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April 2000

# THE Whittier Diabetes REPORT

Scripps and The Whittier Unite

10 Tips for Safe Exercise

Whittier Gets ADA Recognition

Calculated Cooking

*Scripps Whittier Diabetes Care Program*

*Scripps/UCSD/Whittier Diabetes Research Program*

*Community Care Diabetes Program/Project Dulce  
– a program in partnership with  
Community Health Improvement Partners*

The Whittier Institute for Diabetes, a subsidiary of Scripps, is dedicated to diabetes research, education and patient care through a collaborative program with the University of California, San Diego.



As you may have noticed, The Whittier Diabetes Report has a new look. With the color and layout changes, we're aiming for a more appealing, reader-friendly publication. We've also combined The Whittier and Project Dulce newsletters, increasing our report to eight pages and expanding our readership. We hope you like the changes and we welcome your comments or suggestions. Send email to [nevers.lesley@scrippshealth.org](mailto:nevers.lesley@scrippshealth.org).

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## Mission Statement:

The Whittier Institute for Diabetes supports the search to effect a cure for diabetes. To accomplish this, The Whittier will provide resources for innovative research, education and patient care, and will be a catalyst for collaboration among other leading organizations engaged in these endeavors.

**Editor:** Lesley A. Nevers

**Design:** Leslie Gunn, This Gunn for Hire

## Board Profile:

### Quinn's involvement inspired by son's disease

As a seasoned newsman, Edward Quinn might be expected to know more than most about human tragedy, but nothing he encountered prepared him for the death of his own son from a chronic disease that affects some 143 million people worldwide.

Adam was only 24 years old when he succumbed three years ago to complications resulting from type 1 diabetes. His parents didn't know what hit them.

"It was a complete shock to us when Adam died," said Quinn, president of the McGraw-Hill Broadcasting Company, "and it changed my life dramatically."

Quinn had been asked several years ago – when he was general manager of McGraw-Hill-owned KGTV (Channel 10), San Diego's ABC affiliate – to join the fight against diabetes, but multiple commitments had "spread [him] too thin."

After Adam died, he welcomed an opportunity to get involved with The Whittier and learn more about the disease that had claimed his son.

"The timing was right," said Quinn. "I wanted to understand more about the disease and see if I could help other



young people like my son. So that's how I got involved."

Quinn, who is currently serving as vice chairman on The Whittier board of trustees, said he would like to see The Whittier grow into a real focal point along with Scripps in providing comprehensive care while continuing to educate people and raise needed funds for research.

"Not only have I learned more about the disease," he said, "but I've learned more about our capacity to help people lead healthier lives through the clinical program at The Whittier."

## Scripps and The Whittier Unite to Fight Diabetes

### Whittier program joins the Primary Care SoE

Diabetes is a life-altering disease imposing on those who suffer from it a burden that is taxing, but manageable if the patient controls the disease rather than let the disease control him.

Through the Primary Care System of Excellence, the Scripps Whittier Diabetes Care Program will provide diabetes patients with a single standard of care designed to help educate, prevent future complications and reduce associated costs for themselves and the health care system.

According to Kevin Hirsch, M.D., Primary Care physician leader, this approach helps patients manage a cumbersome illness.

"Diabetes is a highly complex, clinical and potentially costly problem because it requires a great deal of patient education and medical follow-up," said Hirsch. "Due to time constraints in primary care, we don't get to do as good a job as we'd like to and we want to make sure the patients get what they need."

John Engle, president and CEO of The Whittier, welcomes the opportunity this new program presents.



Stan Pappelbaum (left), president and CEO of Scripps Health, and John Engle, Whittier president, recently signed an agreement renewing Scripps' commitment to diabetes by developing a clinical program that will benefit patients.

"It allows us the chance to provide the resources for supporting and delivering high-quality, integrative, clinical care and education to diabetes patients across the continuum of Scripps," said Engle.

The Scripps Whittier Diabetes Care Program will use a two-phased approach to achieve clinical excellence in diabetes management throughout the Scripps system.

Phase I will be implemented in the diabetes programs at Scripps Mercy and Scripps Memorial Hospital Chula Vista.

In this phase, nearly 10,000 patients with diabetes will receive care management services through a collaboration

between their primary care physician and a nurse-led diabetes care team. Their health status and adherence to standards of care will be tracked and reported back to physician practices and to the Scripps Primary Care System of Excellence annually.

Phase II (beginning October 2000) will extend the program to La Jolla and the North Coastal region.

"By collaborating with The Whittier and building this tiered program involving diabetes experts, we have developed an integrative and cost-effective program that benefits everyone," said Hirsch.

Maire Robacker is a Certified Diabetes Educator with the Scripps Whittier Diabetes Care Program



## 10 Tips for Safe Exercise



Exercise is a very important part of diabetes management. Regular exercise produces an “insulin-like” effect that can lower blood glucose. Combined with a healthy diet, it can assist in weight management or enhance weight loss, both of which are goals in controlling diabetes.

Before beginning any exercise program, you should always consult your physician. It is probably best not to exercise if you have one or more of the following conditions: untreated diabetic retinopathy, frequent low blood sugar reactions, exercise intolerance; dizziness/light-headedness, or excessive joint or muscle pain. Consult with your health care team for specific guidelines and resources as you plan your exercise program.

The following 10 tips will assist in promoting safe exercise for those with diabetes:

**1. Begin safely.** Be sure you have your physician’s approval. Check your blood sugar before exercise. Blood glucose monitoring is essential to document responses to exercise and to plan for safe exercise progression.

**2. Warm up** for a minimum of 3-5 minutes. This warms the muscles and helps prevent injuries.

**3. Begin slowly.** Develop a weekly plan for increasing the time and intensity of your workout. For example, use a 12-week walking/biking program. Remember to start slow and work up to your goal over time. The reason many people fail at exercise is because they do too much too quickly and the body is unable to tolerate it.

**4.** If you are **unable to walk** or bike, you can exercise while sitting in a chair. There are excellent “chair – exercise” videos available. Remember to exercise at your own pace.

**5. Cool down** following exercise by slowing down the pace of your workout. This allows your heart rate and body systems to slow down and return to normal.

**6. Check your blood sugar** following exercise. Blood glucose can continue

to drop for up to 30 hours after vigorous or prolonged exercise. The greatest risk for hypoglycemia occurs approximately 4-10 hours following exercise.

**7. Carry a fast-acting sugar** if you take diabetes medications. If you experience a low-blood sugar reaction during exercise, stop and eat a fast-acting sugar like glucose tablets, juice, raisins, or a piece of hard candy. Be sure to re-check your blood sugar within 15-20 minutes.

**8.** If possible, **exercise after meals** or snacks to improve blood glucose response to food.

Limit food intake before exercising. However, if your blood sugar is <100mg./dl, you should eat a snack consisting of a protein and carbohydrate prior to exercise.

**9. If you take insulin injections** your insulin requirements may change. Vigorous exercise may require a reduction of 20-30% in your insulin needs. Remember exercise acts like insulin. Be sure to monitor your blood sugars and report any changes to your health care team.

**10. If you have type 1 diabetes** with a blood glucose of >250mg./dl. and positive urine ketones, you should avoid exercise as you may worsen control.

## Hot Off the Presses

The Scripps Whittier Diabetes Education Program Manual is complete and ready to be used by patients enrolled in the Scripps Whittier Diabetes Care Program. The manual is a result of the system’s diabetes educators’ effort and will be used as an interactive tool as well as a resource for attendees at the five sites where the program will be implemented. Many thanks to all who helped develop and fund the project. ❧

## Diabetes Education Program Merits ADA Recognition

The Scripps Whittier Diabetes Self-Management Education Program has been awarded continued recognition from the American Diabetes Association. This program offers high-quality education services to the patients it serves.

The ADA Education Recognition effort, begun in the fall of 1986, is a voluntary process that assures that approved education programs have met the national standards for Diabetes Self-Management Education Programs. Programs that achieve that status have a staff of knowledgeable health professionals who can provide the latest information about diabetes management.

Self-management education is an essential component of diabetes treatment. Compliance with the national standards affords greater consistency in the quality and amount of education offered to people with diabetes. The participant in an ADA-Recognized Program will be taught self-care skills that will promote better management of his or her diabetes treatment regimen. All approved education programs cover the following topics as needed: diabetes overview; stress and psychosocial adjustment; family involvement and social support; nutrition; exercise and activity; medications; monitoring and use of results; relationships



Dawn Applegate (far right), president of the American Diabetes Association, San Diego chapter, presents Maire Robacker, Diabetes Program Coordinator, and John Engle, Whittier president, with a certificate awarding Education Recognition to the Scripps Whittier Diabetes Education program.

among nutrition, exercise, medication, and blood glucose levels; prevention, detection, and treatment of acute and chronic complications; foot, skin, and dental care; behavior change strategies, goal setting, risk factor reduction, and problem solving; benefits, risks and management options for improving glucose control; preconception care, pregnancy, and gestational diabetes; and use of health care systems and community resources.

Assuring high-quality education for patient self-care is one of the primary goals of the Education Recognition Program.

Through the support of the health care team and increased knowledge and awareness of diabetes, the patient can assume a major part of the responsibility for his/her diabetes management. Unnecessary hospital admissions and some of the acute and chronic complications of diabetes may be prevented through self-management education.

“The process gives professionals a national standard by which to measure the quality of the services they provide,” said John Engle, president and CEO of The Whittier Institute for Diabetes. “And, of course, it helps patients to identify these quality programs.”



Calculated Cooking  
by Jeanne Jones

## Light Cinnamon Popovers



**Serving these giant** popovers will always get you at least one “wow” from an admiring guest impressed with your culinary expertise!

A really wonderful aspect of this recipe is that you can make these popovers ahead of time and no one will know the difference. Once you’ve removed the popovers from the oven, cool them to room temperature, wrap them tightly in either plastic wrap or aluminum foil, and place them in the freezer. To serve, unwrap the popovers and arrange them on a baking sheet. Place them in a preheated 350° F. oven for about 15 minutes.

I originally developed this recipe for popovers for a Neiman-Marcus restaurant. They were so popular that we had to make at least some of them ahead of time so we wouldn’t run out during lunch service. This make-ahead aspect also makes these popovers perfect for your own family Easter or Passover celebration. When you return from church or temple, you can surprise your family and friends by having stellar popovers ready in just minutes to serve with your brunch or lunch.

**Diabetic Exchange:** Approximately 1 starch/bread, 1 fat and 1 protein.

*(Conversion by Sabrina Chyzyk, a registered dietitian at Scripps Mercy Hospital)*

Ingredients you’ll need:

- Butter
- All purpose flour
- 5 egg whites
- 1 cup low fat milk, room temperature
- 1 cup all purpose flour
- 1 teaspoon ground cinnamon
- 2 tablespoons butter, melted

1. Preheat the oven to 450° F.
2. Grease 6 custard cups, 3-1/2 inches in dia., or 6 popover tins, with butter, being careful to cover all inner surfaces. Lightly dust each greased container with flour.
3. Combine all ingredients in a blender and blend for 15 seconds at medium speed. *Do not over-mix.*
4. Divide the mixture evenly between the containers. Bake in the preheated oven for 20 minutes at 450° F. Reduce the oven temperature to 350° F and bake for 25 more minutes. Pierce the side of each popover with a sharp knife and continue to bake for another 5 minutes. Serve immediately with your favorite spread. Makes 6 popovers

**Each popover contains approximately:**

Calories: 141, Grams of fat: 4,  
Cholesterol: 12 mg., Sodium: 105 mg.,  
Carbohydrates: 18 grams, Protein: 7 grams,  
Fiber: Negligible

Jeanne Jones has been involved with The Whittier Institute for Diabetes since 1981, when she was named the first president of “Whittier Friends.”

She was diagnosed with type 1 diabetes in her 30s. After the initial shock wore off, Jeanne learned to control her diabetes through an exchange diet. She has parlayed her success into a promising career as an accomplished author.

Jeanne has written numerous books about light cuisine and is an internationally renowned nutrition consultant. She has also made appearances on national programs, including *CBS This Morning*, *Good Morning America* and the *Today* show. Her syndicated weekly column, “Cook it Light,” reaches millions of readers each week.

“Living with diabetes myself, I understand the importance of a well-balanced diet and I’m happy to share my recipes in this newsletter with people who can benefit from them.”

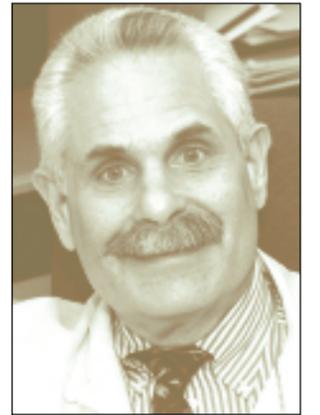
To that end, Jeanne and her sister, Cheryl, have established the Kathryn C. Fishback Foundation. Named for their mother, the foundation has contributed handsomely to ongoing research and various projects at The Whittier.

### Guest Editorial

By Dr. Kenneth Rehm

### Web Siting

Two of Project Dulce’s own were recently featured on the website [www.healthsurfing.com](http://www.healthsurfing.com). Click on the news archive section and scan down to ‘diabetes.’ Read all about Chris Basile’s and Carolyn Baker’s diagnosis and treatment of type 2 diabetes.



## The Psychology of Prevention:

### Mental and emotional fitness leads to compliance

There are many people who know the rules of good health but are not motivated to follow them. This is especially true of people with diabetes. One reason could be the psychological effect of neuropathy.

Paul Brand, M.D., in a lecture given at Gillis W. Long Hansen’s Disease Center in Carville, La., explains this. The sense of touch is thought to be our validating sense. If we see something we are not sure of, our first desire is to touch it, rather than smell, hear or taste it. This touch makes the object real. Without the sense of touch, the reality of something can never really be confirmed and is therefore not validated.

When a person with neuropathy has a loss of sensation in the feet, those feet seem unreal. If there are any problems associated with them, such as ulcerations, the feet are often neglected. Ultimately, if such detachment persists, amputation may become necessary.

It is important for anyone with foot problems to learn to like their feet and know they are an important part of their body. People must recognize the good qualities in their feet and notice such things as how nice their toes look, how

normal the shape of the foot appears, how healthy the skin feels, or how good the circulation is. As trivial as it sounds, such conscious attention fosters a sense of control over one’s own health care and goes a long way toward preventing amputation.

In addition, overall prevention of foot problems requires observing a few principles of foot care:

- Keep your feet warm, clean, protected with the right shoes and socks, safe and free from excess moisture or dryness (especially between the toes).
- Keep the skin conditioned.
- Keep your toenails trimmed – do it yourself or seek help from a podiatrist if necessary.
- Exercise your feet regularly
- Keep your feet balanced when walking.
- See a professional every year if there is no change in neurovascular status.
- Check your feet every day.

For Dr. Kenneth Rehm, communication is the vital link between physician and patient.

“I want to empower diabetics and motivate them so they seek treatment and prevention programs,” Rehm says. “I want them to know they don’t have to lose their foot or live in fear. Whether you have money or not, there is help available.”

Board-certified in the treatment and prevention of diabetic foot wounds, Dr. Rehm has two clinics in San Marcos and El Centro where he offers a three-pronged approach to foot care: prevention, treatment and education. He also works with patients from Project Dulce.

Dr. Rehm graduated from the California College of Podiatric Medicine in 1976 and completed his residency in foot surgery at Jacksonville General Hospital, Jacksonville, Florida. He also has completed a postdoctoral fellowship in rehabilitative medicine with a focus on the high-risk, insensitive and diabetic foot in Carville, Louisiana.

For more information, call Dr. Rehm at (760) 744-6226.