Inquiry into Diabetes Submission 172

Diabetes Inquiry

A personal Submission

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Submitted August 2023 re my Type 2 Diabetes 'journey'

This is a personal story. I will make it brief hopefully though it spans 9 years or so to date. I have never participated in anything like this and want there to be some impact for now, the future and for all pre and current diabetics.

I was diagnosed with Type 2 diabetes after a trip to the local GP on my 56th birthday, as I was feeling so unwell. I was joking at work saying I had inner heat. No doubt it was my liver screaming for me to stop the sugar. Initially I was so relieved that I did not have pancreatic cancer that diabetes seemed like a toddle. I could do this. Well I am alive and writing this but it has never been easy, never easy to swallow meds, never easy to lose weight, never easy not to feel isolated, never easy not to be frustrated by what seems to be highly trained medicos who are turning a blind eye to research, not caring enough to be open minded and not easy to talk to. "Go join Weight Watchers" was a common refrain. I met a lot of Doctors through my work and as they grilled me for information about the reason they had come to see me, I in turn was cheeky enough to ask their Diabetes advice.

Turns out, work stresses, cravings for sweets which had been with me since childhood, some laziness and eagerness of my Doc who I knew through my work to just have a chat and dish out some medications until I came 'under 'control' somewhat was what I had to look forward to. I had to find a Doc who I wasn't paying over \$80 to back then to be taken seriously that I wanted better health. I lost weight by doing the 'usual' but not enough. I exercised and that helped. I purchased the glucose meter and paraphernalia, blood pressure monitor as that has been an issue for 20 years and I was determined to avoid insulin for as long as I could. Lose weight was what the Doc said, lose weight was what the Diabetes people said. I felt like I was spoken to as a child and that went on with 7 day work weeks and weight fluctuating for years. Social occasions including weekly work morning teas that I was expected to join and contribute to, became a nightmare. Sure. I'll bring the cakes and pastries bought with my money that everyone else loves and not eat them.

I stopped work way before my allowed 67 years (now 65) and haven't earned anything since. I was sick, burnt out and had become an introvert. I feel pretty useless to society and have become even more introverted during Covid and since.

I have been so frustrated with poor conventional advice. One fellow I know personally has/had type 2, lowered his carbs after his own research, his GP says he is in remission but has not changed the meds, type or amount, as

he doesn't believe in low carb as a solution. This is not just one local GP's opinion unfortunately

I cannot understand why Docs are not compelled to look into new research. Time it takes, energy I understand but what if funded for a research assistant? See what there is to it?

Big pharma I hear from experts has a lot to do with why there is a lack of research into the whys, hows and treatments that would assist sufferers of Type 2 diabetes such as **Therapeutic Carbohydrate Reduction**. T2D is expensive to treat. I have no income or pension or health benefits so pay dearly through savings and superannuation for my medication. It also costs the taxpayer and government with diabetic hospital stays and such. Once in hospital, what are diabetic patients being fed? Fruit cups, white toast, margarine etc. The health benefits by shifting the focus by medical people to prevention and if necessary, having the patient gain remission or at least lower the medications they are taking is huge.

Is the old food pyramid still for everyone or for anyone for that matter? Dietary guidelines for diabetics through the Diabetes Association seem to not be evidence based at all. **They need to be changed. Lots of fruit, grains and reduced fat dairy and cheese?** What about the RACGP guidelines for this disease? Easy enough to look up. They still want us consuming grains and fruits and only a small amount of healthy fats?

Low carb Canberra and other groups in socials such as Sydney Low Carb, provide supportive, engaging information, advice and ideas for thousands. I was not a Face book member until one lazy day I went searching and found these wonderful admins of a group in Canberra and who I very much needed. These are great support but most of us still need a local GP to assist with monitoring HBA1c and medications.

Prior to Face book I watched a TED talk by the late Dr Sarah Hallberg, a metabolic pioneer. Followed by Dr Jason Fung, Dr Ken Berry and others on social media platforms with millions of followers. Dr Sean O'Mara is the latest US Doc to do research and provide advice that supports the low carb, unprocessed, wholefoods, fasting, exercise recommendations.

Low carb eating works, if you are serious it works super well accompanied by exercise. Let's hear it from our local GP's as they see patients at diagnosis and on going in many many circumstances.

For myself, I want better metabolic health and the medical support required to abandon archaic research and look towards a healthier future. I want open minded rather than sceptical medical practitioners to do their job. I want help avoiding complications such as blindness, loss of a limb due to infection. I am just so frustrated.

I would like funding for diabetes groups to be monitored for research into low carb dietary restrictions. A personal email from a nutritionist at Diabetes Australia in October last year when I asked their position on low carb eating and fasting for diabetics was luke warm at best and really not encouraging. Providing meet ups or seminars that normal working people cannot attend even if they wanted to is not a good use of public monies. I hope that money spent by government aimed at positive outcomes for pre and current diabetes sufferers is not aimed at scare tactics, we know the risks, we want feeless and fearless groups who offer online support and in person if required for all Australians, city and country. Indigenous communities I understand need particular guidance due to risk factors and the impact for them is again, huge.

We don't need fancy apps, supplements derived from wild African rainforests on a Tuesday and we don't need fancy kitchen gadgets. We require support online, a helpline; my preference would be email so I have answers to refer to. Let's not be too scared to give advice based on up to date research, which is disseminated to all staff, and all Medicare funded doctors.

My husband's prediabetes, inflammation and need for pain meds has virtually disappeared after Dr Ken Berry and Dr Jason Fung in the US and their guidance about low carb, backing away from processed carbs and only healthy small amounts of some whole fruits, not fructose and sucrose. He is a new man not a miserable shell.

Telehealth pitfalls from businesses running online health appointments, by completing forms, who are offering medical certificates etc, where no Medicare support is available if using these services, is something I have used various since 2017. They ask a few questions which you can lie in your answers (I admit to this) and receive the meds you are willing to pay for without blood tests, visual consult etc. I have been managing on my own for years.

I want research into and responses to these statements from a local GP; Type 2 diabetes is largely preventable and about 50% of people can achieve remission with the right diet. This is likely to be through carbohydrate reduction.

What do I want as a consumer, patient and citizen?

- I want people to listen. Advocates, researchers, politicians, admin staff. Medical staff, nutritionists, so called experts in this field, following the aforementioned outdated dietary guidelines
- I want research funding pulled from one area to another if necessary re dietary guidelines; see state and national health departments. Nutritionists to not just pull out the 'usual' guidelines when meeting a new patient. Even with my history, my overweight 32-year-old daughter worried about her future has been trotted out the same old dietary guidelines when she needs real help.
- I want State and National diabetes assoc to face reporting bodies on what new work is being done within their organisations. Do they collaborate?

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• I want better subsidised wearable CGMs for those with diabetes over 5 years if they want them. Ones that do not have to be approved by the local GP. This will avoid the constant needle pricks but better still, allow for our own research on what spikes our blood glucose in the day and night. Those blood sugar spikes are deadly.

Therapeutic Carbohydrate Reduction is possibly the biggest and most well kept secret for Type 2 diabetes patients. We need advocates to explore, research and take this super seriously. Who in your family could benefit from this knowledge? It has worked for me, it is an ongoing 'journey' but it works.

Thank you for reading.