

Diabetes Discourse

Volume 5, Issue 1

November, 2014

Quarterly Newsletter of the Bovell Cancer Diabetes Foundation (BCDF)

This Free Newsletter is a Vital Resource for Diabetes Prevention and for anyone Living with Diabetes

Our Vision

- Enriching lives, one person at a time

Our Mission

- To enrich the lives of people living with or at risk for cancer and diabetes by providing financial resources, support, preventive and management education.

BCDF Activities Include:

- Modest grants to individuals/families affected by cancer or diabetes to enhance their quality of life
- Prevention and management education, and small-group workshops
- Advocacy and referrals to resources for individuals/families affected by cancer or diabetes
- Writing grant proposals and fundraising

BCDF relies on donations to carry out its mission. We are an incorporated, charitable Foundation in the Republic of Trinidad and Tobago. BCDF functions with volunteers only and no paid staff.

To contact us with comments, questions or articles, phone 868)

667-2576 or e-mail: adelia@bovellcancerdiabetesfoundation.org;

<http://www.bovellcancerdiabetesfoundation.org>

Disclaimer: *This newsletter is meant to educate and inform. It is not to be used as medical advice. Please consult your doctor for medical advice.*

Accept our Apologies

The November 2014 issue of our quarterly newsletter has been delayed **until now...**

Diabetes Discourse

Volume 5, Issue 1

November 2014

Quarterly Newsletter of the Bovell Cancer Diabetes Foundation (BCDF)

Happy 2015 to All

The Board of Directors of the Bovell Cancer Diabetes Foundation (BCDF) wishes all our readers, our followers on social media, our volunteers, our participants and the people of Trinidad and Tobago a happy, productive 2015.

What a Success!

6th Annual Diabetes in the Limelight Jamboree

Bovell Cancer Diabetes Foundation joined the 2014 World Diabetes Day Campaign by hosting its 6th Annual Diabetes in the Limelight Jamboree to create awareness, provide diabetes and diabetes-related education, information and basic health

Go to page 3

INSIDE THIS ISSUE

- 1 Our Apologies; Happy 2015 to All; What a Success!
- 2 Our Year in Summary
- 2 Let's Talk Cancer with Dr. Liselle Bovell
- 4 Thanks
- 6 Too much Sitting and Diabetes; Caralli & Diabetes
- 7 Glaucoma & Diabetes; Coffee & Diabetes
- 8 BCDF 2015 Rainbow Calendar of Events
- 9 Breakfast & Diabetes Awareness Morning
- 10 Thanks to the companies

Our Year in Summary

Book Launch - BCDF launched two books late December, 2013 – “*Diabetes Education and Prevention: An Instructional Module for Children*” and “*Diabetes Workbook*”



Breakfast and Diabetes Awareness Dialogue Fundraiser - April, 2014 Funds enabled us to continue working with communities to stamp out diabetes. We are pleased to tell you that 100% of your money went directly to our projects.



Quarterly Newsletter – 75% of the Volume 4 issues (November, February and August) were circulated electronically to 500+ persons and hard copies distributed to a smaller number.

Diabetes Discourse

Volume 4, Issue 2

February 2014

Quarterly Newsletter of the Bovell Cancer Diabetes Foundation

[Go to page 4...](#)

LET'S TALK CANCER WITH...

Dr. Liselle Bovell

My Cervical Cancer Story: Part I

Trinbagoian by blood, roots & heritage: Miss Iona Pierre 10/2/2014

This is a story of my war for my life first, then my quality of life and living. It is about prevention, listening to one's body, the importance of having and obtaining true advocates, self-love, will, courage, and confidence to question the choices you are offered when facing health challenges. You must be an active and present participant in any treatment being done to your body and you must always speak up, no matter what.

March 2005: First noticeable symptoms started - the first sign of cervical cancer that I started to experience was significant bleeding (bright, red blood) from moderate to heavy in between menstrual cycles and during sexual intercourse.

April 2005: The bleeding during sexual intercourse continued and a strong smelling odor (like something died, literally) with a very liquid consistency type of pale, pink discharge. I would wear a tampon coupled with a panty liner, which were changed frequently, and my bathing frequency increased from two to three times daily to barely keep the horrible odour at bay. Later in April 2005 I went to my gynecologist's office to find out the cause of all of these very embarrassing, (to say the very least), and disruptive symptoms. It did not take very much for my gynecologist to diagnose. As soon as she got started the tumor was right there at the opening. It was a very localized and an impressive size according to her. She said I needed to go straight to the Oncologist's office. From that moment on I knew that I was not dealing with something that was going to be dealt with easily or with a quick fix and the most unnerving feeling of dread and foreboding came over me.

Two weeks later: I had an appointment with my first Oncologist. As soon as the pelvic exam began, because so much fluid and discharge had built-up as soon as the instruments were inserted to examine the abnormality, the examination table down unto

the floor was soaked, and the horrible stench filled the examination room. During that exam we found out the cause for all of those humiliating and disruptive symptoms. A very impressive sized and localized tumor had grown right at the front of my cervix. The size and the very fact that it grew where it did were the causes for the abnormal bleeding. Also, due to the cervix's size, the once healthy living tissue now surrounding the tumor had died, causing necrosis, which was the reason behind the odor (decomposing body stench). There really WAS some sort of decomposing of tissue taking place around the tumor that took up residence in my body without my say so. A biopsy was taken and then sent to the lab for a complete and full diagnosis.

May 2005: The biopsy results revealed that the tumor was malignant. I went in for my first MRI – the results indicated that the cancer was stage 2B. It had not spread to any other organs, nor did it grow up into my uterus, fallopian tubes, or ovaries. During all this - overnight growth and appearance of a malignant deadly tumor, I was just barely a month after my 22nd birthday. My credit was excellent, I had a good enough paying job, that offered tuition assistance so I was going to school for an Accounting degree, paying out pocket. Before my cancer diagnosis I was apartment hunting to move out on my own; not knowing that sadly it would be the last time I would ever be in a position to view a place to live on my own. I made the decision that I was not going to allow myself to be butchered and basically be castrated without a fight. I did intensive and extensive research on the dreadful side effects of conventional cancer treatments. I was determined to try my level best to avoid having those horrible things happen to me just because I had cancer. So I decided to look up alternative therapies and that happened almost immediately. I chose to fight the cancer using naturopathy and other alternative non-invasive means. As soon as my juicer was shipped to me, I became a vegan and a raw foodist overnight cold turkey, changing my

[Go to page 5...](#)

[From page 1...](#)

screening services to community members. This is one of the few health fairs in the country designed to provide such a wide range of diabetes and diabetes-related screening services, diabetes and cancer education and prevention material to the public. The Jamboree, which was free and open to the public, took place at the Cyd Gray Sporting Complex, Roxborough, Tobago. Just ask the volunteers and participants of the Jamboree - it was like a huge health fair, **only better**. It was staffed by medical and non-medical volunteers who did not just tell you what is wrong, they showed you how to practically do simple things to prevent disease and reverse it if you already have it. There were information booths (nutrition, stroke, diabetes), as well as free screenings for blood glucose, blood pressure, cholesterol, A1C, microalbumin, weight clinic (height, weight, body mass index, bone density, waist circumference, body fat, etc.), foot care booth, doctors, ophthalmologist, children's booth, school children poster exhibits, trophy exhibits/evaluation booth and free giveaways. There were also activities for children including storytelling, colouring, and Zumba dancing. The 2014 Jamboree Speaker was Dr. Tsoiafatt-Angus, Secretary of Community Development and Culture, Tobago House of Assembly (THA). The Jamboree received support from First Citizens Bank, Credit Union of Port-of-Spain, Nestle, Division of Education, Youth Affairs and Sport, THA, Tobago Regional Health Authority, Eastern Credit Union, several volunteers, and of course the attendees who benefited. The school children and adults came in their numbers to experience World Diabetes Day (WDD) with BCDF; thanks to the Principals, teachers and parents. WDD (14th November) raises global awareness of diabetes and its escalating rates around the world. The Jamboree was one of the best learning opportunities in Tobago for 2014, and was a good beginning for participants to take charge of their health. Again, thanks to all our supporters!!!!!!!!!!!!!!

From page 2...

Small Group Workshops – April 2014: 40 persons were trained. The topic was “*Aim for Healthy Weight, Diabetes Prevention and Control.*” We are following attendees for changes.




Life for a Child Project – the project continues. We need to increase our children by 50%. Contact us if you know any child with diabetes. This project meets the immediate needs (testing strips, assistance and support for doctors' visits, monitoring and education) of a child with diabetes.

Quarterly Funding – the fund supports family/individuals with diabetes /cancer situations who apply. More than \$8,900.00 was disbursed this year.

Diabetes in the Limelight Jamboree – November, 2014. Successfully held (page 1 of this issue). Roughly 300 school children and over 200 adults participated.

Complimentary Foot Care Exams – November, 2014. Twelve persons received complimentary foot care exams and massages to the tune of \$3,900.00 courtesy Bovell Cancer Diabetes Foundation, Scotia Bank and So in Love with my Health of Atlanta, Georgia.

Lay Foot Care Attendants (LFCA) Trained – November 2014. To culminate Diabetes Month (November), Bovell Cancer Diabetes Foundation (BCDF) implemented its preventive foot care and amputation reduction project - “*So in Love with my Feet*”. Four LFCA were trained to deal with foot assessments, preventive and management of basic foot care problems, massages, education, choosing proper shoes, referrals,

and relatively low-cost foot care preventive measures at the community level. The LFCAs are now conducting an eight-month externship with **13 community members** who have high blood sugar levels. Community members were given initial assessments, shown how to care for the feet, and will be followed for 8-months via telephone calls and face-to-face visits. 

THANKS



The Board of Directors of the Bovell Cancer Diabetes Foundation would like to thank the companies, organisations schools, and individuals who supported the Jamboree whether financially, morally or in-kind. The event would not have been a success without your support.

Companies

First Citizens Bank (Port-of-Spain), COPOS, Eastern Credit Union, Nestlé Trinidad, Moses Tent Rental, Lesville Guest House, Andy Expert Tailoring, Inc., More For Less Store, R & R Auto Repairs Inc., Tobago News, Tobago Channel 5 and Radio Tambrin.

Organisations

Community Development & Culture, Tobago House of Assembly (Dr. Tsoiafatt-Angus), Tobago Regional Health Authority (Dietitian and her team), Roxborough Health Centre (Nurse Davis and her team of nurses), Education, Youth Affairs & Sport, Tobago House of Assembly (financial support).

A BIG THANK YOU to these volunteers

Individuals

Our tireless volunteers - Dr. Eastlyn McKenzie, Helen Bernard, Esla Davidson, Keturah Marcelle-Fraser, Mary Boucher-Hercules, Simona Jackson, Lisa Horsford, Simone Murray, Leah Newsam, Carla Newsam-Blake, Karen Nesbitt, Kathleen Meharry, Merle John, Nurse Lewis, Nurse Davis (Roxborough Health Centre), Judith Trim, Brian Nurse, Marc Anthoni Bovell-Hector, Lestel Moore, Orville Moore, Tulani Murphy, DeBorah Rowser, Niketa Murphy, Joan Phillips-Pierre (also for her financial contributions), Ann-Marie Andrews, Renee Edwards, Kevon Griffith, Daniella Nanton, Kathleen Owens, Janice Corey, all the medical doctors, Stephanie Green, Andy Chapman, Dianne Chapman, Lewis Friedrich, Roger Cipriani, Mrs. Melville, Yvette Wilson.

Schools

Thanks to all the schools, teachers and Principals who helped to make this a success. Look out for the full list of participating schools, teachers and Principals in our next issue. The Bovell Cancer Diabetes Foundation is about to adopt a school, teachers, please look out for the criteria as we put them in place!!!




From page 3...

changing my diet radically. I stopped consuming all refined sugars, all white [processed] foods and cooked food (being a raw foodist). I pretty much only ate pounds of raw fruits, vegetables, nuts and drank between 2-3 quarts of freshly juiced organic fruits and vegetables and at least one gallon of distilled water daily. I also was taking various herbs (which I would learn way too late to help in any way that I was not even close to taking the correct ones to combat this particular cancer). I had a chest mediport that gave sanitary and direct access to my jugular vein. Usually that would be used for traditional conventional chemotherapy. However I had it placed because I was getting very high and potent doses of vitamin C and other vitamins type of therapy. This was being done at a special facility in the Northern Virginia area along with acupuncture. Being driven to that facility where that part of the alternative therapy I was trying first was the most direct support I received during my attempt at attacking this invasive cancer. Since I was eating foods that had such little fat and such a high level of fiber I lost approximately 20-25+ pounds in 2 1/2 months. I was more than determined to beat this cancer and not lose the most precious things to me, my quality of life and living, my freedom and independence, my fertility, the integrity of my body's anatomy especially in the most intimate parts of a woman, her womb internally and externally her genitalia. So I said to myself I can always gain back the weight. This cancer is ferocious and trying to take over aggressively so I had to be aggressive as well and starve and weaken the tumor of what it was using for nutrients and fuel; sugar, bad fats, genetically and molecularly manipulated substances that did not occur naturally in nature. This plan of attack lasted throughout the summer through early autumn of 2005. I still was getting up and going to work during all of that.

Part II of this story will continue in the next issue of Diabetes Discourse, be the first to read it.

TOO MUCH SITTING & TYPE 2 DIABETES RISK

Too much sitting increases the risk of heart disease, type 2 diabetes, and cancer, despite how much a person exercises, according to new research. The study, a systematic literature review published in *Annals of Internal Medicine*, aims to answer some of the questions regarding the relationship between prolonged sitting and health issues after adjusting for physical activity. Previous studies have failed to determine the exact nature of the relationship. Researchers examined 47 studies, and found that, amongst people who sit for prolonged periods of time, even those who exercised regularly experienced worse health outcomes than people who did not spend a lot of time sitting down. One of the studies reviewed indicated that people who sat for less than eight hours per day lowered their risk of hospitalisation by 14%. The World Health Organisation (WHO) suggests that 3.2 million people die every year as a result of inactivity. The biggest sitting-related health risk revealed by the review was a 90% increase in the risk of developing type 2 diabetes. Important links were also observed between inactivity and several types of cancer, including colon, uterine, breast, and ovarian. Aviroop Biswas, of the Toronto Rehabilitation Institute-University Health Network, said: *"We found the association relatively consistent across all diseases. A pretty strong case can be made that sedentary behaviour and sitting are probably linked with these diseases. "When we are standing, certain muscles in our body are working very hard to keep us upright. Once we sit for a long time ... our metabolism is not as functional, and the inactivity is associated with a lot of negative effects. "We found that exercise is very good, but it is what we do across our day," he explained. "Exercise is just one hour in our day, if we are diligent: we need to do something when we are not otherwise exercising, like finding excuses to move around, take the stairs, or carry groceries*

rather than use the [shopping trolley] at the supermarket." Dr. Joshua Septimus, a clinical Associate Professor of Internal Medicine at Houston Methodist Hospital in Texas, was full of praise for the new research, noting that it *"gives us more data to help counsel our patients."* *"The idea that we could exercise for 15 to 20 minutes a day and that could completely erase any harms of a sedentary lifestyle for the other 23 hours a day is just too hopeful. This showed us that yes, there is some benefit to physical activity... but it's not enough."* 

CARALLI AND DIABETES



Bitter melon can reduce blood glucose levels, but more research is required


Caralli or karela (in India) or bitter melon or bitter gourd is a unique vegetable that can be used as food or medicine. It is the edible part of the plant *Momordica charantia* and is considered the most bitter among all vegetables and fruits.

How does it affect diabetes?

Caralli has long been used as a remedy for a range of ailments, including type 2 diabetes. It contains at least three active substances with anti-diabetic properties, including **charantin**, which has been confirmed to have a blood glucose-lowering effect, **vicine** and an insulin-like compound **polypeptide-p**. These substances either work individually or together to help reduce blood sugar levels.

Scientific evidence

A number of clinical studies have been conducted to evaluate the efficacy of Caralli in the treatment of diabetes. In January 2011, the *Journal of Ethnopharmacology* reported that a 2,000 mg daily dose of Caralli significantly reduced blood glucose levels among type 2 diabetics, although the hypoglycemic effect was less than a 1,000 mg/day dose of metformin. Older studies have also suggested an association between Caralli intake and improved glycemic control. March 2008 issue of *Chemistry and Biology* reported that Caralli increased cellular uptake of glucose and improved glucose tolerance.

However, research published in the *Journal of Clinical Epidemiology* in 2007 failed to show any benefits of Caralli for poorly controlled type 2 diabetics, while another clinical review published two years later in the *British Journal of Nutrition* stated that more, better-designed and clinical trials are required to confirm the Caralli's role in diabetes treatment. 

GLAUCOMA AND DIABETES

Glaucoma is caused by excess fluid pressing on the nerve at the back of the eye. It may occur in people with and without diabetes, and can be a complication of diabetes if retinopathy develops.

How does glaucoma start?

The eye produces a small amount of fluid like water in its middle chamber, which flows around the lens of the eye into the front chamber. The fluid leaves the eye using a drainage network and then enters the bloodstream. Commonly, glaucoma causes the drainage system to become blocked, and fluid becomes trapped in the eye. This causes pressure to build up in the eye and pass to the nerve at the rear of the eye. This nerve may become damaged by glaucoma.

Is glaucoma linked to diabetes?

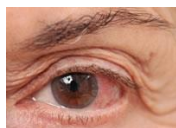
People with diabetic retinopathy have an increased risk of glaucoma. This can happen if abnormal blood vessel growth, which can occur as a result of retinopathy, blocks the natural drainage of the eye.

What are the symptoms of glaucoma?

Glaucoma has very few symptoms in its early stage. As someone with diabetes, an optometrist or another eye specialist should test you for glaucoma at least once each year.

How is glaucoma diagnosed?

Glaucoma may be diagnosed by an optometrist by measuring your eye pressure, checking the eye at the optic nerve, and testing the field of your vision. Experts will quickly be able to determine if you have glaucoma.




COFFEE AND DIABETES



Caffeine (found in coffee) has been shown to impair insulin sensitivity. The effect of coffee on diabetes, when presented in the media can often be confusing. Put simply, coffee contains different chemicals, some of which have beneficial effects whereas others can have a less beneficial effect, such as caffeine, which can impair insulin in the short term.

Caffeine and blood sugar levels

Regular high caffeine intake, over a 4 week period, has been shown to impair insulin sensitivity in people with type 2 diabetes. Whilst the researchers found a relationship between higher coffee consumption and lower sensitivity to insulin, they recognised that the rapid transition to having more coffee may have produced an atypical or emphasised response by the body. A 2009 study of 40,000 participants noted that consumption of 3 cups of tea or coffee a day lead to a 40% lower risk of type 2 diabetes developing. A 2014 study of healthcare professionals in the U.S. and UK, showed that those who increased their consumption of coffee experienced an 11% decrease in risk of type 2 diabetes over the next 4 years. 

Download our BCDF Android App. We have made an Android application to help you keep up to date with our activities. The app works with Android 4.0+. Check out our website <http://www.bovellcancerdiabetesfoundation.org/> for our app, and to donate - help us stamp out diabetes!



BCDF 2015 RAINBOW CALENDAR OF EVENTS

November 2014 - June 2015	Complimentary Foot Care Training of Lay Foot Care Attendants <i>"So in Love with my Feet" Project</i>
January - December	Life for a Child Project Patterned after the International Diabetes Federation's program, this project meets the immediate needs (testing strips, assistance and support for doctors' visits, monitoring and education) of a child with diabetes.
19 th January	Application for First Quarter Funding Deadline - Completed Our mission is enriching lives of people living with cancer and diabetes by providing financial and educational resources
February	Diabetes Discourse Distribution of the free Quarterly Newsletter of the Bovell Cancer Diabetes Foundation Diabetes Share-Line begins
March	Small Group Workshops Hands-on workshops that will provide current information to help participants learn about cancer and diabetes prevention and education.
13 th April	Application for Second Quarter Funding Deadline
25 th April	Breakfast and Diabetes Awareness Dialogue Morning – Market Square, Scarborough, Tobago
May	Small Group Workshops Hands-on workshops that will provide current information to help participants learn about cancer and diabetes prevention and education.
May - December	Diabetes Education on Wheels
June	Small Group Workshops Hands-on workshops that will provide current information to help participants learn about diabetes prevention and management <i>"So in Love with my Feet" Project conclusion</i>
17 th July	Application for Third Quarter Funding Deadline
August	Diabetes Discourse
19 th October	Application for Fourth Quarter Funding Deadline
October/November	Primary School World Diabetes Day Poster Competition Poster design is an expression of creativity and technical aptitude. BCDF presents its sixth annual primary school poster competition for the occasion of World Diabetes Day 2015.
November	Diabetes Discourse
6 th November	Seventh Annual Diabetes in the Limelight Jamboree BCDF joins the World Diabetes Day campaign emphasising diabetes education and prevention New round of <i>"So in Love with my Feet" Project begins</i>

3rd Annual Breakfast & Diabetes Awareness Dialogue

SCARBOROUGH MARKET SQUARE

Come, see, come learn about

DIABETES - how to prevent and manage it

Proceeds will be used to assist our Diabetes Awareness and Education Programme & Projects

Saturday 25th April, 2015

6:00 a.m. - 12:00 Noon

Check out our bargain table with everything under the sun...

Breakfast items: Bakes, hops, pancakes buljol, souse, black pudding, sausage, eggs, cheese, juices... Traditional -cassava bread, chocolate 'tea' ...



Help us 'Stamp Out Diabetes' with only

\$50.00



www.bovellcancerdiabetesfoundation.org
Sign up for our Google Groups
Download our free Android Apps

THANKS TO THE COMPANIES!!!

COPOS Credit Union



Lesville Guesthouse

Moses Tent Rental



R & R Auto Repairs

Andy Expert Tailoring, Inc.



More for Less Store

Tobago Regional Health Authority



Tobago House of Assembly

Education, Youth Affairs & Sport

Community Development & Culture

ROXBOROUGH HEALTH CENTRE