SSEP Update



(Sweet Success Extension Program) SSEP, A Nonprofit Corp. PO Box 7447, Chico, CA 95927 Phone 800.732.2387 <u>ssep1@verizon.net</u> <u>www.sweetsuccessexpress.org</u>

SSEP and the "Lois Legacy"



The SSEP Board of Directors first mourned the loss and now celebrate the life and legacy of Dr. Lois Jovanovic. She will forever be remembered for her leadership and contributions to SSEP while serving on the Board of Directors from its inception until 2012. (Photo provided by Sansum Clinic)

Dr. Jovanovic was an internationally recognized scientist and a visionary, in addition at SSEP we thought of her as a caring, supportive colleague and mentor. She was an advocate for other health care professionals, especially aspiring women, as well as her patients. Dr. Jovanovic personalized relationships and she encouraged others to follow their hearts and aspirations. Dr. Jovanovic was a medical giant ahead of her time in diabetes and reproductive management and care, which she boldly taught based on research – changing management and instilling confidence in care givers.

In the 1980s when the California Diabetes and Pregnancy Program (CDAPP) Sweet Success Program was being implemented, Dr. Jovanovic recognized the opportunities this program presented to improve care for women with diabetes. She worked closely with the prestigious CDAPP group of doctors, nurses, dietitians and social workers in developing the Sweet Success Guidelines for Care and implementing the Sweet Success model of care in over 250 California diabetes and pregnancy programs. Independent of state funding, Dr. Jovanovic implemented a tertiary center Sweet Success program in the Sansum Clinic. Her futuristic research had a powerful, nationwide impact on the success of the California Sweet Success guidelines and model of care.

Over the years, word of the success of this program in California spread as Dr. Jovanovic and the other Sweet Success experts spoke at national and international conferences. By the 1990s, programs in other states were requesting information about Sweet Success and in 1995, Sweet Success Conferences were opened to nationwide registration and Dr. Jovanovic was there with many other CDAPP experts to present at those events. This conference became the Sweet Success Express Annual Sweet Success Research Conference and Dr. Jovanovic was on the conference planning committee for years and spoke at many of these events.

Dr. Jovanovic unselfishly gave of her time to SSEP, health care professionals and patients. She reviewed professional education materials, spoke at our conferences and guided us during our quarterly board meetings for years. She left us richer for having known and worked with her. She changed the way the world manages diabetes and reproductive care.

Dr. Jovanovic was bigger and bolder than life itself. We will always cherish our time with her as the "Lois Legacy" is carried forward.

Fall 2018 - Vol 13 No 4

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SSEP Update GOAL is to publish useful information and/or tools to help team members provide quality diabetes and pregnancy care.

SSEP Mission: Our mission is to improve pregnancy outcomes and long-term quality of life for women with diabetes and their offspring, which extends beyond birth for both mother and child. We work with provider groups to increase their knowledge and delivery of care by:

Developing and/or endorsing events and activities that increase their knowledge.

Supporting multidisciplinary health care teams as they take a proactive approach, focused on healthy lifestyles.

Encouraging providers to involve the entire health care system, community and patient at all levels in supporting lifestyle changes that foster improved longterm health and quality of life.

SSEP Contact Information www.SweetSuccessExpress.org cindy@proedcenter.com - ssep1@verizon.net ssep9@aol.com Upcoming Conferences

Sweet Success Express & SSEP Associate Training & Specialty Seminar in Albuquerque, April 25-26, 2018

Sweet Success Express 2019: Perinatal Diabetes and Prevention:, Embassy Suites Anaheim South, CA, November 7-9, 2019

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SSEP Mailing Address/Phone: PO Box 7447, Chico CA 95927-7447 - Phone: 800.732.2387

NYC - Perinatal Diabetes: Opportunities for Prevention and Care - SSEP Conference & Associate Training - Gigantically Successful

Perinatal Diabetes: Opportunities for Prevention and Care, SSEP Associate Training and Conference was held on October 12-13, 2018, at New York University Langone Medical Center and was co-sponsored by New York University. It was designed to provide a comprehensive update and review of current practice standards and contemporary specialty topics related to diabetes and reproductive health. Fifteen (15) national and international speakers provided practical and relevant management strategies as well evidence-based preventive interventions.

This was first training/conference SSEP has provided in New York. There were 112 participants representing 16 states which exceeded expectations. The evaluations were outstanding showing that the topics, discussions and networking was timely and appreciated. Participant comments indicate they are looking forward to a repeat event in New York in a year or two.

SSEP wishes to thank each of our sponsoring partners for their support for this event.



SSEP dedicated the 2018 conferences held in New York and California to the life and legacy of Dr. Lois Jovanovic. She supported SSEP from its inception and was from New York City, NY before later settling in Santa Barbara, California. She would have been proud that these events were being held at these locations. (See details on page 1)

Sweet Success Express 2018: Prevention - Return on Investment Research Conference 22 Years of Successful Events

or the 22nd time, the **Sweet Success Express 2018: Prevention - Return on Investment Research Conference** was held in California and was very successful. The venue for the last several years has been the Embassy Suites Anaheim South in Garden Grove, CA. Eleven (11) national and international speakers focused on how to invest in preventive management strategies to provide positive returns on diabetes and reproductive health outcomes.

There were 175 attendees representing 14 states at this event. About 73% were from CA. The poster session and exhibit hall offered participants many opportunities to network and learn more about current research. Once again the attendees loved the massage chairs available to use for a small donation to SSEP. They were in use a majority of the time and all donations are most appreciated..

Again, thank you to all that participated in this event. The planning has begun on Sweet Success Express 2019, to be held at the same location on November 7-9. Please watch the newsletters and the website at <u>www.sweetsuccessexpress.org for updates</u>.

SSEP wishes to thank our sponsoring partners for their support for this event.

SSEP had developed a strong following from many dedicated clinicians. We are proud of all the progress clinicians have made to improve services to their patients. SSEP is honored to be a small part of their success.

This event was supported by an Educational Grant from The Community Benefit Grant Program at Hoag This event was supported by an Educational Grants from **Medtronic Diabetes.** Professional Education Center (PEC) co-sponsored the event and provided many donated services.

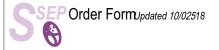
Thank You to our Exhibitors:

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GUIDELINES-AT-A GLANCE Quick references CD or Flash drive

1001 - \$25 - For GDM 2018: 66-pages summarizing key points for GDM management.*

1002 - \$25 - For Pregnancy Complicated by Preexisting Diabetes 2018: 60-pages Key points for

managing preexisting diabetes during pregnancy.*

#1003 - \$25 - For Medication Management 2017: 29-pg instructions for calculating and adjusting insulin injections: pumps/ oral meds. Includes insulin calculation practice sections."

#1023 - \$60 - Complete Set of 3-G/Lines-SAVE \$15/set*

#1051 - \$35 - Diabetes & Reproductive Health Resource Manual 2016 - Over 150 health education, nutritional and psychosocial tools for patient and professionals. Useful for patient teaching and staff training. Purchaser may print and personalize for your program's use.

Membership Programs

#1101- \$55/yr - Individual Membership -1 member. #1102 - \$125/yr - Organizational Mbrshp. -3 mbrs. at 1 facility BENEFITS: Newsletter; Conference/Ed material discounts; Online standards of care consults: email updates and Personalized Membership Card. Annual Drawing; Earn 6 extra chances to win with every \$100 donation to SSEP. FREE: Guidelines-at-a-Glance - Join & apply discount to this order! No tax or S/H for this item

Patient Handouts

#1201- Sweet Success Food Guide - English #1202- Sweet Success Food Guide - Spanish \$1/ea - Minimum order: 25 - Sample of each / \$5 S&H Color coded pictorial food groups patient handouts with labeled portion along with a personalized meal plan for meals and snacks for easy use. Reproduces with permission from CDAPP Sweet Success.

> **Teaching PowerPoint Presentations** *CD or Flash Drive

#1501 - \$25 - 2016 - Tests for Screening and Diagnosis for Diabetes during Pregnancy and Postpartum

36 slides- ADA &Sweet Success recommendations for testing. Ideal for in-services and new personnel.*

#1502 -\$35 - Insulin Therapy During Pregnancy 2017 Part 1: Insulin Injections & Part 2: Insulin Pump Therapy. Includes insulin analogues, calculating & adjusting insulin for both injections and pump use during pregnancy.*

Sign-up for SSEP Newsletter & Conf. **Brochures**

Send email address to ssep1@verizon.net

For more information email ssep1@verizon.net www.sweetsuccessexpress.com

Available O	nline						
UPDATED- 2016							
Includes Guidelines at a Glance for GDM 2018; Current ADA							
Recommendations & Link to CDAPP	Guidelines for Care,2015						
5 Hours							
01-Preconception/Contracepion							
02- Medical Nutrition Therapy	#1301 Complete Set						
3 Hours	of 12 (40 Hours)						
03-Screening & Dx GDM	\$189!						
04-Self-monitoring Blood Glucose	(Less than \$5/CE Hr.)						
05-Medication Management	Free: Guidelines at						
06-Hypoglycemia	a Glance for GDM						
07-Maternal/Fetal Assessment	and Guidelines for						
	for Care 2015 down-						
09-PostPartum/Breastfeeding	load						
10-Neonatal Care	No shipping fee when						
11-Exercise	taken online						
12-Psychosocial/Cultural Issues							
Sweet Success Guidelines for Care							
14-Complete set of 12 modules [40	hrs] - \$189						
Contact us for group discounts - for	6 or more - same facility						

#1301 -SSEP SELF-STUDY SERIES CE COURSES

#1401 - FREE - SSEP - SWEET SUCCESS ASSOCIATE PROGRAM Packet: how to become a Sweet Success Affiliate Program. (May be added to Order Form - No cost for packet)

PATIENT HANDBOOKS

#1601 Eng / #1602 Sp - GDM Patient Handbook 2016 28 pgs - diabetes, pregnancy, testing, labor/delivery, breastfeeding and followup.

#1603 Eng - 2015/ #1604 Sp -2012 - Type 2 DM in Peg. Pt. Handbook 44 pgs - before/during/after pregnancy.

#1601-04: Average (5th - 6th grade) reading level.

Mix & Match - GDM/Type 2/Eng/Sp

< 10 =\$3.50/ea 10 - 24=\$3.25/ea 25- 49=\$3/ea 50-199=2.75/ea ≥200=2.50/ea Watch for Conference Information Updates at

www.sweetsuccessexpress.org - On "Conference" page

CE CREDITS

AMA PRA Category 2 Credit™ is self-designated and claimed by individual physicians for participation in activities not certified for AMA PRA Category 1 Credit™. Participants should only claim credit commensurate with their level of participation. SSEP is a non-profit organization and has no commercial conflict of interest

Nurses: SSEP is a provider approved by the California Board of Registered Nursing Provider #13813 for up to 40 Contact Hours. Certificates available at end of conference for pre-registered attendees.

Physicians: BRN accredited programs may be submitted as AMA PRA Category 2 Credit™

Registered Dietitians/Dietetic Technicians, Registered: The 12 SSEP Self Study Modules have been approved by the Commission on Dietetic Registration for 40 CPEUs for RDs and DTRs. Qualifies for CDE Renewal.

SSEP ssep1@verizon.net

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15% - SSEP Associate Programs 10% - SSEP Individual/Organizational					7.75% Tax - CA only						
					Ship/handling [\$5 up to \$50]						
Members & CA Affiliate Programs Affiliate/Individual Member						(\$15 orders \$50-\$200)					
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Fax Credit Card orders to:530-343-3575 - Ph 800.73						Thank you!					

For more information email ssep1@verizon.net

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Ways Colleagues and Friends can Support SSEP

One way to Donate to SSEP that Costs you Nothing

When you shop on amazon - call up **smile.amazon.com** and put SSEP as your contribution destination - your transaction doesn't change at all, but SSEP gets a contribution from amazon.

By clicking on the link below SSEP will automatically be your contribution destination. http://smile.amazon.com/ch/34-2044369

Thanks to those of you already participating - SSEP is receiving small quarterly contributions - pass this along to friends and let's make the donations bigger.

Make a Year-end Donation to SSEP

The **Giving Season** is upon us, and **giving to Charitable Organizations continues to give**. Contributions to SSEP, a nonprofit charitable organization, are **tax deductible** to the extent of the law and **100% of funds donated will be utilized toward activities to improve outcomes for mothers** with diabetes and their offspring.

Donation can be made:

online at <u>www.sweetsuccessexpress.org/make-a-donation.html</u>

mailed to SSEP, PO Box 7447, Chico, CA 95927

✓ by calling 530-343-3504

A contribution in any amount will be most appreciated.

The Power of Diabetes Educators by Joann Henry RNC MSHS

This year was the first SSE Conference I have ever missed in 22 years. Last year, I had to leave early, but this year due to my husband's health, I was not able to attend at all. But I want you to know I missed seeing you - my friends - and hearing the wonderful speakers.

Each year I try to tell the diabetes educators, in the short introduction I'm allowed, how proud I am of you. I have no doubt that it is the diabetes educators who are responsible for the advancements that have been made in the care of women with diabetes related to pregnancy. Only people who love what they do could accomplish this.

There is a quote by Robert Collier that reminds me of our work. It goes, "Success is the sum of small efforts repeated day in and day out". That is prevention at it's best and that is what we do and what we teach. We do what we love, most of it is repeated small efforts, but we know it works. That is why we are successful and that is why we are so great at what we do.

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Personalized membership card
Membership fee tax deductible to the extent of the law

Membership fee supports member services

Cost: Individual - \$55/yr Organizational - \$125/yr (Includes 3 members)

For more info visit

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on the Products Page or see Order Form on page 3 This is your invitation to Join

HIGH BLOOD SUGAR DURING PREGNANCY UPS RISK OF MOTHER'S TYPE 2 DIABETES, CHILD'S OBESITY - an NIH Study released on Tuesday, September 11, 2018

U.S. Department of Health and Human Services NATIONAL INSTITUTES OF HEALTH NIH News National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) <<u>https://www.niddk.nih.gov/> -</u> CONTACT: Amy F. Reiter, 301-496-3583, <u>email:NIDDKMedia@mail.nih.gov</u>

Mothers with elevated blood glucose during pregnancy – even if not high enough to meet the traditional definition of gestational diabetes

https://www.niddk.nih.gov/health-information/diabetes – were significantly more likely to have developed type 2 diabetes a decade after pregnancy than their counterparts without high blood glucose.

For children born to mothers with elevated or normal glucose, researchers found no statistically significant difference between the two groups of children in terms of their combined overweight and obesity, the study's primary outcome. However, when obesity was measured alone, children of mothers with elevated blood glucose were significantly more likely to be obese.

The results are part of a follow-up study

http://jamanetwork.com/journals/jama/fullarticle/10.1001/jama.2018.11628 published Sept. 11 in the Journal of the American Medical Association. Funded primarily by the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), part of the National Institute of Health, the Hyperglycemia and Adverse Pregnancy Outcomes-Follow-up Study <u>http://www.hapo.northwestern.edu/</u> or HAPO-FUS, followed mothers and their children 10-14 years after birth.

The original HAPO study found that even modestly elevated blood glucose levels increased the risks of complications for the baby both before and shortly after birth. Based on these results many, but not all, organizations adopted a new definition of gestational diabetes <<u>https://www.niddk.nih.gov/health-information/diabetes/overview/what-is-diabetes/gestational,</u> a type of diabetes that occurs during.

a type of diabetes that occurs during.

HAPO-FUS compared the long-term effects of blood glucose levels in mothers who would have met the new definition of gestational diabetes with those who did not. Researchers aimed to learn if modest increases in blood glucose increased the mother's risk of developing type 2 diabetes or prediabetes and the risk of obesity in the mother's offspring at least a decade after giving birth.

The study examined 4,697 mothers for type 2 diabetes, prediabetes and other disorders of glucose metabolism. Among women with elevated blood glucose during pregnancy, nearly 11 percent had type 2 diabetes

https://www.niddk.nih.gov/health-information/diabetes/overview/what-isdiabetes/type-2-diabetes at the follow-up study visit 10-14 years after childbirth and about 42 percent had prediabetes https://www.niddk.nih.gov/healthinformation/diabetes/overview/what-is-diabetes/prediabetes-insulin-resistance. Of their counterparts who did not have elevated blood glucose during pregnancy, about 2 percent had type 2 diabetes and about 18 percent had prediabetes. Mothers with elevated blood glucose during pregnancy – even if not high enough to meet the traditional definition of gestational diabetes.

https://www.niddk.nih.gov/health-information/diabetes – were significantly more likely to have developed type 2 diabetes a decade after pregnancy than their counterparts without high blood glucose.

Researchers analyzed 4,832 children for overweight and obesity, collecting data using body mass index (BMI), body fat percentage, skin fold thickness and waist circumference. For children born to mothers with elevated or normal glucose, researchers found no statistically significant difference between the two groups of children in terms of their combined overweight and obesity, the study's primary outcome.

However, when obesity was measured alone, these measures all showed that children born to mothers with elevated glucose levels were more likely to be obese. For example, using BMI, 19 percent of children born to mothers with elevated blood glucose were obese, compared with 10 percent for children of mothers with normal glucose. Adjusting for the mother's BMI reduced – but did not eliminate – the differences between the groups.

"The differences in mothers and their children due to the mother's higher blood glucose are very concerning. Even accounting for the mother's weight, glucose had an independent effect," said Dr. Barbara Linder, a study author and senior advisor for childhood diabetes research at the NIDDK. "Our findings add to the motivation to find ways to help women at high risk for gestational diabetes who are or plan to get pregnant to take steps to reduce their risk."

The original HAPO study <u>https://www.nih.gov/news-events/news-</u> releases/mothers-high-normal-blood-sugar-levels-place-infants-risk-birthproblems_looked at 23,316 mother-child pairs and found that a mother's blood sugar levels, even short of diabetes, were associated with her newborn's birth weight and body fat. HAPO results led an international panel of experts to recommend new diagnostic criteria for gestational diabetes in 2010. However, not all professional groups adopted these proposed criteria.

"HAPO helped redefine gestational diabetes, and now its follow up continues to raise important alarms about the long-term danger of high blood glucose levels during pregnancy," said study chair Dr. Boyd Metzger, emeritus Tom D. Spies Professor of Nutrition and Metabolism at the Northwestern University Feinberg School of Medicine, Chicago. "This study shows that both mothers with elevated blood glucose levels and their offspring are at higher risk for adverse health effects later in life. More research is needed to find interventions to help both these women and their children."

None of the women in HAPO-FUS were diagnosed with or treated for gestational diabetes during their pregnancy. HAPO recruited an international, racially and ethnically diverse group. Limitations of the data in HAPO include that body mass index was obtained during pregnancy, not before. As well, HAPO-FUS did not collect data on the women or children's lifestyles to evaluate other factors that could contribute to obesity or type 2 diabetes.

The results build on findings from other studies showing that type 2 diabetes in mothers during pregnancy is associated with obesity in that mother's offspring and that elevated blood glucose increases risk of type 2 diabetes in the woman after pregnancy.

"HAPO and its follow-up study have shown the detrimental long-term effects of elevated blood glucose on both mother and child and the importance of early intervention for women at risk for gestational diabetes," said NIDDK Director Dr. Griffin P. Rodgers. "We hope these results will be used to improve the health of generations to come."

HAPO-FUS was conducted at 10 clinical centers around the world: --Northwestern University and Lurie Children's Hospital, Chicago --Kaiser-Permanente Southern California Department of Research and Evaluation, Pasadena --Case Western Reserve University at Metro Health Medical Center, Cleveland --The Hospital for Sick Children, Toronto --Rajavithi Hospital, Bangkok --The University of the West Indies, Bridgetown, Barbados --Royal Victoria Hospital, Belfast, Northern Ireland --The Chinese University of Hong Kong --Royal Manchester Children's Hospital, Manchester, England --Helen Schneider Hospital for Women, Petah Tikva, Israel

HAPO-FUS was funded under NIDDK grant 1U01DK094830

https://projectreporter.nih.gov/project_info_description.cfm?aid=8277164&icde=37 233788&ddparam=&ddvalue=&ddsub=&cr=1&csb=default&cs=ASC&pball=, and NIH's National Center for Advancing Translational Sciences grant UL1TR001422 https://projectreporter.nih.gov/project_info_description.cfm?aid=9472411&icde=40 856495, with additional support from NIH's Eunice Kennedy Shriver National Institute of Child Health and Human Development.

The NIDDK, a component of the National Institutes of Health (NIH), conducts and supports research on diabetes and other endocrine and metabolic diseases; digestive diseases, nutrition and obesity; and kidney, urologic and hematologic diseases. Spanning the full spectrum of medicine and afflicting people of all ages and ethnic groups, these diseases encompass some of the most common, severe, and disabling conditions affecting Americans. For more information about the NIDDK and its programs, see <u>https://www.niddk.nih.gov.</u>

About the National Institutes of Health (NIH): NIH, the nation's medical research agency, includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. NIH is the primary federal agency conducting and supporting basic, clinical, and translational medical research, and is investigating the causes, treatments, and cures for both common and rare diseases. For more information about NIH and its programs, visit <<u>www.nih.gov>.</u>

NIH...Turning Discovery into Health - Registered, U.S. Patent and Trademark Office.

This NIH News Release is available online at: <u>https://www.nih.gov/news-events/news-releases/high-blood-sugar-during-pregnancy-ups-risk-mothers-type-2-diabetes-childs-obesity.</u>

To subscribe (or unsubscribe) from NIH News Release mailings, go to <u>http://service.govdelivery.com/service/subscribe.html?code=USNIH 1.</u> If you subscribed via the NIH LISTSERV, go to <u>https://list.nih.gov/cgi-bin/wa.exe?A0=nihpress.</u>

Reflections by the SSEP CEO

Cindy Parke, RNC, CNM, MSN

SSEP would like to thank everyone for their support in this very busy fall season. We have been so very busy with both the New York City Conference and the annual research conference in Anaheim, CA. Because of the hard work and donated time of so many on the SSEP team, and the generosity of time and shared knowledge of our speakers, we advanced the goals of SSEP. The comments from participants told us that we have taken these opportunities to "improve pregnancy outcomes and quality of life for women with diabetes, and for their offspring through education for health care professionals." We will focus on continued expansion of our efforts to reach more professionals with our excellent services.

I am amazed that it is already post-Thanksgiving! I hope that you had much to be thankful for and that your time included family time. Having been a medical professional for my life, I know that many sacrifice family time to care for patients, thank you for your service. I am balancing concerns and joys in my own life and recognizing that focusing on the positive is a must! I woke this morning to a beautiful sunrise at the beach (work mixed with a bit of pleasure). In fact, because of a low cloud layer there were two: the sun came above the horizon, then hid behind the clouds and rose again! Find joy in your work, and remember that your efforts affect at the minimum two lives as you assist women in pregnancy complicated by diabetes.

Guidelines at a Glance for Preexisting DM - 2018

<u>Now available for purchase -See Order Form on page 3 or at</u> <u>www.sweetsuccessexpress.org - on products page</u> <u>Item #1002 - still only \$25</u>

LIMITED SPECIAL OFFER

Diabetes in Pregnancy Self-Study Modules Updated in 2017 40 CE / CPEU

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SSEP, PO Box 7447, Chico, CA 95927, ssep1@verizon.net or Ph 800-732-2387

Links and Resources

Use of Codeine and Tramadol during Pregnancy

There have been reported incidents of pregnant patients being prescribed codeine for pain control. While there is no specific guidance to avoid codeine in pregnant women, a pregnant woman can become a breastfeeding mother and Codeine can cross into the breastmilk. The FDA and ACOG's recommendations are to avoid codeine for breastfeeding women due to risk of overdose in the neonate. This warning also includes Tramadol. Links to the FDA and ACOG websites are below.

https://www.fda.gov/Drugs/DrugSafety/ucm549679.htm https://www.acog.org/Clinical-Guidance-and-Publications/Practice-Advisories/Practice-Advisory-on-Codeine-

and-Tramadol-for-Breastfeeding-Women .

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Type 1 Patient Handbook for Download

JDRF has a diabetes and pregnancy patient handbook for women with type 1 Diabetes that can be downloaded by professionals or patients. A link has been placed on the SSEP website at <u>www.sweetsuccessexpress.org on the Resource page</u>. It can also be accessed directly on the JDRF Resources page. The direct link is <u>http://typeonenation.org/resources/newlydiagnosed/t1d-toolkits/</u>.

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FREE education product each year (\$25.00+ value)
Quarterly Newsletter
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Membership fee tax deductible to the extent of the law
Membership fee supports member services

Individual Membership - 1 person Organizational Membership - 3 people - same facility

FOOD GUIDE

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