# Eating for better blood sugar

A practical guide for adults with type 2 diabetes • Adapted from The No List

Goal: improve blood sugar and work toward remission when possible. Remission means A1C below 6.5% for at least 3 months without glucose-lowering medication. It is not a permanent cure; continued checkups are needed. Never stop medication on your own. [1]

This version excludes whole grains and peanuts by preference, with cooled white rice as an optional starch. Gluten is a protein, not the reason grains raise blood sugar. Carbohydrates raise blood sugar, including those in gluten-free foods. [2]

| Food or drink | What to do | Easy example or portion |
|---|---|---|
| Vegetables | Choose nonstarchy vegetables often. | Fill ½ your plate with broccoli, leafy greens, cauliflo zucchini or peppers. |
| Protein | Choose lean and minimally processed options. | Fill ¼ your plate with fish, chicken, tofu, eggs or lea beef, pork or lamb. |
| Whole grains and pasta | Leave out for this version of the plan. | Use zucchini noodles or cauliflower rice. Gluten-fre pasta is still a carbohydrate food. |
| Beans and lentils | Include in measured portions; they contain carbs and protein. | Try about ½ cup cooked as your main carbohydrate portion. |
| Sweet potatoes and yams | Include as a portion-controlled starch. | Use about ¼ of your plate; they still contain carbohydrates. |
| Regular potatoes and white rice | Optional after cooking and cooling; some starch becomes resistant, but most remains digestible. | Try ½ cup cooked. Refrigerate promptly at 40°F or below; chill 12–24 hours. This does not guarantee a lower glucose response. [10–12] |
| Fruit | Choose whole fruit instead of juice. | Try a small apple or a portion of berries; include it your meal's carbohydrate amount. |
| Dairy and almond milk | Choose unsweetened options; dairy need not be banned unless medically indicated. | Plain yogurt or unsweetened, calcium-fortified alm milk. Almond milk is usually low in protein. |
| Nuts | Choose unsalted almonds or walnuts. Peanuts are excluded by preference. | A small handful. Peanuts are not on USDA's curren bioengineered food list. [13] |
| Oils and butter | Favor olive or canola oil; limit butter and coconut oil. | Use modest amounts. Coconut oil and butter are h in saturated fat. |
| Soda and caffeine | Replace sugary drinks. Choose decaf if caffeine worsens sleep, anxiety or glucose. | Water, sparkling water or unsweetened decaf tea. need to ban caffeine for everyone. |

Use these portions as starting points, not a prescription. Read total carbohydrate and serving size on labels, and adjust with your diabetes care team. Food guidance: [2–4].

# Daily habits and cortisol

Your body needs cortisol. The aim is healthy hormone function and better stress management, not eliminating cortisol. Feeling stressed or gaining belly fat does not prove that cortisol is abnormally high. [5]

| Focus | Simple action |
|---|---|
| After dinner walk | Make a 30-minute walk after dinner a daily priority before settling in front muscles use blood glucose for energy and can reduce the after-meal rise. S and build up if needed; adapt to your mobility and health. [6,14] |
| Resistance training | Plan for 3–4 days a week if appropriate for your fitness and recovery, to he Three nonconsecutive full-body sessions are a good option; for four days, a body. Allow about 48 hours before working the same muscles again. ADA r nonconsecutive sessions weekly; four is optional, not required. [15] |
| Daily water | Make plain water your main drink. A general daily beverage guide is about women and 13 cups (104 oz / 3 L) for men; this includes water and other d top. Spread intake through the day. Needs increase with heat and sweating fluid limit for heart or kidney disease. [16] |
| Sleep and stress | Keep a regular sleep schedule and aim for about 7–8 hours. Try 5 minutes relaxing walk or time with supportive people daily. These support stress ma treatment for cortisol disease. [7] |
| Weight and progress | If you have overweight, an initial 5–7% weight-loss goal can improve blood possible for some people, but is not guaranteed. Review glucose and A1C v |
| Medication safety | Major changes in food or exercise can cause low blood sugar when taking i tablets. Arrange monitoring and medication review before major changes; yourself. [4] |
| Concern about high cortisol | Ask a clinician about persistent easy bruising, wide purple stretch marks or especially with worsening diabetes or blood pressure. Confirmed excess co evaluation; food and supplements alone are not treatment. [5] |

## Supplements from your original list

Do not treat this list as a recommended daily regimen. None is an established cure for type 2 diabetes or a routine treatment for high cortisol. Bring the exact products and doses to a clinician or pharmacist. [4,8]

| Items on your list | Practical guidance |
|---|---|
| Vitamin E, B1, calcium and magnesium | Use for an identified need or clinician recommendation, rather than automatically taking them for diabetes. |
| Turmeric, cinnamon, milk thistle, garlic, CoQ10, apple cider vinegar pills and glucosamine | Benefits for diabetes control are unproven or inconsistent; check interactions and avoid replacing prescribed treatment. |
| Red yeast rice and potassium citrate | Get individual review before use. Red yeast rice can have statin-like side effects and interactions. Potassium citrate requires review of kidney function, potassium levels and medicines. [9] |

## Preparation notes and sources

For cooked rice and potatoes: refrigerate promptly in shallow containers, within 2 hours of cooking (1 hour above 90°F). Keep at 40°F or below. If reheating, heat to 165°F. Use refrigerated leftovers within 3–4 days. Cooling only changes part of the starch, and results vary; count the carbohydrate portion and monitor your response. [10–12]

Grain and peanut exclusions reflect this plan's preferences, not requirements for diabetes remission. Gluten itself does not raise blood glucose. Peanuts are not listed on USDA's current list of bioengineered foods. [2,13]

## Sources and further reading


[1] ADA — Diabetes remission criteria: diabetes.org/newsroom/international-experts-outline-diabetes-remission-diagnosis-criteria

[2] ADA — Gluten and blood glucose: diabetesfoodhub.org/blog/going-gluten-free-people-diabetes

[3] ADA — Plan your plate: professional.diabetes.org/sites/dpro/files/2024-01/plan_your_plate.pdf

[4] NIDDK — Healthy living: niddk.nih.gov/health-information/diabetes/overview/healthy-living-with-diabetes

[5] NIDDK — Cushing's syndrome: niddk.nih.gov/health-information/endocrine-diseases/cushings-syndrome

[6] CDC — Get active: cdc.gov/diabetes/living-with/physical-activity.html

[7] NIDDK — Managing diabetes: niddk.nih.gov/health-information/diabetes/overview/managing-diabetes

[8] NCCIH — Diabetes and supplements: nccih.nih.gov/health/diabetes-and-dietary-supplements-what-you-need-to-know

[9] NCCIH — Red yeast rice: nccih.nih.gov/health/red-yeast-rice

[10] USDA — Safe leftovers: ask.fsis.usda.gov/article/How-do-I-handle-leftovers-safely ; reheating: ask.fsis.usda.gov/article/What-methods-of-reheating-food-are-safe

[11] Rice cooling studies — Results vary: pubmed.ncbi.nlm.nih.gov/26693746/ and pubmed.ncbi.nlm.nih.gov/34293081/

[12] Clemson Extension — Starch retrogradation: hgic.clemson.edu/factsheet/starch-retrogradation-a-method-for-post-mealtime-blood-sugar-management-in-individuals-with-diabetes/

[13] USDA — Bioengineered foods list: ams.usda.gov/rules-regulations/be/bioengineered-foods-list

[14] ADA — Blood glucose and exercise: diabetes.org/health-wellness/fitness/blood-glucose-and-exercise

[15] ADA — Standards of Care 2026, physical activity: doi.org/10.2337/dc26-S005

[16] National Academies — Dietary reference intakes for water: nationalacademies.org/read/10925/chapter/2