Sweet Success Express 2015: Vision for the Future
Scientific Symposia and Conference

19th Annual National Research Conference
Diabetes in Pregnancy

*Expanded Events planned:

*Workshops Thursday; ICD 10 Coding or DSME Training

*Scientific Symposia Friday; "Omics" technology and the human microbiome - new insights in maternal metabolism, maternal and infant nutritional needs, breastfeeding, contraception and more

*Controversial Practice Standards Saturday
Managing Co-morbidities, weight management, implementing nutrition practice guidelines, teratogenic exposures. oral medications, skin-to-skin contact to breastfeeding, diabetes Doula Mgmt, environmental health and reproduction

*Plus: Abstract and Poster Presentations and Exhibitor Hall
Nursing CE, CMEs and CPEU credits available - Up to 21.25 hours
Discount pricing when you attend the full conference with a workshop. Further discount for Sweet Success members.

Book early, limited room block at Embassy Suites Anaheim South in Garden Grove, CA

What are "omics technology & the human microbiome?"

"Omics" Technology refers to the analysis of large amounts of data representing an entire set of kind, especially the entire set of molecules, such as proteins, lipids, or metabolites, in a cell, organ, or organism.

The human microbiome is the population of trillions microorganisms that live in our gut, mouth, skin and elsewhere in our bodies. These microbial communities have numerous beneficial functions relevant to supporting life such as digesting food, preventing disease-causing bacteria from invading the body, and synthesizing essential nutrients and vitamins. Researchers are beginning to decipher how microorganisms influence biological functions beyond the gut and play a role in immunological, metabolic, and neurological diseases.


Why is this important for diabetes & reproductive care?
The gut microbiota has been defined as a “super organ” with diverse roles in health and disease. New research reveals the gut microbiome play a role in developing obesity, type 2 diabetes, celiac disease, non-alcoholic fatty liver disease, innate immunity and much more. (CMAJ, 2013)

Our “super organ” is modified by diet and also modified by pregnancy. A high fat, high sugar diet can alter the microbiome to release more inflammatory substances into the body. Researchers are paying more attention to what a mother eats both during pregnancy and lactation because of the influence of diet on the composition of the gut microbiome. The mother’s microbiome directly affects the infant’s microbiome.

(Freedman, Jed Norbert lecture, ADA 2014)

One Canadian study stated an increasing concern over rising cesarean delivery and insufficient exclusive breastfeeding. It stated that infants born by cesarean delivery were lacking a specific group of bacteria found in infants delivered vaginally, even if they were breastfed. Infants strictly formula-fed, compared with babies that were exclusively or partially breastfed, also had significant differences in their gut bacteria. Children born by cesarean delivery or fed with formula may be at increased risk of a variety of conditions later in life; both processes alter the gut microbiota in healthy infants, which could be the mechanism for the increased risk. (CMAJ, 2013)

Reference: "Infant gut microbiota influenced by cesarean section and breastfeeding practices; may impact long-term health. Canadian Medical Association Journal, Feb. 11, 2013"
“Our findings indicate that it would be a good idea to screen women who have had a stillbirth for depression for at least 3 years after the stillbirth,” Dr. Hogue said.

The study authors call for additional research to help women manage the grieving process after stillbirth to lower the later risk of depression.

Information on diagnosing and treating depression

About the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD): The NICHD sponsors research on development, before and after birth; maternal, child, and family health; reproductive biology and population issues; and medical rehabilitation. For more information, visit the Institute’s website at http://www.nichd.nih.gov/.

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 www.nih.gov.

Resources from National Diabetes Education Program

NDEP urges all mothers with a history of gestational diabetes to learn about their lifelong risk for getting type 2 diabetes.

Share these NDEP resources in your community:

It’s Never Too Early…To Prevent Diabetes
web resource

Did You Have Gestational Diabetes When You Were Pregnant? What You Need to Know.
tip sheet

The Lasting Impact of Gestational Diabetes
video

Managing Type 2 Diabetes: Sorcy's Story
video

Family Health History and Diabetes: Sandra
web resource

Family Health History and Diabetes: Sorcy
web resource Did you have gestational diabetes?

NDEP has tips to help you prevent or delay the onset of type 2 diabetes:
http://1.usa.gov/1kvG54C
Order Form Updated (07/01/2014)

GUIDELINES AT A GLANCE-2013 (Quick references)
#1001 - $20 - For GDM - DVD: 60+ pages summarizing key points for GDM management.
#1002 - $20 - For Pregnancy Complicated by Preexisting Diabetes - DVD: 56 pages, Outlining key points for managing preexisting diabetes during pregnancy.
#1003 - $20 - For Calculating and Adjusting Insulin (DVD 2012): step-by-step instructions for calculating and adjusting insulin doses (includes team management of insulin therapy & insulin calculation practice sections).
#1023 - $50 - Complete Set of 3-SAVE $10/set
#1101 - $55/yr - Individual Membership
#1102 - $125/yr - Organizational Membership (3 members in 1 facility)

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SSEP CD PowerPoint Presentations
#1501 - $24 - UPDATED 2011 - ADA Recommendations Tests for Screening and Diagnosing Diabetes During Pregnancy and Postpartum 36 slides-ADA & Sweet Success recommendations for testing. Ideal for in-services and new personnel.

#1601-04: Average reading level. Mix and Match Price: < 10 = $3.50 ea; 10 - 24 = $4.25 ea; 25 - 49 = $5.33 ea; 50 - 199 = $2.75 ea; ≥ 200 = $2.50 ea.

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References: CDAPP Sweet Success G/L for Care 2012; AAP Neonatal Hypoglycemia Rec.; ADA-SMC 2011; CDAPP Pocket Guide 2008

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Thank you!

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 <www.nih.gov>.

Researchers at the Phoenix Epidemiology and Clinical Research Branch (PECRB) <http://www.niddk.nih.gov/research-funding/at-niddk/labs-branches/PECRB/pages/about.aspx>, part of the NIH’s National Institute of Diabetes and Digestive and Kidney Diseases, studied 12 men and women with obesity in the facility’s metabolic unit. Using a whole-room indirect calorimeter -- which allows energy expenditure to be calculated based on air samples --researchers took baseline measurements of the participants’ energy expenditure in response to a day of fasting, followed by a six-week inpatient phase of 50 percent calorie reduction. After accounting for age, sex, race and baseline weight, the researchers found that the people who lost the least weight during the calorie-reduced period were those whose metabolism decreased the most during fasting. Those people have what the researchers call a "thrifty" metabolism, compared to a "spendthrift" metabolism in those who lost the most weight and whose metabolism decreased the least.

“When people who are obese decrease the amount of food they eat, metabolic responses vary greatly, with a ‘thrifty’ metabolism possibly contributing to less weight loss,” said Susanne Votruba, Ph.D., study author and PECRB clinical investigator. "While behavioral factors such as adherence to diet affect weight loss to an extent, our study suggests we should consider a larger picture that includes individual physiology -- and that weight loss is one situation where being thrifty doesn’t pay.”

Researchers do not know whether the biological differences are innate or develop over time. Further research is needed to determine whether individual responses to calorie reduction can be used to prevent weight gain.

“The results corroborate the idea that some people who are obese may have to work harder to lose weight due to metabolic differences,” said Martin Reinhardt, M.D., lead author and PECRB postdoctoral fellow. “But biology is not destiny. Balanced diet and regular physical activity over a long period can be very effective for weight loss.”

More than one-third of American adults are obese. Complications from obesity can include heart disease, type 2 diabetes and certain types of cancer, some of the leading causes of preventable death. “What we’ve learned from this study may one day enable a more personalized approach to help people who are obese achieve a healthy weight,” said NIDDK Director Griffin P. Rodgers, M.D. “This study represents the latest advance in NIDDK’s ongoing efforts to increase understanding of obesity.”

The researchers will next study how lean people respond to increased caloric intake. People interested in participating in research may call 602-200-5326 or visit <www.clinicaltrials.gov> (Clinical Trial # NCT00687115) for information. Support for the study comes from the intramural research program of the NIDDK.

The NIDDK, a component of the 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 <http://www.niddk.nih.gov>.

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