



## Monthly Newsletter

111<sup>th</sup> Congress – November 2009

### MESSAGE FROM THE CAUCUS LEADERSHIP

As the chairs and vice chairs of the Congressional Diabetes Caucus, we would like to present the November edition of the Caucus Monthly Newsletter. Below you will find the latest news in diabetes, summaries of recent diabetes events, and updates on the legislative priorities of the Caucus. We hope that you and your staff find this newsletter helpful and informative.

### The Congressional Diabetes Caucus Web Site Gets a New Look!

This week the Congressional Diabetes Caucus is launching a new and improved Web site. It can be found at <http://www.house.gov/degette/diabetes/>. Can't find last month's newsletter? Want to learn about Diabetes Caucus legislation? The new Web site will be up-to-date with the most recent newsletters and contain a legislative section with caucus endorsed legislation. If your Member introduces diabetes legislation, please let [heather.foster@mail.house.gov](mailto:heather.foster@mail.house.gov) know so she can feature it on the site!



Rep. Diana DeGette  
Co-Chair

Rep. Michael N. Castle  
Co-Chair

Rep. Xavier Becerra  
Vice-Chair

Rep. Mark Steven Kirk  
Vice-Chair

### **CAUCUS ALERT!**

#### **Rep. Gene Green Introduces Resolution Supporting an Increase in Federal Funding to find a cure for Type 1 Diabetes**

Approximately 3 million Americans suffer from type 1 diabetes and 15,000 children are diagnosed with the disease each year. Diabetes in the United States costs \$174 billion annually with families paying as much as \$13,000 per year. The National Institute of Health (NIH) has developed 6 goals to guide type 1 diabetes research in the areas of reduction, prevention, and finding a cure. To meet these goals, NIH researchers have recommended an increase in federal funding. Congressman Gene Green introduced

H.Res 35 on January 8, 2009 urging members of Congress to support an increase in federal funds to find a cure for type 1 diabetes.

For more information or to become a cosponsor of this legislation please contact Abigail Pinkele with Representative Green's office at 225-1688 or [abigail.pinkele@mail.house.gov](mailto:abigail.pinkele@mail.house.gov).

### **Diabetes Caucus Leadership Introduces Resolution Supporting National Diabetes Month**

This week the co-chairs of the Congressional Diabetes Caucus joined with 129 original cosponsors to introduce H. Res. 914, a resolution supporting the observance of National Diabetes Month. The resolution encourages people in the United States to fight diabetes through raising public awareness about stopping diabetes and increasing education about the disease. It also recognizes the importance of early detection, awareness of the symptoms of diabetes, and the risk factors for type 2 diabetes. Finally, it supports decreasing the prevalence of diabetes, developing better treatments and working toward an eventual cure for type 1 and type 2 diabetes. Since diabetes afflicts nearly 24 million Americans and is the seventh leading cause of death, we must increase awareness and encourage the research to find cures. National Diabetes Month is observed every November.

The resolution will likely be voted on today, November 19, 2009. To become a cosponsor please contact Heather Foster in Rep. DeGette's office 225-4431 or [heather.foster@mail.house.gov](mailto:heather.foster@mail.house.gov).



#### **NEWS FROM NIH**

##### **Long-term Benefits of Lifestyle Changes or Metformin in Reducing Risk for Type 2**

**Diabetes:** The landmark Diabetes Prevention Program (DPP), supported by the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), was the first major, randomized, multisite clinical trial to demonstrate that type 2 diabetes could be prevented or delayed in a diverse American population at high risk for developing the disease. The trial compared three preventive approaches: standard medical advice; intensive lifestyle modification aimed at losing 5 to 7 percent of body weight through diet and moderate exercise; and treatment with the drug Metformin. The DPP showed that the lifestyle intervention reduced risk for type 2 diabetes by a dramatic 58 percent and Metformin reduced risk by 31 percent. Now, after a 10-year period of following trial participants, long-term benefits of the interventions have emerged: the lifestyle and Metformin interventions reduced development of type 2 diabetes by 34 percent and 18 percent, respectively. People in the lifestyle group also had fewer heart disease risk factors, despite taking fewer medications to control their heart disease risk. Thus, even though sustaining weight loss with lifestyle changes is challenging, it produces long-term health rewards by lowering people's risk for type 2 diabetes and reducing other heart disease risk factors.

**Deaf1 Gene May Play a Role in Type 1 Diabetes:** Scientists identified a gene that may play a role in the development of type 1 diabetes. In a mouse model of the disease, scientists found that cells in the animals' pancreatic lymph nodes make two forms of a gene called *Deaf1*. One form encodes full-length, functional Deaf1 protein, while the other encodes a shorter, nonfunctional variant form. Additional experiments in mice suggested that the functional form of Deaf1 may control the production of molecules needed to eliminate immune cells that can destroy insulin-producing cells in the pancreas, thus preventing type 1 diabetes. Researchers also found that levels of the variant form of Deaf1 were higher in people with type 1 diabetes compared to levels in people without the disease. The research suggests that the development of type 1 diabetes may in part be due to increased levels of the Deaf1 variant protein in pancreatic lymph nodes, which may, in turn, lead to reduced production of molecules that are required to "educate" the immune system not to attack the body's own cells, including the insulin-producing cells of the pancreas. The research was supported by the National Institute of Allergy and Infectious Diseases (NIAID) and the NIDDK.

**Toward Cell Replacement Therapy for Diabetes:** In the pancreas, there are several types of hormone-producing cells clustered in islets. Scientists in NIDDK's Beta Cell Biology Consortium made an exciting discovery that alpha cells, which produce a hormone that raises blood sugar, can be converted to insulin-producing beta cells. Using genetic techniques in mice, the researchers increased the levels of a protein called Pax4, which was known to be involved in pancreatic development. Mice with high levels of Pax4 had oversized clusters of beta cells, which resulted from alpha-beta precursor cells and established alpha cells being induced to form new beta cells. In a mouse model of diabetes, the high levels of Pax4 promoted generation of new beta cells and overcame the diabetic state. The discovery that alpha cells have the potential to convert to beta cells may pave the way toward new cell-based therapies for replacing damaged or destroyed beta cells in people with diabetes.



## Diabetes News

### **Preventing and Treating Diabetes: Health Insurance Reform and Diabetes in America**

November 11, 2009

The Office of Health Reform at the Department of Health and Human Services released a report on November 11, 2009 called *Preventing and Treating Diabetes: Health Insurance Reform and Diabetes in America*. This report outlines the challenges of people with diabetes within the current healthcare system and how

health reform will improve their situation. To view this report, please go to:

[http://main.diabetes.org/site/DocServer/HHS\\_Diabetes\\_Health\\_Reform\\_report.pdf?docID=33841](http://main.diabetes.org/site/DocServer/HHS_Diabetes_Health_Reform_report.pdf?docID=33841)

### **Diabetes and the Flu**

Please click on the flu.gov button for information and guidelines on what people with diabetes should do about the flu.



### **Promise to Remember Me**

Across the country diabetes advocates participating in the Juvenile Diabetes Research Foundation's (JDRF) Promise to Remember Me Campaign are spreading the word about the importance of funding type 1 diabetes research. For information about this campaign, please go to: <http://promise.jdrf.org/>

#### **Additional Links for November: Minorities and Diabetes**

- [Diabetes in African Americans](#)
- [Diabetes in American Indians and Alaska Natives](#)
- [Diabetes in Asian and Pacific Islander Americans](#)
- [Diabetes in Hispanic Americans](#)



#### **Did You Know???**

#### **FASCINATING FACT**

##### **DIABETES STATISTICS IN THE UNITED STATES**

Nearly 24 million Americans have diabetes, another 57 million have pre-diabetes and are at a heightened risk of developing the disease. It is important that we all understand how diabetes affects us, and the communities in which we live and work. Since 1987 the death rate due to diabetes has increased by 45 percent, while the death rates due to cancer, heart disease, and stroke have declined. Additionally, diabetes is the seventh-deadliest disease in the United States and is a leading cause of heart disease, stroke, amputation, blindness and kidney disease.

#### **RECENT EVENTS**

##### **November is American Diabetes Month**

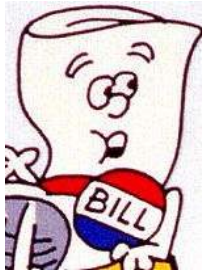
*American Diabetes Month* is a time to improve awareness about this chronic disease that impacts the lives of nearly 24 million Americans – a quarter of whom are undiagnosed. We hope that you will join us in the fight against diabetes by educating your constituents about the seriousness of diabetes and what they can do to prevent developing the disease and its complications.

##### **World Diabetes Day**

November 14, 2009

World Diabetes Day (WDD) is the primary global awareness campaign for diabetes. It was introduced in 1991 by the International Diabetes Federation (IDF) and the World Health Organization (WHO) in response to the alarming rise in diabetes around the world. In 2007, the United Nations marked the Day for the first time with the passage of the United Nations World Diabetes Day Resolution in December 2006, which made the existing World Diabetes Day an official United Nations World Health Day. For more information, please go to: <http://www.worlddiabetesday.org/>





## LEGISLATIVE PRIORITIES

H.R. 1995, ***The Eliminating Disparities in Diabetes Prevention, Access and Care Act***. The Eliminating Disparities in Diabetes Prevention, Access and Care Act is designed to promote research, treatment, and education regarding diabetes in minority populations. This specific focus will help us address the unique challenges faced by minority populations and provide more effective treatment and education. The bill currently has 22 cosponsors.

H.R. 1625, the ***Equity and Access for Podiatric Physicians Under Medicaid Act***. The bill would classify podiatrists as physicians for purposes of direct reimbursement through the Medicaid program. The Bill currently has 112 cosponsors.

H.R. 2425, the ***Medicare Diabetes Self-Management Training Act of 2009***. The bill would make a technical clarification to recognize certified diabetes educators (CDE) as providers for Medicare diabetes outpatient self-management training services (DSMT). CDEs are the only health professionals who are specially trained and uniquely qualified to teach patients with diabetes how to improve their health and avoid serious diabetes-related complications. The 1997 authorizing DSMT statute did not include CDEs as Medicare providers and it has become increasingly difficult to ensure that DSMT is available to patients who need these services, particularly those with unique cultural needs or who reside in rural areas. The bill currently has 31 cosponsors.

H.R. 2590, the ***Preventing Diabetes in Medicare Act of 2009***. The bill would extend Medicare coverage to medical nutrition therapy (MNT) services for people with pre-diabetes and other risk factors for developing type 2 diabetes. Under current law, Medicare pays for MNT provided by a Registered Dietitian for beneficiaries with diabetes and renal diseases. Unfortunately, Medicare does not cover MNT for beneficiaries diagnosed with pre-diabetes. Nutrition therapy services have proven very effective in preventing diabetes by providing access to the best possible nutritional advice about how to handle their condition. By helping people with pre-diabetes manage their condition, Medicare will avoid having to pay for the much more expensive treatment of diabetes. The bill currently has 10 cosponsors.

H.R. 3668, an amendment to the Public Health Service Act to ***Reauthorize the Special Diabetes Programs for Type 1 Diabetes and Indians***. This program provides federal funding for the Special Statutory Funding Program for Type 1 Diabetes Research at the National Institutes of Health and the Special Diabetes Program for Indians at the Indian Health Service. H.R. 3668 would extend these critical programs through 2016 and increase funding for both programs to \$200 million a year. This bill currently has 28 cosponsors.