

MAY 2024 - ISSUE 3

# GLYCEMIC ROOTS

## KEEPING DIABETES EDUCATORS CONNECTED

Waterloo Wellington Diabetes Newsletter

## Engaging Indigenous Peoples in Health Decisions

It is well documented that Indigenous Peoples have an elevated risk of diabetes. Statistics indicate diabetes is diagnosed at younger ages with more severe symptoms at diagnosis, higher rates of complications, and poorer treatment outcomes for Indigenous Peoples.

Diabetes Canada recommends that HCPs engage in a purposeful process of learning and continuous self-reflection to integrate an Indigenous person's preferences, cultural resources and traditional approaches to care within the clinical approach to diabetes management.

Interconnectedness is a core belief of Indigenous Peoples. It reflects the awareness that everything in the universe is connected and has an important place in one's life purpose. Building relationships is an important first step before knowledge translation can take place.

As HCPs, we need to build an understanding of Indigenous health beliefs and determine ways that traditional healing could be included in our healthcare organizations to help support Indigenous communities. The "*two-eyed seeing*" approach emphasizes the importance of acknowledging the strengths of western medicine and indigenous ways of knowing without one dominating the another.

To learn more, access the e-module on caring for Indigenous Older Adults in Waterloo Wellington - click [here](#)

## This Issue:

Engaging Indigenous Peoples  
in Health Decisions

Page 1

NEW - Cardiovascular  
Prevention Clinic  
NEW - Liver Health Clinic

Page 2

Immunotherapy and T1D risk  
& Upcoming Events

Page 3

DiabetesFIT Program &  
Diabetes Educator  
Collaborative Meeting

Page 4





NEW

## Cardiovascular Prevention Clinic

St. Mary's General Hospital, supported by Manulife, has opened the **PREVENT (Prevention Not Events) Clinic**. It is a multidisciplinary, risk factor reduction program for **PRIMARY PREVENTION** of cardiovascular disease. It is located at the St. Mary's General Hospital Cardiac Rehab Clinic at The Boardwalk in Waterloo, Ontario. The multidisciplinary team includes nurse practitioners, registered kinesiologists, exercise assistants, registered dietitians, clerical staff, smoking cessation counselling from a respiratory therapist, and social work support.

Referrals can be made for patients living in the Waterloo Wellington region by a primary care provider (physician/nurse practitioner), an emergency department physician/nurse practitioner, hospitalist, or CDE.

A patient must be deemed high or at increased risk of developing cardiovascular disease, with two-three documented sub-optimally controlled modifiable cardiac risk factors. This may include poorly controlled hypertension, hyperlipidemia, type 2 diabetes, current smoker, or family history of early-onset coronary disease in a first degree relative.

A nurse practitioner will provide a clinical assessment, and where appropriate, initiate evidence-based, preventative medical therapy for the management of diabetes, hypertension and dyslipidemia, based on national guidelines. The first visit will be in-person and the remainder of sessions can be offered in-person or virtually depending on the patient's preference.

Patients will receive an individualized exercise prescription by a registered kinesiologist, and may be invited to join the on-site exercise classes for up to 3 months. If needed, patients will also receive guidance on evidenced-based diet modifications, and smoking cessation counselling.

To learn more about the program, click [here](#)

To access the referral form, click [here](#)

OR e-referral is available on Ocean

NEW

## Liver Health Clinic

Cambridge Memorial Hospital's Regional Liver Health Clinic accepts physician referrals for advanced liver disease from within the Region of Waterloo and Wellington County.

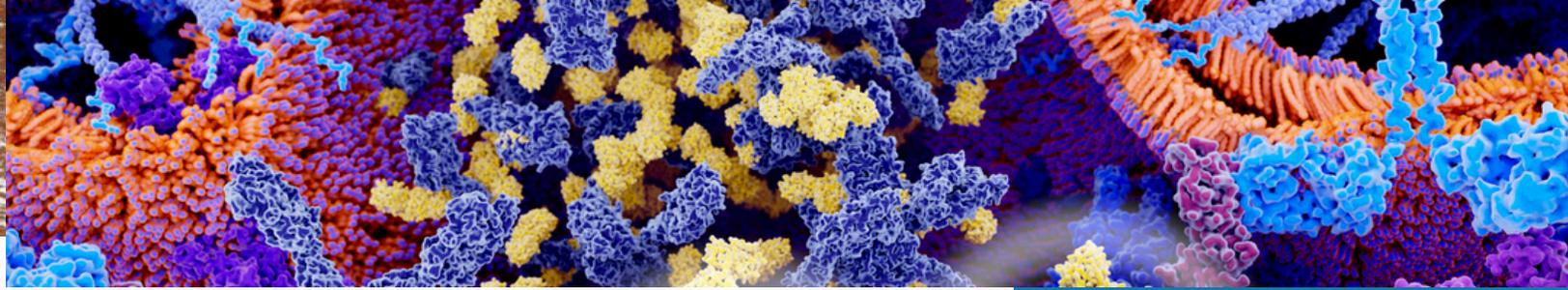
Referrals are accepted for advanced cirrhosis, acute hepatitis, and metabolic-associated fatty liver disease, among other liver disorders.

All diagnostics are done on site, in one location to provide patients with a diagnosis, treatment and management plan.

Care is provided by a multidisciplinary team which includes: Hepatologist, Nurses, Dietitians & Social Work

Referral forms are available on Ocean or [here](#)  
To learn more about the clinic click [here](#)





## Immunotherapy and T1D risk

Advancements in cancer immunotherapy treatments have shown encouraging results for many different malignancies.

One type of immunotherapy which is increasing in use is Immune Checkpoint Inhibitors (ICI). They work by disrupting the inhibitory signaling to T-cells, potentially activating an anti-tumor response.

Examples of these types of drugs are: atezolizumab (Tecentriq), pembrolizumab (Keytruda) and nivolumab (Opdivo).

As this area of therapy continues to grow, clinicians will need to manage the immune-related adverse events that are associated with this class of medications. Although relatively few patients develop an adverse autoimmune event, diabetes educators need to be aware there is a risk of these patients developing type 1 diabetes.

The underlying pathogenesis is unclear. It is thought since pancreatic islet cells express PDL1, which ICI inhibits, this could lead to the activation of autoreactive CD8+ T-cells, causing T-cell mediated pancreatic islet cell destruction.

Evidence is limited. Approximately 50% of reported cases of ICI-related autoimmune diabetes show no detectable autoantibodies.

It has been suggested that patients should have their A1C, FBS, thyroid panel, GAD antibodies tested prior to starting ICI therapy, to try to identify those at higher risk.

Oncology clinics need to monitor glucose levels in these patients, know the early signs of DKA, and consider starting insulin for hyperglycemia.

Patients started on ICI therapy need to be educated on the signs and symptoms of hyperglycemia and report symptoms to their oncologist or primary care provider.

To read more about this topic, click [here](#)

## Upcoming Events

1. **Lawson Centre Nutrition Digital Series: Low Carb/Ketogenic Diet Virtual Session**  
May 30th or June 6th, 2024  
4:30-5:30  
Click [here](#) to register

2. **American Diabetes Association Scientific Sessions**  
Virtual or In-Person  
Orlando Florida  
June 21-24, 2024  
Click [here](#) for more information  
Click [here](#) to register

3. **ADCES 24**  
In-Person Aug 9-12, 2024  
New Orleans, LA, USA  
OR  
Virtual On-Demand  
Aug 26-Oct 28  
Click [here](#) for more information  
Click [here](#) to register

Want to learn how the **Self-Management Program** can benefit you, your patients & program? Contact Danielle at [danielleh@langs.org](mailto:danielleh@langs.org) or call 519-496-7231

Cancer immunotherapy

## Diabetes Fit Program

*Change your life one step at a time*

Diabetes Fit is a **free**, evidenced-based program for individuals at risk of, or living with diabetes offered by YMCA of Three Rivers (Cambridge, Guelph, Kitchener, Stratford and Waterloo). The overall goal is to support participants to adopt and maintain a healthy lifestyle. There is a specific focus on overcoming physical activity barriers, building confidence and competence to exercise and increasing health eating behaviours within a supportive community based setting.

This small group program (8-14 participants) runs over 12-weeks with one 90-minute group session per week. Each class includes education, smart goal setting and exercise. The education focusses on exercise principles, nutrition, and stress management.

Registered Dietitians provide nutrition education. Participants complete aerobic and strength training at an appropriate pace & intensity, supported by qualified exercise professionals. Modifications are available for participants of all fitness levels. Participants are encouraged to be active outside of the program with a focus on daily step counts.

The program is offered virtually or in-person.  
If you feel this program would be a good fit for your clients:  
access the schedule [here](#)  
access the registration form [here](#)

For inquires about the program, please email  
[wellness@ytr.ymca.ca](mailto:wellness@ytr.ymca.ca) or call **519-743-5201**  
ext. 2113

This program is made possible through support from Sunlife.



For those writing the CDE exam May 23-25, Waterloo Wellington Diabetes wishes you success.

Have a joyful and fun-filled summer!

*Trina*

Hello   
Summer

## Diabetes Educator Collaborative Meeting

Our first meeting was held May 8, 2024 in Kitchener, with Dr. Alice Cheng as the educational speaker. Over 40 Diabetes Educators were in attendance. It was a great evening! Those that attended completed a survey to help define how they would like these events to take place in the future.

### Key Survey Results

1. Prefer meetings 2-4 times/year
2. Learning needs: steroids, oncology, pregnancy, gastroparesis
3. Identified gaps in care: preventative care, collaboration, follow-up, shortage of CDEs

Thanks to all who attended.  
Stay tuned for the next meeting  
Fall 2024.



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