoid while having a smoke, go for a walk, or disappear for five minutes while you straighten your head, you'll feel much better.

If you get a panic attack (heart beating at an alarmingly fast pace for no apparent reason), practice slow breathing techniques, you will feel better if you get into a rhythm.

It is advisable to have friends who know you have diabetes around you.

Hallucinogens

If you must indulge, take acid only when in high spirits. This has a lot to do with whether or not you get a 'bad' trip. Disturbed sleep patterns can result. Regular use of Acid can also cause future 'flashbacks.'

People with diabetes shouldn't trip too often; sometimes, insulin intake may be forgotten or ignored - not a good situation. It is not advisable to trip regularly anyway - too much LSD can trigger mental health problems.

I advise people with diabetes who take acid and tend to omit their insulin intake for the trip: DON'T! Take your insulin (maybe a few less units),

eat a healthy meal, and carry sweets/sugar/coke throughout the trip.

While tripping, you generally lose your appetite; the excellent idea is to drink a sugar-filled drink, such as any brand name cola, to keep your sugars up.

It is better to have short-term high blood sugar than low blood sugar and a lot less stressful.

Other precautions:

Remember: Sweets are essential pocket material. Carry something sweet at all times if you feel that you are heading into a bad trip. Reassure yourself that the drug is making you feel the way you do - nothing else. Just sit back, relax, and concentrate on the things that make you happy.

If you get a panic attack (heart beating at an alarmingly fast pace for no apparent reason), practice slow breathing techniques, you will feel better if you get into a rhythm.

It is advisable to have friends around you that know and trust you, and you should always tell them that you have diabetes in case of any problems.

Ecstasy

Ecstasy will initially come on strong. Peak = 1/2 hour - Whole trip = 4 hours

You may feel nausea or dizziness and possibly vomit. However, these feelings wear off after a while.

Once the initial 'rush' phase has worn off, you are left with a feeling of warmth and 'openness.'

You may also feel more energetic and prone to bursts of mad dancing (especially in a club environment) and repetitive movements.

Some ecstasy pills can feel like a mild 'LSD' trip; others can have a more amphetamine effect.

Possible side effects:

Appetite-suppressant and mild stimulant.
Sleep patterns are disturbed.

Common scenario = insulin omission + exercise (rave) + ecstasy leading to severe dehydration, exhaustion, hyperthermia, and ketoacidosis.

For some people with diabetes who take 'E' that omit their insulin intake for the experience, my advice: DON'T! Take your insulin (maybe a few less units), eat a healthy meal, and carry sweets/sugar/coke throughout the trip. While tripping, you generally lose your appetite, and the excellent idea is to drink sugar-filled drinks to keep your sugars up.

It is better to have short-term high blood sugar than low blood sugar and a lot less stressful.

Cocaine

Using cocaine will give you a general feeling of well-being and possibly false confidence.

It sometimes gives energy and 'keeps you awake' in party situations.

One side effect that could have on your condition includes disturbed sleep patterns.

Sleep patterns can be disturbed.

It is not excessive for people with diabetes to take cocaine; sometimes, insulin intake may be forgotten or ignored.

Cocaine and especially crack cocaine is highly addictive. Users can become psychologically and physically addicted very quickly. This is not a good situation for insulin-dependent diabetics who rely on 'control' as much as possible.

You generally lose your appetite; eating and drinking fruit drinks is excellent to keep your sugars up.

It is better to have short-term high blood sugar than low blood sugar, which is much less stressful.

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