



Sir Brian Bell
Foundation
Supporting Health and Education in PNG



WORLD DIABETES DAY

- November 14th, 2017 -

**WOMEN AND DIABETES:
OUR RIGHT TO A HEALTHY FUTURE**

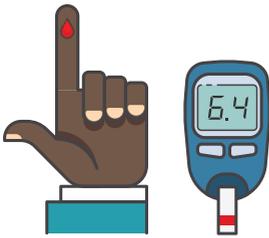
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WORLD HEALTH ORGANIZATION (WHO)

On World Diabetes Day 2017, WHO joins partners around the world to highlight women's right to a healthy future. Around 8% of women – or 205 million women – live with diabetes worldwide, over half in South-East Asia and the Western Pacific. During pregnancy, high blood glucose substantially increases the risk to health for both mother and child as well as the risk of diabetes for the child in the future. Almost half of women who die in low-income countries due to high blood glucose die prematurely, before the age of 70 years. Diabetes is a major cause of blindness, kidney failure, heart attack, stroke and lower limb amputation. Healthy diet, physical activity and avoiding tobacco use can prevent or delay type 2 diabetes. In addition, diabetes can be treated and its consequences avoided or delayed with medication, regular screening and treatment for complications. Ensuring such actions form part of the recommendations of WHO's Global report on diabetes launched in 2016.

INTERNATIONAL DIABETES FEDERATION:

All women with diabetes require affordable and equitable access to care and education to better manage their diabetes and improve their health outcomes.

Supporting facts:

There are currently over 199 million women living with diabetes. This total is projected to increase to 313 million by 2040.

- Two out of every five women with diabetes are of reproductive age, accounting for over 60 million women worldwide.
- Diabetes is the ninth leading cause of death in women globally, causing 2.1 million deaths per year.
- Women with type 2 diabetes are almost 10 times more likely to have coronary heart disease than women without the condition.
- Women with type 1 diabetes have an increased risk of early miscarriage or having a baby with malformations.

WHAT NEEDS TO BE DONE?

- Health systems must pay adequate attention to the specific needs and priorities of women.
- All women with diabetes should have access to the essential diabetes medicines and technologies, self-management education and information they need to achieve optimal diabetes outcomes.
- All women with diabetes should have access to pre-conception planning services to reduce risk during pregnancy.
- All women and girls should have access to physical activity to improve their health outcomes.

For more information head to: <https://www.idf.org/four-activities/world-diabetes-day/wdd-2017.html>

WHAT IS DIABETES?

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone that regulates blood sugar. Hyperglycaemia, or raised blood sugar, is a common effect of uncontrolled diabetes and over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels. Currently, 422 Million adults have diabetes according to World Health Organization. Over time diabetes can damage the heart, blood vessels, eyes, kidneys, and nerves. Adults with diabetes have a two- to three-fold increased risk of heart attacks and strokes combined with reduced blood flow, neuropathy (nerve damage) in the feet increases the chance of foot ulcers, infection and the eventual need for limb amputation. 2.6% of global blindness can be attributed to diabetes according to WHO and is also among the leading causes of kidney failure. Early diagnosis, optimal treatment, and effective ongoing support and management reduce the risk of diabetes-related complications.

TYPES OF DIABETES

Type 1 diabetes - Type 1 diabetes is an autoimmune condition that occurs when the pancreas is no longer able to produce the insulin needed because the cells that produce the insulin have been destroyed by the body's immune system. As the body needs insulin to survive, people with type 1 diabetes must replace this insulin every day without it the body burns its own fats as a substitute which releases chemical substances in the blood. Without ongoing injections of insulin, the dangerous chemical substances will accumulate and can be life threatening if it is not treated (ketoacidosis). Symptoms for type 1 diabetes can include being excessively thirsty, passing more urine, feeling tired and lethargic, always feeling hungry, having cuts that heal slowly, itching, skin infections, blurred vision, unexplained weight loss, mood swings, headaches, feeling dizzy and leg cramps. Usually diagnosed in childhood, teens and young adult years, type 1 diabetes can, however, occur at any age. It is not preventable with current knowledge and is managed with Insulin replacement through lifelong insulin injections or use of an insulin pump, monitoring of blood glucose levels regularly, exercising regularly and following a healthy diet. Regular health check-ups are crucial to ensure you are on track with your diabetes management.

Type 2 diabetes - Type 2 diabetes is a progressive condition in which the body becomes resistant to the normal effects of insulin and/or gradually loses the capacity to produce enough insulin in the pancreas. Risk factors for type 2 diabetes include being overweight or obese, those with low levels of physical activity, unhealthy diet, previous gestational diabetes and a family history of diabetes. Type 2 accounts for the vast majority of people living with diabetes globally, those at an increased risk should see their doctor for a check-up. Once seen only in adults, type 2 diabetes is now increasingly occurring in children. Many people with type 2 diabetes display no symptoms and is commonly diagnosed at a later age, symptoms can include being excessively thirsty, passing more urine, feeling tired and lethargic, always feeling hungry, having cuts that heal slowly, itching, skin infections, blurred vision, gradually putting on weight, mood swings, headaches, feeling dizzy and leg cramps. Type 2 diabetes can sometimes initially be managed through lifestyle modification including a healthy diet, regular exercise, monitoring your blood glucose levels and regular health check-ups with your doctor.

Gestational Diabetes - Gestational diabetes mellitus (GDM) is a form of diabetes that occurs during pregnancy and usually goes away after the baby is born. You are at an increased risk of gestational diabetes if you are over 25 years of age, have a family history of type 2 diabetes, are overweight, are from certain ethnic backgrounds, have had gestational diabetes during previous pregnancies, have previously had polycystic ovary syndrome or previously given birth to a large baby. Women with gestational diabetes are at an increased risk of complications during pregnancy and at delivery and increases a mother's type 2 diabetes risk in future and their child's risk for type 2 diabetes later in life is increased. Gestational diabetes is managed by monitoring blood glucose levels, adopting a healthy eating plan and performing regular physical activity. Regular check-ups are required with your health care team during pregnancy. Effective management of gestational diabetes will reduce the risk of complications during pregnancy and the birth of your baby. Approximately 10 -20% will require insulin injections for the rest of the pregnancy, these injections are safe for both you and the baby. After the baby is born, gestational diabetes usually disappears.

Pre-diabetes - Pre-diabetes is a condition in which blood glucose levels are higher than normal but not high enough to be diagnosed with type 2 diabetes and causes no signs or symptoms. There are two pre-diabetes conditions: Impaired glucose tolerance (IGT) is where blood glucose levels are higher than normal but not high enough to be diagnosed as type 2 diabetes and Impaired fasting glucose (IFG) where blood glucose levels are escalated in the fasting state but not high enough to be classified as diabetes. It is possible to have both Impaired Fasting Glucose (IFG) and Impaired Glucose Tolerance (IGT). Risk factors for pre-diabetes are similar to those for type 2 diabetes including being overweight, being physically inactive, having high triglycerides and low HDL-C (good cholesterol) and/or high total cholesterol, high blood pressure or a family history of type 2 diabetes and/or heart disease. Those with polycystic ovarian syndrome, previous gestational diabetes or those from certain ethnic backgrounds such as the Pacific Islands, Asia and the Indian sub-continent are also at an increased risk. For those diagnosed with pre-diabetes, treatment involves the same lifestyle changes that are recommended for people diagnosed with diabetes including physical activity, healthy eating and if necessary losing weight.

REDUCING YOUR RISK OF DIABETES

Currently type 1 diabetes cannot be prevented however researchers are looking into the autoimmune process and environmental factors that lead people to developing type 1 diabetes. Evidence, including large-scale randomised control trials, show type 2 diabetes can be prevented or delayed in up to 58 per cent of cases by taking a few preventative measures:

Weight management – In 2016, more than 1.9 billion adults aged 18 years and older were overweight, of these people over 650 million adults were obese according to WHO. Excess weight is the single most important cause of type 2 diabetes and increases the chances of developing type 2 diabetes seven-fold, while being obese increases your risk 20-40 times than someone in healthy weight range according to the Harvard School of public Health. Know your BMI number (Body mass index) used to determine whether you are in a healthy weight range for your height. Check your BMI at the Heart Foundation of Australia's website: <https://www.heartfoundation.org.au/your-heart/know-your-risks/healthy-weight/bmi-calculator>.

Exercise regularly – Inactivity promotes type 2 diabetes. Working your muscles more often and making them work harder improves their ability to use insulin and absorb glucose putting less stress on your insulin-making cells. Walking briskly for a half hour every day reduces the risk of developing type 2 diabetes by 30 percent. New to exercise? Talk to your doctor.

Eat a healthy well-balanced diet – Try to stick to eating fruits, vegetables, legumes, whole grains, lean meats, fish, eggs, milk, cheese, yoghurt and high fibre foods and reduce your salt, sugar and fat intake particularly trans and saturated fats.

Quit smoking – Smokers are 30–40% more likely to develop type 2 diabetes than non-smokers. If you are having trouble quitting smoking talk to your doctor.

Manage blood pressure - Exercise regularly, maintain a healthy weight, eat a balanced diet and take blood pressure medication if advised by your doctor.

Talk to your doctor: Take note of any changes in your health and see your doctor for regular health check-ups.

Regular check-ups - Make a note of any changes in your health and discuss these with your doctor.

