

HANA'S BULLETIN

Monthly Organization Forum



Understanding Diabetes: An overview

By HANA EducationTeam

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone that regulates blood sugar. World Health Organization (WHO) estimated that diabetes was the seventh leading cause of death in 2016; the direct cause of 1.6 million deaths (World Health Organization, 2020.) Diabetes causes a Hyperglycaemia, or raised blood sugar effect that left untreated leads to serious damage to many of the body's systems, especially the nerves and blood vessels (WHO,2020.) According to the Center for Disease Control (CDC) (2020), 34.2 million US adults have diabetes, with 1 in 5 of them unaware of their status, which in the last 20 years, the number of adults diagnosed with diabetes has more than doubled, leading as the number one cause of kidney failure, lower-limb amputations, and adult blindness. Furthermore, acute complications such as ketoacidosis for type 1 and Hyperosmolar hyperglycemic state (HHS) or type 2 may occur.

Type 1 Diabetes is an autoimmune reaction in which the body attacks itself leading the body to stop making insulin. Symptoms often develop quickly and it is usually diagnosed in children, teens, and young adults.

Type 2 Diabetes, the most common type, occurs when your body does not use insulin properly. The body becomes unable to keep the blood sugar at a normal level. This form of diabetes develops over many years and was commonly diagnosed in adults, but over the years, more children, teens, and young adults are seen diagnosed.

(continued on pg.2)

IN THIS ISSUE

UNDERSTANDING DIABETES

LIVING WITH DIABETES: A MEMBER PERSPECTIVE

DRUG SPOTLIGHT

THANKSGIVING: HANA MESSAGE TO MEMBERS AND SUPPORTERS

Gestational Diabetes occurs during pregnancy which poses an increased risk of complications during pregnancy and at delivery.

Risk factors: Type 1: has no known risk factors as it is autoimmune.



Type 2: first-degree relative with type 2 DM, obesity, those of African Americans, Hispanic Americans, Native Americans, Asian Americans, and Pacific Islanders decent, age, history of gestational DM, hyperlipidemia, and certain medications.

Signs & Symptoms: Symptoms of type 1 and type 2 DM are usually the same. Polydipsia (excessive thirst), polyuria (increased urination), polyphagia (excessive eating), anorexia, weight loss, nocturnal enuresis, visual changes, weakness, fatigue, nausea, abdominal pain, repeated infections, decreased wound healing, or infections that are uncommon.

Prevention: Type 1: has no known prevention as it is autoimmune.

Type 2: prevention or delayed start includes achieving and maintaining a healthy body weight, physical activity – doing at least 30 minutes of regular, moderate-intensity activity 3-5 days a week, eating a healthy diet, avoiding sugar and saturated fats, and avoiding tobacco use or smoke cessation. Gestational: maintaining a healthy, balanced diet and exercise

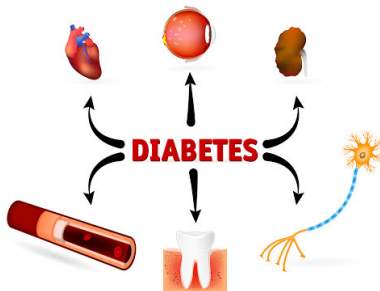
Screening: Type 1 and 2: Hemoglobin A1C $\geq 6.5\%$ on 2 occasions, symptoms of DM plus random plasma glucose concentration ≥ 200 mg/dL on 2 occasions, fasting plasma glucose ≥ 126 mg/dL on 2 occasions, two-hour post-load glucose ≥ 200 mg/dL during an oral glucose tolerance test on 2 occasions. For gestational diabetes, it is screened during the 24th week of pregnancy.



Treatment: Type 1: Primarily insulin therapy

Type 2: Use of oral glucose-lowering agents and/or insulin
Nutritional therapy, weight reduction with regular exercise is greatly advised for the control of both type 1, 2, and gestational diabetes..

Prognosis: Those with diabetes can live a long life, but not without major complications if proper care and treatment is not carried out and maintained. Type 1 and 2 diabetes often lead to complications such as blindness, kidney failure, heart attacks, stroke and lower limb amputation. As for gestational diabetes, these women and possibly their children are also at increased risk of type 2 diabetes in the future.



According to WHO, adults with diabetes have a two- to three-fold increased risk of heart attacks and strokes. Reduced blood flow along with neuropathy (nerve damage) in the feet increases the chance of foot ulcers, infection and eventual need for limb amputation. Diabetic retinopathy is an important cause of blindness, and occurs as a result of long-term accumulated damage to the small blood vessels in the retina. Diabetes is the cause of 2.6% of global blindness and is among the leading causes of kidney failure (WHO, 2020.)

For more information, visit the World Health Organization (WHO) & The Center for Disease Control and Prevention (CDC)

References

Center for Disease Control and Prevention. (2020). *Diabetes*. Retrieved from <https://www.cdc.gov/diabetes/index.html>
World Health Organization. (2020). *Diabetes*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/diabetes>

A diabetic Story



Amina Dubuisson, DNP, RN, MSN,
MBA/HCM, LNHA

In 2006, I was diagnosed with type 2 diabetes mellitus. It was devastated and scary news to me knowing that diabetes was in the top ten diseases that are considered to be the leading cause of death. At first, it was difficult to accept, but I immediately started to work on my nutrition and incorporated some physical activities. Through this journey, I have had some ups and downs. I lost some weights, but at times it was not desirable.

The experience of diabetes differs from person to person and impairs self-management in different ways. Many have died to the complications of diabetes that are highly related to noncompliance to treatment regimens.

I know and understand that it can be very challenging for diabetic patients to follow their therapeutic diets. Having diabetes creates psychological stress that negatively affects self-management and quality of life. However, there is a lack of understanding regarding the psychosocial aspect of diabetic patients. In many situations, they are labeled as non-compliant because others fail to recognize the connection between their emotions and behaviors as it relates to their psychosocial processes and needs. Some people are very frustrated with the fact that there is no cure for diabetes and feel that healthcare providers and family members don't seem to understand their continuous struggle. People with a lack of psychosocial support may feel unmotivated to perform self-care behaviors such as taking their medications and following their prescribed diets.

I encourage people with diabetes to participate in the physical activity of their choice such as walking, biking, jogging as tolerated. You don't have to spend hours and hours participating in the exercise, but you need to at least walk for 30 minutes around your neighborhood. Healthy food choices and follow the recommended portion size will also help with controlling the blood sugar level. I am not a vegan, but I encourage people to incorporate plant-based foods into their diet. A plant-based diet is highly encouraged as it helps to lower the hemoglobin A1C level. A plant-based diet composes mostly but not entirely of plant foods. It supports a high consumption of fruits, vegetables, legumes, seeds, whole grains, and nuts.

If you have a loved one who is living with diabetes, it is important to identify any psychological stress and try to provide some psychosocial support to improve adherence to the regimen. With the support of friends and family members who can cook and eat a healthy meal with them, it becomes an enjoyable social gathering. It is also true as far as physical activity, encourage your loved ones to go for walk and even walk with them. Your support can improve their self-management.

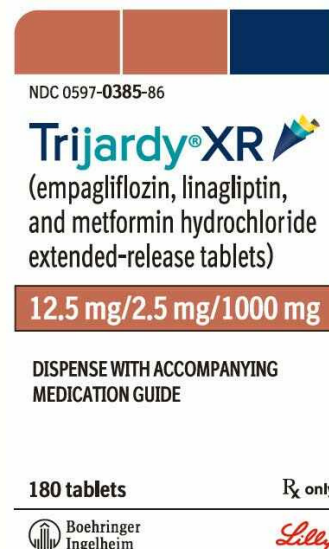
Drug Spotlight

Trijardy XR

A triple-combination tablet (Trijardy XR), comprising empagliflozin (Jardiance), linagliptin (Tradjenta), and extended-release metformin hydrochloride, for the treatment of adults with type 2 diabetes. It decreases renal reabsorption of glucose and lowers the renal threshold for glucose, and thereby increases urinary glucose excretion.

Warning: TRIJARDY XR is not for everyone as serious side effects may occur.

Ask your provider at your next appointment if prescription TRIJARDY XR is right for you.



Each tablet contains 12.5 mg of empagliflozin, 2.5 mg of linagliptin, and 1000 mg of metformin hydrochloride.

Dosage: See Prescribing Information. Tablets must not be split, crushed, dissolved, or chewed.

Store at 20°C to 25°C (68°F to 77°F); excursions permitted to 15°C to 30°C (59°F to 86°F) [see USP Controlled Room Temperature]. Protect from exposure to high humidity.

Dispense in a well-closed container as defined in the USP. Keep out of reach of children.

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HANA IS THANKFUL



HANA would like to extend a great thanksgiving to all of its members and supporters. We are thankful to all for your commitment to the organization. Thankful, for although it has been a challenging year, you all continue to show your support to all our programs and endeavors. From our home to yours and our heart to yours, Happy Thanksgiving HANA family. You are our blessing.

"Gratitude is the inward feeling of kindness received. Thankfulness is the natural impulse to express that feeling. Thanksgiving is the following of that impulse."

-Henry Van Dyke

Upcoming events

- Members Appreciation Dinner via Zoom
November 21, 2020
- Member Christmas Party via Zoom
December 2020



EDUCATION TEAM MESSAGE

This newsletter is a regularly distributed publication distributed on a topic of interest to HANA members and its subscribers.

Contact us:

WWW.HANAOFFFLORIDA.ORG

INFO@HANAOFFFLORIDA.ORG