

Health Alert

The Highs And Lows Of Caring For Children With Diabetes

(NAPSA)—Approximately 1.2 million people in the U.S. live with Type 1 diabetes.

Typically diagnosed in childhood, people with Type 1 diabetes have a pancreas that is unable to produce insulin, a hormone that regulates blood sugar, or glucose. Therefore, they must take insulin injections or use an insulin pump. Most people understand that having diabetes means carefully monitoring food intake and taking insulin to prevent the long-term complications associated with high blood glucose. But people with diabetes and their families will tell you it's actually low glucose, called hypoglycemia, that keeps them up at night—literally.

Parents of children with diabetes spend a lot of time monitoring glucose levels and adjusting insulin dosages and carbohydrate intake (because carbohydrates turn into sugar when processed by the body). Most parents get up several times a night to check their child's glucose because it's terrifying to face the possibility that, in severe cases, their child could die in the middle of the night from hypoglycemia.

KK Kessel is an 11-year-old with Type 1 diabetes who's had two seizures as a result of nighttime hypoglycemia. His mother, Britta Bushnell, says, "The constant vigilance required to care for a child with Type 1 diabetes is beyond what most people can know."

Technology available to help these families manage diabetes includes insulin pumps—small external devices that deliver insulin around the clock—and continuous glucose monitoring (CGM) systems that measure glucose lev-



A new device helps many parents monitor their children's health and still get a good night's sleep.

els every five minutes and deliver alerts based on those levels.

In addition, the most recent innovation is the first-of-its-kind mySentry™ Remote Glucose Monitor, which could dramatically change nights for parents of children with diabetes. When used with an integrated insulin pump and CGM system, mySentry allows parents to see real-time insulin pump status and glucose trends—and hear alerts and alarms at their bedside—while their child sleeps in his or her own room.

For example, an alarm could alert parents in the middle of the night if their sleeping child's glucose levels are falling, allowing them to take necessary action to prevent hypoglycemia. With mySentry, Britta says, "We don't have to worry about him sleeping through lows and not treating them in the middle of the night, like we worried about for a long time."

For more information, visit www.medtronicdiabetes.com/mysentry1.

For important safety information, please visit medtronicdiabetes.com/importantsafetyinformation.