COMMUNITY RESOURCES:

FREE DIABETES EMERGENCY NECKLACE
Send a self-addressed, stamped envelope to:
Free Diabetes Necklace, Diabetes Research and Wellness Foundation
PO Box 96046, Washington, DC 20090-6046

CHURCH HEALTH AND WELLNESS CENTER
Free diabetes classes offered on second Saturday of each month.
901-259-4673

JDRF WEST TENNESSEE CHAPTER
JDRF is the leading global organization funding Type 1 diabetes (T1D) research. Our strength lies in our exclusive focus and singular influence on the worldwide effort to end T1D. Contact JDRF for more information:
901-861-6550

AMERICAN DIABETES ASSOCIATION
1-800-342-2383

MEMPHIS FIT KIDS
A free online grant-funded program that assists families in recognizing children’s health habits. Go online to memphisfitkids.org to find out more information.

WARM LINE
The Parent Support Warm Line is a free, live telephone line that connects parents with trained professionals who provide practical information, guidance and emotional support. The goal of the Warm Line is to help parents navigate stressful situations in order to help young children and teens flourish physically, socially and emotionally. The Warm Line may be reached Monday-Friday from 11 a.m. to 8 p.m. CST. Call 844-UPP-WARM

MENTAL HEALTH RESOURCES
Youth Villages/Youth Mobile Crisis: 1-866-791-9226
Memphis Police Department/Crisis Intervention Team: 901-545-2677 or 9-1-1 for more information.

WHAT’S HAPPENING: Upcoming events

JDRF ONE WALK
Oct. 7 at 10 a.m. at Shelby Farms
Go to www.walk.jdrf.org.

FAMILY FUN DIABETES RETREAT
Oct. 27-29, Camp Courageous Kids
Go to www.thecenterforcourageouskids.org/schedule.html

ADA DIABETES EXPO
Coming to the Memphis area soon!

NOVEMBER IS DIABETES AWARENESS MONTH

BACK TO SCHOOL
By Christy Foster, MD, Pediatric Endocrinology Fellow

I have always loved this time of year. I remember dragging my parents to the store to pick out the perfect folder, notebooks and pens to get ready for the next year. Planning for my first-day-of-school outfit was always key to start the school year off right. For those with diabetes, this time of year can require other unique planning as you get ready to go back to school.

As another resource, you will want to talk with your school counselor or vice principal to discuss a 504 plan for your child. This gives you the ability to talk about your child with those most directly involved with your child’s care, including teachers, bus drivers and PE coaches. As an example, this can help provide your child with the ability to have extra time on tests if needed during an episode of low or high blood sugar, as well as access to the restroom and water if necessary. For older children and teens who are responsible, you can also negotiate what supplies your child can have access to during the school day. It should also address who can be responsible for your child’s care if a school nurse is not available. Having this plan in place can decrease the fear that your child may be penalized for needing to receive treatment while at school. Your child has the right to take part in any after-school activities he or she wants. For your child to have the best school experience, be ready to use some of these tools to advocate for them.

Planning for low blood sugars and high blood sugars and having the needed supplies available can help everyone be prepared. Supplies to include in your box would be insulin, pen needles or syringes, pump supplies (for those on pumps), glucometers and test strips. Glucose tabs, glucagon and snacks should be included to treat low blood sugar.

First, you want to make sure that your child has an updated school care plan that you and your provider have agreed on, which will help your school nurse know how to take care of your child. This should detail how often your child checks his or her blood sugar and how to address any high or low blood sugars, as well as the insulin doses your child should receive with lunch and snacks if necessary. Ask for the nutrition facts for the provided school lunch or, if wanted, you can send lunch with your child. The school nurse will use this information to calculate the dose and administer the insulin your child needs.

ASK THE NURSE: Why do I need to wear a diabetes ID bracelet?
By Erica Davis, RN, BSN

It is very important that anyone with diabetes has identification on his or her body. In an emergency situation, there may not be anyone available to provide crucial information about your child’s diagnosis and treatment to those responding to the emergency situation. What needs to be on a diabetes medical identification bracelet or necklace? The star of life symbol is a universal symbol that emergency responders will look for to find information about specific medical needs. In addition to this symbol, the words on your child’s identification are also very important. Other optional information can include what type of diabetes your child has, if your child is taking insulin, if he or she is on a pump and an emergency contact phone number.

Diabetes bracelets do not have to be classic silver chain link bracelets. They come in all kinds of fashionable and affordable designs specific to each age group. Please take time to sit down with your child to find a medical identification that he or she likes and can be proud of wearing. Your providers want to stress the need for identification to ensure daily safety for your child.

Le Bonheur Children’s Hospital
848 Adams Avenue
Memphis, Tennessee 38103

Le Bonheur Health System

LeBonheur child

LeBonheur children

LeBonheur childrens

/lebonheur_child

Back to School

School Bus

My First Day of School

For your child’s best school experience, be ready to use these tools to advocate for them.
I am one of the registered dietitians in the Diabetes Clinic. I help patients and their families learn about food and nutrition and the important role it plays in diabetes management. You might see me teaching one of our diabetes education classes or for a follow-up visit during clinic. I love helping others learn more about their diabetes care and I am passionate about promoting healthy eating for a healthy lifestyle.

Outside of work, I enjoy staying active by riding my mountain bike, running, practicing yoga and attending workout classes at my gym. I also consider myself a bit of a “foodie,” so I am always excited to check new places to eat or try a new recipe at home. Recently, I got engaged to my wonderful fiancé, and we have been busy planning our wedding and honeymoon as well as buying our first home!

PATIENT SPOTLIGHT: Whitby Holden

I have had diabetes for three years. Every day presents a new struggle for me to face. I have managed this by doing what the doctors and nurses tell me to do and trying to stay on track. They know what is best for my health. Le Bonheur has been so good at guiding me along the way and making the best decisions for my health.

Tips for Carbohydrate Counting at School

1. Plan ahead. One way to prevent issues at school lunch time is to bring your lunch. This allows you to count the carbs before your child even leaves for school. If your child is skipping lunch at school often, look at the school’s menu and pack a lunch on days the school is serving something your child dislikes.

2. Determine at the beginning of the year who is responsible for counting your child’s carbohydrates. Is it the school nurse? Is it your child’s teacher? Is it mom or dad or another family member? It is always a good idea to identify who is responsible for the 504 Plan as well.

3. W hat advice w ould you give to som eone w ho has been recently diagnosed w ith diabetes? My advice would be to keep fighting. You are not alone in this fight, and there are others who understand your pain and struggles. The days might seem difficult, but the hard work definitely pays off.

4. Use your resources. It is important to understand your child’s right to receive education and participate in all school-related activities with reasonable accommodations. Every state has outlined laws in place for students with chronic illnesses for which school policies are developed. A great starting point for obtaining this information is the American Diabetes Association website, www.diabetes.org.

5. Tip 4: Decide on mode of communication and frequency. How often will you communicate about supplies? When do you want to be notified about blood glucose levels and how often? Do you want to communicate by phone, texting, email or even mobile applications or other software? These are questions that should be discussed and addressed in your conversations with the school nurse, school medical office.

6. Tip 5: Have a discussion with your child. Listen to your child’s needs and wants for his or her academic and social experiences. Discuss accommodation plans and expectations of your child’s active participation in his or her care.

All communication plans and processes should be outlined in your child’s 504 Plan. A 504 Plan defines the aids, services and modifications needed by your child for safe access to all school activities while meeting diabetes management needs. Information in the 504 Plan is shared with school administrators, nurses and teachers to address your child’s diabetes care needs while he or she participates in classroom education, field trips and extracurricular activities. If your child has an established Individual Education Plan (IEP), then it functions in the same manner as the 504 Plan relative to diabetes care.

Your diabetes educator is a liaison and advocate for you and your child. Ask your educator about resources for communicating with your school and your patient portal and clinic email.

CHIEF’S CORNER: Presence of early markers of adult heart disease in children with diabetes

Type 1 diabetes mellitus (DM) is an important risk factor for heart and vessel disease (atherosclerosis). Individuals with diabetes are at two to four times the risk for developing atherosclerosis. Recent studies in children and adolescents with type 1 DM have shown presence of early changes in heart vessels (coronary arteries) that predict premature adult heart events such as angina and myocardial infarction (heart attacks).

These early changes include a thickening of the inner linings of blood vessels and changes in blood flow. Because coronary artery disease begins as a generalized disturbance, affecting blood vessels throughout the body – not just the heart – simple, non-invasive ultrasound imaging of carotid and brachial arteries can help diagnose early signs of blood vessel disease. It has been shown that children and adolescents with type 1 DM and elevated blood cholesterol levels are at increased risk of reduced blood vessel function or thickened arteries.

It has been shown that high-dose folic acid treatment for two months improves blood vessel function in pediatric type 1 DM. To date, there have been few short-term studies evaluating the beneficial effects of cholesterol lowering drugs on blood vessel function in type 1 DM patients who also have elevated blood cholesterol. On the other hand, only two studies have evaluated the effect of cholesterol-lowering drugs on blood vessel function in type 1 DM patients who have normal cholesterol levels with similar results. Furthermore, pediatric diabetes and endocrinology centers are needed to assess the efficacy of high-dose folic acid and cholesterol-lowering drugs in preventing adult atherosclerosis.