**Diet and Exercise Management Plan for a Patient with Type 2 Diabetes and History of Hypertension**

Diabetes type 2 is a condition characterized by the insufficiency of the body to perceive glucose in the body especially due to resistance of insulin by the body receptors while hypertension is a condition of high blood pressure resulting in stress. Therefore, exercise and diet management for type 2 diabetic patient and hypertension is important as it helps in controlling the condition to a normal healthy living.

Caloric content and portion sizes of the food that people eat play a significant role in the management of high blood pressure and diabetes type 2. Thus, it is important to reduce the food portions and calories in the body through daily exercise for a month to manage the body weight. Consequently, the patient should avoid salt in their food: blood pressure is increased by a high sodium diet. He or she should use salt-free seasonings, avoid lunch meals, fast foods, and canned foods. In fact, the patient should aim for 1500 milligrams of salt (about half teaspoon of salt). All in all, a patient with type 2 diabetes and history of hypertension should have a diet and exercise management plan.

Fiber, potassium, and magnesium may assist in controlling blood pressure and diabetes. Thus, fruits and vegetables are highly recommended because they are rich in fiber, magnesium, and potassium and have a low sodium content. A patient should stick to veggies and whole fruits daily for a month. On the other hand, magnesium sources include seeds, legumes, nuts, poultry, and lean meats. Likewise, the patient is advised to take squash, spinach, kale, lima beans, mangoes, melons, grapes, dates, collards, raisins, broccoli, apricots, tuna, and sweet potatoes to increase the natural content of fiber, magnesium, and potassium (Fort, et. al 2013). Precisely, the patient should avoid desserts, sweetened beverages, processed meats, fats, and red meat.

In the dietary plan, a balanced diet is advised with a variety of healthy proteins, carbohydrates, and fats. The right combination of food should be chosen to maintain the glucose level in the body. The patient should eat a variety of food but monitor the high carbohydrate foods; carbohydrates impact more on the body blood sugar levels (Fort, et. al 2013). In a meal, half of the plate should contain non-starchy vegetables and the meal should be complemented by whole grains, lean protein, low-fat dairy, nuts and small portions of fresh fruits. Likewise, proteins to be taken include lean proteins like turkey or fish that have low saturated fat. In grains, the best option is whole grains that contain fibers that are essential for digestive health. Furthermore, they also contain minerals, vitamins, and phytochemicals. Fats found in avocado, pecans and almonds are recommended. Also, polyunsaturated fats in sunflower oil and walnuts can help to lower body cholesterol. They help reduce cravings because they are typically generous.

On day one, the breakfast should be Basil Frittata and tomatoes. The frittatas should be served with a sliced fruit and a whole grain. Lunch should be served with grilled shrimp skewers, and for supper, a carrot soup and butternut squash will do. Subsequently, day two breakfasts should be served with dried fruit, seeds and granola with nuts. Lunch should be rice and beef with stuffed peppers. Lastly, supper should be quinoa tabbouleh salad. Next, day three breakfast should entail cream cheese with a stuffed French toast; lunch should be served with white beans, and supper should be grilled asparagus and Cuban-marinated sirloin kabobs. Day four breakfast pecan muffins with a banana or carrot, lunch should be served with chicken tortilla, and supper should be lemony hummus. Day five breakfast should include Greek yogurt with apple pie oatmeal; lunch should be served with tomatoes, spinach with tilapia and dinner should be turkey cranberry wraps. Succeeding, day six breakfast should be superfood smoothie that takes minimal time to prepare, grilled turkey burgers will do for lunch, and tomato pasta spinach for supper. Lastly, day seven breakfast should be goat cheese scramble and veggie, lunch should be lemony green beans with pork, and supper should have chicken with salad stuffed pitas to complete the week. The patient should observe the weekly diet plan for the next four weeks.

Exercise is crucial in management. The patient should be able to exercise at least 30 minutes a day, five days a week. In essence, cardiovascular exercise is important: it includes jogging, walking, jumping rope, running, aerobics, and swimming (Fort, et. al 2013). Also, strength training for muscle building that burns the calories in the body is vital. The patient should make the exercise more fun for him to do it efficiently, thus having a training partner is also advised. On the other hand, quick workouts for thirty minutes each day are recommended. In essence, brief workouts are good for a diabetic patient. Thus, the daily activities like climbing stairs or walking should be increased progressively. Nonetheless, the patient is advised to get a pedometer for daily management and measurement.

In conclusion, a diet and exercise management plan are crucial for a patient with type 2 diabetes and history of hypertension. The patient should try and reduce his or her food consumption and exercise to burn calories. Instead, he/she should stick to veggies and whole fruits daily for a month. Moreover, the patient should exercise at least 30 minutes a day for five days a week.

**References**

Fort, M., Alvarado-Molina, N., Peña, L., Montano, C., Murrillo, S., & Martínez, H. (2013).

Barriers and facilitating factors for disease self-management: a qualitative analysis of perceptions of patients receiving care for type 2 diabetes and/or hypertension in San José, Costa Rica and Tuxtla Gutiérrez, Mexico. BMC Family Practice, 14(1), 1.