



Newsletter of the Department of Endocrinology & Diabetes



WENDY SKY DIVES FOR DIABETES

After receiving an email from the Junior Diabetes Research Foundation (JDRF) outlining the many fundraising adventures, with sky diving being one of them, "I decided that if I was going to do it then I would do it for this great cause. The other reason is because if my beautiful girl, [Dekota] can put up with what she has over the last seven years and all the years ahead then I can do this for her".

Wendy Scott says that there is nothing that can be done to prevent Type 1 Diabetes and that once a child/person has it they have it for life. Dekota is now 10 years old.

"She [Dekota] was three years old when diagnosed. The best thing for her was going to a pump rather than injections, as when she was five years old she was on six needles a day. The hardest thing is the lack of understanding of Type 1 Diabetes and...the care it requires. The other thing that gets her down is the fact she can't just pick something up and eat it. She has to wash her hands, finger prick and then put all the information into her pump. [Dekota] then has to dial-up and deliver the insulin - all before she can eat the item. People also need to know TYPE 1 is for life, yes you are insulin dependent, and no you don't grow out of it".



Wendy Scott Diving for Diabetes



kid's corner

HAVING diabetes at a young age can be scary, so it helps if kids have their own space to chill out and have fun, says Diabetes WA spokeswoman Stacey Boyne.

To celebrate National Diabetes Week, Princess Margaret Hospital launched a Kids Corner at its diabetes clinic on July 17.

"The Kids Corner is designed for patients aged three to 13 who attend quarterly diabetes outpatient clinics," Ms Boyne said. "It is bright and welcoming for patients to have fun and interact with other children, as well as reduce the stress on parents and families during their appointments."



"Hospital environments can be a little clinical, so it's wonderful to have this space where children won't feel so isolated."

Type 1 diabetic Kirstyn Kent (11) colours in the mural hanging in the PMH Kids Corner.

DIABETIC PATIENTS GET A CHILL-OUT SPACE AT PMH



Page 21 of July 23, 2013 issue of Western Suburbs Weekly

legumes

THE GREAT ALL ROUNDERS

Legumes are a plant-based foods, that include beans, lentils, and peas. Legumes are inexpensive and contain many nutritional benefits including:

- Low GI, keeping you full for longer
- Low in saturated fat
- High in fibre for digestive and heart health
- Gluten free
- Alternative protein and iron sources to meat



Low GI foods have been shown to improve post-meal blood glucose levels (BGL), but recent research has found that legumes have other positive benefits for people with diabetes.

Findings of a 2012 study demonstrated that legumes reduced post-meal BGL's at subsequent meals on the same day, and if consumed with an evening meal, the post meal BGL's were lower at breakfast the following day. Following these findings it was suggested that:

- Long term glycaemic control may be improved as a result of reducing post blood glucose levels not only at one meal, but throughout the course of the day.
- Incorporating legumes with foods that normally cause a higher blood glucose response, may result in improvements in HbA1c (a measure of long term blood glucose control).
- Eating legumes may also be preventative against hypoglycaemia.

In patients that had Type 2 diabetes, a 2012 study found that if legumes were consumed the:

- HbA1c was reduced by 0.5%.
- Total cholesterol was significantly reduced, along with blood pressure, heart rate and weight – all beneficial for heart health.

Higgins, J.A. Review Article: Whole Grains, Legumes, and the Subsequent Meal Effect: Implications for Blood Glucose Control and the Role of Fermentation. J Nutr Metab. 2012; 2012: 829238; <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3205742/>

The Heart Foundation of Australia recommends that everyone includes legumes in their meals at least twice a week. Legumes can be bought dried, canned or fresh. Legumes commonly found in supermarkets are baked beans, red kidney beans, butter and cannellini beans, chickpeas and lentils.

Legumes can be used in such foods as salads, dips, soups, Mexican, Middle Eastern, Indian, Mediterranean and North African cuisine and sweet treats such as muffins and biscuits. Adding legumes to a meal will extend the meal and add extra texture and flavour. This means you can use less meat, which makes the meal cheaper and lowers the fat content.

If you would like to know more about ways to include legumes into your diet, call the diabetes department and talk to the dietitians or see them at your next clinic appointment.

recipes

Vegetarian rolls

3 slices wholemeal bread
400g can chickpeas drained and rinsed
1 carrot grated
1/2 zucchini grated
1 onion or 3 green shallots finely chopped
1/2 cup grated light tasty cheese
1 egg
2 teaspoons mixed herbs (optional, makes it taste like sausage rolls)
salt & pepper
2 sheets reduced fat Canola puff pastry
low fat milk (to baste)
sesame seeds (optional)

Method

1. Preheat oven to 180C and line baking tray with baking paper.
2. Use food processor to blend bread and chickpeas.
3. Combine all ingredients including vegetables, cheese, egg, herbs and salt/pepper.
4. Line tray with baking paper, cut pastry sheet in half, and baste with milk on all sides. Place filling in a sausage shape down the middle and then fold up the sides. Turn pastry over so seal is on the bottom.
5. Brush with low fat milk, sprinkle sesame seeds and then slice each sausage shape into 3-4 sections.
6. Bake for 20 min or until golden.
7. Serve with tomato sauce.

Source: Katherine's Big Sis!

Kid-friendly lentil stew

The dish is both child and freezer friendly – make a double batch for those nights when you need dinner on the table in a hurry.

Serves: 4 Cooking time: 30 minutes

Ingredients

1 tbs olive oil
2 garlic cloves, grated
1 small onion, grated
1 tsp ground cumin
1/2 tsp ground coriander
1/2 tsp turmeric
1 cup dried red lentils, rinsed
3 cups reduced salt vegetable or chicken stock
1 tbs reduced salt tomato paste
1/2 cup pumpkin, diced
1/2 cup frozen peas
1/2 cup sweet corn
White or brown rice, to serve

Method

1. Heat olive oil in a large saucepan and sauté garlic and onion for 2 minutes.
2. Add cumin, coriander and turmeric chilli, and cook for 1 minute. Add lentils, stock, tomato paste and pumpkin and bring to the boil.
3. Reduce heat to simmer and cook for 15 minutes.
4. Add peas and corn and cook for an additional 5 minutes.
5. Serve with steamed rice.

Source: <http://www.heartfoundation.org.au/recipes/Pages/kid-friendly-lentil-stew.aspx?mt=All>



ride to cure diabetes



The Ride to Cure Diabetes raises funds to support JDRF, the worldwide leader in funding research to cure, treat, and prevent type 1 diabetes.

Each year people from around Australia assemble in Adelaide in mid January and ride their bikes for long distances to challenge themselves and celebrate their fundraising efforts.

On January 18th 2014, Dr Aris Siafarikas (Endocrinologist) and Mark Shah (diabetes nurse practitioner) will ride 160 km.

Their goal is to raise \$3500 each.

You can visit their webpage at :<http://ride.jdrf.org.au> or send this link to friends or family.



WHAT CAUSES TYPE 1 DIABETES IN EARLY CHILDHOOD?

The Environmental Determinants of Islet Autoimmunity (ENDIA) study is an Australian study involving pregnant women and their baby who has an immediate family member with type 1 diabetes, investigating the causes of Type 1 Diabetes. If we can understand exactly what in the environment contributes to or protects against the disease, we may be able to modify these factors to prevent Type 1 Diabetes in the future.

Here in WA, 6 families have been enrolled so far, and plenty more are required. If you are pregnant, planning a pregnancy, or have a child less than 6 months old, and you, your partner or any of your children have Type 1 Diabetes, then your baby and you may be eligible to participate in ENDIA.

For more information, please visit the ENDIA website at www.endia.org.au, or contact WA ENDIA coordinator Wayne Soon on 9340 7974 or at wayne.soon@health.wa.gov.au.



WA's inaugural ENDIA participant, Lauren Haddow, with her one month old son, Michael. Lauren and her four year old daughter Mary have Type 1 Diabetes.



THE PREDICTIVE LOW GLUCOSE SUSPEND MANAGEMENT (PLGM) PILOT HOME STUDY - hypoglycaemia prevention with predictive suspension of insulin delivery - a study that will contribute to the global body of knowledge around artificial pancreas technology.

The Medtronic Veo pump can currently be used in conjunction with real-time continuous glucose sensors that can alert people to changing trends in their glucose levels. The 'low glucose suspend' function offers an extra feature whereby insulin delivery will automatically stop for a set time when the glucose level reaches a pre set low limit. The next generation Medtronic pump includes a 'suspend before low' or predictive capability. When used with a glucose sensor, the pump can suspend based on a sensor predicted low limit, with the aim of preventing hypoglycaemia from occurring. This may offer extra reassurance in managing hypoglycaemia. This requires a special mathematical equation so that the pump knows when to stop the insulin delivery. Another mathematical equation is required to resume insulin delivery in order to prevent high blood glucose levels from occurring due to suspension of insulin delivery.

We are running a home trial later this year at PMH. Then together with other centres in Melbourne, Sydney, Newcastle and Adelaide we will be trialling this pump for a longer period of time, to see how acceptable this technology is to people when going about their usual day to day activities i.e. 'real life'. This study is supported by JDRF; please visit the study website at: <http://www.t1dcrn.org.au/clinical-research/hypoglycaemia-prevention-with-predictive-suspension-of-insulin-delivery>.

To learn more about this study please feel free to ask your Doctor in clinic or contact Mary Abraham: Mary.Abraham@health.wa.gov.au Jennifer Nicholas: Jennifer.A.Nicholas@health.wa.gov.au Phone: 93408744

support

Ongoing Support

Type 1 diabetes can be a frightening and overwhelming experience. Even as time goes on, it's a constant curve. That's why JDRF has developed a support program that provides practical advice and help for people who have been affected by a diagnosis of Type 1 diabetes.

Peer Support Program

A helping hand from someone who understands life with Type 1 diabetes

JDRF's Peer Support Program is a volunteer network that connects people who have been affected by Type 1 diabetes. The Program provides the opportunity for individuals to talk to a volunteer who has been there, someone who can give practical help and advice.

All our Peer Support volunteers not only have personal experience living with Type 1 diabetes, they are carefully selected by JDRF and given ongoing training to help them to give the very best support.

The Peer Support Program provides an opportunity for people affected by the disease to reach out to the Type 1 diabetes community, receive ongoing support and transition to life with type 1 diabetes.

Access the Peer Support Program

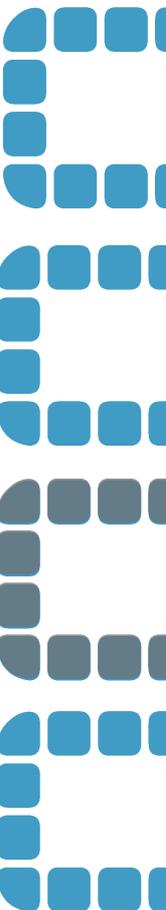
Contact Jenny Simonds at JDRF on 92071278 or email peersupportwa@jdrf.org.au to be put in touch with a Peer Support volunteer near you.



Julia's Story

The JDRF Peer Support Program was a lifeline for me. My volunteer came into our lives at exactly the right time. I felt supported and safe. No question was too small or too silly.

Julia, NSW, mother of Thomas who was diagnosed in 2009





famous people

YOU ARE NOT ALONE – FAMOUS PEOPLE WITH DIABETES INCLUDE:



Jamie Cripps

AFL - Shortly after St Kilda recruited Jamie in 2010 he was diagnosed with Type 1 Diabetes. He learned to live with his insulin dependency whilst experiencing his first pre-season as an AFL player. He now plays for the West Coast Eagles.



Nick Jonas

Singer – of the pop group, Jonas Brothers. In 2005 the Jonas Brothers formed; but it was also the year Nick found out he had Type 1 Diabetes. Although managing diabetes is often challenging with his touring schedule, Nick tries to be positive.

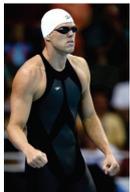
“The first time I heard someone say ‘thanks for sharing,’ I thought, if I can use this as an opportunity to inspire people, then it’s all worth it.”



Sam Reid

AFL – Sydney Swans footballer. When Sam was diagnosed with Type 1 Diabetes he said,

“At the football club everyone was in a worried and panic mode, and were so serious about it. I wanted to lighten the situation and wanted everyone to know I was still the same and they didn’t have to treat me any differently...You’re meant to wear a bracelet in case something happens; if I’m passed out or something, [so] people know.”



Gary Hall Jr.

Swimmer – Olympic swimmer. Gary was an accomplished competitive swimmer when he was diagnosed with Type 1 Diabetes in 1999. With four Olympic medals already in hand (two gold, two bronze) from the 1996 Olympics, Gary became more determined. At the 2000 Olympics in Sydney, Australia, He won two gold medals, a silver and a bronze, bringing his Olympic medal count to eight. At the 2004 Athens Games, he became the oldest male in 80 years to win gold for the U.S. team by winning both a gold and bronze medal, for a total of ten. Gary regularly speaks to young people with diabetes, emphasizing that their goals can be accomplished despite living with diabetes.

“I can run from Diabetes but I’ll never get very far. It’s gonna catch up to me, and I need to deal with it and move on.”



Brett Stewart

Rugby League – Brett is an Australian professional rugby league footballer who plays for the Manly-Warringah Sea Eagles in the National Rugby League. He is an Australian international and New South Wales State of Origin representative fullback known for pace, sleight of hand, prolific try-scoring as well as being a solid last line of defense. He has played his entire NRL career for the Sea Eagles, with whom he won the 2008 and 2011 Premierships. Brett was diagnosed with Type 1 Diabetes at age 14.

young leaders

DA YOUNG LEADERS PROGRAM – REGISTER NOW!

Diabetes Australia (DA) wants to find young people (aged 15 – 29 years) from all over Australia to help us develop and shape the future of young people living with diabetes in Australia.

“Your stories and opinions are important to us in forging the future of young Australians living with diabetes. Please help us to champion your cause” Diabetes Australia CEO, Greg Johnson

As one of Diabetes Australia’s Young Leaders, you will have the chance to:

- join a group of people from across Australia who are all passionate about working to do something for young people living with diabetes
- tell us what is important to you in living with diabetes
- provide ideas about how we can best address these issues
- help us make these resources and information available to the widest possible audience using the best, most up-to-date communication methods
- become public advocates and spokespeople for young people with diabetes
- share your stories about real-life with diabetes – the good, the bad and the ugly
- help to make people (public/Governments/HPs/Researchers) more aware of life with diabetes
- enhance and improve the lives of young people living with diabetes
- become directly involved in advocating for change
- provide information, interviews and opinions of life with diabetes within your town, city and state as necessary
- promote positive perceptions of young people with diabetes
- work to influence the work DA does for young people with diabetes.

DA will undertake ongoing communication with all Young Leaders using social media and webinars so you don’t need to be living in a capital city to make your views heard and be part of our team.

If you have any queries at all, please do not hesitate to contact Jane Cheney at jcheney@diabetesvic.org.au or on (03) 8648 1830

feedback

FEEDBACK PLEASE

1. If you have any ideas about how the newsletter can be improved please contact Madeleine (Project Officer) on 9340 7978.
2. The Department is also seeking feedback about consumer involvement in clinics and diabetes research from families attending clinic. To find out more, please speak to a member of the clinic team at your next appointment.

