

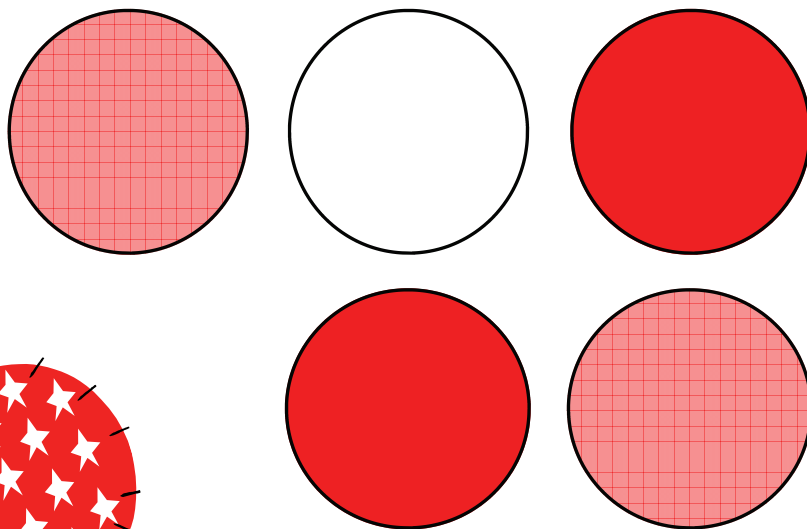
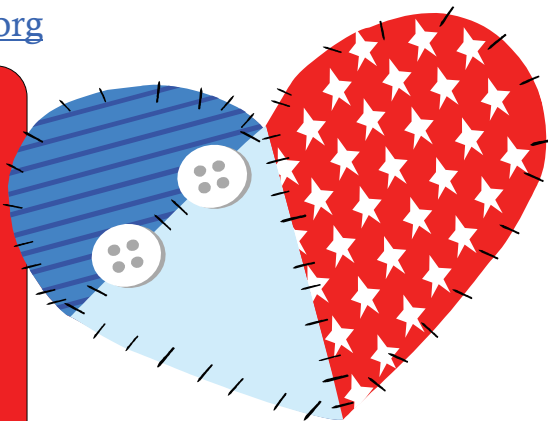
# Family Matters

December 19, 2007

[www.diabetes.org](http://www.diabetes.org)

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Volume 1, Issue 3

## Cozy Up This Winter with a *Quilt for Life*

### Children with Diabetes Quilt for Life

"The Quilt for Life" celebrates the lives of our children," says Jeff Hitchcock, founder and CEO of Children with Diabetes (CWD). The mission of CWD is to promote understanding of the care and treatment of diabetes, especially in children; to increase awareness of the need for unrestricted diabetes care for children at school and daycare; to support families living with diabetes; and to promote understanding of research into a cure.

Jeff is also the father of Marissa who has Type 1 diabetes. "The Quilt helps people realize that diabetes is not just about the statistics they read in the paper; it's about Marissa and other children living with Type 1 diabetes. It gives the kids a chance to share what it's like for them to live with diabetes," said Jeff.

The Quilt for Life started in 2002 when Jeff, looking for a way to put a face to this disease was inspired by

how the AIDS memorial quilt had changed how people, the government and research viewed HIV and AIDS. "The AIDS Memorial Quilt showed people how the disease affected real people and real lives," said Jeff. "That's what I hoped the CWD Quilt for Life would do for children with diabetes."

In 2005, the Quilt for Life was displayed on the National Mall in Washington, DC. "The Quilt will be back on the Mall in August 2008 to show members of Congress, candidates for the presidency and lobbyists, the celebration of our kids' lives and to tell their stories."

The Quilt now consists of 595 squares and continues to grow. **The American Diabetes Association wants to grow the number of our families represented in the Quilt for Life.** Share your child's story and submit a quilt square to be displayed at future CWD events.

Click here to learn how to submit a quilt.

### ADA Families Creating Quilts

*Michelle Knight, ADA's Associate Director of National Youth Initiatives (and avid quilter) shares some of her best tips!*

### Tips for Quilting Confidence:

**Plan first.** Draw what you want your final product to look like on paper. Calculate your dimensions leaving room for seam allowance (1/4 inch) and binding.

**Get your supplies.** There are three pieces to a quilt—the quilt top, the batting, and the back. You should be able to get everything you need from a quilt or fabric store.

**Choose your fabrics carefully.** 100% cotton fabrics are the best for your quilt top. Pre-wash your fabrics to avoid shrinkage and "bleeding" of the dyes from one fabric to another. Use a light color batting unless you have a very dark quilt. Fabric for the back of your project can be anything that you have around the house or that is interesting to you.

**Measure twice, cut once.** Always double check your measurements before cutting any fabric. Don't forget to



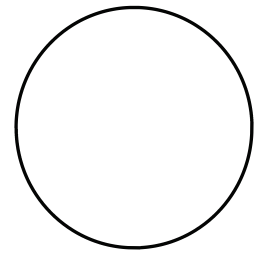
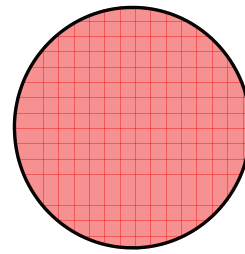
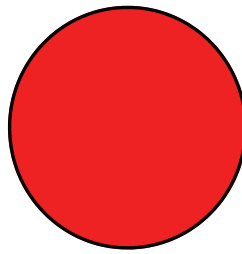
## Planet D. For Kids With Type 1 Diabetes. A New Way to Explore. Discover. Connect.

For many years, the American Diabetes Association has helped families and health care providers manage type 1 diabetes through resources and local programs including ADA's Diabetes Camps and Family Resource Networks. Now, the ADA is expanding its commitment to these families by weaving all of its programs and resources for type 1 youth under a new umbrella: Planet D.

"Planet D is a place just for us—kids and teens with type 1 diabetes to explore and discover new possibilities related to diabetes," said Dana Lewis, 19. Dana currently serves as Chair of the Planet D Team, a group of youth and young adults who advise the ADA on Planet D initiatives. "Even better—we can connect with others who have diabetes and share our own personal experiences."

One of the first places youth with type 1 diabetes across the nation can experience Planet D is online at [diabetes.org/planetD](http://diabetes.org/planetD).

The Planet D Web site provides a completely safe and secure online environment for youth to leverage diabetes management tools, learn about issues affecting people with diabetes, build personal D-identities, and interact with other youth through a variety of social networking opportunities including message boards, personal sharing and online polls.



## Quilting (con't)

include your seam allowance in your calculations.

### **Sew your quilt top together.**

Use thread that is the same color lighter than your fabric so that it does not show through on the front. Trim all loose threads. When your entire quilt top is done, iron the project to be sure it has no wrinkles and lies flat.

**Create the sandwich.** When you have all three of your pieces—the quilt top, batting and back—create your "sandwich." Pin these three layers together with safety pins. Be generous—the pieces should lay flat without wrinkles or

slippage when moved.

**Quilt as desired.** Use thread that matches your quilt top. Stitching lines should be no more than four inches apart both vertically and horizontally across your quilt.

**Trim, bind the edges, then celebrate.** Take a moment to admire your work. Then ship it off to Children with Diabetes!

### **Michelle's Best Website Picks:**

[The Wide World Quilting Page](#)

[How to Quilt For Beginners](#)

[Quilting.com](#)

## ADA's 67th Scientific Sessions

*This year the American Diabetes Association's Scientific Sessions gathered more than 16,000 people from all over the world in Chicago, Ill. At ADA's Annual Scientific Meeting experts shared the research and advancements they have made in the realm of diabetes. Presentations from Scientific Sessions were covered by Reuters, Reuters Health, Bloomberg, CNBC, The Wall Street Journal, The Washington Post, WebMD, and HealthDay. The following are some research highlights:*

### **A1C Test Name Change**

Coming in 2008, it will become easier to understand how your child's blood glucose levels have been during the past three months. In addition to getting an A1C percentage, blood glucose control will be reported as a number called the estimated average glucose (eAG). The eAG will be reported in mg/dl, the same units blood glucose is reported in diagnosis and self-management.

### **Progress in Islet Cell Transplantation**

Patients who have received a single-donor islet transplant are still insulin-independent after six years. This is very promising as it indicates that islet transplants can work for long periods of time. Scientists hope that one day, islet transplants will be prescribed as insulin is prescribed today for patients with type 1 diabetes. In other advancements, scientists have successfully transplanted islet cells from living donors. Until recently, human islet cells from cadaver donors were the only source of islet cells for transplantation.

### **Stem Cells and Beta Cell Proliferation**

Scientists continue to study and understand stem cell development. They are making progress in turning on parts of the cells involved in the pathway of stem cells becoming beta cells.

## Spotlight On Research

Do you ever wonder where exactly all that research money is going and what came of it? Here are a few examples of some significant ADA discoveries:

- Invention of the first glucose meter
- Introduction of more effective forms of insulin
- Therapeutic regimens to control both pre- and post-meal blood glucose levels
- Invention of the portable insulin pump
- Transplantation of new insulin-producing cells from a donor pancreas
- Laser treatments to prevent blindness
- Relationship between nutrition and diabetes
- Mapping the genetics of type 1 diabetes
- Blood glucose control to prevent eye, kidney and nerve disease
- Insulin receptors discovered on cell membranes

To read more ADA funded research for people with Type 1 diabetes, visit our Research Database.

## Advocates in Action

Want to know what's happening locally with advocacy?

The ADA Advocacy Committee is gearing up for the 2008 legislative session! We are actively involved in the Healthy Schools Coalition, where ADA Associate Director of Programs and

Advocacy is currently serving as Co-Chair, and we will continue to support the legislation that this coalition introduces to increase physical education in elementary schools throughout Maryland. If you are interested in getting involved as a grassroots advocate, please contact Shawn at [smcintosh@diabetes.org](mailto:smcintosh@diabetes.org).

If you'd like to stay informed of our legislative efforts locally and nationally, join ADA's Action Alert [here](#).

### Ask Adam



Meet Adam, an incredible athlete with Type 1 diabetes. He's here to answer your questions about being active, or about anything else! To ask Adam your question, just send him an e-mail: [adisc1@gmail.com](mailto:adisc1@gmail.com).

#### What are some of the new devices I see you with these days and do they help you with your biking and activities?

The newest one is my Continuous Glucose Monitoring System made by Dexcom, which measures my sugar real time whenever I need it. The Continuous Glucose Monitoring System is worn on my abdomen equipped with a sensor that transmits my sugar levels to a hand held monitoring device every five minutes. The monitor allows me to view my sugar levels on a 1 hr, 3 hr and 9 hr graph so I can observe different trends in my sugar levels based on my daily activity. One of the benefits is I don't have to check my sugar levels as frequently throughout the day. Currently, I am now down to about 2 pricks of my finger per day. For more information on the Continuous Glucose Monitoring System check out there website at [www.dexcom.com](http://www.dexcom.com).

If you're as active as I am, then you'll find this device just as useful as I have. While I'm on my bike, if my sugar should start to drop the monitor will automatically alarm me when I get out of my normal BG range. Even more importantly it will wake me up if I'm sleeping and my blood sugar levels drop below 80. This device helps to prevent sugar highs or lows before they get serious. Being very active can have a real impact on your daily sugar levels, this device is an extremely helpful system for monitoring and controlling your own individualized needs.

The other new device I am currently using is a new insulin pump made by Insulet. This pump is called OmniPod and is the only wireless pump I know of. The Pod gives you the freedom of never having to worry about tubing. It's a waterproof self adhesive pump that injects just below the skin's surface. You can wear the pod just about anywhere on your body, I prefer the back of my triceps. The nice thing about the pod is it lasts for 3 days before you have to replace it. I have been using the pod for 3 months and love it. More information can be found here: [www.myomnipod.com](http://www.myomnipod.com).

Another recent addition is my switch from Humalog to Apidra Insulin. This is fast acting insulin that begins working within five minutes after it's administered into the body. This helps prevent from spikes in my sugar levels while eating meals.

#### What are some new adventures that are on the horizon for Adventures For the Cure?

Adventures For the Cure (AFC) just recently registered for its first bike race and it will be across the country! We are entered in the 4 man relay team and we will be using Surly Steamrollers (one gear), the same bikes that we went across with in summer of 2006. The race will start in California on June 12<sup>th</sup> and we should be finishing around June 18<sup>th</sup> in Annapolis, MD. More information on the race can be found on our website here: [www.adventuresforthecure.com](http://www.adventuresforthecure.com)

Sign up to ride with Adam next year [www.diabetes.org/tour!](http://www.diabetes.org/tour!)

# I Want That!

Give a Gift that Really Counts



## Calsulin Insulin Unit Calculator

The Calsulin Insulin Unit Calculator is intended to help patients calculate the amount of required bolus insulin units at mealtime. The device uses three factors in its calculation: blood glucose level (from a blood glucose meter), grams of carbohydrates consumed, and the amount of exercise to be taken post-meal. The device crunches these numbers and displays a recommended amount of insulin units to be injected. Thorpe Products.

[www.thorpe-products.com](http://www.thorpe-products.com)

## FoodCuber Storage Trays

FoodCuber Pre-portion and Storage Trays—reminiscent of traditional ice cube freezer trays—are designed to help people limit their food intake.

To simplify portion control, the person prepares food for storage, fills the “cubes,” fastens the lid, and stores the tray in the freezer, refrigerator, or cupboard. The trays are available individually or as a set of three 32-oz trays with two-cup, one-cup, and half-cup cubes marked with “fill” and “half fill” lines. FoodCuber, 952 A Ave., Lake Oswego, Ore. 97034. 503-699-2823.

[www.foodcuber.com](http://www.foodcuber.com)



## Pelikan Sun Lancing Device

This self-contained lancing system seeks to reduce the pain associated with lancing to obtain blood samples for glucose testing. The button-operated device uses electronically controlled lancing for minimal penetration. Skin pricks are performed via 50 lancets on a replaceable disk. This device is perfect for young children, as they will not be responsible for handling the sharps with their fingers. Pelikan Technologies, 1072 E. Meadow Circle, Palo Alto, Calif. 94303. 650-842-1000.

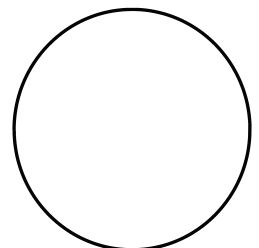
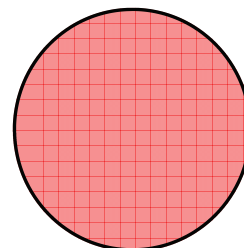
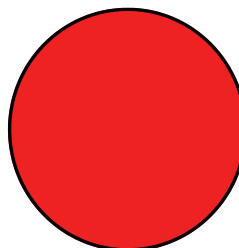
[www.pelikantechnologies.com](http://www.pelikantechnologies.com)

## Apple-Walnut Cookies

vegetable cooking spray  
 1 cup rolled oats  
 1/2 cup walnuts, chopped  
 1 cup whole wheat pastry flour  
 1/2 teaspoon baking soda  
 1/4 teaspoon baking powder  
 1/4 teaspoon salt  
 1/2 teaspoon ground cinnamon  
 1/4 teaspoon ground ginger  
 2 egg whites  
 1 Granny Smith apple, peeled, cored and grated  
 1/4 cup unsweetened applesauce  
 1/2 cup light brown sugar, packed  
 3 tablespoons sugar  
 2 tablespoons vegetable oil  
 1/2 teaspoon vanilla extract  
 1/2 cup raisins

1. Heat oven to 375 degrees F. Spray baking sheets with vegetable cooking spray.
2. Place the oats and nuts on a separate, unsprayed baking sheet and toast until golden, about 8 minutes. Set aside.
3. Combine the flour, baking soda, baking powder, salt, cinnamon and ginger in a medium bowl.
4. Combine the egg whites, grated apple, applesauce, brown sugar, sugars, oil and vanilla extract in a large bowl. Stir in the dry ingredients until just combined. Add the raisins and toasted oats and walnuts.
5. Drop the dough onto the prepared baking sheets by tablespoonfuls, about 2 inches apart.
6. Bake the cookies one pan at a time until golden, about 10 to 12 minutes. Cool on wire racks for 3 minutes before removing them from the pan. Cool cookies completely before serving.

Recipe makes 36, 2 cookies per serving			
Calories	128	Carbohydrate	22g
Fat	4g	Fiber	2g
Protein	2g	Saturated Fat	0g



## CDE Sit Down



Paula Yutzy is a CDE at Mercy Medical Center in Baltimore. She is also the Chair of the Maryland Youth Initiatives Committee and the mother of a son with Type 1 diabetes.

Do you have a question for Paula? Send it now to [jfrieman@diabetes.org](mailto:jfrieman@diabetes.org).

Dear Paula,  
What is the *dawn phenomenon*, and what can we do to prevent it?

Everyone has a dawn phenomenon. The body makes certain hormones called [counterregulatory hormones](#). These hormones, which include [glucagon](#), [epinephrine](#), growth hormone, and cortisol, raise blood glucose levels, when needed, by signaling the liver to release more glucose and by inhibiting glucose utilization throughout the body. It has to do with your circadian rhythm, the body's natural sleep/wake rhythm. These are the hormones that wake your body from its night of sleep and fasting and "rev up your engine" to face the new day.

In people who do not have diabetes, the body makes insulin in response to the rise in glucose from these hormones and the glucose stays pretty consistent. In people who do not make insulin (type 1) and in people who do not make enough insulin (type 2) the pancreas can not make the insulin to balance the hormones. In addition they create an increased insulin resistance. Around 4-6 AM these hormones typically begin their work, the glucose begins to rise. The effect can last till 11 AM or so. There are many ways to deal with this rise in glucose in the early morning. If you wear an insulin pump, you can increase the basal insulin beginning around 3 AM to balance the increase in glucose. If you are on NPH insulin, you can take it at bed time (9-10 PM) instead of at dinner to move the peak of action from around midnight to more like 4-6 AM. If you take Lantus or Levemir which are "flat" insulins, sometimes we give a little NPH at bedtime to just add a bit more insulin to the time of the rising glucose.

For those who have type 2 diabetes, Metformin can be taken at dinner or bedtime since it's primary action is to stop the liver from making too much glucose when you do not need it.

To decide if the high glucose in the morning is due to the Dawn Phenomenon, you should check your glucose before bed, about midnight, around 3 AM and when you get up. If you have a Dawn Phenomenon you will see no hypoglycemia during the night and a rise in the glucose between the 3 AM and wake-up glucose readings.

Of course, you should never make a change in your diabetes medications without first talking to your Health Care Provider (HCP) first. By checking the glucose as I have described, on 2-3 different nights and writing down the readings, you will give your HCP a head start to decide which solution is best for you. After changes are made, repeat the glucose checking routine to be sure that the changes have worked.

### ADA's Second Annual Workshop for Parents of Children with Diabetes

The Maryland Chapter of the ADA held our second annual workshop for parents of children with diabetes on December 8th at Mercy Medical Center. The workshop included a Q&A with Paula Yutzy, CDE, and an open discussion with adults about their experiences living with Type 1 diabetes.

Please stay tuned for information about our next workshop!

Special thanks to our ADA Youth Initiatives Committee Members:  
Adam Driscoll, Tracey Hamelin,  
Fatuma Richardson,  
Stefan Rubin and Paula Yutzy.

## Calendar of Events

**June 2-8, 2008:** LPGA Tournament at Bulle Rock volunteer opportunity. For more information contact Shawn McIntosh, [smcintosh@diabetes.org](mailto:smcintosh@diabetes.org) or 410-265-0075 x4676.

**June 6, 2008:** Tour de Cure at Meadowbrook Park in Ellicott City. Register to ride today at [www.diabetes.org/tour](http://www.diabetes.org/tour). For more information contact Melissa Sharlat, [msharlat@diabetes.org](mailto:msharlat@diabetes.org) or 410-265-0075 x4670.

For more information, or to add or remove yourself from this mailing list, please contact: Julie Frieman, [jfrieman@diabetes.org](mailto:jfrieman@diabetes.org)