Diabetes Discourse

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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.

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National and Local Community
Unite to Stamp Out Diabetes at
BCDF's 10th Annual Breakfast &
Diabetes Awareness Dialogue



Scarborough Market Square came alive with color, culture, and community spirit on Saturday, June 21, 2025, as the Bovell Cancer Diabetes Foundation (BCDF) hosted its 10th Annual Breakfast Morning and Diabetes Awareness Dialogue. Beginning at 6:00 a.m., the event drew hundreds of attendees who gathered to enjoy a "Breakfast with a Difference" while engaging in important dialogue about diabetes, how to prevent and how to manage it. Patrons were treated to traditional Tobago breakfast items, including bakes, buljol, cassava bread,

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How to Prevent Diabetes: Tips to Control the Condition

Complications from diabetes is one of the leading causes of death and disability in the Trinidad & Tobago. While some types of diabetes are not preventable, others are. This is why it is important to keep track of your habits and health, especially if you are living with pre-diabetes.

What causes diabetes?

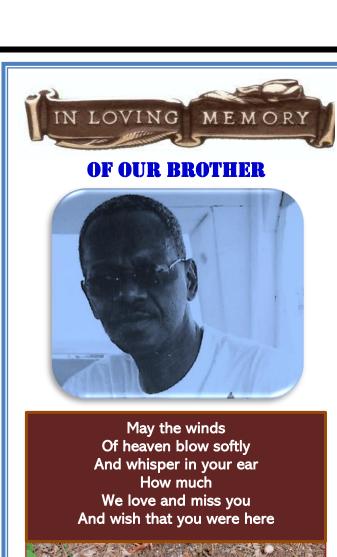
Diabetes develops when your blood sugar levels get too high, or an excess of glucose in the bloodstream. When you eat carbohydrates, your body breaks them down into blood sugar, which is used for energy. If there is too much glucose in the blood, it can lead to health issues, such as diabetes. The direct cause for the condition varies depending on type.

Type 1 diabetes occurs when the cells responsible for insulin production do not function properly. In this case, beta cells in the pancreas make little to no insulin, which is an essential hormone that regulates blood sugar. The hormone helps glucose reach the body's other cells. Without insulin, glucose would build up in the bloodstream. Because of this, people with Type 1 require regular insulin injections. Type 2 occurs when your body stops producing enough insulin or is not using it properly ('insulin resistance'). When someone is insulin resistant, it makes it harder for them to regulate blood sugar levels.

How do you get diabetes?

Type 1 diabetes is an autoimmune disease, while Type 2 is impacted by factors, such as weight gain, lack of exercise and diet. Type 1 is not 'directly inherited,' but 'it has a higher likelihood in people that have had a brother or sister or parent with diabetes'. Type 2 is not considered a hereditary disorder, but you are substantially more likely to develop it if a first-degree relative has the condition.

How to prevent diabetes ...Go to Page 5







From your sisters, brothers, neices, nephews & your BCDF Family



From Page 1... National and Local Community Unite.. and chocolate tea, with options thoughtfully prepared for both traditional and vegan diets. The two breakfast packages—Deluxe and Supreme—sold out by noon, reflecting the enthusiastic support of the national and local community. In addition to the vibrant breakfast experience, the event featured a bustling rummage table under the theme "Everything Under the Sun," offering affordable clothing, books, jewelry, and household items. This segment not only promoted sustainable practices but also provided an opportunity for meaningful community interaction. Another highlight of the morning was the interactive diabetes education segment with a registered nurse on site, where attendees received practical information and blood glucose testing to help prevent and manage diabetes. Uplifting soca music created a festive atmosphere, blending education with celebration. Proceeds from the breakfast sales, and rummage table directly support BCDF's ongoing Diabetes Education programmes, and Cancer reinforcing the Foundation's mission to enrich lives through awareness and action. Special thanks go out to all our treasured volunteers and supporters who helped make this 10th Annual Breakfast Morning a resounding success. Warm appreciation to Strong Minded Survivors for supporting BCDF and traveling to Tobago for the event. Special mention: Mr. & Mrs. Orville Moore of Lesville Guesthouse, Tobago and members of St. Jude's and Church of the Annunciation, Arima, Trinidad for the support. As one participant shared, "This was not just a breakfast—it was a movement for healthier living and stamping out diabetes." We invite vou to relive the highlights in our Photo Gallery.

Make A Donation To BCDF!





Help Stamp Out Diabetes & Cancer!

Photo Gallery - Breakfast 2025



RN with Diabetes Education & Blood Glucose Testing



DJ providing the sound system and sweet Soca music





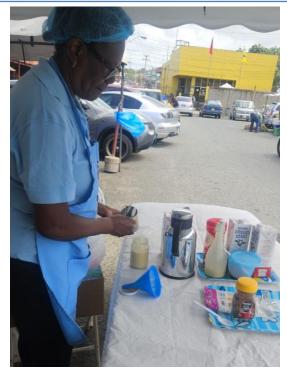


Our Servers & Community Interface



Volunteers with Strong Minded Survivor Gracian Augustine Supporting the Event





Our Tea Corner & Public Interface



Rich Tobago Traditional 'Chocolate Tea' being Served



Photo Gallery Continued...



Inside the Box...



How to Prevent Diabetes... Cont'd

Only Type 2 is largely preventable, and lifestyle changes are the main prevention method. It is known that changes in physical activity and weight loss and lifestyle changes can reduce the risk of developing Type 2. Fat decreases the effectiveness of insulin. To reduce the risk of getting Type 2, it is key to maintain a healthy lifestyle. This includes:

Dietary changes: Eating a healthy, balanced diet that is low in carbohydrates, sugar and saturated fats; and high in fruits, vegetables and grains

Exercise: Engaging in at least 30 minutes of physical activity several times a week.

Diabetes is a "a serious problem," but it is a disease that can be monitored and managed with proper care. A person living with diabetes can have a completely normal life.

Trinbagonians can prevent & control Type 2 diabetes. So why are we not doing it?

The financial cost of diabetes is staggering, but the personal toll is even greater—heart attacks, amputations. blindness. kidnev disease. depression, and premature death. Type 2 diabetes also brings "diabetes distress"—the daily emotional burden of managing a chronic illness, including fatigue, brain fog, and isolation. Frustratingly, it is often preventable and controllable. Yet in Trinidad and Tobago, Type 2 diabetes continues to worsen, exposing deeper issues in our systems. A food industry focused on profits, a healthcare system where amputations are cheaper than prevention, the high cost of healthy living, and the difficulty of changing habits all contribute. What can it take to fix this national problem? Better care can help, but effective multisectoral action from health care, research, science, nutrition, business, public health and politics is needed to change the financial and other incentives that drive so many Trinbagonians toward sickness instead of health.

Modified from:

https://www.usatoday.com/story/news/health/2 023/10/01/type-2-diabetes-preventionprogress/70768126007/

Let's Talk Cancer Dr. Liselle Bovell Breast Cancer



Breast cancer is the uncontrolled growth of abnormal cells in the breast. Breast cancer is one of many types of cancer, and it is the most common cancer among women in the Trinidad and Tobago (T&T). While women are much more likely to develop breast cancer than men, men can be diagnosed with breast cancer, too.

How Does Breast Cancer Happen?

Our bodies are made up of trillions of cells. Healthy cells grow and divide to form new cells as the body needs them. The cells die when they are damaged or old. However, in cancerous cells, abnormal changes in the genes that control cell growth can cause cells to divide out of control. The damaged or old cells do not die as they should. Malignant is another word used to describe cancerous cells. These cells can sometimes form into groups, called tumors. In some cases, cancer cells stay confined to the breast (sometimes called "local to the breast"). Over time, it is possible for some cancer cells to invade the bloodstream or lymph system and spread to other parts of the body. Cancer spread to another part of the body is called metastasis. If you or someone you love has been diagnosed with breast cancer, we know how overwhelming it can feel. For many people, it is unexpected. But you are never alone. BCDF is here for you with information, support, and community, no matter where you are on the diagnosis and treatment path.

Questions to ask your Doctor about breast cancer

Diagnosis, treatment, and for the rest of your life, you will go through many phases in your

Let's Talk Cancer

breast cancer experience and it is normal to have questions about all of them.

After Diagnosis

- Can you provide me a copy of my pathology report?
- What type of breast cancer do I have?
- What is the stage of the breast cancer?
- What is the size of the cancer?
- How far has the cancer spread?
- Has the cancer spread to any lymph nodes?
- Has the cancer traveled outside the breast to any other organs?
- Does the cancer have hormone receptors? (Hormone receptor-positive breast cancer grows in response to the hormones estrogen and progesterone)
- Is the cancer HER2-positive? (HER2-positive breast cancer makes too much of a protein called HER2, and can be more aggressive than other breast cancers.)
- Do I need to have more tests before we decide what treatment is best?
- Would I benefit from genetic testing for an inherited mutation to learn whether I have an inherited breast cancer genetic mutation?
- Do I qualify for genomic tests (tumor biomarker tests, testing the genetic activity in a tumor) to learn about my risk for recurrence?
- What are my chances of survival over the long term?
- Are there other doctors I should see?

Deciding on a Treatment Plan

- How long have you been treating my type of cancer?
- What treatment options do you recommend for me? Why?
- How do these treatments work?
- What are the chances that the cancer could come back after treatment?
- What are the most common side effects of the treatments you are recommending?

Let's Talk Cancer

- How can I manage these side effects?
- How soon will I need to begin treatment?
- How long will treatment last?
- Will I need to take time off work, or can I work through treatment?
- Are there any activity restrictions I will need to follow?
- Will I need extra help at home during treatment?
- I am concerned about losing my hair because of chemotherapy. Can you tell me about resources for preventing hair loss or managing it?
- Will this treatment cause early menopause or menopausal symptoms?
- If I decide to seek a second opinion about the treatments you have recommended, what do I need to do?
- Are there any other ways I need to prepare for treatment?
- What if the treatment does not work or the cancer comes back later
- If you are of child bearing age: I am concerned about how treatment might impact my ability to have children in the future
- Will I be able to breastfeed after treatment?

Before Surgery

- Are you a certified surgeon?
- What type of surgery do you recommend for my diagnosis?
- How long have you been performing this type of surgery?
- What are the side effects of the surgery you are recommending?
- How soon will I need surgery?
- Are there any medicines or supplements I need to stop taking before surgery?
- Is there an option for me to have a lumpectomy (breast-conserving surgery) instead of mastectomy?

Let's Talk Cancer

- What are the risks and benefits of lumpectomy versus mastectomy?
- How long will the surgery take?
- Will you need to remove any lymph nodes? If so, what do I need to know about side effects of lymph node surgery?
- Will I need to stay overnight in the hospital?
- How will I feel after surgery?
- Will there be stitches or staples in my incision?
- How do I take care of the incisions at home?
- Will I need extra help as I recover at home? How should I prepare?
- Are there recovery exercises I will need to do at home after surgery?
- What will my breast look and feel like after surgery?
- Will I have scars?
- Will I still have normal feeling in my breast?
- Is breast reconstruction an option for me?
- Is it possible for me to have breast reconstruction at the same time as mastectomy?
- Is there any reason I may need to wait to have breast reconstruction?
- I don not want reconstruction. Are there any side effects of mastectomy without reconstruction that are different from side effects of mastectomy with reconstruction?
- If I am having side effects after surgery, when should I call your office?
- When will my first follow-up visit be?



Taken from: Living Beyond Breast Cancer. Available at: https://www.lbbc.o rg/about-breastcancer/what-isbreastcancer/questionsto-ask-oncologist

Let's Talk Cancer

Prostate Cancer

Questions for your Doctor – Newly Diagnosed

These questions are to help someone who has just been diagnosed with prostate cancer begin to make a plan with their healthcare team. Consider using a notebook or you phone to record test results, treatments, and upcoming appointments to feel more organized. Having all important information together may help reduce some of the stress of a prostate cancer diagnosis. Diagnosis

- What exactly is my diagnosis?
- What is the stage and Gleason score?
- How aggressive is the cancer? What is my risk group?
- What other tests will be done?
- Should I consider getting genetic testing?

Treatment

- What are all of my treatment options?
- What is the goal of treatment?
- What treatment do you recommend based on my stage and risk
- group? Why do you recommend this particular treatment?
- Am I eligible for a clinical trial?
- What are the potential side effects of the treatments we discussed?
- How can these side effects be managed?
- What will my treatment schedule be?

Living with Prostate Cancer

- Are my siblings, children, and grandchildren at higher risk?
- Where can I get more information about prostate cancer and
- treatment options?
- What steps can I take to be active and healthy during and after
- treatment?
- Do you have resources or services for my spouse or partner?
- How can I find support and resources to help pay for my cancer treatment?

Let's Talk Cancer

Many people seek second opinions to explore all options. Seeking a second opinion is common and doing so can make you feel more confident in the treatment decision that you make. Finding out that you or a loved one has prostate cancer can be scary. Prostate cancer is usually a slow growing disease. You have time to gather information about your diagnosis and make an informed decision about your next steps. Many resources and services are available and BCDF is here to help you along the way

Chemotherapy

Chemotherapy is a treatment that is used to kill cancer cells. It is either given intravenously (through the veins) or orally (as a pill). Chemotherapy is a type of systemic treatment. This means it travels through the bloodstream to affect all of the body's cells. Chemotherapy affects healthy cells, therefore it can cause significant side effects. Chemotherapy is a common treatment for advanced prostate **cancer.** It is often given with hormone therapy or after hormone therapy stops working. It is sometimes used along with hormone therapy in patients with very high risk early stage prostate cancer. Possible side effects of chemotherapy include fatigue, hair loss, nausea, diarrhea, numbness or weakness in fingers/toes, mouth sores, confusion, higher risk for infection, and headaches.

Questions for your Doctor

- Why are you recommending chemotherapy? What is the goal of treatment?
- Is this standard of care or have you modified the approach for my situation?
- When should I begin chemotherapy? What will my treatment schedule be?
- How soon will we know it is working? How will we measure success, failure, and/or progression?
- Will I need other treatments during or after chemotherapy? If so, when?
- How will the chemotherapy be given?
- Where will I go for treatments? Will I need someone to go with me?

Let's Talk Cancer

- How will it affect my lifestyle/quality of life during treatment? After treatment?
- How can my side effects be managed?
- What side effects should I report to you? Who can I call if I need help immediately?
- What steps can I take to be active and healthy during and after treatment?
- What type of support will I need from my caregiver or others? What help
- will you provide? What other support is available? From where?
- How much does this cost? Are there cheaper options?
- How can I find support and resources to help pay for my cancer treatment?

About Prostate Cancer

Prostate cancer is the most commonly diagnosed cancer in men in Trinidad and Tobago. When diagnosed at an early stage, it can usually be treated successfully. In fact, when prostate cancer is caught early, nearly 100% of men diagnosed today will be alive in five years.

What is the Prostate?

The prostate is a small, walnut-shaped gland in the male reproductive system. It sits just below the bladder and surrounds the upper part of the urethra, which is the tube that carries urine from the bladder. The prostate is necessary for reproduction and helps make some of the fluid in semen. It also produces prostate-specific antigen (PSA), a substance that may increase if a man has prostate cancer. Elevated PSA levels don't always mean cancer. PSA levels can also increase due to age, recent sexual or physical activity, or an enlarged or inflamed prostate gland.

What is Prostate Cancer

Prostate cancer occurs when prostate cells stop behaving normally. Normal cells grow, divide, and die on a regular basis. Sometimes, something goes wrong with this process, and the cells do not die as they should. Instead, they create a growth or tumor. Tumors can be benign (not cancerous) or malignant (cancerous). Most

Let's Talk Cancer

prostate cancer grows very slowly, and many men never know they have the disease. However, some prostate cancers are aggressive. It can spread from the prostate to the bone, other organs, and the lymph system. When this happens, the disease is called metastatic prostate cancer. If prostate cancer spreads, or metastasizes, to the bone, you have prostate cancer cells in the bone, not bone cancer.

Prostate Cancer Screening and Diagnosis

Prostate cancer screenings like the PSA blood test can help detect prostate cancer at an early stage often before there are any signs and symptoms. Early detection of prostate cancer gives patients the best chance of living longer. The 5-year survival rate is over 99% when prostate cancer is caught early. When prostate cancer is caught at an early stage, it typically does not show any symptoms. Screening tests like the PSA blood test can detect cancer at this stage when it is most treatable. When symptoms do appear, they can include frequent or painful urination, difficulty urinating, blood in the urine, or painful ejaculation. Sometimes they can be mistaken for other disorders. Common symptoms of advanced prostate cancer may include pelvic or back pain, leg weakness, anemia, and weight loss. It is important to understand your personal risk and talk with your doctor about routine testing. Early detection saves lives.

Taken from: https://zerocancer.org

Prostate Cancer Risk Factors

(HIGH-FAT FOODS)

PROSTATE CANCER RISK FACTORS HORMONES CHEMICALS AGING (+50)FAMILY . INHERITED HISTORY SYNDROME RACE **GEOGRAPHY** ETHNICITY DIET GENE CHANGES

GENETICS

SEPTEMBER • PROSTATE CANCER AWARENESS MONTH