



# ODPCP

OHIO DIABETES PREVENTION  
AND CONTROL PROGRAM

BUREAU OF HEALTH PROMOTION  
AND RISK REDUCTION

OFFICE OF  
HEALTHY OHIO

## The Ohio Department of Health Gestational Diabetes Project: *Fostering Collaboration between the Maternal Child Health and Chronic Disease Programs*

The Ohio Department of Health (ODH) Maternal Child Health (MCH) and Health Promotion/ Risk Reduction programs are teaming together to develop a statewide plan to prevent type 2 diabetes mellitus among women with a history of gestational diabetes mellitus (GDM). Along the way, staff members are learning and sharing with similar teams from West Virginia and Missouri. This is because ODH was selected in the spring of 2010, to participate in a national year-long GDM project that is sponsored by the Association of Maternal and Child Health Programs (AMCHP), the National Association of Chronic Disease Directors (NACDD) Women's Health Council, and the Centers for Disease Control and Prevention (CDC). The goal of the project is to foster collaboration between MCH and chronic disease programs around shared goals. GDM is a perfect starting point.

About half of all women who have gestational diabetes during pregnancy will ultimately develop



ODH GDM Project Committee Members-Thomas Joyce, Norma Ryan, Amy Dunn, Joyce Hersh and Jo Bouchard. Not pictured: Andy Wapner, Gwen Stacy, Lisa Fry, Reena Oza-Frank and Anne Kutys

type 2 diabetes. This is a lifelong risk. Recommendations established by the American Diabetes Association are for women with this history to be screened for type 2 diabetes in the immediate post-partum period and at least every three years thereafter. In a study of the Ohio Medicaid population, only 46 percent of women kept their post-partum visit appointment. Gestational diabetes complicates between 3–9 percent of all pregnancies; which is an estimated 9,000 pregnancies each year in Ohio. Obesity and

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*Nan Migliozi, Director of the Office of Healthy Ohio and Dr. Cynthia Shellhaas CFHS Medical Director are Co-Chairs for the ODH GDM Project*

*Elizabeth Conrey, CDC Assignee to ODH as the State Maternal and Child Health Epidemiologist assisting with the ODH GDM project.*

overweight status, which are major risk factors for the development of type 2 diabetes, each occur at 22–25 percent among women of reproductive age in Ohio.

Participants on ODH's team include members from Bureau of Child and Family Health Services, Healthy Ohio's Ohio Diabetes Prevention and Control Program, Women, Infants, and Children (WIC) program, the State Epidemiology Office, Women's Health Program and the Ohio Department of Jobs and Family Services. The team's project activities over the next 18 months include the following: authoring a report, analyzing data and raising awareness.

First, the team will use existing data sources to develop a descriptive report about gestational diabetes in Ohio. This report will be a resource for both medical and public health professionals that serve women with both gestational and type 2 diabetes. As a corollary, the team will evaluate existing data systems and prepare

recommendations for improvement in capturing GDM-related data.

The team will also gather data about existing health care practices to determine the continuum of care for women with a history of GDM. With assistance from CDC epidemiologists, this fall the team will survey Ohio prenatal and primary health care providers to learn about their practices. This includes diagnosis and care during pregnancy, the immediate post-partum follow-up and inter-conception care and the long term follow up extending past the reproductive years. The team will attempt to identify gaps in service in this continuum and will determine how to develop the capacity to fill those gaps. In the winter of 2011, the team will conduct focus groups of women with GDM currently or in a past pregnancy to identify messages that women find responsive. These two pieces of data will help the state team develop appropriate collaborative interventions which may include strategies to increase

post-partum glucose screening rates and improve long-term follow-up of women with a history of GDM.

Finally, the team will utilize social media and traditional social marketing techniques to increase public awareness. Messages focusing on reducing the risk of both gestational and type 2 diabetes and the link between obesity and the development of type 2 diabetes have been crafted for Facebook and Twitter accounts as well as for the ODH website. The link between GDM and type 2 diabetes will be emphasized during National Diabetes Month in November, National Birth Defects Month in January and Women's Health Week in May.

The successful culmination of this project is important not only in its own right but because it marks the first of many potential collaborations between these two areas.

For more information visit:  
[www.ODH.ohio.gov](http://www.ODH.ohio.gov)

# Seasonal Influenza



## The Disease

Influenza, the flu is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness and at times can lead to death. Some individuals, such as older people, young children and people with certain health conditions, are at high risk for serious flu complications. The best way to prevent the flu is by getting vaccinated each year.

In 2009–2010, a new and very different flu virus (called 2009 H1N1) spread worldwide causing the first flu pandemic in more than 40 years. During the 2010–2011 flu season, The Centers for Disease Control and Prevention (CDC) expects the 2009 H1N1 virus to cause illness again along with other influenza viruses. The 2010–2011 flu vaccine will protect against 2009 H1N1 and two other influenza viruses.

Most people who get the flu will have mild illness, will not need medical care or antiviral drugs, and

will recover in less than two weeks. Some people, however, are more likely to get flu complications that result in being hospitalized and occasionally result in death. Pneumonia, bronchitis, sinus infections and ear infections are examples of flu-related complications.

The flu can also make chronic health problems worse. For example, people with asthma may experience asthma attacks while they have the flu, and people with chronic congestive heart failure may have worsening of this condition that is triggered by the flu. The list below includes the groups of people more likely to get flu-related complications if they get sick from influenza.

### People at High Risk for Developing Flu-Related Complications

- Children younger than 5, but especially children younger than 2 years old
- Adults 65 years of age and older
- Pregnant women
- Also, last flu season, American Indians and Alaskan Natives seemed to be at higher risk of flu complications

### People who have medical conditions including:

- Asthma
- Neurological and neurodevelopmental conditions

[including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability (mental retardation), moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].

- Chronic lung disease (such as chronic obstructive pulmonary disease [COPD] and cystic fibrosis)
- Heart disease (such as congenital heart disease, congestive heart failure and coronary artery disease)
- Blood disorders (such as sickle cell disease)
- Endocrine disorders (such as **diabetes** mellitus)
- Kidney disorders
- Liver disorders
- Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders)
- Weakened immune system due to disease or medication (such as people with HIV or AIDS, or cancer, or those on chronic steroids)
- People younger than 19 years of age who are receiving long-term aspirin therapy
- People who are morbidly obese (Body Mass Index, or BMI, of 40 or greater)

## Flu and People with Diabetes

### Increased Risk from Flu

People with diabetes (type 1 and 2), even when well-managed, are at increased risk of severe disease and complications, like hospitalization and even death, as a result of getting the flu. This is because diabetes can make the immune system less

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## Seasonal Influenza continued from page 1

able to fight severe influenza disease. In addition, illness can raise your blood sugar level. Also, sometimes people don't feel like eating when they are sick, and this can cause blood sugar levels to rise and fall.

### Vaccination is the Best Protection against Flu

CDC recommends that people with either type 1 or type 2 diabetes, who are 6 months and older, get a flu shot (*The nasal spray vaccine should not be given to people with diabetes*).

People with type 1 or type 2 diabetes are at an increased risk of developing pneumonia from the flu, therefore a pneumonia (pneumococcal) vaccine is also recommended for them. A pneumonia vaccine should be part of a diabetes management plan.

National Influenza Vaccination Week (NIVW) is a national observance that was established to highlight the importance of continuing influenza vaccination, as well as fostering greater use of flu vaccine after the holiday season into



January and beyond. The 2010-2011 season's NIVW is scheduled for **December 5–11, 2010.**

CDC will be supporting organizations across the country in their vaccination efforts during National Influenza Vaccination Week. There are podcasts, e-cards and other e-health activities to support this effort. You can help in promoting the ongoing flu vaccine efforts by placing these graphics on your web pages.

We anticipate planning efforts will be similar to previous years where we will designate different days of the week to emphasize the importance of vaccinating special populations, such as children, seniors and health care workers. Please plan to emphasize the importance of vaccinating these special populations with awareness activities.

The message is **"Get Vaccinated..."** The graphic can be placed in any way that works best for your particular site. We are hoping to see this graphic on as many of our partner sites as possible in the weeks leading up to NIVW. If possible, we'd like to see the graphics stay up past immunization week. For campaign information: <http://www.cdc.gov/flu/NIVW/help.htm>



The **National Healthy Mothers, Healthy Babies Coalition (HMHB)** is launching **text4baby**, a free mobile information service that provides pregnant women and new moms with information to help them care for their health and give their babies the best possible start in life. Women who sign up for the service by texting **BABY** to 511411 (or **BEBE** in Spanish) will receive free SMS text messages each week, timed to their due date or baby's date of birth.

# Gestational Diabetes Increases Risk for Developing the Disease in Mother and Child

*For National Diabetes Awareness Month, take steps now to prevent diabetes in the future*

Most women with gestational diabetes know that taking steps to manage the disease during pregnancy is critical for the health of both mother and child. What many women don't realize is that those steps need to continue even after the baby is born. Women who have had gestational diabetes are at increased risk for developing diabetes in the future and their child is also at increased risk for obesity and type 2 diabetes. The Ohio Diabetes Prevention and Control Program (ODPCP) has partnered with the National Diabetes Education Program (NDEP) to share this message during National Diabetes Awareness Month this November.

As we recognize National Diabetes Awareness Month, we want all women with a history of gestational diabetes to be aware of their long-term health risks, the health risks faced by their children and steps they can take to keep themselves and their families healthy," said Thomas Joyce, ODPCP director.

Gestational diabetes occurs during pregnancy and affects about seven percent of all U.S. pregnancies, or about 200,000 pregnancies each year. Women who have had gestational diabetes should be re-tested for diabetes six to 12 weeks after the baby is born, and at least every one to three years after that.

"Many women think that if the follow-up test after the baby is born shows no signs of diabetes, they are

in the clear, but that's not the case," said ODPCP nurse consultant Amy Dunn. "What many of these moms don't know is that they have a 40 to 60 percent chance of developing diabetes as early as five to 10 years after their baby is born. These women need to know this information and they need to take steps to lower their risk for developing diabetes."

Two ODH employees, Trina Dickerson and Sandra Scott, will appear with their children on posters developed to alert women with a history of gestational diabetes to be aware of their long-term health risks.

Women with a history of gestational diabetes can do a lot to prevent or delay the risk of developing diabetes. In addition to screening for diabetes, it is important for women to reach and maintain a healthy weight by making healthy food choices and being active for at least 30 minutes, five days a week. These action steps are good for the entire family and help mom and baby manage their risks for developing diabetes. Breastfeeding also helps protect against childhood obesity, which is a risk factor for type 2 diabetes. For mom, breastfeeding can also promote an earlier return to pre-pregnancy weight.

Gestational diabetes occurs more frequently among women with a family history of diabetes; overweight and obese women; and Hispanic/Latina, African-American,



*Trina and Marra Dickerson*

American Indian, Asian, Pacific Islander and Alaska Native women. Women who have had gestational diabetes should be screened regularly for diabetes and pre-diabetes.

It is important that women talk to their doctors about their history of gestational diabetes. Women with a history of gestational diabetes should also talk to their obstetricians about earlier screening for gestational diabetes in future pregnancies. The children of women who had gestational diabetes are also at increased risk for obesity and type 2 diabetes. It's a good idea for mothers who had gestational diabetes to tell their child's pediatrician.

The National Diabetes Awareness Month campaign from NDEP includes print public service announcements and poster series

*continued on page 6— see [Increases Risk](#)*

## Carroll County YMCA Program Reports Success

The Carroll County YMCA recently completed a very successful 10-week diabetes self-management program. Funded through the Ohio Department of Health (ODH), 20 participants having or at risk for diabetes



attended weekly educational sessions to help them take control of their health while sharing concerns in a group setting. Sessions encouraged healthy lifestyle choices in nutrition, fitness and coping with stress as well as information on the disease itself through a certified diabetes educator. Blood glucose levels were monitored each week and beginning and ending program weights were compared. Participants worked out with a personal trainer and upon completion of the program received a six-month membership to the YMCA. The Carroll County YMCA was awarded two additional grants for a fall session, already filled, and a third in 2011. One participant said, "Because of the diet and exercise I no longer have heartburn, colitis and tired, sluggish days. I have lost 11 pounds in nine weeks and I have dropped a whole dress size. I have tons of energy and feel wonderful".

I was personally knocked out at the camaraderie the group developed. Each member had 19 others cheering them on. Our Certified Diabetes Educator, Susan Morris, was the proverbial font of knowledge. She had the personality allowing the participants the freedom to ask her any questions.

Carol Myers, Carroll County YMCA



## Increases Risk

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featuring real people who are taking steps to prevent or delay type 2 diabetes, as well as stories from real people living with diabetes and taking steps to manage their disease.



*Sandra and Tommy Scott*

To learn more about the steps to reduce the risk of developing diabetes, check out NDEP's risk tests in English and Spanish. Visit [www.YourDiabetesInfo.org](http://www.YourDiabetesInfo.org) or call 1-888-693-NDEP (6337); TTY: 1-866-569-1162. Ask for *It's Never Too Early to Prevent Diabetes* and a tip sheet for children at risk called *Lower Your Risk for Type 2 Diabetes*, in English or Spanish.

The U.S. Department of Health and Human Services' National Diabetes Education Program (NDEP) is jointly sponsored by the National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC) with the support of more than 200 partner organizations. Its Small Steps. Big Rewards Prevent Type 2 Diabetes. campaign communicates that type 2 diabetes can be prevented or delayed through modest lifestyle changes.

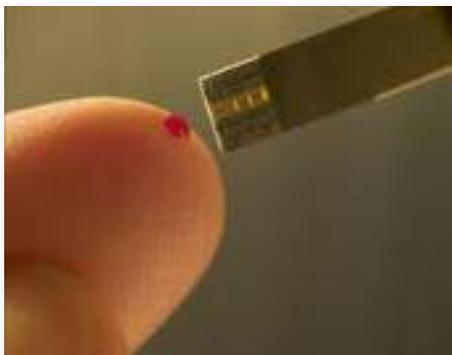
## Infection Prevention during Blood Glucose Monitoring and Insulin Administration

The Centers for Disease Control and Prevention (CDC) has become increasingly concerned about the risks for transmitting hepatitis B virus (HBV) and other infectious diseases during assisted blood glucose (blood sugar) monitoring and insulin administration.

CDC is alerting all persons who assist others with blood glucose monitoring and/or insulin administration of the following infection control requirements:

An underappreciated risk of blood glucose testing is the opportunity for exposure to bloodborne viruses (HBV, hepatitis C virus, and HIV) through contaminated equipment and supplies if devices used for testing and/or insulin administration (e.g., blood glucose meters, fingerstick devices, insulin pens) are shared.

Outbreaks of hepatitis B virus (HBV) infection associated with blood glucose monitoring have been identified with increasing regularity, particularly in long-term care settings, such as nursing homes and assisted living facilities,



where residents often require assistance with monitoring of blood glucose levels and/or insulin administration. In the last 10 years, alone, there have been at least 15 outbreaks of HBV infection associated with providers failing to follow basic principles of infection control when assisting with blood glucose monitoring. Due to underreporting and under recognition of acute infection, the number of outbreaks due to unsafe diabetes care practices identified to date are likely an underestimate.

Although the majority of these outbreaks have been reported in long-term care settings, the risk of infection is present in any setting where blood glucose monitoring equipment is shared or those assist-

ing with blood glucose monitoring and/or insulin administration fail to follow basic principles of infection control. For example, at a health fair in New Mexico in 2010, dozens of attendees were potentially exposed to bloodborne viruses when fingerstick devices were inappropriately reused for multiple persons to conduct diabetes screening. Additionally, at a hospital in Texas in 2009, more than 2,000 persons were notified and recommended to undergo testing for bloodborne viruses after individual insulin pens were used for multiple persons.

Unsafe practices during assisted monitoring of blood glucose and insulin administration that have contributed to transmission of HBV or have put persons at risk for infection include:

- Fingerstick devices should never be used for more than one person
- Whenever possible, blood glucose meters should not be shared. If they must be shared, the device should be cleaned and disinfected after every use, per manufacturer's instructions. If the manufacturer does not specify how the device should be cleaned and disinfected then it should not be shared.
- Insulin pens and other medication cartridges and syringes are for single-patient-use only and should never be used for more than one person.
- Failing to change gloves and perform hand hygiene between fingerstick procedures



# Have a Holiday Heart-to-Heart

The holidays are known as a time for family gatherings, catching up with relatives, and sometimes even the occasional family conflict. Like drama at the holiday dinner table, in many ways your health is influenced by your family—for better or for worse. This year, why not start a conversation that benefits everyone? Gather your family health history.

## Why It's Important

Family history of disease is an important part of understanding your risk for developing a number of serious diseases, including type 2 diabetes. Diabetes is a serious disease that, if left untreated, can lead to serious health problems including blindness, loss of limb, kidney failure, heart disease, and early death. In fact, most people with type 2 diabetes have a family member such as a mother, father, brother or sister with the disease.

The Ohio Diabetes Prevention and Control Program and The National Diabetes Education Program (NDEP) encourages all families to gather their family health history this holiday season and help prevent or delay type 2 diabetes in future generations.

By knowing your family health history, sharing it with your health care team, and taking important steps—such as maintaining a healthy weight or losing a small amount of weight if you are overweight, making healthy food choices, and being physically active—you can



prevent or delay type 2 diabetes (as well as other serious diseases) and help ensure that you will be enjoying holiday family gatherings for years to come.

## Four Questions You Should Ask

The answers to these key questions could help you prevent type 2 diabetes in your future.

- Does anyone in the family have type 2 diabetes? Who has type 2 diabetes?
- Has anyone in the family been told they might get diabetes?
- Has anyone in the family been told they need to lower their weight or increase their physical activity to prevent type 2 diabetes?
- Did your mother get diabetes when she was pregnant? This condition is also known as gestational diabetes.

If the answer to any of these is yes, or you have a mother, father, brother, or sister with type 2 diabetes, you may be at an increased risk for developing type 2 diabetes. Talk to your doctor and visit [www.YourDiabetesInfo.org](http://www.YourDiabetesInfo.org) to learn more about managing your risk and preventing or delaying type 2 diabetes.

# Sugar Byte

**Women with gestational diabetes have an approximately 50 percent risk for development of type 2 diabetes within the next 5–10 years.**

# November 14, 2010 Declared as World Diabetes Day by the International Diabetes Federation

Diabetes Education and Prevention is the World Diabetes Day theme for each year during 2009–2013. The campaign calls on all those responsible for diabetes care to understand diabetes and take control. For people with diabetes, this is a message about empowerment through education. For governments, it is a call to implement effective strategies and policies for the prevention and management of diabetes to safeguard the health of their citizens with and at risk of diabetes. For healthcare professionals, it is a call to improve knowledge so that evidence-based recommendations are put into practice. For the general public, it is a call to understand the serious impact of diabetes and know, where possible, how to avoid or delay diabetes and its complications. The key messages of the campaign are:

- Know the diabetes risks and know the warning signs
- Know how to respond to diabetes and who to turn to
- Know how to manage diabetes and take control

## Campaign Objectives

The objectives for the 2009–2013 campaign were informed by the work of the Federation's Consultative Section on Education and its Task Force on Epidemiology and Prevention. The objectives



were further informed by the World Health Organization's 2008–2013 Action Plan for the Global Strategy for the Prevention and Control of Non-communicable Diseases. This document is available online in English at

<http://www.who.int/nmh/en>

The campaign goals are to:

- Encourage governments to implement and strengthen policies for the prevention and control of diabetes and its complications.
- Disseminate tools to support national and local initiatives for the prevention and management of diabetes and its complications.
- Illustrate the importance of evidence-based education in the prevention and management of diabetes and its complications.
- Raise awareness of the warning signs of diabetes and promote action to encourage early diagnosis.
- Raise awareness of and promote action to reduce the main modifiable risk factors for type 2 diabetes.

- Raise awareness and promote action to prevent or delay the complications of diabetes.

The World Diabetes Day logo is the blue circle—the global symbol for diabetes which was developed as part of the Unite for Diabetes awareness campaign. The logo was adopted in 2007 to mark the passage of the United Nations World Diabetes Day Resolution. The significance of the blue circle symbol is overwhelmingly positive. Across cultures, the circle symbolizes life and health. The color blue reflects the sky that unites all nations and is the color of the United Nations flag. The blue circle signifies the unity of the global diabetes community in response to the diabetes pandemic.

**Smoking is especially harmful  
for people with diabetes**

OHIO  
TOBACCO  
**QUIT LINE** CALL IT QUILTS.  
**1-800-QUIT-NOW**  
1-800-784-8669

## The Future of Diabetes is in Your Hands During American Diabetes Month®

### SHARE YOUR VISION TO STOP DIABETES

During American Diabetes Month this November, the American Diabetes Association is encouraging the public to take action against this devastating disease by asking “How will you Stop Diabetes? The future is in your hands.”

The national Stop Diabetes movement was launched in November 2009. By the end of November 2010, the goal is to gather the support of 1 million Americans to help confront, fight—and most importantly—stop diabetes. The Association hopes to reach and exceed the goal by the end of this month.

Local residents can become a part of the movement by visiting [www.stopdiabetes.com](http://www.stopdiabetes.com) or calling 1-800-DIABETES to:

- ▲ Share\*—“Share Your Vision to Stop Diabetes” by posting your video on [stopdiabetes.com](http://stopdiabetes.com) starting October 15, 2010.
- ▲ Incorporate the hand as a symbol of the movement in a 30-second video online to show your passion and commitment to changing the future of diabetes. Be sure to check out our sample videos at [stopdiabetes.com](http://stopdiabetes.com) made available by VSP® Vision Care.

Once the video submissions are complete, the public will be able to vote for the most compelling video. The top three finalists will

receive an Apple® iPad® and the winner will be part of a Stop Diabetes public service announcement. The “Share Your Vision to Stop Diabetes” video contest is sponsored by VSP® Vision Care.

*\*Video submissions will not be accepted after November 30, 2010.*

- ▲ Act—The future of diabetes is in your hands. Take action now by visiting [stopdiabetes.com](http://stopdiabetes.com) or calling 1-800-DIABETES. Text JOIN to 69866 to join the movement to Stop Diabetes. Standard data and message rates apply.
- ▲ Become one of the millions in the movement.
- ▲ Become an Advocate for the cause and receive alerts and critical information to help stop diabetes through our advocacy efforts.
- ▲ Attend a local community activity to learn more about diabetes and how you can stop it.

- ▲ Take control of your health. Request your free copy of “Top Five Ways to Stop Diabetes and Get Healthy Right Now!” or “What Can I Eat?” booklet by calling 1-800-DIABETES.
- ▲ Download your own Check Up Checklist at [stopdiabetes.com](http://stopdiabetes.com) and bring it to your next health care provider’s visit.
- ▲ Learn—Become a part of the movement by learning more about diabetes.
- ▲ Learn how to survive the holidays with the “Celebration Survival Guide” available at [stopdiabetes.com](http://stopdiabetes.com) or 1-800-DIABETES.

The drive to stop diabetes cannot succeed without individuals dedicating time, effort and funds to support our mission-critical activities in your neighborhood. You can get involved by visiting [www.stopdiabetes.com](http://www.stopdiabetes.com) or calling your local American Diabetes Office at 1-800-DIABETES.



 American Diabetes Association®

## Diabetes not only about food and medication—*there's more*

*This article was written by Bobbi Randall. Bobbie is a certified diabetes educator and registered, licensed dietitian. She supervises a diabetes self-management training program at Dunlap Community Hospital in Orrville, Ohio. The information echoes the joys and frustrations many diabetes educators/care providers have expressed.*

Recently I wrote about diabetes and dealing with the multiple treatment plans. Just when a plan is working great and blood sugar ranges and A1C numbers are within normal limits, something happens. The numbers begin to jump around and frustration builds.

Diabetes is not a stagnant disease. It adjusts as a person's body changes. Physical changes like age, health status and activity level can make glucose numbers fluctuate. Mental stress can also affect blood sugars. Studies reveal that students learning new concepts in or out of a classroom setting can cause blood sugars to jump around. Just balancing a checkbook, even if the total is a positive number, can tax the brain enough to change the glucose level in the blood.

The emotional stress of daily living also can influence glucose results. Grieving over the diabetes diagnosis is enough to cause the numbers to be out of range. Too many people think that just not

eating what they think they are not supposed to eat will control their diabetes. There is more to this disease.

Some of the people that I have taught diabetes training deserve multiple pats on the back. They should be in the "Diabetes Hall of Fame" if there is one. I am honored to have been their guide to a healthy lifestyle. You know who you are. Way to go—you make me proud.

I admire their willingness to learn as much as possible about diabetes and how it can affect their life. Some have joined online diabetes forums, attend support groups, read books, and subscribe to diabetes and other health-related magazines. They visit their physicians regularly and never miss an appointment to other health professionals. Some e-mail me often to let me know how they are doing. Keep it up.

These people are not "diabetics" anymore than a person who has to deal with chemotherapy and radiation is a cancer. They are people who deal with diabetes.

They are not embarrassed with this diagnosis. They put diabetes in their everyday vocabulary. Owing the disease is a source of empowerment to them. The more they talk about it, the less ashamed and "sick" they feel.



*Bobbi Randall, M.S., R.D., L.D.*

Many realize that isolating themselves does not improve their physical or mental health. Claiming diabetes in conversations encourages others to do the same; this is a win-win situation.

Diabetes requires a careful balance of physical, mental, emotional and spiritual health. If a person with diabetes is not in balance, it will show up in the blood sugars. A history of fluctuating blood sugars can lead to multiple health complications that do not have to occur.

Find education, support, camaraderie and encouragement with diabetes. A Diabetes Self-Management Training program can nurture your entire health, not just the physical. Ask your physician to refer you to a local program. Many insurance companies will pay for this type of accredited training. You have everything to gain.

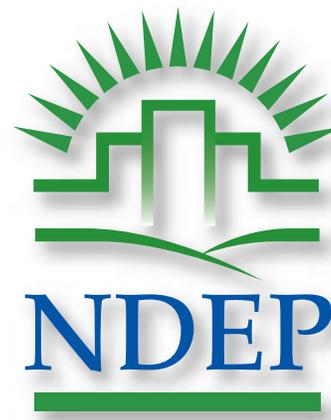
## The National Diabetes Education Program Prepares for National Diabetes Awareness Month, November 2010

The National Diabetes Education Program (NDEP) will mark National Diabetes Awareness Month 2010 in November by promoting awareness and prevention messages that emphasize having a family history of diabetes as a risk factor for developing type 2 diabetes. They will also promote NDEP messages for women with a history of **gestational diabetes** and children of these pregnancies as they relate to family history and increased risk.

The NDEP National Diabetes Awareness Month 2010 outreach campaign uses real people telling their personal stories about diabetes prevention and managing increased risk due to family history of type 2 diabetes and/or gestational diabetes. These materials build on NDEP’s popular approach for the Managing Diabetes 2009 campaign, which featured testimonials from real people living with diabetes.

Join the effort by using NDEP messages, tools and resources to promote National Diabetes Awareness Month activities in your area:

<http://ndep.nih.gov/partners-community-organization/campaigns/family-history/index.aspx>



If you would like to contribute an article for the next newsletter or if you are aware of other upcoming educational opportunities and Internet resources, please send us your ideas.

Use this form to report a change in address or to be removed from our mailing list and/or to share information.

Name
Agency
Old address
New address

**Return to: Nancy D. Schaefer, R.D., L.D.,**  
 Ohio Diabetes Prevention and Control Program  
 Bureau of Health Promotion and Risk Reduction,  
 Ohio Department of Health, Columbus, OH 43215, Phone: (614) 728-3775

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