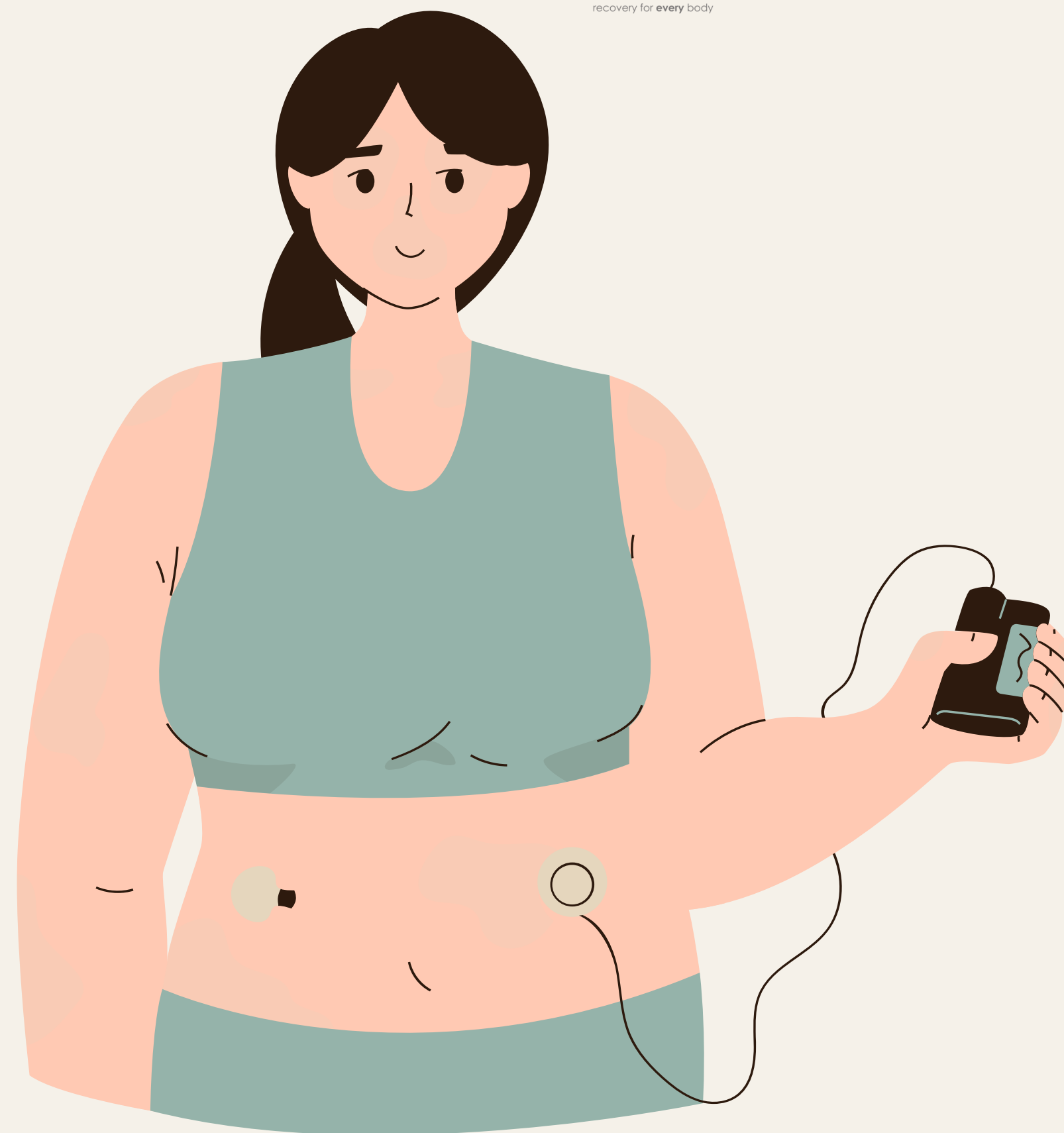


RECOVERY SESSION

TYPE 1 DIABETES AND EATING DISORDERS

By Wendy Pope, BAsC, MHDM Dip, MEd (in progress) (she/her)
and Stephanie Ryall, MD Candidate (she/her)



AGENDA

- What is Type 1 Diabetes?
 - Symptoms
 - Management
- What Eating Disorders are Associated with T1D?
- How Do EDs and T1D Impact Each Other?
- Panel Discussion
- Q&A

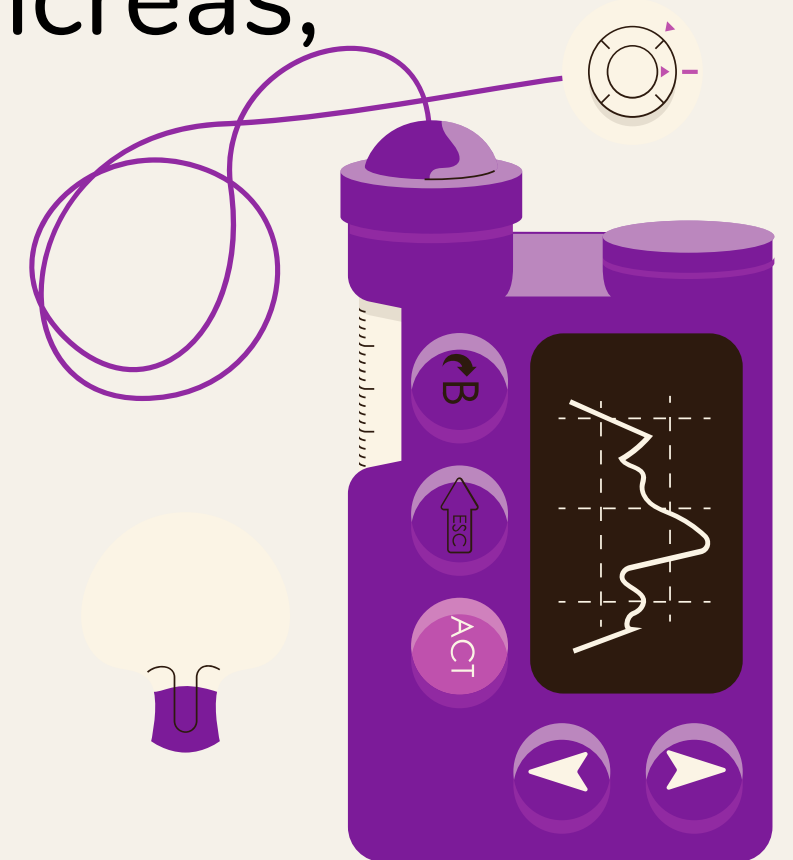


WHAT IS TYPE ONE DIABETES (T1D)?



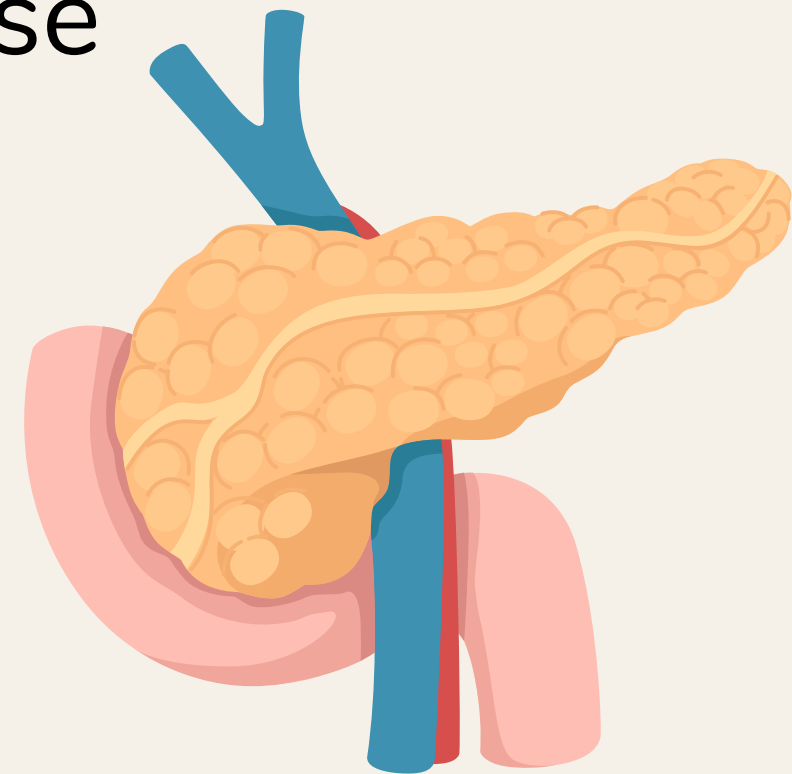
TYPE 1 DIABETES (T1D)

Type 1 diabetes is an autoimmune condition where the immune system attacks the beta cells in the pancreas, and thus they can no longer produce insulin.



TYPE 2 DIABETES (T2D)

Type 2 diabetes is a metabolic disorder where the body either resists the effects of insulin or doesn't produce enough insulin to maintain normal glucose levels.



WHAT ARE THE SIGNS AND SYMPTOMS OF T1D?



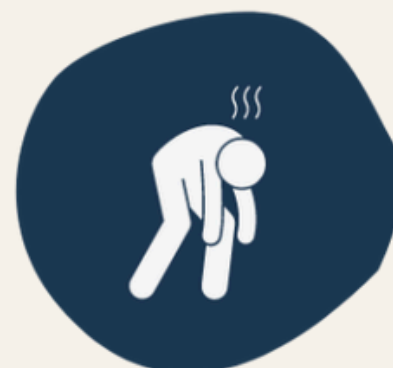
SYMPTOMS



Intense Thirst



Weight Loss



Lack of Energy



Blurred Vision



Frequent Urination



Bedwetting

- It can take months or years for enough beta cells to be destroyed that symptoms are noticeable
- Once symptoms appear, they can be very severe

MANAGEMENT

- Checking blood glucose regularly
- Insulin therapy
- Other factors that can effect glucose levels:
 - Stress
 - Eating moments
 - Movement



WHAT EATING DISORDERS ARE ASSOCIATED WITH T1D?



DIABULIMIA (ED-DMT 1)

- Diabulimia (ED-DMT1) is media-coined term refers to an eating disorder where people with type one diabetes purposely restrict their insulin intake to influence their body shape/size.
- Although the DSM-V does not officially recognize this disorder, it can lead to irreversible health consequences and even death.



HOW DOES T1D IMPACT EATING DISORDERS?

- T1D increases risk of an ED by 2.5 times (10% vs 4%)
 - EDNOS, Bulimia Nervosa, Disordered eating
- T1D diagnosed before ED 94% of the time
- Why?
 - Increased focus on diet, carb counting from a young age
 - Mechanism to cope with stresses of chronic disease or feeling out of control of one's body
 - Higher rates of body dissatisfaction



HOW DO EATING DISORDERS IMPACT T1D?

- **Eating disorders increase risk of complications for people with T1D:**
 - Poor Metabolic Control
 - Hospitalization frequency and length
 - Acute and chronic complications
 - Overall 10 year Mortality:
 - 2.5% for T1D
 - 6.5% for AN
 - 34.8% for both AN & T1D



DIABETIC KETOACIDOSIS (DKA)

- **What is it?**

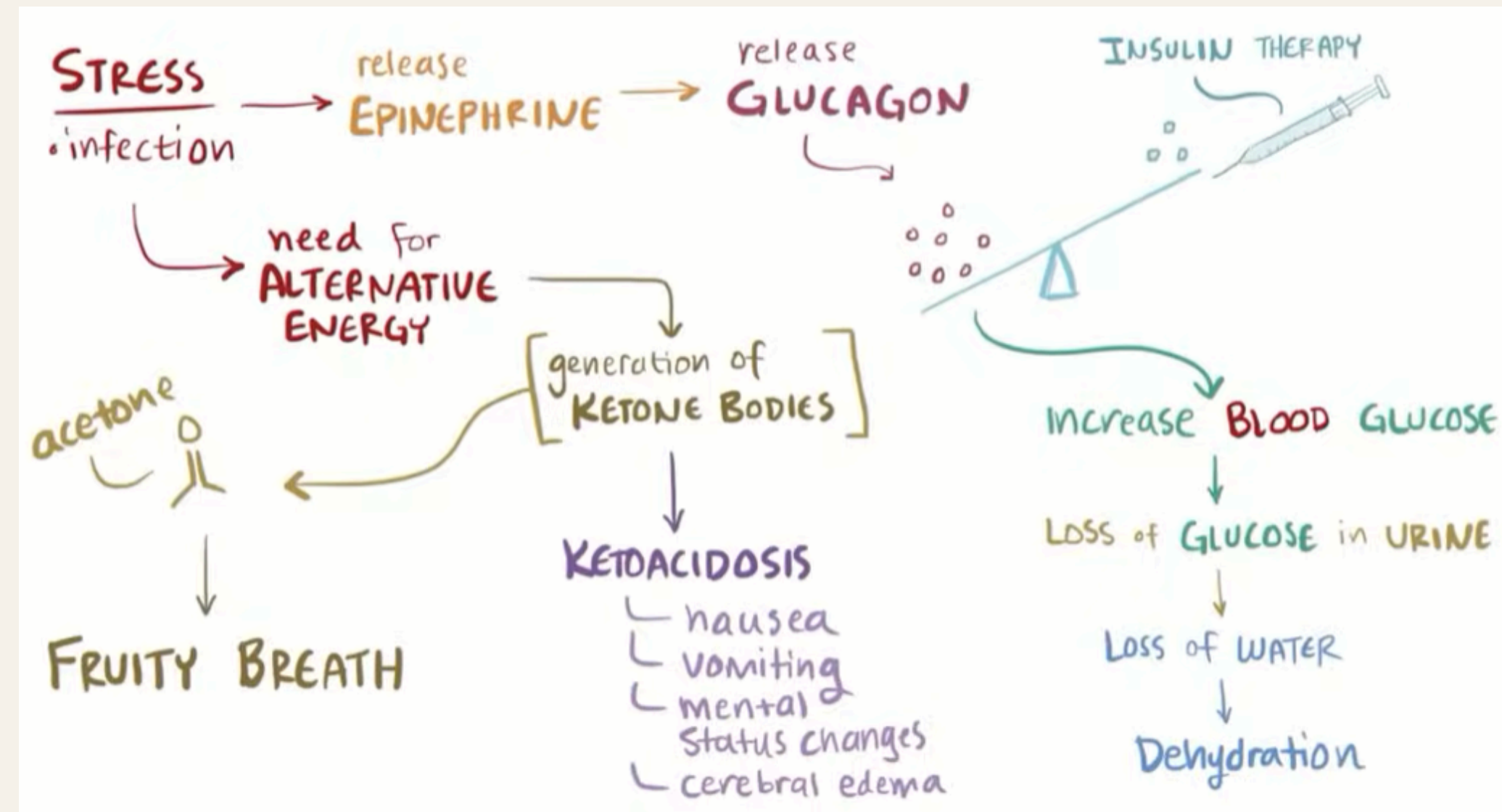
- Inability to use glucose (due to lack of insulin or increased stress)
- Fat breakdown to ketones for energy which increases acidity of the blood

- **Symptoms/Signs:**

- Nausea, Vomitting, Confusion
- Dehydration, thirst, + urine

- **Treatment:**

- Hospitalization, Fluids, Insulin, Electrolyte replacement



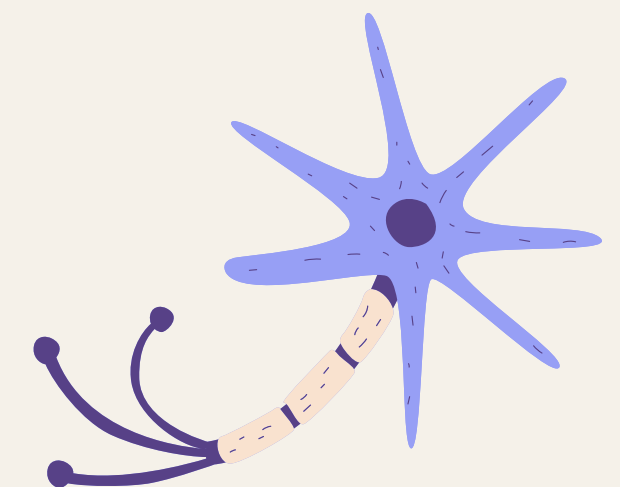
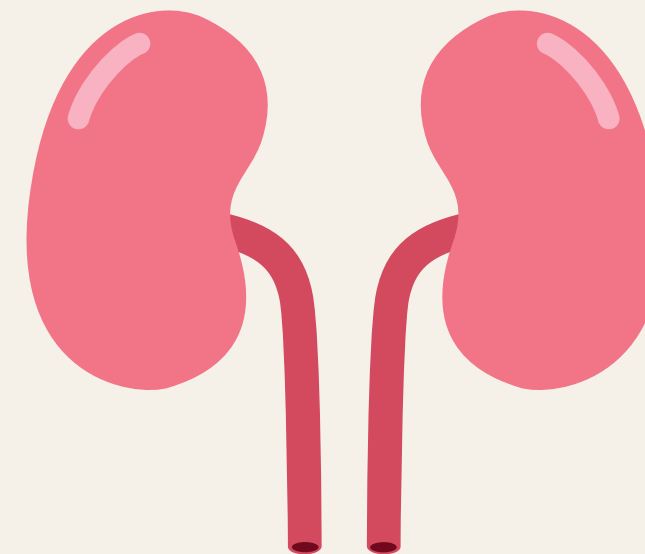
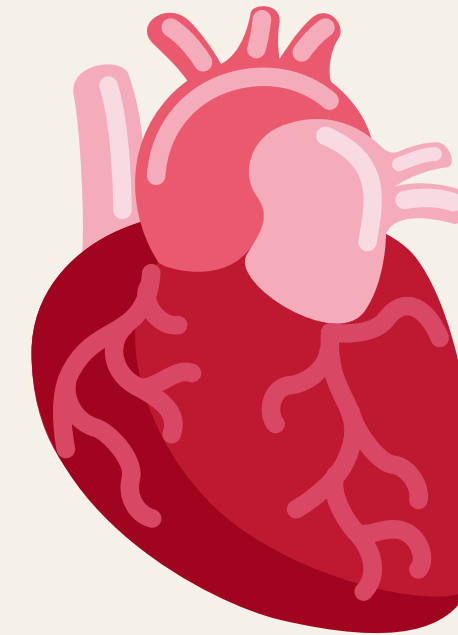
- **Consequences:**

- kidney damage, brain swelling, cardiac arrhythmia etc.

CHRONIC COMPLICATIONS OF T1D

Glycemic control essential for preventing long term complications:

- **Microvascular:**
 - Retinopathy - Eyes
 - Neuropathy - Nerves
 - Nephropathy - Kidney
- **Macrovascular:**
 - Heart disease
 - Stroke
 - Peripheral vascular disease



TREATMENT

- Multidisciplinary treatment team is necessary:
 - endocrinologist
 - psychiatrist
 - dietitian
 - diabetes education nurse
 - psychologist/psychotherapist
- Clear communication between the diabetes and eating disorder management teams is essential
- Consider pump therapy as it has been shown to decrease disordered eating



THANK YOU!



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