

GLYCEMIC ROOTS

KEEPING DIABETES EDUCATORS CONNECTED

Waterloo Wellington Diabetes Newsletter

NEW

WaterlooWellington
DIABETES

At-Risk Renal Disease Prevention Initiative

In the aim of prevention, Waterloo Wellington Diabetes Central Intake (WWDCI) in collaboration with local community-based nephrologists, developed triage criteria for at-risk renal disease based on the recent KDIGO and Diabetes Canada CKD guidelines.

WWDCI is now screening all incoming diabetes referrals using this criteria starting with the Cambridge North Dumfries region, with the goal of expanding this initiative across all of Waterloo Wellington region in 2026.

If a referral meets the at-risk criteria (listed below), the referrer will receive a message via Ocean or fax to consider completing a "Specialist Only" referral requesting a nephrology consult to aid in prevention. This referral will be directed to the nephrologist closest to the person's home address.

At-Risk Renal Criteria

People living with diabetes who have **one** of the following:

- ACR \geq 2.0 mg/mmol (on 2 occasions within 12 months) OR
- ACR \geq 20 mg/mmol on 1 occasion

OR

Any **two** of the following criteria:

- eGFR 30-89 mmol/L (eGFR $<$ 30 mmol/L qualifies for referral through the Ontario Renal Network)
- Kidney failure risk equation score of \geq 3% in 5 years
- Retinopathy (non-proliferative, proliferative, or macular edema)
- Hypertension
- Obesity (BMI \geq 30)
- Obstructive Sleep Apnea
- Cardiovascular Disease (Ischemic Heart Disease, Heart Failure, TIA/Stroke, or Peripheral Artery Disease)
- Family history of kidney failure requiring dialysis and/or kidney transplant

** All referrals are reviewed by experienced CDE healthcare professionals. Triage decisions are individualized based on the available clinical information at the time of referral.

[Click here](#) to access a recent publication in The Lancet on the global and national burden of CKD

[Click here](#) to access the most recent Diabetes Canada Chronic Kidney Disease guidelines

[Click here](#) to assess the most recent KDIGO guidelines

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Diabetes Canada Conference Key Takeaways

1. Traditional Indigenous Medicines

- o Holistic whole person approach to care (vs treating one issue at a time), often includes plant medicines & ceremonies to reconnect, heal, and pass on traditional knowledge.
- o Dreams play an important role: show what is meant to be manifested, spirits showing you your path

2. Pancreatic Islet Stress

- o Beta cells uniquely susceptible to stress due to secretory role. Beta cells either adapt or fail when under stress. Dysfunction is present >5 yrs before diagnosis
- o Autophagosome clearance is impaired in beta cells (removal of damaged or toxic substances), increasing internal cellular stress
- o Investigating therapies to help protect beta cells from stress damage

3. Foundations of Incretin Therapy

- o Incretin therapies offer benefits beyond glucose control (cardiorenal, metabolic, PAD, alzhiemers, parkinsons)
- o GIP: neuroprotective, appetite supression, decreases inflammation, improves insulin secretion and beta-cell proliferation in mice
- o For those who can not reach full dose, 1/2 of recommended dose of GLP-1 therapy provides 75% of the benefits seen in clinical trials

4. Clinical Practice Guideline Updates

- o New special article on Diabetes Canada Methods for CPGs, [click here](#)
- o Chapter updates in the pipeline:
 - **2025:** organization of care, diabetes in pregnancy, older adults, diagnosis and classification
 - **2026:** nutrition, glycemic monitoring, T2D in children and adolescents, physical activity

5. Mitigating Muscle Loss with Incretin Therapy

- o Estimated 7kg lean mass lost/year on semaglutide (3kg is skeletal muscle mass)
- o Upon discontinuation, body weight is regained as both fat and muscle across the entire whole body
- o Important to do walking and resistance exercises to gain muscle mass while on GLP1 therapy and after discontinuation
- o 0.4 kg protein/kg/meal optimizes muscle protein synthesis

6. Early Detection and Management of CKD in Diabetes

- o Clinical inertia is only part of the issue for lack of early identification
- o Prevalence of eGFR < 60 ml/min & diagnosis of diabetes in Canadian Primary Care = 26.7%
- o Screen with urine ACR and serum creatinine yearly, currently only 13% of people with diabetes screened yearly

7. Critical Periods of Diabetes Risk

o Pediatrics

- T1D: diagnosis rates equal in girls and boys until age 20, then risk is higher for men (impact of sex hormone on autoimmunity & insulin resistance)
- Canada has the 5th highest incidence of T1D in the world

o Puberty

- Peak onset of T1D is age 12-14 due increase in insulin resistance, the greater the change in BMI during puberty the higher the risk of T2D

o Pregnancy

- Prevalence of GDM in Canada = 11.8%. In-utero hyperglycemia, fetal hyperinsulinemia & increased fetal lipid storage can increase beta cell stress and early failure in offspring
- Prolactin is protective to beta cell mass and insulin production

Diabetes Canada: New and Updated Resources

NEW

1. **Get the Facts on Fibre:** reviews the role of fibre in glucose management, digestion and heart health
2. **Protein and Diabetes** - explains protein's role in glycemic control
3. **Safety Tips for AID use** - includes tips on how to safely return to injection therapy and sick day management

UPDATED

1. **The Glycemic Index Guide** - expanded glycemic index list
2. **Basic Carbohydrate Counting**
3. **Getting Started: Healthy Eating and Diabetes** (formally Just the Basics)
4. **The Balanced Food Plate**

COMING SOON with QR codes

1. Pharmacotherapy Management of T2D
2. ABCDESSS
3. Sick Day Prevention and Management
4. Stepwise Approach to Insulin Regimes for People with T2D
5. Hypoglycemia



NanoSALV Catalytic

New Wound Care Product

NanoSalv Catalytic is an advanced skin and wound treatment that facilitates faster healing. It employs ultra-small, efficiency boosting catalysts that achieve optimal healing outcomes. NanoSALV reserach reports closing 77% of chronic wounds within 8 weeks. It is an easy to use liquid gel that is indicated for use on skin that is injured, inflamed and/or infected.

[Click here](#) to learn more



PRODUCT RECALL

Libre 3 Plus Sensor Recall

Health Canada has announced a recall of Abbott Freestyle Libre 3 Plus glucose sensors. A subset of Libre 3 Plus sensors may provide incorrect low glucose readings. If undetected, incorrect low glucose readings over an extended period may lead to incorrect treatment decisions for people living with diabetes. This could pose serious health risks, including potential injury or death. Please refer to the following Health Canada recall notice for affected product serial numbers, [click here](#)

Patients using Libre 3 Plus glucose sensors should be directed to locate their sensor serial number and visit either Health Canada recall notice above or www.freestylecheck.com to determine if their sensors are part of the recall. If the serial numbers match, patients should discontinue use, dispose of the affected sensor, and request a replacement with Abbott Diabetes Care customer service.

This recall affects approximately three million sensors made in the U.S. from a single production line and has been linked to seven deaths and over 700 injuries worldwide. Abbott Diabetes Care reports the issue has been identified and resolved. Abbott reports more than half of the affected sensors have expired or have been used. The issue is only related to the affected sensors and does not apply to the Freestyle Libre 3 reader or app or any other Libre products.



CDECB: New Portfolio System



The Canadian Diabetes Educator Certification Board (CDECB) is offering a new electronic portfolio submission system. You can continue to submit your portfolio through the paper based system or switch over to the electronic platform. The changes were made to improve the portfolio submission process.

In speaking with CDECB representatives, they provided more insight into the CDE designated renewal process. They explained that the CDECB exam is meant to assess introductory level knowledge for all areas of diabetes care and management. It is designed for first-time registrants.

The portfolio is designed for CDE renewals, as CDEs often specialize in given area of care and can cater their portfolio submission to their area of speciality while avoiding the stress of studying for an exam.

[Click here](#) to learn more

*****Remember registration to write the 2026 CDECB exam is due by Feb 1st!**



1. Connecting the Dots: An Update on Recent CKD, MASLD and Obesity Pharmacotherapy Guidelines

Virtual
January 19, 2026
8-9:15 pm

[Click here](#) to learn more

2. Beyond Prescriptions: Single & Dual GLP-1/GIPs, Nutrition and Health

In-Person or Virtual
Double Tree Hilton Toronto Downtown
January 30, 2026
8 am – 4:40 pm

[Click here](#) to learn more

3. Managing Diabetes In Ramadan

Virtual
January 26, 2026
6-7:30 pm

[Click here](#) to learn more

4. Parents Supporting Parents

Virtual or In-Person
Langs Community Health Centre
Feb 2, 2026 and May 25, 2026

For more information & to register:
call 519-653-1470 ext. 285 or
email: paeds@langs.org

5. Charles H. Best - State of the Art Management of T1D in Adults

Virtual or In-Person
Hilton Toronto/Markham Suites
Conference Centre
April 17, 2026

[Click here](#) to learn more



If you were not able to attend the Dec 4th webinar "Integrating Indigenous Learnings into Clinical Practice", you can watch the video recording [here](#).

Want to learn how the **Self-Management Program** can benefit you, your patients & program? Contact Kyla at kylap@langso.org or call 519-947-1000 ext. 265

NEW

Regional Programs and Services



Health Care Connect & Primary Care Access



St. Mary's Health Foot Care Clinic

St. Mary's Health is a healthcare organization affiliated with St. Joseph's Health System, that is committed to providing compassionate, community-based care and supports to improve access to preventative health services.

St. Mary's Health has recently launched a **free foot care clinic** based in Kitchener but open to all (no geographical boundaries for acceptance).

Services offered by Footcare Certified RPNs:

- Toenail trimming & filing
- Callus and corn care
- Diabetic foot checks and foot health assessments
- Education on foot hygiene, foot care and proper footwear
- Screening for circulation or skin issues

*** People with more advanced wound care needs will be directed to follow up with their primary care provider or directed to urgent care

Clinic details:

St. Joseph Church
148 Madison Ave S, Kitchener
Free parking, walker and wheelchair accessible

Dates: Tuesdays and Thursdays, 10 am-4 pm from December 16, 2025-March 31, 2026.

They are hoping to offer the clinic after this date. This will be determined by the response rate. **To book an appointment call:** 1-877-611-0669



St. Joseph's
HEALTH SYSTEM

Virtual Urgent Care

St. Joseph's Healthcare Hamilton offers virtual urgent care services to people living in southwestern Ontario with an urgent medical issue that is not life threatening. The www.urgentcareontario.ca services are only for individuals who cannot see their family doctor due to availability or they do not have a family doctor.

Nurse Practitioners offer same-day or next-day virtual appointments, with referrals arranged if in-person care is required.

[Click here](#) to learn more about adult services

[Click here](#) to learn more about pediatric services

Wishing you a wonderful holiday season!

Trina



Health
Care
Connect

Looking for a family doctor?

ontario.ca/healthcareconnect



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