Diabetes Nurses Interest Group

DNIG
THE VOICE
FOR
NURSING IN
DIABETES
CARE AND
PREVENTION

Report from the Chair



Lisa Herlehy

Greetings to all DNIG members. With nurses week now long behind us hopefully all were recognized and appreciated. The executive of DNIG appreciate the support and passion of you, the members of this interest group. Thank you for making a difference in the care and management of those living with diabetes. Summer is now in full swing and it is time for everyone to enjoy some down time, embrace those lazy days and recharge the batteries. For those among us living with diabetes, however, there is no break. The daily work of managing insulin and other medications, balancing carbs

and physical activity and planning for the unexpected does not take a rest. It is for this reason that the interest group exists: to support nurses with an interest in diabetes so that we may support our clients with the highest level of care. In this newsletter you will find a sampling of some of the things members of your group have been doing in the last few months including recipients of bursaries and conference funding, educational opportunities and sponsorship as well as updates on member benefits still available. In addition you'll find an update on the election process and opportunities for

joining our executive team. We are extending a very big THANK YOU to Alwyn Moyer (Membership) and Margaret Little (Treasurer) who have dedicated untold hours and professional experience to DNIG over the last 12 years. This group would not exist if not for them and countless members have benefitted from their sage mentorship.

Lisa

Would you like to

- write for the newsletter?
- present a webinar?
- become part of an executive team?

Here is your opportunity to shine. Contact us to discuss opportunities.

Executive Members

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Executive Members — Election Update

In keeping with RNAO policy, the Diabetes Nurses Interest Group (DNIG) has posted applications for experienced, committed, skilled individuals to join the executive for the 2019-2021 term. We are still seeking nominees for the positions of Treasurer and Communication and will continue the search over the summer.

Get in touch with us if you would like to have a voice about the important role of nursing in the provision and co-ordination of diabetes care and prevention in acute and community care settings in Ontario. For more information or to discuss the positions, send an email to <u>Lisa Herlehy</u> at dnig.info@gmail.com.



Diabetes Update Conference

Julie MacKenzie RN BScN CDE

Diabetes Update, Mont Tremblant, March 20-23, 2019. Now in its fourth year, Diabetes Update is accredited by the Canadian Society of Endocrinology and Metabolism via the Royal College of Physicians and Surgeons of Canada. See: https://www.diabetesupdate.ca

The reason that I wanted to go to this conference was to learn more about recent studies on medications and upcoming treatments. The side benefit was meeting other like-minded professionals with a passion for diabetes, who want to provide the best care to those living with the condition. Oh, and being able to attend a conference along with some of the best researchers and presenters, many of whom contributed to the making of the Diabetes Canada Guidelines, in such a beautiful place, not far from home, did not hurt either!

The impact of attending the conference was multifaceted: there were so many wonderful talks and workshops that it was hard to summarize everything that I learned so I will focus on some of the highlights for me.

Updates on New Drugs

Anyone working in diabetes care is familiar with the many drug trials to identify medications that are safe for patients at high risk for cardiovascular events (e.g. DECLARE, CAROLINA, LEADER, SAVOR, CARMELINA, SUSTAIN-6, REWIND, PIONEER-6, EMPAREG, CANVAS). At the conference, we were reminded that each trial for a new medication costs 300-500 million dollars. That is a lot of money put into studying medications to improve the outcomes for our patients and their lives while ensuring cardiovascular safety.

We heard about three current trials (EMPAREG, CANVAS, DECLARE) to assess cardiovascular outcomes for patients taking SGLT2 inhibitors (glifozins), which are showing a reduction in MACE (Major adverse cardiovascular events). These drugs inhibit glucose reabsorption in the kidney and so lower blood sugar. As well, it is important to remember that there are less expensive drugs available that have a longer safety record.

Fast-acting insulin aspart is one of the new kids on the block in Canada. The drug is a new formulation of insulin aspart but includes Vitamin B3-niacinamide and L-arginine (Senior & Hramiak, 2019). The advertised benefits of the drug are that it mimics the pancreas, releases within 5 minutes, works within 4 minutes and is gone in 3 hours (ONSET-1 trial). It may be a better option for those that prefer to take their insulin after starting a meal. I must admit I know about it but have not encountered anyone using it as of yet.

It was interesting to hear about the planned introduction of a more stable Glucagon coming soon. Apparently the preparation, which is for nasal administration, will be stable for 2 years, this would be wonderful because Glucagon is expensive and goes out of date quickly.

And as Dr. Alice Cheng says, "whatever dose of insulin you choose to start a patient on will always be wrong. Start anyway and adjust to get optimal glycemic control".

Sievenpiper, J L, Chan C, Dworatzek P et al., Clinical Practice Guidelines. Diabetes Canada 2018 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada: Nutrition Therapy. Can J Diabetes 2018; 42(Suppl 1): S64–S79.

Diabetes Update Conference - continued

Diabetes and Dementia

We heard there is evidence that diabetes increases the risk of dementia in older people—by approximately 60%. On a practical note, the chapter: 'Older Adults with Diabetes' in the 2018 Clinical Practice Guidelines (Meneilly et al., 2018) indicates that when the older person with diabetes has multiple co-morbidities and/or frailty, strategies should be used to strictly prevent hypoglycemia. These strategies might include the choice of antihyperglycemic therapy and less stringent A1C targets [Grade D, Consensus]. Also, antihyperglycemic agents that increase the risk of hypoglycemia or have other side effects should be discontinued in these people [Grade C, Level 3 (235,253)].

On a practical note, we heard that the clock drawing test may be used to predict which older individuals will have difficulty learning to inject insulin safely [Grade C, Level 3 (164) Meneilly et al., 2018].

Diet and Diabetes: The Keto Diet.

These days, we are inundated with a constant stream of advice on diet and exercise. So it is not surprising that many people with diabetes are speaking with diabetes educators and physicians about trying a Keto diet—looking for options to lose weight, or for intermittent fasting.

Since there are many versions of the Keto diet, it is important to foster a climate of openness to give patients the confidence to discuss options or to talk about what they are already doing, rather than feel they need to hide it for fear of judgment or being told "No" (Harvard T.H. Chan School of Public Health, 2019). This is consistent with the CPG guidelines which advise practitioners to "provide counseling on a diet suited to the individual based on values, preferences, and treatment goals using the advantages/disadvantages in Table 1 Properties of dietary interventions." (Sievenpiper et al., 2018, pS64). The table referred to includes the Atkins diet, which is considered to be a ketogenic diet.

The 2018 CPG note that there does not appear to be any long-term safety data for the Keto diet (that is over the past 2 years). So advice should take into consideration the patient's diagnosis, medication, level of control and ability to follow the diet safely. For example, patients with Type 2 patients following a Keto diet might be advised that intermittent fasting for one day can increase insulin sensitivity and be taught to test for ketones and to call in for advice if ketones are greater than 1.

There were so many other tidbits and information from this event I could share, but I feel like I am already running on. So, make sure that next year you get registered to go. The talks are down to earth and relevant to our everyday practice. And who doesn't want to hear the best of the best provide us with information and research to top up our knowledge and give us more to improve the outcomes for our patients? Thanks to the Diabetes Nursing Interest Group that made it possible for me to attend this workshop.

References

Harvard T.H.Chan School of Public Health. (2019). The Nutrition Source. Diet Review: Ketogenic diet for weight loss. Retrieved from: https://www.hsph.harvard.edu/nutritionsource/healthy-weight/diet-reviews/ketogenic-diet/

Meneilly, GS, Knip, A, Miller, DB, et al., Management of Diabetes in Canada: Diabetes in Older People: Can J Diabetes 2018; 42(Suppl 1): S283–S295.

Nursing Career Fair - Toronto

Laura McBreairty, DNIG Student ENO

I recently represented DNIG with a poster presentation at a nursing career fair hosted by York University and Nursing Students Association of York. The fair was held on the York University campus on March 7, 2019 with a great turnout of approximately 70 students. Several other RNAO interest groups were present along with some hospital representation.

As a student it was a great experience to both represent DNIG as well as talk to other students about their interest in diabetes. Prior to joining DNIG I was unaware of the avenues available to pursue nursing in diabetes management. This uncertainty seemed to be shared by many of the students I

spoke with who inquired about this area of nursing. Among those who were familiar with the position of a certified diabetes educator, most were unclear of the specific role and day to day activities of the position as well as how it may differentiate from other professionals that can obtain the certification such as dietitians. It was encourag-



ing to see the interest in diabetes nursing and most students I spoke with picked up our handouts about certification as a diabetes educator.

The Nursing Student Association of York organized a fantastic career fair and I look forward to hopefully seeing some of my fellow students again in the future as nurses in diabetes care.



Free for Students!!

- ▶ Provides a forum for the discussion
- of issues within the diabetes care nursing community
- Contributes a nursing voice on diabetes related practice, education, and research issues
- ► Advocates/lobbies at the provincial level
- ► Supports continuing nursing education
- Strives to establish a network

for information sharing and collaboration

Bursaries related to education,

Special Projects in Diabetes: \$1000 to support a RN completing a special project focusing on diabetes.

Scholarship: \$2,000 to support a RN pursuing education in the area of diabetes education and care specific to type 2 diabetes.

Research Award: \$3,000 supports a graduate student conducting research focused on an aspect of nursing prevention, or management of diabetes.

Northern Students Tuition Support:

\$1000 for RN or graduating BN student living and working in RNAO Region 11 or 12 who wishes to pursue advanced education focusing on diabetes education/care.

Thinking about Certified Diabetes Educator certification?

- ► Application deadline for the CDE certification examination is around February 1st each year; the examination is written in May with a cost of \$500.
- Eligibility criteria to write exam:
 - →Be registered and licensed with a regulatory body in Canada as a healthcare professional.
 - → Have accumulated a minimum of 800 hours of practice in diabetes education within the
 - 3 years prior to the application deadline, while fully licensed with a regulatory body as a Canadian health professional.
- ► Getting clinical experience can be challenging. Possible options are to volunteer at a Diabetes Education Centre, or to become a camp nurse at camps supported by CDA.
- ► Several post secondary institutions in Ontario offer applied education programs for health professionals, on site or online, such as The Michener Institute.
- ▶ Other resources include RNAO Diabetes Best Practice Guidelines and Diabetes Canada
- ► Resources: http://www.cdecb.ca/ https://www.diabetes.ca/for-professionals http://michener.ca

Email: dnig.info@gmail.com Website:

Website Update

In late 2018, the DNIG executive decided to replace our existing website (www.dnig.rnao.ca) with one that has improved functionality and aesthetic appeal.

Specifically, we wanted a website that is:

Media friendly, with the capacity to post video clips and social media icons
Up-to-date and engaging, giving members access to an events page, resources list, and a
"members only" log-in section

Compatible with multiple devices, including mobile phones and tablets Modern and eye-catching, with high quality images and a rotating Home Page banner

To achieve these aims, DNIG has been working with a programming professional who has been busy creating a demo website. Once fully complete, the updated website will be housed on a new domain name: www.dnig.ca.

We are excited at the prospect of further connecting with our membership through these advanced website features. Stay tuned for an announcement regarding the website's soft launch

Kingston Nursing



The theme of this years conference held at St. Lawrence College in Kingston was 'Learn, Collaborate, Network' and DNIG was there doing just that! There were a number of interesting research areas and projects presented which highlighted the power of nursing research. And the keynote speaker was our own Doris Grinspun whose presentation was entitled 'Evidence Informed Care in Pursuit of Quality Health Outcomes.

DNIG was pleased to meet with a number of RNAO and DNIG members as well as to reach out to a record number of students attending the conference.

2019 Bursary Recipients

DNIG offers four bursaries each year through the Registered Nurse Foundation of Ontario (RNFOO).

Three DNIG bursaries were awarded this year.



DNIG Northern Students' Tuition Award

Montana Massicotte is an Indigenous nursing student completing her final year in the Sault College-Laurentian University collaborative BScN program.

Her passions include Indigenous health, social justice, mental health, and health promotion. She also has a strong interest in cultural safety within health care. She recently finished her consolidation with the diabetes education team at Wabano Aboriginal Centre for Health.

Montana will begin the Master of Public Health program at Waterloo University in the Fall of 2019.

DNIG Research Award

Sarah Moore is a Supervisor-Nurse Practitioner at Kingston Health Sciences Centre and a PhD Student at Queen's University who promotes practical research opportunities.

She started the Nurse Practitioner-led Diabetes Consult Service in 2013 and has enjoyed working with patients with diabetes in the Inpatient, Cancer Centre, and Renal Centre settings. She has been privileged to co-chair Diabetes Canada's Inpatient Quality and Safety Interest Group and acted as a chapter author for the 2018 Diabetes Canada Clinical Practice Guidelines. Sarah believes strongly in collaborative care models that integrate clinical environments with academic organizations to support professional development and research opportunities for nurses.



DNIG Scholarship Award

Katelyn Sushko is an MSc thesis-stream student at McMaster University. Her research focuses on exploring the determinants of glycemic control during pregnancy among women with pregestational diabetes.

If you have been a DNIG member for one year and are considering further education, keep an eye on the RNFOO website for the call for applications, at: www.rnfoo.org

Diabetes Education Opportunities

Conference Funding is still available for Fall 2019 Conferences. APPLY NOW!

https://www.diabetes.ca/conference

Diabetes Canada Professional Conference and Annual Meeting, Winnipeg Manitoba 2-5 October 2019

https://kinghooper.com/toronto/
Kinghooper Diabetes Education Course
Four Points by Sheraton, Toronto Airport, Mississauga, ON
25—27 November 2019

Watch the DNIG website for updates and new on other upcoming conferences.

Conference Funding Application

Name:
Address:
Email:
Phone:
RNAO membership # DNIG Membership duration
Divid Membership daration
Employment status: FT PT Employer
Please tell us about the conference you wish to attend, approximate distance and your anticipated mode of transportation.
*NOTE: For reimbursement of agreed upon amount, an expense report and all receipts are to be submitted to DNIG, no later than 1 month following conference completion . Recipients are also asked to submit a written report on your experience to DNIG executive to share with membership.
Please attach a 1-page document (maximum 500 words) outlining why you qualify for this funing.
Be sure to:
Describe your professional objectives for attending the conference.
Describe your involvement (past/present) in your professional association/DNIG Describe your employment status, location, role in diabetes nursing
Describe how you will share what you have learned with your nursing colleagues
Please supply one professional reference.
Name: Phone number:
I certify that all information contained I this application is true and accurate.
Applicant signature Date:
Please scan completed application and <u>e-mail to Lisa</u> . Apply Now!