

Building Connections: The Maestro Project



Participant Newsletter Issue 48 Summer 2011

Congratulations!

To Michael Park on the debut of his Diabetes Opera!! Way to go Michael – we are all so proud of you! Wonderful use of art in service of education and awareness! And a whole lot of talented entertainment. Audience participation determined the fate of the main character and showed that there is still A LOT more diabetes education needed out there!!! Fantastic!!!!
<http://www.michaelpark.ca/Welcome.html>

Run for Diabetes

September 5th at Assiniboine Park in Winnipeg. Half marathon, 10K run, 3K family walk and a kids fun run. Please register online at the running room www.runningroom.com or call CDA for more details at 204-925-3800.



CDA Needs You!!

Needed: Volunteers to help with kit distribution on September 1st, 3rd and 4th at the Running Room (Grant location) and various roles on the day of the Run for Diabetes event, September 5th at Assiniboine Park.

Positions needed to be filled: course marshals, course set up and take down, start and finish line attendants, kids run attendants, water station attendants.

If you are interested in volunteering please let Kasia James know ASAP at kasia.james@diabetes.ca or phone 204-925-3800 ext 225.

Wear Your Blue – Support Young Adults with Type 1 Diabetes!!

Hi there!

My name is Angela and I am a participant in the Maestro Project. I am also a jewelry designer. I'm going to be designing jewelry using the "blue" theme for World Diabetes Day and fundraising specifically for young adults with type 1 diabetes. 50% of all the proceeds from these bracelets will be going to places that support young people with diabetes, like the Maestro Project and Youville Center.

I will also be taking donations of used and unwanted jewelry (costume, vintage, fine, watches, etc) for this specific project, so if you don't want to buy a piece but still want to help, you can do that!

You can contact me through my work email: a.sawatzky@live.com or by phoning 204-997-9509 or by visiting the salon I'm working from: 261 Hair Company located at 261 Lilac St off of Corydon Ave or view <http://www.inspirationsbyangela.blogspot.com>

All the pieces for this project will range between \$20 to \$35 each depending on the supplies used, if I come up with a design that is cheaper to make, or lots of people donate old jewelry, I can lower that price a bit! Looking forward to hearing from you! -Angela



Research News

Spring 2011

Diabetes Prevention Trial – DPT-1 oral insulin trial update.

This follow up study included individuals who participated in the early intervention of oral insulin (1994-2003) given to try to prevent or delay type 1 diabetes in those who were known to be at risk. A telephone survey was conducted in 2009 to determine whether diabetes had been diagnosed and, if not, an oral glucose tolerance test (OGTT), HbA1c and autoantibody levels were obtained. Of the 372 subjects randomized, 97 developed type 1 diabetes before follow up. 75% of the remaining 275 subjects were contacted. In the interim, 77 individuals had been diagnosed with type 1 and 54 of the remainder have had an OGTT. 10 of these were diagnosed. Among individuals meeting the original criteria for insulin autoantibodies, the overall benefit of oral insulin remained significant. However the hazard rate in this group increased from 6.4% to 10.0% after cessation of therapy. Researchers concluded that the oral insulin treatment effect in individuals with confirmed insulin autoantibodies appeared to be maintained with additional follow up, however, once therapy stopped, the rate of developing diabetes in this group increased to a rate similar to that in the placebo group.

June 2011

Results of a global survey presented at last month's ADA conference in San Diego showed that 1/3 (35%) of patients with diabetes reported regularly missing or not taking insulin treatment as prescribed an average of 3 days a month. The Global Attitudes of Patients and Physicians in Insulin Therapy (GAPP) survey identified a high frequency of insulin omission in a sample of 1,530 adults with type 1 diabetes (12%) or type 2 diabetes (88%) who use insulin therapy. The key conclusions from this large scale survey were: insulin omission was more frequent among younger respondents who had more frequent hypoglycemia, who were less successful with other treatment tasks (ie checking blood sugars), who regarded insulin adherence as less important, who had more logistical barriers (ie traveling, altered daily routines) and who were concerned that insulin treatment required lifestyle changes. Satisfaction with insulin therapy, especially flexibility of injection timing, was associated with higher adherence rates. Omission rates were highest in Turkey, followed by the US, China and Japan and were lowest in France, Germany, the UK and Spain. The researchers suggest prescribing insulin regimes that are more flexible and fit more easily into people's lifestyles as key to improving compliance with treatment and to lead to improved clinical outcomes for patients. Canada did not take part in the GAPP survey but these findings have important implications for Canadians with diabetes who struggle with taking their insulin. Maybe it's time to talk to your diabetes education team about your regimen and the possibility of building more flexibility into options for your daily routine.

Student? – Yes. Starving? – Not if you can help it!!! Back to School Fare on a Budget

Cash can often be a challenge if you are student or if you've just left home, and are living "on your own". You might need to economize, reign in the gourmand tendencies, cut down on pre-packaged "treats", but you will not want to sacrifice your health!

Here are some shopping tips that might help:

- One big weekly shopping trip at your local supermarket will work out to be cheaper than lots of single trips to the local quickie mart over the week
- Whole grain cereals that you cook (oatmeal, red river cereal etc) can be bought in bulk or in large quantities and can "stretch" further than even large boxes of cold cereals
- Look for supermarket "own brands" and in-house specials
- Some supermarkets sell products at reduced prices as they approach their sell-by dates, but remember to make sure you will use them before they expire
- Market stalls can be cheaper for things like fruit and vegetables in season
- Buy foods such as pasta, rice, dried beans and lentils in bulk
- Frozen or tinned fruits and vegetables can be handy and nutritious if you find fresh produce goes off before you get a chance to use them up
- Beans and pulses (like chickpeas) are cheap and filling and very nutritious. They are fun to experiment to cook with and you can try all sorts of recipes and exotic flavor combinations
- Compare prices and selection with local ethnic grocery stores, you may be pleasantly surprised as well as inspired to try something new

Lemon Basil Pesto with Fresh Vegetables

Thanks to diabeticgourmet.com

Makes 8 servings

1 ½ cups packed basil leaves
½ cup packed baby spinach leaves
½ cup walnuts
¼ cup grated cheese (ie: Asiago, Romano, Parmesan)
2 Tbsp soft silken tofu
½ tsp salt
½ tsp ground black pepper
¼ cup extra virgin olive oil
½ tsp grated lemon zest
1 large red bell pepper cut into ¾" strips
1 pint small cherry tomatoes

In a food processor, pulse basil and spinach until finely chopped. Add nuts and cheese, whirl until nuts are finely chopped. Add tofu, salt and pepper. With motor running, drizzle in oil. Add lemon zest and whirl to blend. Cover and refrigerate up to 24 hours.

Makes 1 cup.

You now have many options to use your pesto. Goes very well with pasta, chicken breasts, grilled shrimp... be creative!! To serve, scoop pesto into serving bowl. Set bowl in center of a plate and arrange pepper strips and tomatoes around it and then toss with your entrée of choice!

Nutritional information for the pesto:

Per serving:

3 g protein
180 mg sodium
12 g healthy fats
2 g saturated fat
2 g dietary fibre
4 g carbohydrates



Community Events

Team Diabetes Canada isn't ALL about running!!
Check this out!!

<http://www.diabetes.ca/get-involved/supporting-us/team-diabetes>

Hike: Conquer the Volcano – Costa Rica, May 5, 2012

Bike: RBC GranFondo – Whistler, Sept 10, 2011-07-12

Bike: Test of Metal 2012 – June 16, 2012

Walk/Run: Rio de Janeiro Marathon, Brazil – July 2012

Walk/Run: Reykjavik Marathon, Iceland – Aug 2012

Walk/Run: Edmonton Marathon, Alberta – Aug 20, 2011

Walk/Run: Okanagan Marathon, Kelowna – Oct 9, 2011

WebWatchers

Doing some high-altitude hiking this summer? Not sure how your diabetes will respond?

There is no reason why people with diabetes should not participate in activities at altitude, but there may be changes in insulin and carbohydrate needs that you may need to consider. Read this helpful section at:

<http://www.diabetes.org.uk/MyLife-YoungAdults/Sports-and-physical-activity/Hiking-at-altitude/>

Wondering what other centers are doing with regards to innovative diabetes education programs??

<http://www.diabetes.ca/documents/for-professionals/Bestpractice-eng.pdf>

Anything you would like to try for young adults in MB??

Get Better Together! A FREE program for living better with chronic disease

Are you sick and tired of being sick and tired? Or, are you managing well and want to stay that way? Come and learn to manage your condition better and cope with the challenges that health problems create in our lives. To register, call the Wellness Institute at 204-632-3927.

Upcoming Schedule of Winnipeg Programs:

- North End Wellness Center, 363 McGregor St. Tues Sept 27-Nov 1, 1:00-3:30
- Access River East, 975 Henderson Hwy Tues Oct 4-Nov 8, 9:30-12:00
- Reh-Fit Center, 1390 Taylor Ave. Tues Oct 4-Nov 8, 6:00 – 8:30
- Wellness Institute, 1075 Leila Ave, Wed Oct 5 – Nov 16, 1:00 – 3:30
- Place Desmeuron (French Program), 400 Des Meurons St, Tues Sept 20 – Oct 25, 1:00 – 3:30
- Youville St. Vital, 6-845 Dakota St, Mon Oct 24 – Dec 12, 1:00 – 3:30

For more information and other classes, please visit our website at www.getbettertogether.ca

Thinking of Taking a Year “Off” – Maybe Volunteering or Working Overseas?

Thanks to diabetes.org.uk

If you are thinking of doing some volunteer work overseas, your diabetes isn't necessarily going to stop you, but you will need to consider quite closely the implications of managing your diabetes if you decide to work in a developing country.

While many voluntary organizations will not exclude you from volunteering, do be prepared for some extra checks, as they will look into each application on an individual basis.

You will probably need to have an initial medical assessment and a report from your doctor. This will help the organization decide whether a specific position overseas is safe and suitable for you. You may also be a little restricted in the areas that you are allocated to work as most organizations will want you to be in easy reach of medical facilities in case of any problems, so that may well mean capital or major cities.

While many volunteer organizations will consider the implications of your diabetes quite carefully, it is always worth thinking through potential issues for yourself. This isn't intended to put you off – more to make sure that you're fully prepared. This way you, the voluntary organization and the people you are helping all get the best out of the experience.

You will need to consider the following:

- How would you guarantee a regular and safe supply of insulin or other supplies?
- How does the food differ and potentially effect your management?
- Will you be more or less active than you are now?
- How confident would you feel at managing high/low blood glucose if there was no nurse or doctor to call for advice, and the local hospital may be some journey away?
- Things like diarrhea and vomiting are more common in developing countries. Would you be able to manage sick days on your own with no advice from your d-team?
- In many rural areas living conditions are very basic. How would you keep your insulin cool when there is no guaranteed electricity supply or running water?
- The equipment and resources you need for your diabetes management may well not be available in a developing country. If your placement is over a year, how would you get your annual surveillance tests, address management issues or get checked for possible complications of your diabetes?
- What languages are used in the host country and how confident are you in speaking and understanding them? Of making yourself and your needs understood?

It is also very worth while discussing these things with your diabetes team. Your team may be able to put you in touch with one of their international colleagues or a diabetes service in or near where you will be. It is also worth talking to other young people with type 1 who have traveled and volunteered abroad to find out what their experience was like. They may have very helpful suggestions and advice. Your diabetes educators may know and be able to put you in touch with a peer. Do your research. Be prepared. Be knowledgeable and flexible. The world will welcome you!



“Doctor Simmons? The repairman for your laser is here!”

Please send your feedback to:

The Maestro Project
Room 514 JBRC
715 McDermot Avenue
Winnipeg, MB R3E 3P4

Phone: 204-789-3719
Fax: 204-977-5691

Email: cmacdonald@mich.ca
Web: www.maestroproject.com



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