Type 1 discovery

100 YEARS OF INSULIN SPECIAL

Issue 86/ October 2020 – January 2021

Life after lockdown
Professor Partha Kar discusses hopes for the future

Chris Bright
Stigma in the type 1 football community

The artificial pancreas
From research to launch

Great Britain’s online type 1 community
#GBDOC

100 YEARS OF INSULIN
Type 1 community preparing to mark the centenary

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A look at past and present scientific achievements. From Frederick Banting discovering insulin to our latest artificial pancreas app

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These foundations and trusts are supporting the following projects:

- The Steve Morgan Foundation
- Diabetes UK My Pancreas Awareness
- Dr. Prath Chennai
- Kings College London
- Can high-intensity exercise combat hypo unawareness?
- Professor Amy McClenahan - University of Dundee
- Human trials for beta cell regeneration
- Professor Paul Johnson - University of Oxford
- Harboring biomarkers in clinical trials of cell replacement
- Dr. Timothy Tye - Kings College London
- Improved, cost-effective prediction of Type 1 Diabetes in early life using combined prediction models
- Dr. Richard Oram - University of Exeter
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The Alan and Babette Sainsbury Charitable Fund
- Blue cell hormone patients with long-standing Type 1 Diabetes
- Dr. Richard Oram - University of Exeter
- Professor Yvett Ster - The Hebrew University - Hadassah Medical School

The Cadogan Charity
- Exploring the translational potential of the NPY Y4 receptor for treating Type 1 Diabetes.
- Dr. Gavin Bewick - Kings College London
- Clinical trials in the Type 1 Diabetes UK Immunotherapy Consortium: Bigger, Smarter, Faster
- Professor Colin Dapenny - Cardiff University
- The beta is a score and beyond: novel composite outcomes measures of islet cell function for use in clinical trials
- Professor Colin Dapenny - Cardiff University

The Mason Le Page Charitable Trust
- Exploring the translational potential of the NPY Y4 receptor for treating Type 1 Diabetes.
- Dr. Gavin Bewick - Kings College London

To find out about all the projects we fund, visit jdrf.org.uk/research

A word from Karen

100 years of insulin and looking forward

Welcome to our World Diabetes Day special issue to celebrate 14 November - Sir Frederick Banting’s birthday - and mark the lead up to the anniversary of 100 years of insulin. A tremendous discovery for which I know millions of people worldwide are grateful.

I know it’s been a difficult time due to the impact of Covid-19. I hope you and your loved ones have managed to stay safe.

I’m proud to see how as a community we have adapted and evolved to help support each other.

Due to the impact of cancelling all of our face to face fundraising events we have taken a hit financially, which unfortunately has been followed by some tough decisions. This has sadly included some JDRF staff redundancies and a restructure of the work we do.

I must also apologise that we were unable to deliver the last issue of Discovery magazine due to resource and cost constraints. This issue will be delivered digitally to the majority. But we would like to hear your thoughts for the future. Please complete this short survey: www.surveymonkey.co.uk/r/ZHYQBG

I would like to take this opportunity to say a huge thank you to all of our supporters. It has been a really tough few months but thanks to your generosity we have managed to continue our fantastic work. Also a huge thank you to our NHS staff and key workers who have looked after us all during this time.

I would like to focus our energy on the future. I am excited about many of the changes we have made at JDRF and I know that we will be able to offer you many more interesting opportunities to get involved and support our work.

Karen Addington
Chief Executive
**New test better predicts which babies will develop type 1 diabetes**

Scientists have devised an approach to predict which babies will develop type 1 diabetes. Seven international sites have followed 7,798 children at high risk of developing type 1 diabetes from birth, over nine years, in The Environmental Determinants of Diabetes in the Young (TEDDY) Study. The new risk score for newborns stems from a JDRF-funded international study. The score incorporates genetics and family diabetes history, alongside measuring the presence of islet autoantibodies in the pancreas - which are a sign that beta cells are being damaged. The study found that this new approach dramatically improved prediction of which children would develop type 1 diabetes. Most importantly, it doubled the efficiency of programmes to screen newborns to prevent the potentially deadly condition of ketoacidosis, a consequence of type 1 diabetes in which insulin deficiency causes the blood to become too acidic. Researchers believe the combined approach can also be rolled out to predict the onset of other diseases with a strong genetic component that are identifiable in childhood, such as celiac disease.

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**Triathlon Triumph at Blenheim**

On Sunday 13 September, a group of parents from The Hall School took part in the Blenheim Palace Triathlon to raise money for JDRF. The event, originally scheduled for May 2020, was postponed due to the coronavirus pandemic and eventually went ahead under strict social distancing measures. A global pandemic and closed swimming pools couldn’t stop this unbelievable team. Not only did they complete the gruelling swim, cycle and run, which challenges even the most experienced of triathletes, they also raised a staggering £55,000 for type 1 research. A huge thank you to everyone who took part in the Blenheim Palace Triathlon for JDRF.

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**Type 1 community prepares to mark centenary of insulin discovery**

The international type 1 diabetes community is preparing to mark the centenary of the discovery of insulin - which is considered one of the greatest breakthroughs in medical history. Frederick Banting and his research collaborators discovered in Toronto, Canada in 1921 that insulin could treat type 1 diabetes. This allowed people with type 1 diabetes to live instead of die - and began the next century of research breakthroughs. World Diabetes Day 2020 - which falls on Banting’s birthday of 14 November - will see JDRF supporters and others affected by type 1 diabetes around the world begin to mark the approaching centenary. JDRF’s activities will focus on the future of type 1 diabetes research as well as the past, highlighting the community’s determination to maintain momentum towards cures. Supporters will be invited to an exclusive online virtual event on 12 November 7-8pm to celebrate Banting’s birthday and kick start activity. To find out more please visit jdrf.org.uk/world-diabetes-day-2020.

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**WILL THE NEXT BOND HAVE TYPE 1 DIABETES?**

Actor and celebrity supporter, James Norton, who lives with type 1 diabetes - has seen speculation mount on whether he’ll scoop the role of cinema’s celebrated spy. Bookmaker’s Ladbrokes declared over the summer that odds on Norton taking up the part had dropped to 6/4. Norton was diagnosed with type 1 diabetes in 2010. He previously said to JDRF: “Managing the condition is a challenge, but I haven’t let it get in my way.”

(Lef) Jeremy Irvine, Jamie Dornan and James Norton (right)

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**MAKE YOUR WILL ONLINE FOR FREE**

Did you know JDRF supporters can make a will for free? A qualified solicitor from makeawillonline will look over every will and helplines are available if you need assistance. To find out more go to jdrf.org.uk/legacy Gifts in wills help us to create a world without type 1 diabetes.

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**WHAT IS THE BEST TYPE 1 DIABETES TECHNOLOGY OR DEVICE INVENTED?**

- **Glucose monitoring system**: 48%
- **Insulin pump**: 22%
- **Blood glucose meter**: 19%
- **Insulin pen**: 11%
- **Closed loop / artificial pancreas**: 4%

**Find out more**

You can keep up with our latest news at jdrf.org.uk/news or follow us on Facebook. For the latest type 1 news go to jdrf.org.uk/news.
Chris Bright, a Welsh international Futsal player and semi professional footballer reflects on the past few years spent completing his masters - an analysis into stigma surrounding the diabetes football community, an issue he has faced at different points throughout his sporting career. And, the work he is doing with The Diabetes Football Community which gives support to type 1 talent in the game.

I was diagnosed with type 1 diabetes in 1999 at the age of 8. Upon diagnosis, my very first question was “can I still play football?” Luckily I had an exceptional diabetes nurse who gave the answer I wanted, being “yes”. However, she readied me to ensure I knew how hard it would be to live out the dreams of playing football at the highest level.

Now twenty years on I have completed my masters on the type 1 community and how stigma impacts members of our diabetes football community. This involved analysing some of the online content of blog posts, Facebook posts Tweets as well as interviewing several type 1 members of the community who had volunteered their time to support the project.

The masculinity and macho culture that’s embedded in football really pushes players to hide anything that could be perceived as a weakness by fans, players, coaches or the media. This very much is the case for those of us with type 1.

In using secrecy as a coping mechanism for avoiding stigma, academic research has demonstrated that this may increase the likelihood of poorer self-management and health outcomes. But because for the first time I’m suggesting, with support from the research, that the culture of the sport I’ve grown up with may have a detrimental impact on my health. So, with greater identification towards football, you’re more likely to hide your condition, and in hiding your condition you’re less likely to do the right things to self-manage it. There are questions that stem from this which could really open the door for some interesting exploration. For example, is this just as a result of football culture, traditionally with a working class - middle class background? Does it differ with other team sports such as cricket or rugby, where the tradition of the game may encourage a different culture and demographic background? Could we also consider a difference between men’s football and women’s football?

Although the evidence of the study suggests a significant challenge for those with T1D accessing a sporting culture where weakness is shunned, I do think we’ve seen an opportunity in the findings to help alleviate some of that strain. It’s not all bad news! This mechanism we’ve created through The Diabetes Football Community (TDFC) has helped to bridge the gap in identification for this population. Building identity with diabetes is important, it helps psychologically, socially and with the eventual medical outcomes for the condition.

This study for the first time suggests we need to create a positive affiliation to draw people to their condition and break down some of the stigma for those who find it hard to identify with T1D. Without that, peer support is not able to cut through to those who may need it the most.

The Diabetes Football Community tackles and dispels stigma while providing a positive view of our condition, which for the first time in our lives is celebrated rather than shunned. This is why TDFC has been successful. I knew the reasons deep down but now I’ve taken the time to research it and understand it from a social and cultural perspective, I believe my view of our future direction is far clearer. I also hope it can help to influence decision makers within diabetes care to look at niche populations in greater detail, and more importantly on the impact of stigma on self-management.

Read the full version of this article: thediabetesfootballcommunity.com

Get support on living with type 1 at jdrf.org.uk/information-support

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**Fact**

Play football at least two-three hours after your last quick acting insulin dose to prevent hypoglycemia.
A Post-COVID future: Cause for hope?

Professor Partha Kar discusses how Covid-19 has affected life for people living with type 1 diabetes. Looking at the introduction of online self-management tools and hopes for the future.

COVID-19 has brought with it many an angst, many a worry - and more understandably so as datasets have emerged around risks with type 1 diabetes. Factor in the constant messaging from media, virtual or print – and for many living or caring for those with type 1 diabetes, these have been tough times indeed.

However, as ever, there will be some positives to come out of this - and from a personal perspective, I sincerely hope this to be the case. For starters, the continued messaging around diabetes having different types, not being a homogenous entity - and need for clear and separate strategies regards care for all types - with equal attention. There are already examples including the launch of a global first-of-a-kind online education and self-management platform for all people with type 1 diabetes: Digibete - for children 0-18 years old; and, MyWayDigitalHealth for adults.

In addition, a natural progression of the entire COVID-19 situation for healthcare is an acceleration to more virtual contacts. In modern society, it’s about time the NHS did this – and this may be the trigger to use video contacts, phones etc to take diabetes care forward. The next logical step would thereby be increased access to technology - and one hopes the combination of focus on type 1 diabetes, need for more virtual contacts and importance of self-management will make policy makers realise the benefit of appropriate technology - whether they be non-invasive glucose monitoring or insulin pumps - or as we move ahead - closed loop insulin pump systems. A combination of appropriate technology along with use of virtual clinics, platforms where the person with type 1 diabetes and clinician can see data simultaneously can be transformative for all concerned - and hopefully gains more traction. This, however, also comes with a word of caution. Plenty of data from pre-COVID times show that access to technology is skewed against those from non-white ethnicity as well as those from socioeconomically deprived communities. If we want to improve Ts diabetes care, we do so irrespective of one’s colour or circumstances in life - and that has to be a fundamental concept in the post-COVID world too.

Finally, as we progress hopefully to better times, we should never lose sight of people who have type 1 diabetes live with a lifelong condition who need insulin to simply survive. 2021 marks 100 years of the discovery of insulin- and we need to be able to change the word “survive” to “lead as good a quality of life as anyone else”. This is where technology fits - as a key plank of self-management - along with education and peer support with trained specialists being guides in that journey.

The future is what we all make it and in the NHS, recent successes have made me hopeful. With organisations such as JDRF championing the need for focus, we look forward to a brave new world for those living with type 1 diabetes.

Product watch

The latest continuous glucose monitors giving greater insight into glycemic profiles, allowing patients with diabetes to make adjustments to improve metabolic control.

Dexcom G6 CGM System
Indicated for people age 2 years and older, has received CE Marking for wear on the back of the upper arm, providing patients with more choice on how to comfortably wear their device.
dexcom.com

Control-IQ™ Technology for the t:slim X2™
The t:slim X2™ insulin pump has launched Control-IQ™ Technology, designed to help increase time in range, as measured by CGM.
airliquidehealthcare.co.uk/diabetes-service

My type 1 shopping list

I love keeping active and trying new and thrilling things!

9 year old Maya is very adventurous. Since being diagnosed around 8 years ago has remained active, taking part in judo, athletics and Park Run (before Covid-19 hit!).

Maya has a varied diet and although not a big fan of veg has the occasional broccoli... but most of all loves her mum’s chicken and waffles! Maya’s mother Joyce doesn’t follow a low carb diet, but will make low carb or carb free meals at times to help evaluate Maya’s basal levels of insulin.

Honey Chicken with Stir-Fried Brown Rice
• This recipe is from the Mindful Chef cookbook which is a great place to find lots of gluten free and low carb recipes.

Full English breakfast (minus the bread)
• Eaten at any time of the day. This provides a good mixture of veg and protein; eggs, beans, sausages, tomatoes, mushroom and bacon (don’t forget to bolus!)

Teriyaki or Jerk Pork
• A mixture of pork and vegetables in Teriyaki sauce. Most vegetables don’t need to be counted and this is a delicious and healthy option for a balanced dinner for all the family.
Thoughts of a type 1... Community Leader

Jules Barcroft organises a weekly Great Britain Diabetes Online Community tweetchat. Coming together on Twitter around the hashtag #GBdoc, the community has helped many – including Jules herself when she became homeless.

About three years ago I took over the role of organising the weekly #GBdoc tweetchat along with a team of helpers. Whereas before we were hosted by one person, the community decided that it should become a chat for the community, by the community.

The new tweetchat format was born! Every Wednesday at 9pm a member of the community takes over the hashtag #GBdoc and the community goes beyond the weekly tweetchats. Coming together on Twitter to discuss a topic of their choice.

There are so many initiatives that have happened within the community – too many to mention. But the community has seen the birth of a quiz, fantasy football league, a book club and a craft club.

There is great value in research into the stigma surrounding chronic illness.

I was diagnosed in 1999, just before turning 18 years of age.

Overall a lot of the challenges have drifted away. But there are new people finding us all the time.

There are so many initiatives that have happened within the community – too many to mention. But the community has seen the birth of a quiz, fantasy football league, a book club and a craft club.

If you've got a story to tell, email us at info@jdrf.org.uk

To join in with the conversation search #GBdoc on twitter from Wednesday at 9pm.

Thoughts of a type 1 diabetes leader.

You can read more stories about people living with type 1 diabetes on our blog. Go to jdrf.org.uk/blog to find out more.

Rebecca Redmond, from Canada, living with type 1 and related to Frederick Banting - the co-discoverer of insulin, reflects on her experience.

I would like to think that I helped by using my voice. I often receive messages from other type 1 diabetes and caregivers thanking me for sharing honest experiences, putting words to things they cannot say. I often receive messages from other type 1 diabetes and caregivers thanking me for sharing honest experiences, putting words to things they cannot say.
The artificial pancreas – from research trials to launch

This year’s launch of the CamAPS FX artificial pancreas was another milestone on the research journey that began with insulin’s discovery in 1921. Sara Hartnell is a diabetes dietician based in Cambridge. She has long collaborated with Professor Roman Hovorka on clinical trials of the artificial pancreas, also known as a hybrid closed-loop insulin delivery system. JDRF’s Conor McKeever interviewed Sara shortly before the launch.

Hi Sara. To kick off, how has the artificial pancreas improved since you first started working with the team?

The first artificial pancreas that I was involved in using was stored on a mini laptop – participants almost had to carry it round with them – but now it’s literally on an app on a mobile phone! It’s really nice to be able to see the improvement in design with each study to the point where we’ve just got it on an app, which is brilliant for the users.

So where do you see it going, what’s the next step?

At the moment the algorithm is being used with a Dana pump and a G6 sensor, simply because it’s the best combination that works for it. However I think that as everyone has their own preference, choice is crucial, and so I think it’s important that the artificial pancreas can work with different sensors and pumps in the future – like a pick ‘n’ mix system. One challenge is finding pumps that are compatible with the artificial pancreas – sometimes it’s just not possible to make the pumps work in such a way. However, Roman’s always on the look-out for new things and is open to working with pump companies to increase compatibility.

We’re also already talking to the necessary people at NHS and other bodies to make sure as many people can have access as possible.

What about training? Will both the users and healthcare practitioners need training to use the artificial pancreas properly?

Yes, I think it’s a bit of a learning curve for both parties, as with any new tech that comes to the market. The artificial pancreas app is actually quite easy to use – there’s just a few features that need explaining. As with any other hybrid closed loop system (such as the Medtronic 670g or Control IQ), there are a few key differences between that and a normal insulin pump that need to be accounted for. For example, with the artificial pancreas, you need to bolus for meals, and ideally this can be around 10-15 minutes beforehand. However, unlike insulin pumps, if you forget to bolus for a meal it’s not a good idea to bolus straight after. This is because the system will automatically increase insulin delivery when your blood glucose starts to rise and so you can risk giving yourself a ‘double whammy’ of insulin – resulting in a hypo. In this case it’s better to wait and see what the system is doing then correct the dose.

What are the main benefits that you’ve seen during the trials?

Generally, blood glucose management is better, whichever age group you look at. The main thing people highlight is the better sleep and the fact that overnight it is just amazing. People wake up in target and say their quality of sleep is better, and we’ve got various evidence from studies that support this. For parents, a lot of the worry overnight is taken away and that’s so important. One example is a chap who took part in an overnight study of the artificial pancreas. He said that he hadn’t realised how unwell he’d been feeling until he used it and felt better. He said he slept better and woke up with more energy. Because of this, he wasn’t tired and grumpy to his teenage daughters. He said even the dog lost weight because he had the energy to walk the dog after a day at work.

So, on top of clinical improvements in type 1 diabetes management, people find they have a much better quality of life and love the fact that they can spend less time thinking about their diabetes.

And finally, how has it been working with Roman?

He’s brilliant! He’s very hands-on, helpful and available. For example, all the closed loop studies have a twenty-four hour helpline which we manage as a team. This is so that study participants can call if something has gone wrong with the system or if they’re worried about anything. If I had a call in the middle of the night and I wasn’t sure how to help the person I could ring Roman and he would give advice.

Scientific progress:

1920 Canadian physician Frederick Banting opens his first medical practice in London, Ontario. The following year, he and Charles Best discover insulin.

1922 14-year-old Leonard Thompson becomes the first person with type 1 to be treated with insulin. The injections save his life, and Banting and Best are awarded the 1923 Nobel Prize in Medicine.

1930’s The first longer-acting insulins are developed in Denmark and Canada, reducing the number of injections that people with type 1 need to take.

1955 British biochemist Frederick Sanger publishes the structural formula of bovine insulin, laying the groundwork for the production of human insulin. Sanger was awarded the Nobel Prize in Chemistry for this work in 1958.

1969 British chemist Dorothy Hodgkin describes the three-dimensional structure of porcine insulin, using X-ray crystallography. She is later awarded the 1964 Nobel Prize in Chemistry for this work.

1970 and 1978 JDRF is founded in the US by a group of parents whose children have type 1. Their conviction is clear: through research, type 1 diabetes can and will be cured. In 1978 JDRF-funded research leads to the development of genetically engineered human insulin, designed to replace animal-derived insulin.

1986 On 6th November JDRF is registered as a charity in the UK.

2000 JDRF scientists establish the ‘Edmonton Protocol’ to successfully transplant beta cells from donors into people with type 1.

2008 JDRF-funded clinical trial demonstrates that continuous glucose monitoring helps people with diabetes to avoid dangerous blood glucose highs and lows.

2014 JDRF researcher Doug Melton develops a way to rapidly convert human stem cells into insulin-producing cells in the lab - a vital step towards replacing beta cells in people with type 1.

2019 Researchers from the JDRF-supported TriNet programme find that an immunotherapy called teplizumab can delay the development of type 1 by an average of three years in those at high genetic risk.

2020 and beyond

Backed by 13 years of JDRF-funded research, the first downloadable artificial pancreas app launches. The app is licensed for use by both adults and children with type 1, including pregnant women. JDRF continues fundraising for research that is bringing us closer to curing type 1.
ROCHE PIONEERS VIRTUAL PUMP STARTS

Members of the Roche Diabetes Care team, looking for new ways to work with people with diabetes under recent circumstances, have made a transition to using video conferencing tools to remotely help those who are beginning pump therapy. Trainers in this role usually show patients and healthcare professionals how to use diabetes pumps and devices in a face to face setting, however, during lockdown, this usual route was impossible.

Over 10,300 people with type one diabetes in the UK use an insulin pump, which is a device that provides the body with regular insulin throughout the day.

Christian Sharp, who has worked at Roche Diabetes Care for sixteen years is a former diabetes nurse specialist and lives with type one diabetes himself.

Early in the lockdown period he was approached by a paediatric diabetes team to conduct a pump start remotely, to help one year old Martha who has type one diabetes, something he or the team had never done before.

Christian said, "When patients with diabetes begin pump therapy I usually work alongside a diabetes nurse to make sure the patient fully understands how to use the device. A remote pump start was new to me but, with some trial runs with the diabetes nurse before the sessions started, we made sure they ran smoothly. The remote sessions included a demonstration of attaching the pump, and inserting, removing and changing cannulas."

Evening sessions were chosen for the pump start, another first for Christian who usually works during office hours, as it allowed the parents to concentrate on the education, while Martha slept. The session was a success and Martha is now getting on well with the pump. In the weeks that followed, Christian went on to conduct over twenty successful remote pump starts with pediatric patients.

Meanwhile, Roche's Diabetes Care Trainer Helen Nicholls who is also a former diabetes nurse specialist, has recently helped six people with diabetes with successful remote pump starts, including a teenager.

"Prior to the pandemic, a virtual call with a patient was nonexistent but we’ve all been prompted to work in new ways," said Helen Nicholls. "The recent launch of our YouTube channel made the process easier as I had lots of video material to share beforehand."

Following the success of these initial virtual training sessions, Roche Diabetes Care Training Specialists are now able to offer virtual support for new and existing users of Accu-Chek insulin delivery systems. To facilitate this, Roche colleagues are exploring new creative ways to demonstrate products virtually.

Dr Claire Marriott, Medical Affairs Lead at Roche Diabetes Care added; "We are delighted that we have continued to help people with diabetes who are appropriate for an insulin pump to manage their diabetes, throughout lockdown. Remote sessions help patients to avoid a healthcare setting whilst receiving the same level of care and education that they need, in a safe environment."

Ensuring informed patient choice when deciding upon which insulin pump to use is very important and, as such, Roche is supporting initiatives from the Diabetes Technology Network (DTN) and others to launch virtual Patient Choice Events at a national and local level. Roche also continues its headline sponsorship of the JDRF series of Discovery Days, to help provide more holistic support to those living with type 1 diabetes, which have now also transitioned to virtual events.

With the availability of these virtual events, coupled with these remote training sessions from Roche and other providers, it is hoped that people with diabetes coming up for a renewal or starting on a pump for the first time will be able to do so without delay.
After lobbying efforts from JDRF and partner organisations, NHS England announced in April 2019 that they were committed to granting all pregnant women with type 1 diabetes access to CGM technology by April 2021.
Experience Freedom with Pod Therapy
Simplify insulin delivery

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Archie H.
PODDER™ SINCE 2017

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†The sample Pod is a needle-free, non-functioning Pod that can be worn for up to 3 days.
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100 years of insulin
As we approach 14th November – insulin discoverer Sir Frederick Banting’s birthday and World Diabetes Day – we would like to invite you to our exclusive virtual event which will mark 100 years since Banting’s world-changing breakthrough.

Please save the date:
12 November 2020
From 7.00 - 8.00pm
jdrf.org.uk/WDDevent

This event will take a look back at how much we’ve progressed and also look forward to the research momentum building.
This is a once in a lifetime opportunity to come together as a community, hear inspirational stories from people affected by type 1 and hear from us - the staff members working behind the scenes at JDRF.

Find out more about how to get involved at jdrf.org.uk/get-involved

300 awards & prizes
Win £25,000

Fund vital medical research into type 1 diabetes by playing the JDRF weekly lottery. And you could win the £25,000 top prize!

Your support could help us find the next big breakthrough.

Play now at jdrf.org.uk/lottery

100 years of insulin

JDRF
Improving lives through type 1 diabetes research

For more information about JDRF, please visit jdrf.org.uk

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1 King St, Hammersmith London W6 9HR. INS-ODS-09-2019-00003 V3-Pt3
Thank you – Everyone at JDRF would like to say thank you to all of the amazing NHS staff, across the UK, for the incredible community support and care you are providing and for your continued support of JDRF during this time. We know how busy this period must be. To those in the diabetes team who had roles repurposed in the efforts against Covid-19, to those who have continued offering care and support in a new way, to the type 1 community, you are superheroes. Keep well and safe.

Matthew Carty – A huge thank you to Matthew Carty - a super star fundraiser who raised a massive £2110, which is enough to buy 211 Rufus bears to help support children with type 1 diabetes. Keep up the good work Matt!

Matthew Carty – Dan Farrow, JDRF UK’s Head of Community Engagement, would like to say a massive thank you to Matthew Carty - a super star fundraiser who raised a massive £2110, which is enough to buy 211 Rufus bears to help support children with type 1 diabetes. Keep up the good work Matt!

Rachael Crawford – Dan Farrow, JDRF UK’s Head of Community Engagement, would like to say thank you to all of the amazing NHS staff, across the UK, for the incredible community support and care you are providing and for your continued support of JDRF during this time. We know how busy this period must be. To those in the diabetes team who had roles repurposed in the efforts against Covid-19, to those who have continued offering care and support in a new way, to the type 1 community, you are superheroes. Keep well and safe.

Paul Coker and Wendy Gane – Thank you to Paul Coker (1bloodydrop) and Wendy Gain for their inspiring work and support in Wales and increasing JDRF’s engagement within the adult community, through their amazing work on the All Wales Patient Reference Group for people living with diabetes and the Cross Party Group In Diabetes working with Welsh parliament.

Sufyan and Nick – Dan Farrow, JDRF UK’s head of Community Engagement, would like to say a massive thank you to professor Nick Oliver and Dr Sufyan Hussain for their expertise, guidance and help supporting the type 1 community with our Covid-19 information provision including jdrf.org.uk/coronavirus

Liam McPhee – age 11 from Inverurie raised £401 by selling Cat and Dog Treat Jars (‘Petporium’) that he made through his Virgin Money Growing scheme.

Rachael Crawford – Dan Farrow, JDRF UK’s Head of Community Engagement, would like to say thank you to campaigner and JDRF supporter Rachael Crawford who is making tremendous strides in raising awareness amongst airport and security authorities for people living with type 1. See more at jdrf.org.uk/airsecurity

Adam Forrester – A big thank you to Adam Forrester, an adult living with type 1, for providing us with a passionate and informative patient case study, facilitating us in our work towards increasing access to technology for people living with type 1 via the NHS.

What will your legacy be?
Ty’s mum wants to see a type 1 cure for her little boy. You can help future generations by leaving a gift in your Will. Help us to create a better future and achieve our mission: a world without type 1.

Make your will for free now at jdrf.org.uk/legacy

Thank you NHS – Everyone at JDRF would like to say thank you to all of the amazing NHS staff, across the UK, for the incredible community support and care you are providing and for your continued support of JDRF during this time. We know how busy this period must be. To those in the diabetes team who had roles repurposed in the efforts against Covid-19, to those who have continued offering care and support in a new way, to the type 1 community, you are superheroes. Keep well and safe.

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What’s on

Our what’s on page is sadly looking a little quiet due to COVID-19. However on the up side we still have some amazing virtual events, alongside potential in person events for 2021. Visit jdrf.org.uk/events to view the latest list. Don’t forget you can also set up a regular gift here: jdrf.org.uk/get-involved/give

Virtual events

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type 1 food and nutrition:</td>
<td>13 October</td>
<td>7pm</td>
</tr>
<tr>
<td>virtual event</td>
<td></td>
<td></td>
</tr>
<tr>
<td>World diabetes day:</td>
<td>12 November</td>
<td>7-8pm</td>
</tr>
<tr>
<td>virtual event</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type 1 technology and devices</td>
<td>5 December</td>
<td>10.00am</td>
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<td>for experienced users:</td>
<td></td>
<td></td>
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<tr>
<td>Fusion advanced event</td>
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Keep on running

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Walk Scotland</td>
<td>9 May 2021</td>
<td></td>
</tr>
<tr>
<td>Berlin Marathon</td>
<td>26 September 2021</td>
<td></td>
</tr>
<tr>
<td>London Marathon</td>
<td>3 October 2021</td>
<td></td>
</tr>
</tbody>
</table>

To sign up to any of our events, go to jdrf.org.uk/events

Calling all artists! Grab your paint brushes, pencil or pens as JDRF needs your help!

We are coming up to World Diabetes Day where we will kick start fundraising activity in the lead up to marking 100 years of insulin. We need you to design our new thank you card so we can send this out to thank our wonderful supporters.

You can send your designs (no larger than A4 please!) by email or post to:

JDRF
17/18 Angel Gate
City Road
London
EC1V 2PT
or north@jdrf.org.uk

The winner will be announced on 14th November - please include your contact information so we can contact you if you win!

A WINNER WILL BE SELECTED FROM EACH OF THESE AGE CATEGORIES

Age 6-8 / Age 8-12 / AGE 12-14

CLOSING DATE: 2nd NOVEMBER
Growing a tiny human is exhausting. Your diabetes management doesn’t need to be.

With the Dexcom G6 Continuous Glucose Monitoring (CGM) System you know where your glucose levels are, where they’re heading and how fast with just a quick glance at your smartphone or watch.†

Customisable alerts, including a predictive Urgent Low Soon alert, can let you know if you’re heading dangerously high or low. All with zero fingersticks* or scanning.

Speak to your Diabetes Care Team about Dexcom G6 or find out more at dexcom.com/ukiemum

*S If your glucose alerts and readings from the Dexcom G6 do not match symptoms or expectations, use a blood glucose meter to make diabetes treatment decisions. †For a list of compatible smart devices, please visit www.dexcom.com/compatibility. Dexcom, Dexcom Follow, Dexcom Clarity and Dexcom G6 are registered trademarks of Dexcom Inc. in the U.S., and may be registered in other countries. © 2020 Dexcom Inc. All rights reserved. Dexcom International Ltd and its affiliated European entities. 1 Tanfield, Suite 6, Level 1 Tanfield, Edinburgh EH3 5DA. LBL018758 Rev001.