

## News and Views From Integrated Diabetes Services

Gary Scheiner MS, CDE • Judy Tripathi, RD, LDN, CDE • Debbie Liebman BSN, RN

### WORLDWIDE SERVICE NOW AVAILABLE



Spanning the globe to bring you the best in diabetes care, Integrated Diabetes Services now offers diabetes self-management education and consulting via phone, fax and the internet throughout the United States and abroad. Since instituting this service at the beginning of the year, we have begun working with clients from 14 states and 7 foreign countries.

If you or someone you know could use some expert guidance navigating the daily maze of diabetes self-care, give us a call. Physician referrals are not required, and credit card billing is available. Services are available “per-consult” or on a 3 or 12-month retainer basis.

For details, visit our web site ([www.integrateddiabetes.com](http://www.integrateddiabetes.com)); click on the “remote consulting” icon), or call our office toll-free: 877-735-3648.

**TIRED OF FIGHTING TRAFFIC?**  
Have your next consult over the phone or via the internet! Call to schedule: 610-642-6055.

## NOT-SO-SIMPLE SYMLIN

by Gary Scheiner

### New Type-1 Treatment Offers Benefits, But There's Work Required

Hailed as the first new treatment for Type-1 diabetes since the discovery of insulin, pramlintide (brand name Symlin, Amylin Pharmaceuticals), is now commercially available. Symlin is virtually identical to amylin, a pancreatic hormone normally cosecreted with insulin in response to meals. Just like insulin, amylin is lacking in those with Type-1 diabetes, and is under-produced by those with Type-2.

Symlin acts on the central nervous system to: (1) slow the emptying of the stomach's contents into the small intestine for absorption, (2) blunt the secretion of glucagon by the pancreas, and (3) decrease appetite. As a result, Symlin helps to prevent the sharp blood sugar rise that usually occurs after meals in most people with diabetes.

*Symlin helps prevent the sharp blood sugar rise that usually occurs after meals.*

Symlin is administered in the same manner as insulin: injection into the subcutaneous fat (it can also be delivered with an insulin pump, if you're willing to use one just for Symlin). It cannot be mixed with insulin because of pH incompatibilities, and the injection/infusion sites for insulin and Symlin should be kept at least several inches apart. To date, there is no pen available for Symlin.

The injections/boluses are to be given at the onset of each substantial meal or snack (containing 30 or more grams of carbohydrate). Symlin's activity peaks about half an hour after injection, and wanes in about 3-4 hours. Fixed doses commonly range from 5 to 10 units per meal for those with Type-1 diabetes, and 10 to 20 units for those with Type-2. The most common side effect is mild temporary nausea, which tends to dissipate after a few weeks.

While there is no doubt that Symlin can improve after-meal blood sugar control, the tricky part is adjusting the amount and timing of mealtime insulin. Amylin Pharmaceuticals recommends an initial 50% reduction in the mealtime bolus of rapid acting insulin. In practice, lesser reductions are actually necessary.

Since Symlin's primary effect is to slow down the rate of digestion, it is most beneficial to delay the mealtime insulin. Pump users can easily use an extended bolus to deliver their insulin over 2-3 hours. Those on injections can take their injection 30-60 minutes after eating, or switch back to Regular insulin.

*(Not-So-Simple Symlin continued from page 1)*

My personal experience with Symlin has shown that it does blunt after-meal blood sugar spikes, and the satiety effect keeps me from overeating at meals and snacking too soon afterwards. I have been taking Symlin through a second insulin pump, which can be a bit inconvenient (tangled tubing, two infusion sites) and costly (in terms of disposable supplies). I also wore a Continuous Glucose Monitor with each change in therapy to compare and contrast my blood sugar results, but that's another story – see the picture above.

After some trial and error with the mealtime insulin, I have come to the conclusion that I need no reduction in my insulin doses, but an extended bolus is necessary to prevent postmeal hypoglycemia followed by a blood sugar rise several hours after eating. Given the side-effects and inconveniences involved in using Symlin, the jury is still out on whether it will make a real difference in clinical outcomes and quality of life for those of us with Type-1 diabetes. But at least it's nice to know that there is something – anything – new to help us in our daily battle with this disease.



***Gary Scheiner stops at nothing to help people with diabetes... even wearing 2 pumps and a CGMS!***

*To learn more about Symlin, Philadelphia-area readers are welcome to attend the Type-1 diabetes support group at Integrated Diabetes Services on Wednesday, November 2, 2005. The topic of the meeting will be "Optimal Use of Symlin".*

## NEW FOR TYPE-2: BYETTA

Just as Symlin has been added to the arsenal of treatments for Type-1 diabetes, exenatide (brand name Byetta) has joined forces in the fight against Type-2 diabetes.

Interestingly, exenatide is a protein found in the saliva of the Gila Monster lizard. Its effects are very similar to those of an incretin hormone, GLP-1, found in humans. When food is ingested, GLP-1 is secreted from endocrine cells in the small intestine. GLP-1 stimulates pancreatic insulin secretion (only in proportion to the blood glucose rise caused by food, thus there is no risk of hypoglycemia). GLP-1 also inhibits the secretion of glucagon, thus reducing the release of glucose from the liver. By slowing gastric emptying, GLP-1 blunts the rush of glucose from the GI tract to the bloodstream. It also increases the sensitivity of the body's cells to insulin, further enhancing blood glucose control. And last but not least, although the mechanisms are not completely understood, GLP-1 has been shown to increase satiety, decrease food intake and promote weight loss.

GLP-1 has been shown in animal studies to increase beta cell mass and preserve beta cell function. These positive effects on pancreatic beta cells would be very beneficial in combating the progressive beta cell destruction otherwise found in type 2 diabetes.

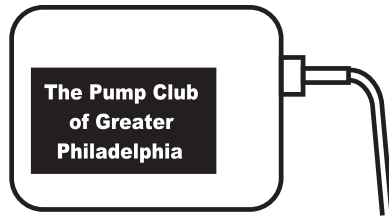


Byetta is very similar to GLP-1, except that it lasts longer in the body. Byetta can be used alone or in combination with metformin (Glucophage) and/or sulfonylureas (glyburide or glipizide).

Now the bad news. Mild nausea is common during the first few weeks of Byetta usage, but it usually subsides over time. Byetta must be administered twice a day (before breakfast and dinner) by injection. Marketed by Amylin Pharmaceuticals and Eli Lilly and Company, Byetta comes in two fixed-dose pre-filled pens: one delivers 5 mcg per dose, and one delivers 10 mcg per dose. Each pen holds 66 doses. There are no dosage adjustments needed for meal size or exercise. Exenatide is heat sensitive, so the pens should be kept cool between injections (refrigeration or Frio case).

Early reports from physicians who are prescribing Byetta indicate that it is very effective for helping to promote weight loss and lower blood glucose levels – particularly after meals. For more information about Byetta, speak to your physician or contact Amylin customer service at 866-208-1657.

# THE PUMP ROOM



## Secrets to Infusion Set Success

It has been reported that up to 50% of the blood sugar variations experienced by pump users can be traced back to infusion site and insulin absorption problems. With that in mind, the Insulin Pump Club of Greater Philadelphia welcomes Natalie Bellini to our next meeting, Wednesday, December 7th at 7:30 pm. A nurse, long-time pump user and area manager for Animas Corporation, Natalie has spoken across the country on the topic of infusion sets. Find out: Which sets work best for which people? Where are the best sites? How should they be rotated? How long can they really be worn? Bring your toughest questions for Natalie!

## Guardian RT On The Way



Medtronic MiniMed has announced the launch of its new Guardian RT – a continuous glucose monitor that displays blood sugar values in Real Time (thus the “RT”). Unlike the CGMS of old, the Guardian features a small transmitter (attached to the subcutaneous glucose sensor) which sends a signal to a handheld

monitor. The monitor updates the blood glucose level every 5 minutes, and alerts the user if the reading falls above or below a certain threshold. Guardian RT requires only 2 fingerstick calibrations per day (compared to 4 with the CGMS), and the sensors typically last 3 or 4 days. The data is fairly consistent with fingerstick blood glucose measurements (+/- 18%), so it is still in the user's best interest to perform fingerstick tests prior to administering insulin. Guardian RT will require a physician's prescription. Medtronic is rolling out CGMS one major market area at a time, based on the insurance reimbursement climate. It may take a while for Guardian RT to find its way into Philadelphia, where the insurance climate is, well, less than “ideal”.

## Medicare Changes Pump Coverage

Staying with its track record for making things as complicated as possible, Medicare has revised its guidelines for covering insulin pumps and supplies. Actually, the changes make it slightly easier to obtain coverage for a pump. Instead of a negative C-peptide test (which indicates an almost total lack of pancreatic insulin production – a rarity in those with Type 2 as well as “honeymooning” Type-1s), Medicare will pay for a pump if there is a positive test for beta cell antibodies. For those who use the C-peptide level to qualify, it must be within 110% of the lab's lower limit of normal, and it must be done when the fasting blood glucose level is  $\leq 225$  mg/dl. However, Medicare will now approve pumps in patients with renal insufficiency whose C-peptide is up to double the normal level. Confused? Need further explanation? Join the club.

## Medtronic Announces New Infusion Sets

Users of Paradigm insulin pumps will soon have two new infusion set options: A “short canula” version of the popular Silhouette, and a straight needle set (the Sure-T) for reducing the risk of clogs and kinks. The new Silhouette has a 13mm canula (compared to 17mm on the standard version), which makes it a better fit for those with very little subcutaneous fat. It will be available with 23” or 43” tubing. The Sure-T features a fine 6mm steel needle that inserts easily by hand. It has a 4” length of tubing that meets a disconnect mechanism which also adheres to the skin. The dual-adhesive system provides additional security against accidental dislodgement. Sure-T is available with 23” tubing only. For more information, call 1-800-MINIMED, or visit [www.minimed.com](http://www.minimed.com).

## THINSet Reservoirs for Paradigm Pumps

Fifty50 Pharmacy has introduced a new reservoir for Medtronic Paradigm insulin pumps. THINSet reservoirs hold 1.8 ml (for 511, 512 and 515 models) or 3.0 ml (for 712 and 715 models), and are engineered to accept any infusion set that uses a standard Luer fitting. For the first time, Paradigm users have the option of using innovative infusion sets from companies such as Animas, SimpleChoice, UnoMedical and Disetronic. For more information, call Fifty50 Pharmacy at 800-746-7505, or visit [www.fifty50pharmacy.com](http://www.fifty50pharmacy.com).

## NEW PRODUCT FOCUS

### OmniPod: The World's First Disposable Pump



It's the size of a cookie and does virtually everything that a full-sized insulin pump can do. OmniPod from Insulet

Corporation has received FDA clearance and should be sticking to the abs, hips and butts of countless users by the end of the year. This waterproof, self-adhesive device holds up to 200 units of insulin and has its own internal infusion set (a 6mm canula inserted by a self-retracting needle at a 45-degree angle), so there is no tubing and you never even see a needle!

Instead of a motor and drive mechanism, the "Pod" delivers insulin by way of a unique valve system that requires little more than a minute electrical impulse to deliver insulin in 1/20th of a unit increments. This allows the device to be extremely compact and safe.

The "Pod" is controlled by a remote programmer, which features a built-in Freestyle meter and bolus calculator. The Pod must be replaced every 72 hours, or it turns into a pumpkin (it literally stops working after 3 days). Users are provided with several months' supply of Pods along with a single programmer. Additional programmers may be purchased separately.

For more information, contact Insulet Territory Manager Christine O'Rourke at 973-714-2097, or visit [www.myomnipod.com](http://www.myomnipod.com).



## PATIENT SPOTLIGHT: ZACH FUSFELD



Not many high school freshmen can match the insight or ambition possessed by Zach Fusfeld. A resident of Wynnewood, PA and a 9th grade student at Lower Merion High School, Zach hopes to pursue a career in biology or genetics. He would like to find a cure for diabetes, but as he admits, "There are a lot of other diseases that need a cure just as much."

Zach's ambition to manage his diabetes had him taking five to seven shots a day ever since his diagnosis four years ago. This past July, he had the insight to ditch the shots and give pump therapy a try. "Everything is easier with a pump," says Zach. "Diabetes is easier to manage, and living life is a lot easier. Anyone who is thinking about it should just go for it."

Zach's hobbies include biking, soccer and computers. A self-proclaimed video game junkie, his claim to fame is achieving the 3rd from top level in Lord of the Rings Return of the King video game (we assume that's pretty good). His musical insight can't be questioned: Zach is a big fan of the Beatles. "They're a great band, no matter what age you are," he says.

Spoken like anything but a high school freshman!

## SAY BOO TO DIABETES

Join Integrated Diabetes Services on Sunday, October 30th as we meet at the Art Museum in downtown Philadelphia and walk along scenic West River Drive for the JDRF's Walk To Cure Diabetes. Wear a costume if you like, or just come as you are. Besides the walk, there will be music, entertainment, food and fun activities for the kids. Most importantly, we will be raising money for a terrific cause. Nearly 90% of all money raised goes directly toward research to find a cure for diabetes and its complications.

All of our walk team members will receive a bright red "Stomp Out Diabetes" shirt along with a team photo. If you can't join us on the 30th, please send a contribution to our office (checks payable to JDRF). For more information or registration information, please call our team captain, Debbie Liebman, at 610-642-6055.

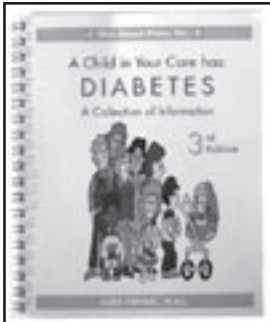
# FEATURED PRODUCTS

Integrated Diabetes Services carries a wide range of diabetes self-care products, including:

- Pump Accessories
- Dex Tabs
- Armchair Exercise Videos
- Lancing Devices
- Sharps Disposal
- Supply/Travel Cases
- Skin Wipes/Lotions
- Ketostix
- Self-Care Books
- Pedometers
- Injection Aids
- Food Scales

For a complete catalog, visit [www.integrateddiabetes.com](http://www.integrateddiabetes.com)

## A Child In Your Care has DIABETES: A Collection of Information – 3rd Edition.



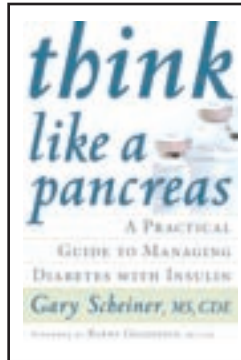
Excellent resource manual, complete with copier-ready forms, checklists and guides covering everyday issues such as field trips, daycare & school checklists, sports planning and sleepovers. A must-have for every parent and caregiver, from Hen House Press. \$22

## FreeStyle Pedometer:

Accurately counts daily steps for health and weight control. Compact size, easy to read display. Durable belt clip. Battery included. \$15



## Think Like A Pancreas: A Practical Guide to Managing Diabetes With Insulin



Gary Scheiner MS, CDE's unique approach to setting up and fine-tuning an insulin program (using injections or a pump). Written in a light, fun-to-read manner and free of medical mumbo-jumbo. "Think Like A Pancreas" covers everything from exercise to carb counting to managing sick days and hypoglycemia. Includes a description of new/upcoming technologies, as well as an extensive resource list. \$16

## Sof-Set QR Infusion Sets:

IDS has a large supply of Sof-Set 90°-insertion infusion sets with standard Luer-lock connectors (for all non-Paradigm pumps) and a Quick-Release mechanism. A variety of tubing and canula lengths are available. All in original packaging. Call 877-735-3648 for specifics. \$36/box of 12 (originally \$130/box).



To order, call 877-735-3648  
or mail this page with check  
(payable to Integrated Diabetes Services)  
or credit card information to:

Integrated Diabetes Services  
333 E. Lancaster Ave., Suite 204  
Wynnewood, PA 19096

### Ship To:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_\_\_ Zip \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_

Product Total: \$ \_\_\_\_\_

Priority Mail Shipping\*: \$4.00

Total Payment: \$ \_\_\_\_\_

To pay by credit card:



Check One:  Visa  Mastercard

\*Call for shipping charges on large orders

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_ / \_\_\_\_



## DISCONTINUED INSULINS

As of July 2005, Eli Lilly and Company discontinued production of its Pork insulin products as well as Humulin Ultralente and Lente. Novo Nordisk, the world's other major insulin producer, made similar product line cuts last year. Users of Pork insulin should not have too much difficulty making the transition to human insulin, but with the understanding that human insulin may peak earlier and stop working sooner than the pork version. Users of Ultralente or Lente should consider switching to a basal insulin such as Lantus (with mealtime injections of rapid-acting insulin), or giving insulin pump therapy a try.



## FITNESS FIGHTS COMPLICATIONS:

A recent study at the Cooper Institute in Dallas found that people with diabetes who are in the best aerobic shape are least likely to die from diabetes-related complications, regardless of their weight. Study participants were treadmill-tested to determine

fitness levels, and then followed for 15 years. Those in the top 25% for fitness were 3-5 times less likely to die during the duration of the study. Perhaps most noteworthy was the observation that those who were overweight but physically fit had a similar risk as those who were at a more normal weight and physically fit. The moral of the story: pay less attention to the scale, and spend more time exercising.

## INSULIN SENSITIZERS FOR TYPE-1s?

For many years, insulin sensitizers (also known as thiazolidinediones, or glitazones) have been effective at reversing insulin resistance for those with Type-2 diabetes. But what about Type-1s who also happen to be insulin resistant? Researchers at the University of Texas examined the use of an insulin sensitizing medication (rosiglitazone) with overweight Type-1s for a period of 8 months. Use of rosiglitazone did not improve blood sugar control or weight status any more than use of a placebo, but total daily insulin use did decrease slightly. Thus, it appears that use of insulin sensitizers has limited benefit for those with Type-1 diabetes.

## PALM PRICKS EQUAL FINGER STICKS

In a research report from the ADA annual Scientific Sessions, it was shown that blood samples from the palm or heel of the hand are comparable to fingerstick measurements when testing blood glucose levels. Samples taken from other "alternate sites" such as the arm or leg tend to lag 10-15 minutes behind fingerstick samples, and may result in inaccurate dosing decisions if the blood glucose level is changing rapidly. Samples from the hand do not appear to lag, and can be used safely.

## SYNDROME X DEFINED

Syndrome "X", also referred to as "Metabolic Syndrome", involves a cluster of health conditions that often occur simultaneously and may have a single underlying cause. These conditions, which include insulin resistance (pre-diabetes or Type-2 diabetes), elevated blood pressure, unhealthy cholesterol levels, and excess fat storage around the abdomen, each contributes to heart disease. When they occur together, the risk for heart disease grows exponentially. After 6 years of debating, the World Health Organization has finally agreed on a definition of Metabolic Syndrome:



A waist circumference greater than 37" (men) or 31.5" (women), plus any 2 of the following:

- Triglycerides greater than 150
- HDL less than 45
- Blood pressure greater than 130/85
- Fasting blood sugar greater than 100
- Previously diagnosed Type-2 diabetes

Those who meet the criteria for Metabolic Syndrome should panic (no, this is not a typo). Reducing the risk factors listed above is imperative for prevention of serious cardiovascular problems. Work with your physician and diabetes educator to help reduce your modifiable risks.

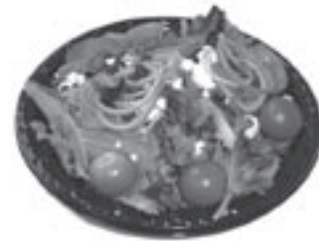
## THE BEST METER IS:

Consumer Reports online recently rated the various lines of blood glucose meters based on consistency, accuracy, ease of use, speed, size and memory. The winner, by a slim margin, was the One Touch Ultra and UltraSmart. The Freestyle Flash was a close second, followed by the AccuChek Complete, Ascensia Contour, and AccuChek Compact & Advantage. The low-priced “store-branded” meters such as ReliOn and TrueTrack were rated the lowest.



## EAT YOUR SALAD FIRST

Eating a sizable vegetable-based salad as a first course at a meal may help lower the calories consumed in the entire meal. Researchers at Penn State University studied 33 women and found that overall calorie intake for meals was 12% lower when a large (3-cup) salad was consumed at the beginning of the meal, and 7% lower when a small (1½-cup) salad was consumed, when compared to having no salad at all.



## DUE FOR AN UPGRADE?

If your insulin pump is approaching 4 years old (or longer), you are probably eligible to receive a new one. The latest pumps include a number of innovative features that make them safer, more effective, and easier to use. For a complimentary demo, give us a call (610-642-6055) and schedule a time to stop by.



## CALENDAR OF EVENTS

(... continued from page 8)

### Miscellaneous Events

- Ongoing:** JDRC Family Network Support Group Meetings are held quarterly at 5 sites spanning the Delaware Valley. For information, contact Bonnie O’Neil, Volunteer Outreach Coordinator, at 610-993-7686.
- October 30:** JDRC Walk to Cure Diabetes in front of the Philadelphia Museum of Art. Call 610-664-9255 or visit [www.jdrf.org](http://www.jdrf.org).
- Nov. 10:** Optimizing Pump Therapy (evening support group), hosted by Holly Burkhardt of Medtronic MiniMed, at Bryn Mawr Hospital. Call 800-933-3322 x-2502 for details.
- Nov. 15:** Greater Philadelphia Pediatric Diabetes Support Group, hosted by Natalie Bellini, RN, CDE of Animas Corp, at the Radisson Hotel, King of Prussia. Separate programs for kids & parents. 3rd Tuesday of each month. For details, call 877-937-7867 x-1333, or e-mail [Natalie@buffalo.com](mailto:Natalie@buffalo.com).
- Dec. 7:** Pump User Group hosted by Kimberly Schaefer of Medtronic MiniMed, at the Holiday Inn City Ave., Philadelphia, 6:30 pm. Call 800-933-3322 x-2504 for details.
- Dec. 14:** Pump User Group hosted by Kimberly Schaefer of Medtronic MiniMed, at the Doubletree Hotel at Roosevelt Blvd & Grant Ave. in NE Philadelphia, 6:30 pm. Call 800-933-3322 x-2504 for details.
- March 17-19:** Children With Diabetes Focus on Pumping Conference at the Marriott West Hotel in Conshohocken, PA. Visit [www.childrenwithdiabetes.com](http://www.childrenwithdiabetes.com) or call Laura Billetteaux at 734-428-8265.
- March 18:** ADA Diabetes Expo at the Pennsylvania Convention Center in Center City Philadelphia. Featuring live demonstrations, youth activities and cultural events. Free. For more information, contact Alex Jackson at the ADA, 610-828-5003, x-4635.
- May 18-20:** Save the Date!!! Diabetes Exercise & Sports Association (DESA) annual North American conference at the University of North Carolina. Contact Gary Scheiner at 877-735-3648 for further information.
- May 19-21:** Diabetes Family Retreat Weekend at Split Rock Resort in the Poconos. For children with diabetes and their families. Call Setebaid Services at 866-SETEBAID or visit [www.setebaidservices.org](http://www.setebaidservices.org).



## WAY TO GO!

### Congratulations to the following patients:

- **Thelma Abdill**, for lowering her A1c from 8.5 to 6.9%!
- **Melanie Bacine**, on the birth of her daughter Meredith Julia, 4/16/05!
- **Greg Bauer**, for his new position with Smiths Medical!
- **Allison Blass**, for breaking the 8% A1c barrier!
- **Doug Bucci**, for his diabetes-themed art exhibit at Philadelphia's Kimmel Center!
- **Jennifer Ferry**, on the birth of her daughter, Brianna Marie, 9/26/05!
- **Anne Hoffman**, for her all-time best A1c: 6.6%!
- **Mary Macik**, on the birth of her son Michael James, 5/28/05!
- **Rolf Schoyen**, for his best A1c in 10+ years: 6.4%!
- **Jamie Swidler**, for starting her new business, InHouse Studio!
- **Marilyn Witherup**, for lowering her A1c from 8.5 to 7.2%!



Control Solutions is published by Integrated Diabetes Services, the diabetes self-care specialists. Day, evening and weekend consultations are available for all ages.

#### Services include:

- ✓ Basic diabetes education
- ✓ Blood sugar "tune-ups"
- ✓ Insulin pump therapy
- ✓ Weight management
- ✓ Nutrition counseling
- ✓ Exercise planning
- ✓ Preventive health
- ✓ Diabetes & Pregnancy

**610-642-6055**

**877-SELF-MGT (735-3648)**

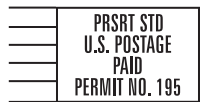
333 E. Lancaster Ave., Suite 204 Wynnewood, PA 19096  
www.integrateddiabetes.com



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# CONTROL SOLUTIONS

Return Service Requested



## Save a Tree!

Send us your e-mail address  
for future mailings:  
[debbie@integrateddiabetes.com](mailto:debbie@integrateddiabetes.com)

## CALENDAR OF EVENTS

Integrated Diabetes Services: Programs are FREE and held at the IDS office.

Call 610-642-6055 for info.

**Insulin Pump Club of Greater Philadelphia** – support group and news, education and updates for pump users. 7:30 – 9:00 pm. Weds: Dec 7, 2005; March 1, 2006.

**Parents' Support Group** – education and support for parents of children with diabetes. Parents only, please. 7:30 – 9:00 pm. Weds: Jan. 4, Apr. 5, 2006.

**News, Novelties & Networking** – program for people with Type-1 diabetes, focusing on the latest research and technology in treating/managing diabetes. Co-sponsored by JDRE. 7:30-9:00 pm. Weds: Nov 2, 2005; Feb. 1, 2006.

**NEW! Saturday Support Group for Adults with Diabetes** – Come meet & talk with other adults about living with diabetes. Learn about developing a healthier lifestyle, eating right, exercise, weight loss, blood sugar control and more. Led by Registered Dietitian/Certified Diabetes Educator, Judy Tripathi. First Saturday of each month (2nd Saturday in November only), 11am-noon.