CAROUSEL OF HOPE KICKOFF LUNCHEON

BACK TO SCHOOL NUTRITION TIPS

TRIALNET CHANGES DIABETES CLASSIFICATION

CARING FOR TODDLERS WITH TYPE 1 DIABETES

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On May 18, the Children’s Diabetes Foundation held The Carousel of Hope Kickoff Luncheon for over 100 guests at The Peninsula Beverly Hills. The Kickoff built excitement for the upcoming gala on October 8 at The Beverly Hilton. Mrs. Barbara Davis, chairman of the Ball and founder of the Barbara Davis Center (BDC) and the Children’s Diabetes Foundation, announced this year’s gala will be a “Celebration of Hollywood.” Its strength. Its power. Its talent.

This year’s honorees certainly exemplify that theme. Denzel Washington will present the Inspirational Lifetime Achievement Award to Sir Sidney Poitier, an honor that was inspired by his incredible legacy and the many lives he has touched. Jane Fonda, David Foster, and Sherry Lansing will receive Brass Ring Awards, presented by Quincy Jones, Carole Bayer Sager, and Anjelica Huston, respectively. Once again, Jay Leno will be the evening’s Emcee, George Schlatter will be the Producer, David Foster will be the Music Director, and Clive Davis and Quincy Jones will be the Music Chairmen.

The gala requires a large team of people to come together for the cause. Barbara Davis thanked all involved with this year’s gala, particularly since several have been helping for many, many years. Mrs. Davis introduced some of the key people and supporters of the event and had the room in hysterics by reliving stories of the past. Mrs. Davis also thanked the many sponsors who have been so gracious to help the event come to life.

Madeline van Orman, an 11 year old patient of the Barbara Davis Center, talked to the crowd about her life with type 1 diabetes.

1. Whitney, Barbara, and Dana Davis; 2. Alana Collins Stewart & Melanie Griffith.
3. Tracy & Madeline van Orman, Christina & Lori Finch, Gina Abou-Jaoude, Dana Davis, Dalyla Creaghe, & Dr. Robert Slover; 4. Barbara Davis.
5. Ghada Irani & Candy Spelling; 6. Jolene & George Schlatter.
shots she has to take, and the daily care that is
needed. “The life I knew before my diagnosis, the
one where I could eat and drink what I wanted,
when I wanted, is gone. This new life requires me to
check my blood up to 10 times and get four shots of
insulin a day.”

Dr. Robert Slover, Director of Pediatrics at the
Barbara Davis Center, shared the exciting research
efforts that are going on in the BDC’s research
center, including the closed-loop pump system,
more commonly known as the artificial pancreas.
The Barbara Davis Center cares for thousands
of patients in clinics, but know they are helping
millions around the world through their research.

When speaking about the Barbara Davis Center,
Madeline said, “I get to have the best doctors and
nurses to take care of me. But one of my favorite
things about going to the Barbara Davis Center is
that it is my safe place. It’s not just a clinic where I
get medical care, it’s a place where I am welcome
with open arms, and everyone cares about me.” Dr.
Slover is one of those understanding doctors and
the Children’s Diabetes Foundation is proud to
work with a center that has such caring staff.

Each of the Kickoff Luncheon attendees left with a
beautiful piece of jewelry from Kendra Scott and a
make-up bag from Neiman Marcus. Many thanks
to our long-standing friend, Fred Gibbons from
Treefrogs for the beautiful flower arrangements.

To learn more about The Carousel of Hope, visit
The Children's Diabetes Foundation would like to sincerely thank Nancy Lockspeiser for her beautiful artwork. For every Carousel of Hope Ball, Nancy has made a gorgeous creation for the gala's invitation and event journal. Her art has become a staple of the event and sets the stage for the exciting evening to come. This year, Nancy graciously donated the beautiful painting that will be seen at the 30th Carousel of Hope Ball.

LATINO SUMMER PARTY

The Barbara Davis Center’s Latino Program celebrated their second year of success with the Latino Summer Party! Families ate delicious food from Lupitas Restaurant, heard great salsa music played by Quemando, and could visit vendors to learn about pump technology and getting involved in the diabetes community. Kids also loved getting their faces painted, running relay races, and dancing to the music! It was a great day for all!

The Children's Diabetes Foundation will soon be holding diabetes support groups in Spanish! If you are interested in learning more, contact Ana Reinhardt at 720-708-7559.
Having a toddler or preschooler can be an amazing time—they are always exploring, curious, and active. And the rate at which they develop skills often brings daily surprises. Yet, with this comes challenges too. Temper tantrums, difficulty communicating needs and wants, and “wanting what they want when they want it” are common toddler/preschoolers behaviors.

Understandably, type 1 diabetes in this age group can also be hard as there are unique challenges with a diabetes diagnosis and its management. We often hear parents and caregivers talk about the guilt they feel about their child being diagnosed with type 1 diabetes. You have 100% of the diabetes responsibility and this can lead to feelings of worry and frustration when your child’s blood sugars are so variable. Activity level and eating habits are unpredictable and may cause these worries and frustrations to increase. You may experience even more stress because your child can’t always communicate when his/her blood sugars are low, or if shots are avoided because of needle anxiety. All of this is normal and it is okay to admit that type 1 diabetes can be stressful and overwhelming. We have worked with hundreds of children with type 1 diabetes at the Barbara Davis Center (BDC) and their parents, and we know this for sure – you are not alone!

One goal for type 1 diabetes management is an A1c less than 7.5%. However, you do not need to have blood sugars in range 100% of the time to achieve this. In fact, perfection is impossible and unrealistic!

Dr. Shideh Majidi is a pediatric endocrinologist and Dr. Kimberly Driscoll is a pediatric psychologist. Both work at the Barbara Davis Center.

We want you to aim for at least 50-60% of blood sugars in range (80-180 until your child is 6 years old, then 70-150 starting at age 6). At the BDC, we are part of your Type 1 Diabetes Team – type 1 diabetes providers, dieticians, nurses, social workers, and psychologists – and we want to engage in a partnership with you to help manage your child’s type 1 diabetes. There are so many things we can work on together including:

1. Insulin dosing if your child is a “picky” eater.
2. Discussing CGMs and pumps to follow blood sugar trends and make more specific insulin dose adjustments.
3. BDC’s psychologist can assist you with behavioral challenges specific to eating like getting your child to try new foods or helping you with worries about low blood sugars.
4. BDC’s dieticians can discuss working on your child’s eating habits.
5. BDC social workers can give you strategies to help with insulin injections and fear of needles.

Don’t ever forget – you are not alone with type 1 diabetes. Your Barbara Davis Center Type 1 Diabetes Team is here to work with you through the unique challenges of having a toddler or preschooler with type 1. Our #1 goal is for you and your child to be as healthy, happy, and active as possible.
For most people, the onset of type 1 diabetes seems to occur suddenly, often resulting in a trip to the emergency room with life-threatening complications such as diabetic ketoacidosis (DKA). The Barbara Davis Center at the University of Colorado Anschutz Medical Campus is a member of TrialNet, a worldwide leader in type 1 diabetes prevention research and one of the prominent organizations working to change that scenario.

In the January 2016 issue of Diabetes Care, JDRF, American Diabetes Association (ADA), and Endocrine Society recommended adoption of a new type 1 diabetes staging classification. This recommendation is largely based on two decades of TrialNet research involving more than 150,000 relatives of people with type 1 diabetes.

Type 1 diabetes can now be most accurately understood as a disease that progresses in three distinct stages.

The new staging classification is vital to understanding how type 1 progresses. Equally important is TrialNet’s ability to diagnose the disease in its earliest stages, allowing for prompt intervention.

According to TrialNet Chair Carla Greenbaum, MD, “Identification of the pre-symptom stages of type 1 diabetes can be compared to identification of high blood pressure as a predictor of heart attack and stroke. Before treatment for high blood pressure became commonplace, we were missing a key tool to prevent heart disease. Today, people can receive intervention long before they experience symptoms or significant complications. The same is now true for type 1 diabetes.”
Clinical research supports the usefulness of diagnosing type 1 diabetes early—before beta cell loss advances to stage 3. The earlier diagnosis is made in the disease process, the sooner intervention can take place, and the more beta cells are likely to remain. More beta cells may lead to better outcomes regarding blood sugar control and reduction of long-term complications.

Dr. Peter Gottlieb, TrialNet Principal Investigator at the Barbara Davis Center explains, “TrialNet’s goal is to identify the disease at its earliest stage, delay progression, and ultimately prevent it. We offer screening and clinical trials for every stage of type 1 diabetes and close monitoring for disease progression.”

For people who participate in type 1 diabetes prevention research like TrialNet, the risk of DKA at diagnosis decreases from 30 percent to less than 4 percent.

Both the ADA and JDRF recommend TrialNet screening for people who have relatives with type 1 diabetes. Family members have a 15 times greater risk of being diagnosed than a person with no family history. Screening is available at no charge to:

- anyone between the ages of 1 and 45 with a sibling, child, or parent with type 1 diabetes.
- anyone between the ages of 1 and 20 with a sibling, child, parent, cousin, uncle, aunt, niece, nephew, grandparent, or half-sibling with type 1 diabetes.

It is recommended that children who do not test positive for diabetes-related autoantibodies continue to get rescreened every year until age 18.

New information is presented on the prevention of prolonged hypoglycemia (particularly with new pump and CGM technology).

- The use of intranasal glucagon and low dose glucagon are discussed in chapter 10, Preventing Hypoglycemia.
- Information on continuous glucose monitors (CGMs) is updated. Advances in this area have been enormous in recent years.
- A table is now included in chapter 3 outlining topics to cover with pump training and includes boxes to check when the family is comfortable with each area.
- The methods for calculating Correction Factors (insulin sensitivity), calculating Insulin to Carbohydrate (I/C) ratios, and use of the Insulin on Board feature are given new emphasis.
- Information relating to the many new insulin pumps, (e.g., the Tandem t:slim G4™ and the MiniMed 630G pumps) is provided.
- Special chapters on insulin adjustments using real-time CGM data and retrospective CGM data may help to improve overall glucose control.
- A new chapter is now included on the artificial (“bionic”) pancreas and current potential artificial pancreas systems are reviewed.
- A new chapter 17 is available to help with skin care and CGM sensor/pump set insertions, tape, and “sticking” problems (also see chapter 12).
- Chapter 13 dealing with insulin pump and/or CGM use in the school or workplace now includes a general Standard of Care form which can be used at schools for all students with diabetes.
This summer, we say goodbye to three amazing Barbara Davis Center (BDC) doctors as they move onto new positions or retirement.

Dr. Georgeanna Klingensmith has worked at the BDC since 1995 and was the Pediatric Director for 15 of those years. In that time, she helped thousands of children through the pediatric clinic and research. She stated, “to be entrusted with helping parents care for their children is the greatest privilege I know.” Dr. Klingensmith also loved teaching young pediatric endocrinologists to be the academic and research leaders of the future, a job that gave her great joy. We will miss Dr. Klingensmith at the BDC, but know she will love the extra time to visit her children and grandchildren and to travel with her husband, Bill.

Dr. Jennifer Raymond was selected to be the Diabetes Director at Children’s Hospital Los Angeles beginning this past summer. While she will continue some of her research efforts at the BDC, she will be making a huge difference for the underserved populations in Southern California. Dr. Raymond thanks all her patients for the opportunity to work with them and said she “can’t think of a higher honor than being the doctor for patients and families with type 1 diabetes.”

Dr. David Maahs has been an impactful part of the Barbara Davis Center’s Pediatric Clinic for the past 10 years. He was the principle investigator for multiple studies, including the artificial pancreas, kidney complications, behavioral studies, and prevention of type 1 diabetes. Along with Dr. Chase, he co-wrote the infamous Pink Panther Books. We will miss Dr. Maahs in the pediatric clinic and research division, but he will be a great addition to the Stanford Medical School as their Section Head of Endocrinology and Diabetes.
The Guild of the Children's Diabetes Foundation held its Brass Ring Luncheon Kickoff for more than 120 attendees on June 16 at a beautiful home in Cherry Creek. The space was graciously offered by Jeff Hendley, a Realtor with LIV Sotheby's International Realty. Attendees enjoyed hors d'oeuvres from local restaurants including sushi from Matsuhisa Denver and sandwiches from Postino. After, guests indulged in a tasty cone from Little Man Ice Cream. Coyote Gold also provided specialty margaritas for everyone to enjoy.

The Kickoff created much excitement for the Brass Ring Luncheon, which will be held on Friday, November 18th at the Denver Marriott City Center. The event will feature an exquisite fashion show presented by Garbarini as well as extensive live and silent auctions. The event honors children with type 1 diabetes by having them speak and walk the runway.

Wendy Aiello, Brass Ring Luncheon Chair, thanked everyone who has already secured their table at the event and those who are making the Kickoff possible. Tangy Buchanan, The Guild's President, showed her excitement to be helping the Children's Diabetes Foundation and the Barbara Davis Center through the Brass Ring Luncheon.

Dana Davis, Executive Director of the Children's Diabetes Foundation, expressed sincere thanks to all members of The Guild for putting their hearts into our cause because they are making a true difference for Barbara Davis Center families.

The Brass Ring Luncheon will benefit The Guild of the Children's Diabetes Foundation, which supports initiatives such as the Helping Hand program (helping families-in-need with the financial burden of diabetes), scholarship program for patients with type 1 diabetes, and family fun events that connect families affected by type 1 diabetes.

1. Deidre Hunter & Suzie Sparling; 2. Garbarini Model.
3. Wendy Aiello - Chair of the BRL; 4. Susie Hummell, Gina Abou-Jaoude, Ana Reinhardt.
5. Kickoff attendees.
REEL 'EM IN!
4TH ANNUAL FLY FISHING DAY FOR BARBARA DAVIS CENTER FAMILIES

Barbara Davis Center patients and their families recently joined the Children's Diabetes Foundation and the High Plains Drifters for the 4th Annual Reel 'Em In Fly Fishing Day.

Over 50 kids headed up to the Buchanan Recreation Center in Evergreen, Colorado to practice their fly fishing skills which included informational sessions on proper casting, fly tying, and fishing on one of the two ponds on the property.

The first catch came early in the day with 12 year old Tamaya reeling in her first fish with her grandfather Frank and little sister Amarri looking on. The fishers had the opportunity to work with club mentors to hook their own fish before heading in for lunch and fun door prizes.

 Afterwards, many kids persistently worked on their casting for their chance to catch a fish and for many, their patience paid off!

Date and location for next summer's fishing event will be released in early 2017.

HIGH HOPES GOLF TOURNAMENT

The 8th annual High Hopes Golf Tournament, benefiting The Guild of the Children's Diabetes Foundation was held on July 28th at the Meridian Golf Club in Centennial, Colorado. The tournament, sponsored by NexGen Resources (Charlie & Judy McNeil), was attended by many returning players, as many as new teams. As golfers checked in, they were welcomed with gift bags, hats and custom fitted golf gloves.

Players quickly went out to warm up in hopes of “cashing in” on contest holes including a $10,000 cash prize, provided by Gary and Sally Newcomb, and a 2016 Mustang or Volkswagon, from O'Meara Ford. It was a great day as the players took the course with a shotgun start.

To conclude the day, players shopped the fabulous silent auction and enjoyed delicious food and beverages as the award ceremony commenced. Many congratulations were given to all the winners of the Scramble and, new to the tournament this year, the Shamble.
A record number of scholarship recipients and their families joined us at the Cherry Creek Country Club on June 2 to celebrate the accomplishments of high school seniors and college students who are currently patients at the Barbara Davis Center (BDC). The Guild of the Children’s Diabetes Foundation proudly awarded 20 scholarships.

The scholarship program was established in memory of past Guild President, Charlotte Tucker, who encouraged young people from the BDC to pursue higher education. The Guild was able to award $4,000 scholarships to 20 students.

Reception Chair, Stephanie Babbitt, welcomed recipients, families and guests. Guild President Tangy Buchanan voiced congratulations to the recipients and turned the program over to guest speaker and local author of the book “A Chick in the Cockpit,” Erika Armstrong. After years of focus she made it to the captain’s seat of a commercial airliner. Erika encouraged the students to “let their dreams take flight.” Lori Finch, Scholarship Selection Chair, then introduced recipients and Tangy presented each with a certificate of recognition. Students then spoke about their plans to attend college and recognize key people who helped them achieve this award.

A special thank you to Stephanie Babbitt, who served as Scholarship Reception Chair. Also to our Selection Committee – Tangy Buchanan, Ron Carda, Lori Finch, Jen Findlow, Helen Hanks, Warren Hanks, Beth Harris, and Jan Livingston.
THE GUILD

SCHOLARSHIP OPPORTUNITIES FOR 2017-2018

The Guild is always proud to award scholarships to high school seniors and college students who are current patients at the BDC. Applications for the 2017-18 school year will be available in February 2017. Patients who are college or trade school bound will be notified regarding applications. If you do not receive information or have questions, please contact Susie Hummell at the CDF office after February 15, 2017 at 303-628-5109 / 800-695-2873 or email Susie@childrensdiabetesfoundation.org.
The 2nd Annual Run for the Ring 5K & Kids’ Fun Run, presented by Mercedes-Benz, brought nearly 200 people together to run for the brass ring – the cure. After grabbing breakfast and a Run for the Ring performance t-shirt, runners lined up behind a new Mercedes-Benz E Class MY17 to launch the race. Whether they ran, walked, biked, or danced, everyone enjoyed the course along the beautiful Anschutz Medical Campus. After the race, the crowd gathered for medal presentations to cheer on those who took the honors.

But the fun didn’t stop there! Runners and their families got balloon animals, jumped in inflatables, had their faces painted, enjoyed snow cones, and visited with a variety of vendors. Younger kids also enjoyed a pedal car course, featuring mini Mercedes-Benz cars. They also had the opportunity to tour the Barbara Davis Center to learn more about their clinical care, programs, and extensive research.

For the kids’ 1/16 of a mile track, the runners ran for 40 minutes and got a tag for each lap they completed. The young runners were cheered on by families and friends as they sped through inflatable arches, misters, and hydration centers. The DJ was on hand so they could dance their way through the course too. A few kids even ran this race after running the 5K with their family members.

It was an amazing day and fun for all! We would like to thank Mercedes-Benz of Littleton, Westminster, Denver and Longmont for supporting the event and continuing to help our community.

Photos: © Steele Style Shots
Over five hundred participants from throughout the United States, New Zealand, China, Germany, Canada, and the United Kingdom attended this year’s ATDC Conference, July 14-17 at the Keystone Resort and Conference Center in Keystone, Colorado. Conference Director, Satish K. Garg, and Marian Rewers once again assembled an outstanding roster of renowned diabetes experts, who along with BDC healthcare staff presented the most up-to-date information on type 1 and type 2 diabetes.

This year’s industry-sponsored workshops and dinners were offered by Medtronic Diabetes, Sanofi U.S. Inc., Omnipod, Novo Nordisk, Johnson & Johnson Diabetes Care Companies, and Dexcom, Inc.

We extend our gratitude and appreciation to our educational grant, supporting sponsors, and educational support exhibitors (listings are in order of support levels):

**EDUCATIONAL GRANT SUPPORTERS**
- Sanofi-Aventis U.S.
- Dexcom, Inc.
- Medtronic Inc. Diabetes

**SUPPORTING SPONSORS**
- Novo Nordisk Inc.
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- Omnipod
- Tandem Diabetes Care
- Lexicon Pharmaceuticals
- Lilly USA, LLC
- BD Medical/Diabetes Care

**EDUCATIONAL SUPPORT EXHIBITORS**
- AstraZeneca
- Abbott Diabetes Care
- Cumberland Hospital

Continued on next page.
Join us for the 2017 ATDC Conference which will be held July 13-16 at the Keystone Conference Center in Keystone, Colorado. You may register through our online registration process beginning this fall: www.regonline.com/ATDC.
On July 11, the Tied to a Cure Denver Golf Tournament started off another year of golf tournaments benefiting diabetes research at the Barbara Davis Center. Over 100 players gathered at the Pinehurst Country Club on a day with perfect weather for a round of golf and an enticing silent auction. Players were greeted with Jack Link's Jerky, golf balls, tees, cigars, and a gift card to the Pinehurst Pro Shop.

Before teeing off, DJ and Ed Smith spoke to the golf players about type 1 diabetes. DJ was diagnosed with type 1 diabetes in 2011 and since then, he has educated people about what diabetes is and the daily management it requires. He claims that everyone with type 1 diabetes knows the date they were diagnosed because it's the day your life changes completely. DJ's dad, Ed, showed the many supplies type 1 diabetes requires and explained the high cost of staying healthy. They hope that one day, a cure for diabetes will be found so that DJ doesn't have to carry around his diabetes supplies and take artificial insulin every day.

The Tied to a Cure golf tournaments are chaired by Michael McDonald of McDonald Automotive, Todd Schieck of M&N Aviation, and Dan Fuller of Haley Custom Homes. The Children's Diabetes Foundation is very thankful for their passion of raising money for diabetes research so that a cure can be found.

The Children's Diabetes Foundation would like to thank the many generous sponsors of the Tied to a Cure Denver Golf Tournament, including McDonald Automotive, Dobizlo, Accelerated Logistics Auto Transport, and Siegel Oil, among others.

Since 2010, the Tied to a Cure Golf Tournaments have raised over $2 million for diabetes research at the Barbara Davis Center.

Interested in attending McDonald Automotive's Tied to a Cure Las Vegas Golf Flyaway? Visit www.childrensdiabetesfoundation.org/event/las-vegas-golf/ or contact Amanda Garrett at 303-628-5112 or Amanda@childrensdiabetesfoundation.org.
Keaton has lived with type 1 diabetes for 4 years. After getting a shot, Keaton always says,

"I'm the bravest of the brave!"

The Barbara Davis Center hopes to one day find a cure for Keaton.


SCHEDULE YOUR DONATIONS STARTING NOV. 1
www.ColoradoGives.org/CDF
UPCOMING EVENTS

OCTOBER 8  The Carousel of Hope
   The Beverly Hilton Hotel, Beverly Hills, CA
   This star-studded gala is an incredible evening of entertainment that raises awareness and funds for CDF.

OCTOBER 23  Boo Bash
   Colorado School of Mines
   A spooky party for BDC patients (ages 12 and under) and their families.

OCTOBER 27-28  Tied to a Cure Las Vegas Golf Flyaway Tournament
   Shadow Creek Golf Course
   Enjoy an overnight excursion to Las Vegas for a game on the exquisite Shadow Creek Golf Course.

NOVEMBER  Diabetes Awareness Month
   There's no better time to spread awareness and education for diabetes. Check our social media to share our messages!

NOVEMBER 14  World Diabetes Day
   A day to recognize the strength and courage of those living with diabetes around the world.

NOVEMBER 18  Brass Ring Luncheon
   Denver Marriott City Center
   Denver’s premiere fashion event, complete with silent and live auctions and a delicious lunch.

DECEMBER 6  Colorado Gives Day
   Donate to CDF at www.coloradogives.org/cdf to increase the value of your gift. Donations can be scheduled starting November 1.

JOIN MONTHLY CDF SUPPORT GROUPS

You are not alone with diabetes and support groups are the perfect opportunity to realize this by connecting with other individuals and families who are affected by type 1. Whether you are newly diagnosed or have been doing this for years, it is always great to meet people who understand what you are going through and to connect with the diabetes community. All are welcome — friends, adults, parents, children and teenagers, and other family members.

Meetings will typically be the first Wednesday of every month. To receive information about CDF Support Groups, visit www.childrensdiabetesfoundation.org/support-groups. If you have any questions, contact Mattie Peck at 303-628-5106 or Mattie@ChildrensDiabetesFoundation.org.

TO LEARN MORE ABOUT CDF EVENTS, VISIT
WWW.CHILDRENSDIABETESFOUNDATION.ORG/OUR-CALENDAR
Is there any new information on a faster-acting insulin?

This is a good question. It is important for all people with diabetes who use a rapid-acting insulin (Humalog, NovoLog, Apidra) either by injections or in an insulin pump. As emphasized in all of our educational books, blood sugars peak 60 minutes after a meal, but the activity of these insulins does not peak until approximately 90 minutes after giving the insulin bolus. Thus, for optimal glucose control, current insulin must be administered 20-30 minutes prior to eating (this is most important with the morning meal, but relates to any meal in which blood/CGM sugar levels exceed 180 mg/dL after eating). The current plan with the initial Artificial Pancreas will be to recommend people pre-bolus prior to meals (thus calling it a “Hybrid” Artificial Pancreas). The use of various pre-bolus times, depending on the pre-meal blood glucose level, is discussed in Chapter 6 of the new 3rd edition of our book, Insulin Pumps, Continuous Glucose Monitors and the Artificial Pancreas (available at www.ChildrensDiabetesFoundation.org/books).

The good news is that a new faster-acting insulin from NovoNordisk called, “NovoRapid” is in the works. In patients with type 1 diabetes who took the new insulin just prior to eating, it lowered blood glucose levels by 24 mg/dL two hours after eating in comparison to the usual NovoLog. It is thus better than current insulins, but perhaps still not quite as rapid as desired. More work is needed to find the ideal ultra-rapid acting insulin. It is not currently known when the NovoRapid insulin will be commercially available.

I recently read that glucose values from the Dexcom continuous glucose monitor (CGM) were approved by an FDA panel for insulin dosing. Why is that important?

Previously, only blood sugars were approved for insulin dosing. Yet, most people using a CGM were using the CGM values for insulin dosing and management. So in part, it is just the FDA catching up with what is happening in real-life. The approval acknowledges that the Dexcom CGM values are now essentially as accurate as blood sugar values.

The approval may also be important in relation to insurance coverage. Some companies are currently reluctant to cover the CGM sensors, whereas others are “seeing the light,” and making sensors available with no co-pay. If a person does 8 blood sugar sticks per day, and the strips cost $1 each, the cost (with no insurance) would be $240 per month for a total of 240 values. If a person “reuses” each CGM sensor one time, and allows it to work for two weeks (2 sensors/month), the cost would be about $200 per month (with no insurance) for 8,640 CGM glucose values in the month (2.3 cents per determination). The improved glucose control with consistent CGM use saves money in preventing the acute and chronic complications of diabetes. There is a small additional cost related to CGM in that calibrations must be done using a blood sugar strip. Although Dexcom recommends two calibrations per day, many people now do only one calibration, usually first thing in the morning.

We still advise use of blood sugar strips to confirm and treat hypoglycemia. The CGM subcutaneous readings are usually ≈ 7 minutes behind the blood glucose value. With a rapidly falling or rising value, the difference may be even greater. The CGM value may lag behind the blood glucose value during treatment, causing the person to consume more carbs than needed. Try to use the “Rule of 15” (pg 46 in Understanding Diabetes) when treating hypoglycemia.
As the summer winds down, millions of children and teens get ready to go back to school. While most of us plan ahead for clothes, school supplies, and books, how many parents plan ahead for an important decision that children must make every day at school: What do I eat for lunch?

While it is easy for us to regulate what our children eat when they are young, we cannot always control the in-class birthday parties, candy-based fundraisers, and mid-day snacks. Studies have shown that the habits we start during childhood and adolescence often carry on into adulthood. So while we prepare our children to succeed in the classroom, we also need to start preparing them to succeed in the lunchroom.

**Review weekly lunch menus**

The National School Lunch Program requires that the meals offered in most schools must have a certain amount of calories, fat, saturated fat, vitamin A, vitamin C, calcium, and iron. It may surprise you to learn that many foods fit into these guidelines, including chicken nuggets and tater tots.

Sit down and review the weekly or monthly lunch menu with your child. Discuss which foods are liked and why certain foods are perhaps healthier choices than others. After talking about it, come to an agreement for each meal and have your child circle the selection. Even small decisions can make a huge impact, such as choosing regular milk instead of flavored milk, which has added sugar.

Studies have shown that when you involve children in the decision-making process, they are much more likely to actually perform the desired activity. In this case, that means selecting a healthier lunch!

**Know the school’s policy on snacks**

If your child is just starting at a new school or if major changes have happened from year to year, visit the school and ask how snacks are handled.

Ask these questions:

- Are breaks provided in the morning where children can bring in snacks?
- Are children allowed to snack in class?
- Are vending machines accessible to children between classes?
- Does the school have numerous fundraisers that focus on selling candy or chocolate to students?
- Are specialty snack bars available in the lunchroom, which may tempt children to avoid the regular lunch line in favor of less healthy alternatives?

Knowing the policies can help you plan for and deal with them. For example, you could provide your child with a healthy snack for breaks or discuss with your child which snacks are healthier at the vending machines and snack bars. If you are really unhappy with your school’s current food and snack policies, get involved in the Parent-Teacher Association to promote nutrition awareness through policy changes and/or education of teachers, staff, and administrators. No one knows a problem exists unless you tell someone.
Pack your own healthy lunch and snacks

The best way to positively impact food decisions is to make sure you provide a nutritious lunch and snacks each day, foods you know your child will want to eat. Lunch often is packed without the child’s input. You pack a healthful lunch, thinking that your child will eat well while at school. Instead, your child gets to school, trades your banana for a mini candy bar, eats some of a friend’s chips, buys a soda, and then throws the rest of your lunch away.

Before packing anything, ask your child what to include. The child may answer “chicken nuggets.” Explain why chicken nuggets are not the best option and maybe some small pieces of grilled chicken cut up into “nuggets” with a side of barbecue sauce would provide a healthier choice. Have your child help you make the “nuggets” with some small cookie cutters. If you want to help assure your child will eat what is packed, involve your child in making the lunch.

Ask your child what types of fruits and vegetables to pack. Cut those fruits and vegetables up into easy-to-eat pieces, such as apple slices (with a little lemon to retain the color), grapes, pineapple chunks, baby carrots, string beans, etc. Put the snacks in a plastic bag, so they are easy to access and eat during the day. Sometimes the difference between a child eating an apple and not eating it is simply slicing it up.

Finally, give your child something sweet. We are all born liking sweet-tasting foods, so offer your child something that will satisfy this craving, so it is not necessary to go looking for it elsewhere. A few Hershey’s Kisses, a couple of mini-sized pieces of chocolate, a box of raisins, or even some dates/figs are great options.

Set an example at home and at school

While it is great that we try to have our children eat healthy during the day, if they come home to fast food and pizza most evenings, we are sending them mixed signals. We must set an example of healthy eating at home before we can expect our children to make healthy choices when we are not with them.

Most children and even most teens, even if they will not admit it, tend to follow the habits of their parents. So, how good are your nutrition habits? Taking the time to plan and prepare healthier meals at home will not only impact you, but will benefit your child and the entire household. You also can get your child in the habit of trying new foods by cooking, which is important for good health. Most children establish their eating habits by around 6 years of age, so if they are used to trying new foods, they probably are more receptive to trying healthier alternatives during school lunches. On the other hand, if they have grown up eating chicken nuggets, hot dogs, and tater tots, the green beans sitting on their lunch tray probably do not look appetizing.

Teach moderation at home, so children can practice at school as well. If they learn that a treat or snack involves only a couple cookies or a small handful of chips, rather than the whole bag, those habits will carry over when they are given treats in school for birthdays, fund-raisers, and rewards for doing well in class, such as pizza parties.

Finally, try to educate your children about health. You can practice this way:

• **Math**: If there are 4 grams (g) of sugar in a packet and 32 g of sugar in this bottle of soda, how many sugar packets are you drinking?
• **Science**: Do you know that clogged arteries can impact your heart and blood flow? Demonstrate this by using plastic tubing, lard, and some red-dyed water.
• **History**: Of the foods we eat today, which are native to North America?

Follow these tips and your child’s eating habits will be great at home, at school, and later in life!
On our social media pages, we asked people:

What is your most prominent low blood sugar symptom?

Check out the variety of answers we got:

- Super tired is my first clue! –Jeri
- Shakiness, headache, hungry, tingles in my feet, sudden mood change, light headed, blurred vision, cold sweats, and confusion –Holly
- My daughter shakes, sweats, and gets headaches. If she is really low I notice that she starts to space out. (She never notices when that happens, but I do) –Heather
- My chest starts hurting from my heart beating too fast and then I feel very weak and start sweating. I also sometimes hallucinate when I’m reeeeaallly low. –Martyn
- I yawn over and over –Stephanie
- My heart beats very hard and I feel spaced out. –Stacy
- My son says he is starving! –Monica
- Sweating and hunger. Oh, and people’s voices sound really far away. –Robyn
- My daughter (8 years) gets shaky and her eyes get blurry –Rosa
- Our daughter tends to get flushed cheeks when she’s low. –Dee Dee
- Usually I get really hot and lose my temper –Nicole
- Usually I start to feel anxious and can’t think as clearly –Connie
- Profuse sweating followed by jello legs –Jeremy
- I get shakey and feel super hyperish –Lydia
- Shakey, hungry, mood change –Katie
- I start sweating and parts of my body start to go numb –Sharece
- Knee pains and laughing at everything –Sara
- The area around my lips feels numb –Alice
- My hands get numb! –Dana
- Shaking and weak –Kim
- Uncontrollable shaking –Freddy
- Feeling nauseous –Renee
- Shaking, dizziness, hungry –Erin
- Disorientation –Stephen
- Very weak and dizzy –Magan
- A lot of the time, I can tell just by looking at my daughter’s(8) face. She gets dark circles, flushed and sweaty. –Kristin
- I get super fixated on tasks and refuse to stop. It’s obsessive. When I force myself to stop I’m always very low! –Marybeth
- Double vision –Angeline
- I feel like everything is moving very slow, like I’m in the world but I’m not. And then I start to feel like an anxiety attack. –Jessica
- My little guy is only 20 months old. I can notice he’s low by 2 things- his eyes get puffy and the way he cries. –Jessica
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If you would like to submit an article or a letter to NewsNotes send information to: Mattie@childrensdiabetesfoundation.org

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