

## Our Mission

The **Cray Diabetes Self-Management Center** supports the University of Kansas Health System's Endocrinology and Internal Medicine Departments for comprehensive diabetes care. The diabetes center is founded on Bud and Sally Cray's beliefs that diabetes treatment should not be hurried and should be based on mutual conversations, listening and problem solving. These beliefs continue to be the driving model for patient care within the program. Patients have opportunities to visit with diabetes educators, attend support groups and take group classes in addition to their regular doctor and advanced practice professional visits.

**For more information contact us at [Craydiabetes@kumc.edu](mailto:Craydiabetes@kumc.edu) or call 913-588-6877.**



## Endocrinology Corner

### What is LADA ?

By Meghan Peters, PA-C

**LADA (Latent Autoimmune Diabetes in Adults)** is an autoimmune condition where the body's immune system attacks the beta cells in the pancreas that produce insulin. However, the "attacking and killing" of all the beta cells may take longer in adults compared to children or teens with type 1 diabetes. The older you are, the longer your body can preserve its beta cells and insulin production. This can be a big reason why adults are originally diagnosed as having type 2 diabetes and later realized to have LADA as their beta cells decline over time.

- Previously referred to as "type 1.5" diabetes
- Often misdiagnosed as type 2 diabetes, as autoimmune diabetes is more commonly thought of in children
- Autoimmune diabetes makes up 2-12% of cases of adult-onset diabetes
- More than half of autoimmune diabetes presents in adults (rather than in children)
- Up to 90% of people with autoimmune diabetes do not have any family history of type 1 diabetes

#### When should we suspect LADA?

- Diagnosis before 50 years old
- Normal weight
- Poor response to typical treatments for type 2 diabetes

#### How do we test for LADA?

- Autoimmune labs to test for antibodies against the pancreas
- C-peptide test to check if the body is still making insulin

#### Why is early diagnosis important?

- Misdiagnosis and delaying insulin can increase the risk of diabetic ketoacidosis and long-term complications
- Screening for other autoimmune conditions (e.g., thyroid issues, celiac disease) is important, as they are at higher risk for having multiple autoimmune disorders
- Early blood sugar control can help the pancreas to preserve its ability to produce insulin for a longer period

#### How to treat LADA

- Medications for type 2 diabetes can still be effective if a person's pancreas is still producing insulin
- Insulin therapy is needed if the pancreas is no longer producing sufficient amounts to cover the body's needs



## Access to Diabetes Experts at the Cray Diabetes Self-Management Center

By Race Shepherd, MS, RD, CDCES

Our **Cray Diabetes Self-Management Education and Support (DSMES)** program provides flexible options for managing diabetes, including telehealth, in-person visits, and virtual group classes.

### **Telehealth (Virtual) Access: Endocrinology Providers and Diabetes Educators**

Telehealth makes it easy for patients who can't or don't want to travel. Virtual consultations are ideal for people with busy schedules, mobility issues, or those in remote areas. They provide the flexibility to attend appointments from home, making it easier to stick with the program. Virtual access also helps during situations where in-person visits are difficult, such as bad weather or public health concerns. Telehealth visits are accessed through the visits portion of your My Chart. If you are comfortable getting into your My Chart for messaging or looking at future appointments, you can likely attend virtual visits too!

### **In-Person Access: Three Locations**

For those who prefer face-to-face interaction, we offer in-person sessions at three locations. These sites are conveniently chosen to give patients access no matter where they live. In-person sessions offer direct support from certified diabetes educators and hands-on education. This format works best for patients who feel more comfortable discussing their health concerns in person or want more interactive, personalized care. Patients can choose from Main Campus (a.k.a MOB) in Kansas City, KS, College Square Medical Pavilion in Overland Park, KS, and Englewood Center in Gladstone, MO. Not all providers are available at all locations.

### **Afternoon and Evening Virtual Group Classes: Diabetes Educators only**

For added flexibility, we offer virtual group classes on Monday evenings (6-8 pm) or Tuesday afternoons (12-1 pm). Group classes foster a sense of community, giving patients the chance to interact, ask questions, and learn from each other. They provide the same education that would be provided during our one-on-one sessions, but in a quicker timeline of only 8 weeks. The sessions, led by experienced educators, cover key topics like diet, exercise, and medication. After completion of our group class, patients will follow up at least once with an educator. Ongoing support is available after that as well!

### **Free Online Classes:**

In addition to the clinic visits and group classes, there are multiple online classes designed to provide support and more information on specific topics related to nutrition and diabetes management. All patients, family members, employees, and community members are encouraged to participate. Registration for these classes is available free of charge on our website, <https://www.cookingwithcray.com>.

By offering these options—telehealth, in-person visits, group classes, and free online classes—we make sure anyone can access the support they need, no matter their situation.

#### **Services Available:**

- Medical Visits (MD, PA, NP)
- Individual Diabetes Education
- Group Diabetes Education Classes
- Telehealth options available

#### **Locations:**

- KUMC Main Campus - 2000 Olathe Blvd, Kansas City, KS 66160
- College Square Medical Pavilion - 12000 W 110th, Overland Park, KS 66210
- Englewood Center - 101 NW Englewood Rd, Gladstone, MO 64118



## Expert Advice

### Staying Up to Date on Your Diabetes Care

By Aubrey Hall, RD, CDCES

You are the most important member of your diabetes care team. Managing your diabetes is in your hands - that includes making healthy food choices, staying physically active, taking your medication, and regularly checking your blood glucose. Your diabetes healthcare team is here to guide you by teaching you how to manage your diabetes and monitoring A1C, blood pressure, cholesterol, and other factors to help prevent long-term complications. The list below is a useful guide for you and your healthcare team to stay up-to-date on diabetes care.

#### At every office visit:

- Check your blood pressure
- Check your weight and discuss a reasonable weight target with your healthcare provider
- Bring your glucometer or CGM reader to appointments and discuss blood glucose readings with health care provider
- Review your eating patterns
- Discuss your physical activity
- Discuss any lifestyle, work, or emotional changes
- If you use nicotine, talk about ways to quit
- Talk about medications that you are currently taking

#### At least every 3 to 6 months:

- Get your A1C checked

#### At least once a year:

- Check your cholesterol
- Get a dilated eye exam
- Get a flu shot
- Get a complete foot exam
- Have your kidney function checked

#### At least once in a lifetime:

- Get a pneumonia vaccine



## Diabetes Distress

By Nickky McClelland, LSCSW

Managing diabetes can be overwhelming, frustrating, and downright discouraging. *It's ok not to be ok.* The first step is recognizing your unique challenges and reaching out for help, which can be tough but is crucial. According to the CDC, people with diabetes are 2-3 times more likely to experience depression than people without diabetes. Diabetes Distress is real and can negatively impact you even if you have been managing well for years. Here are some effective coping strategies to add to your diabetes management toolbelt for overall success. And remember, your Cray Diabetes care team is always available and ready to help support you.

#### Increase Positive Coping Strategies:

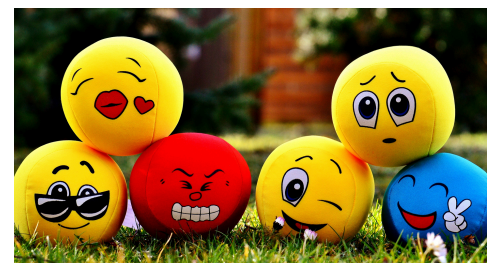
- Stay connected- friends, family, healthcare team
- Do things you enjoy/make you happy
- Develop a plan
- Get moving (physically & mentally)
- Eat healthy
- Get enough sleep
- Ask for help

#### Reduce Negative Coping Strategies:

- Emotional/over or binge eating
- Emotional or physical isolation from loved ones, or healthcare team
- Depression
- Self-criticism
- Substance use
- Giving up
- Avoidance

#### To Reduce Stress, Anxiety and/or Diabetes Distress:

- Practice deep breathing exercises regularly
- Set small, attainable goals & celebrate the "victories"
- Focus on the solution and not the problem





## Healthy Eating

### Mealtime Insulin Dosing on Low Carbohydrate Diets

By Anna Newby, MS, RD, CDCES

Many people with Type 1 and Type 2 diabetes use low carbohydrate diets to help improve their after-meal blood glucose rise. This strategy can significantly reduce blood glucose after meals, but some people still notice a rise, despite limiting carbs.

**Carbohydrates**—found in grains, beans, starchy vegetables, fruit, and milk—are the main foods that raise blood sugar. While these foods aren't “bad” for you, they turn into glucose and need to be managed.

Did you know **protein** and **fat** also contribute to glucose? Protein and fat turn into glucose at a much slower rate, with only a small portion of these foods affecting blood sugar compared to 100% of carbohydrates. For those on insulin, this can be tricky, as insulin is usually dosed based on carbohydrates in the meal.

Fats have little impact on blood glucose and don't need to be included in mealtime insulin dosing. However, protein does raise blood glucose, especially with high-protein meals. If you have a high-protein, low-carbohydrate meal and notice your blood glucose rises, try dosing for 20% of the protein grams as if they were carbohydrates.

- *Example: For a 30-gram protein smoothie with 4 grams of carbohydrate, dose for the 4 grams of carbs plus 20% of 30 grams of protein (6 grams), for a total of 10 grams.*

This could be a helpful starting point for managing blood sugar after meals. If your blood sugar doesn't rise after a low-carb, high-protein meal, you don't need to try this strategy.

Managing blood sugars with insulin can feel like a puzzle, and we hope this strategy can help solve a piece of that puzzle!



## Healthy Eating Recipe

### Apricot Almond Bites

By Pattie Lueyot, MS, RD, CDCES

This is my go-to healthy vegan energy bites made with dried apricots and raw almonds. It's a great snack option for adults and children. It's satisfied my craving for sweets while providing low carb and less sugar content with some healthy fats. I also like to add 2-3 tablespoons of flaxseed meal and chia seeds for more fiber.

**Nutrition Facts per 1 bite:** Calories 46, Fat 3.3 g, Carbohydrates 3.1 g, Fiber 1.6 g, Protein 1.5g

#### Ingredients (Makes 10 bites):

- ½ cup raw almonds
- 1 cup dried apricots
- 2 tbsp unsweetened shredded coconut
- 1 tbsp chia seeds
- ½ tsp vanilla essence
- ½ tsp ground cinnamon

#### Directions:

1. Put the almonds in a food processor and pulse until roughly chopped.
2. Add the apricots, coconut, chia seeds, vanilla essence, and cinnamon and pulse until chopped well.
3. Using 1 heaping tablespoon at a time, form the mixture into balls.
4. Put in the fridge for 1 hour to set up, then enjoy!

These can be stored in an airtight container in the fridge for up to 1 week.

Recipe from [www.thewholesomefork.com](http://www.thewholesomefork.com)

For more healthy recipes: visit <https://www.cookingwithcray.com>, and also to sign up for free cooking demo sessions and learn how to cook healthy recipes and more!



SCAN ME