

SSEP Update

(Sweet Success Extension Program)



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SSEP in Joint Providership presents: 23rd Annual Sweet Success Express Research Conf.

PERINATAL DIABETES - Focus on Patient-Centered Care

Nov. 7-9, 2019 - Embassy Suites Anaheim South, CA



SSEP in Joint Providership with the Perinatal Advisory Council, PAC~LAC, and cosponsor, the Professional Education Center (PEC), will present the 23rd Annual Sweet Success Express Research Conference, Perinatal Diabetes - Focus on Patient-Centered Care on Nov. 7-9, 2019 at the Embassy Suites Anaheim South, Garden Grove, CA.

Changes in management guidelines for diabetes in pregnancy and constantly evolving technologies create complex and uncertain workplace issues for clinicians. Those who desire a competitive advantage in today's rapidly changing work environment search for content that speaks to them and knowledge that they can apply to improve patient outcomes. The curriculum for this event is developed to meet the evolving workforce need for knowledge and application – what current guidelines are and how to incorporate the changes into their unique clinical setting.

You won't want to miss the interactive, **Pre-conference day workshops:**

- Workshop 1) New Technology: CGM & Pump**
- Workshop 2) A Plan for Maternal/Fetal Assessments.**

Dynamic speakers will present current management strategies based on the concepts of patient-centered care, the team approach and new technologies. Topics will include creative and practical applications of evidence-based management strategies. Concepts of self-management education, team management, preventive interventions, and treatment modalities for current clinical applications will be integrated into the program. The goal is to train clinicians to provide the highest quality care based on each patient's individual needs with the power to achieve improved health outcomes.

The content of the SSE 2019: Focus on Patient-Centered Care event parallels that of the 2019 American Diabetes Association (ADA) Standards of Medical Care in Diabetes of focusing on Patient-centered Care and is consistent with the CDAPP Sweet Success model of care and current ACOG Position Statements.

We invite you to join SSE 2019: Perinatal Diabetes – Focus on Patient-centered Care, where you are sure to have a meaningful experience. The meeting will provide many opportunities for networking and discussions and to build collaborations and contacts with a wide range of professionals in the field of diabetes and reproductive health. We are sure that you will find this to be a truly exciting meeting presenting both clinical management and basic research.

Some of the speakers include:

Jeffrey Sperling, MD



Linda (Lynn) Barbour, MD

Teri Hernandez, PhD, RN



You won't want to miss these powerful speakers

Siri Kjos, MD



Gladys (Sandy) Ramos, MD



Geetha Rao, RD, MS, CDE

Julie Daley, RN, BSN, MS



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 long-term 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 2019: Perinatal Diabetes: Focus on Patient-Centered Care: Embassy Suites Anaheim South, CA, November 7-9, 2019

SSEP Board of Directors 2019 - 2020

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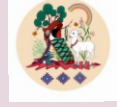
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Continuing education for MD, RN, RD & LCSW

For brochure, registration & lodging info visit:
www.sweetsuccessexpress.org/conferences.html



Recap - Recognition - Summary of SSEP & Sweet Success Express:



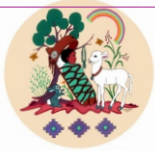
PERINATAL DIABETES - Power of the Team

A SSEP Associate Training and Specialty Conference - Albuquerque, NM

SSEP, in Joint providership with the Perinatal Advisory Council (PAC~LAC), and cosponsored by the Professional Education Center (PEC) presented Perinatal Diabetes: Power of the Team Associate Training and Specialty Conference at the Hyatt Regency Albuquerque, in Albuquerque, NM, on April 25-26, 2019. SSEP and PEC collaborated with the Navajo Area Sweet Success Group Associate Programs to plan and present the event. The Navajo Area Consultation Service Agreement that provides funds for education for the Navajo Area Sweet Success Group Associate programs provided substantial monetary support for this conference.

This conference will address the concept of patient-centered care and team management, which parallels that of the 2019 American Diabetes Association (ADA) Standards of Medical Care in Diabetes. Patients are partners with health care providers in medical management, and care must be addressed from all perspectives of body and mind.

Attendance exceeded, 21 RD and 20 non-licensed health care providers (MS, NA, CNA, Health Techs). Only 6 listed they were CDE, but the anticipated 75 participants with a total of 105 participating, including 46 RN, 1 LVN, 8 NP, 2 CNM, 9 MD/PhD likely there actually were more CDEs. Seventeen (17) states were represented with 35% from AZ, 26% NM, 9% CO, 7% UT, 6% CA, 4% TX and the other 13% from AK, FL, GA, KS, MD, MT, NC, NH, OR, WA, WY. The Evaluations were excellent with the mean for all speakers for both days at a 4.45 rating out of 5.



SSEP, SSE and PEC extends sincere gratitude to The Navajo Area Sweet Success Associate Programs and the Navajo Area Diabetes Program for their volunteer help and financial support for this event. Without their assistance this event would not have been possible.

Supported by an educational grant from MEDTRONIC DIABETES




Alleviating Pain - Restoring Health - Extending Life

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Supported by an educational grant from Novo Nordisk, Inc.



Novo Nordisk is changing diabetes

BENCH-TO-BEDSIDE: NIMH RESEARCH LEADS TO BREXANOLONE, FIRST-EVER DRUG SPECIFICALLY FOR POSTPARTUM DEPRESSION (NIH Release)

U.S. Department of Health and Human Services NATIONAL INSTITUTES OF HEALTH NIH News National Institute of Mental Health (NIMH)
<https://www.nimh.nih.gov> - For Immediate Release: Wednesday, March 20, 2019

CONTACT: Claire Cole, 301-443-4536, [e-mail:NIMHpress@nih.gov](mailto:NIMHpress@nih.gov)

What:

Approximately 1 in 9 women in the United States experiences symptoms of postpartum depression, according to the Centers for Disease Control and Prevention - https://www.cdc.gov/mmwr/volumes/66/wr/mm6606a1.htm?s_cid=mm6606a1_w. Now, the U. S. Food and Drug Administration (FDA) has approved brexanolone - <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm633919.htm>, an analog of the endogenous human hormone allopregnanolone and the first drug specifically designed to treat postpartum depression - <https://www.nimh.nih.gov/health/publications/postpartum-depression-facts/index.shtml>.

Some psychiatric drugs owe their discovery to chance - serendipitous observations of clinical benefit - or a process of incremental improvement based on drugs previously discovered by chance. Not so with brexanolone, which has a truly novel mechanism of action and was developed by design, thanks to a series of basic and translational neuroscience studies. FDA approval represents the final phase of a bench-to-bedside journey for this drug -- a journey that began in the NIMH Intramural Research Program (IRP).

In the 1980s, NIMH IRP researchers discovered that metabolites (products formed when the body breaks down or "metabolizes" other substances) of the steroid hormones progesterone and deoxycorticosterone bound to and acted upon receptors for gamma-aminobutyric acid (GABA) -- a major inhibitory neurotransmitter in the brain. These steroids were found to amplify GABA-activated chloride ion currents, thereby impacting the excitability of neurons.

This finding led to a series of studies, completed by researchers in the NIMH IRP and by researchers at institutions funded by NIMH, that clarified how these metabolites fluctuate during times of stress and during the estrous cycle in rats and the menstrual cycle in humans. Research indicated that the concentration of one of these metabolites (allopregnanolone) increases during pregnancy, but then drops after birth. In some women, this drop triggers the development of depression and anxiety.

A biopharmaceutical company utilized these basic research findings to develop brexanolone, a drug that can be used to treat postpartum depression by restoring levels of this metabolite. Successful clinical trials have led to FDA approval of an injectable version of this drug - <https://www.fda.gov/downloads/AdvisoryCommittees/CommitteesMeetingMaterials/Drugs/PsychopharmacologicDrugsAdvisoryCommittee/UCM624643.pdf>.

Want to learn more about this story? NIMH experts are available to provide information on postpartum depression and the importance of, and the science underlying, brexanolone.

This NIH News Release is available online at: <https://www.nih.gov/news-events/news-releases/bench-bedside-nimh-research-leads-brexanolone-first-ever-drug-specifically-postpartum-depression>.

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-GLines-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- \$65/yr - Individual Membership - 1 member.
- #1102 - \$175/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 SH 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

#1301 - SSEP SELF-STUDY SERIES CE COURSES Available Online
UPDATED- 2018

Includes Guidelines at a Glance for GDM 2018; Current ADA Recommendations & Link to CDAPP Guidelines for Care, 2015

5 Hours

- 01-Preconception/Contraception
- 02- Medical Nutrition Therapy

3 Hours

- 03-Screening & Dx GDM
- 04-Self-monitoring Blood Glucose
- 05-Medication Management
- 06-Hypoglycemia
- 07-Maternal/Fetal Assessment and Guidelines for
- 08-Intrapartum and Delivery
- 09-PostPartum/Breastfeeding
- 10-Neonatal Care
- 11-Exercise
- 12-Psychosocial/Cultural Issues

Free: Guidelines at a Glance for GDM

and Guidelines for Care, 2015 download

No shipping fee when taken online

#1301 Complete Set of 12 (40 Hours)
(Less than \$5/CE Hr)

#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
- #1603 Eng - 2015/ #1604 Sp - 2012 - Type 2 DM in Preg. Pt. Handbook

28 pgs - diabetes, pregnancy, testing, labor/delivery, breastfeeding and followup.

44 pgs - before/during/after pregnancy.

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

- < 10 = \$3.50/ea
- 10 - 24 = \$3.25/ea
- 25 - 49 = \$3/ea
- 50 - 99 = 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 neither SSEP nor PEC has commercial conflict of interest.

Nurses: Professional Education Center (PEC) is a co-sponsor of SSEP educational events and is a provider approved by the California Board of Registered Nursing Provider #9890 for up to 40 Contact Hours. Certificates available upon completion of modules.

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 CEUs for RDs and DTRs. Qualifies for CDE Renewal.

SSEP

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(H) _____ Fax _____

Email _____ Order Date _____

Item #	Qty	Description	Chose One →	CD / Flash	Price Ea	Times Qty	Final Cost

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(\$15 orders \$50-\$200) _____

(\$25 orders \$200-\$500) _____

(Call 530-343-3405 if >\$500) _____

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Print name on card _____

Billing Address of Card if different from mailing address _____

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3 or 4 Digit security code _____

Fax Credit Card orders to: 530-343-3575 - Ph 800.732.2387

Thank you!

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

Ways Colleagues and Friends can Support SSEP at No Cost to Them

Reward yourself by Donating to SSEP - it Costs you Nothing

Sign-up to donate through SmileAmazon and earn 3 entries in Summer SSEP Member Drawing for free registration to 2 day Nov. SSE Research Conference

- Just send date signed up, your name and contact information to ssep1@verizon.net

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>

- pass this along to friends and let's make the donations bigger.

Make Donation directly to SSEP

Contributions to SSEP, a nonprofit charitable organization, are tax deductible to the extent of the law and 100% of funds donated are utilized toward activities to improve outcomes for mothers with diabetes and their offspring.

✍ Donation can be made online, mail or phone

✍ www.sweetsuccessesexpress.org/make-a-donation.html

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

✍ by calling 530-343-3504

Contributions in any amount are most appreciated.

Colorado law caps cost of insulin at \$100 a month - the first state to take action

- Colorado has become the first state to cap insulin prices, which have more than doubled since 2012.
- The state is capping co-payments for diabetics with private insurance at \$100 per month.

By - Associated Press - Thursday, May 23, 2019

DENVER — People with diabetes in Colorado won't have to pay more than \$100 a month for insulin under a new law. Gov. Jared Polis signed legislation Wednesday that caps insurance co-payments on insulin no matter the type of insulin. KCNC-TV reported that the Democrat declared that the days of insulin price gauging are over in Colorado at a ceremony filled with people affected by diabetes.

The bill was sponsored by state Rep. Dylan Roberts, who lost his brother, Murphy, to diabetes.

Nationally the average insulin price nearly tripled from 2002 through 2013, and prices have risen 10% or more a year since then, forcing many diabetics to ration their insulin. Some have ended up in hospitals and a few have died as a result, which has led to congressional hearings on the issue.

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- ✍ Membership fee supports member services

Cost: Individual - \$65/yr

Organizational - \$175/yr

(Includes 3 members)

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

DAILY FOLIC ACID SUPPLEMENT MAY REDUCE RISK OF GDM (NIH Study)

U.S. Department of Health and Human Services NATIONAL INSTITUTES OF HEALTH NIH News Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) <<https://www.nichd.nih.gov/>>
For Immediate Release: Tuesday, April 30, 2019

CONTACT: Robert Bock or Meredith Daly, 301-496-5134, <e-mail: nichdpress@mail.nih.gov>

DIABETES NIH study suggests supplement that reduces risk of birth defects may also have maternal health benefit. Taking a folic acid supplement daily before pregnancy may reduce the risk of gestational, or pregnancy-related, diabetes, according to a study by researchers at the National Institutes of Health and other institutions. The findings appear in Diabetes Care.

Folic acid is the synthetic form of folate <https://ods.od.nih.gov/factsheets/Folate-Consumer/>, or vitamin B9, which is found in leafy green vegetables, nuts, peas, beans and other foods. The U.S. Preventive Services Task Force recommends <https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/folic-acid-for-the-prevention-of-neural-tube-defects-preventive-medication> that all women of reproductive age take a daily supplement containing 400 to 800 micrograms of folic acid to reduce the risk of conceiving a child with a neural tube defect, a class of birth defects affecting the brain and spinal cord.

Gestational diabetes <https://www.niddk.nih.gov/health-information/diabetes/overview/what-is-diabetes/gestational/definition-facts> results when the level of blood sugar, or glucose, rises too high. It increases a woman's chances for cesarean delivery and for blood pressure disorders during pregnancy. It also raises the risk of cardiovascular disease and type 2 diabetes later in life. For infants, gestational diabetes increases the risk of large birth size and of obesity during childhood and adulthood.

In the current study, researchers analyzed data from nearly 15,000 women enrolled in the Nurses' Health Study II a long-term study of diet, lifestyle factors and disease outcomes among female nurses. Among more than 20,000 pregnancies, there were 824 cases of gestational diabetes. Compared to women who did not take a folic acid supplement, those who took less than 400 micrograms were 22% less likely to develop gestational diabetes. Those who took 600 micrograms were 30% less likely to develop the condition.

"In addition to reducing the risk for neural tube defects, our findings suggest that taking folic acid supplements before pregnancy might provide a low-cost way to reduce the risk of gestational diabetes," said the study's senior author, Cuilin Zhang, M.D., Ph.D., of the Division of Intramural Population Health Research at NIH's Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD).

The researchers did not find a lower risk of gestational diabetes associated with consumption of foods that contain high amounts of folate. They cited earlier studies showing that folic acid is absorbed more easily into the body, compared to the naturally occurring form of the vitamin. Researchers also noted that previous studies have found that insufficient folate is associated with insulin resistance (difficulty using insulin to lower blood glucose), which may precede the development of type 2 diabetes in non-pregnant people.

REFERENCE: Li, M, et al. Prepregnancy habitual intakes of total, supplemental, and food folate risk of gestational diabetes mellitus: a prospective cohort study. Diabetes Care. 2019; <https://doi.org/10.2337/dc18-2198>

This NIH News Release is available online at: <https://www.nih.gov/news-events/news-releases/daily-folic-acid-supplement-may-reduce-risk-gestational-diabetes>.

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>

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 www.sweetsuccessexpress.org on the Resource page. It can also be accessed directly on the JDRF Resources page. The direct link is <http://type1oneration.org/resources/newly-diagnosed/t1d-toolkits/>.



NOW AVAILABLE Sweet Success Food Guides

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Personalized meal plan for meals and snacks
Easy for patient teaching & use - in English & Spanish

at \$1/each - minimum order \$25 / \$5 S&H
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Guidelines at a Glance for Preexisting DM - 2018

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

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Updated in 2017 40 CE / CPEU
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