

# Diabetes Treatment – More Than Medical

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**Children's**<sup>SM</sup>  
Healthcare of Atlanta  
*Dedicated to All Better*



**GEORGIA DIABETES SYMPOSIUM**  
FOR HEALTH PROFESSIONALS

*Saturday, November 12, 2016*

*8:30am - 5:00pm*

*Atlanta Marriott Marquis*

*265 Peachtree Center Ave NE,*

*Atlanta, GA 30303*

# Disclosures to Participants

## Requirements for Successful Completion:

For successful completion, participants are required to be in attendance in the full activity, complete and submit the program evaluation at the conclusion of the educational event.

## Conflicts Of Interest and Financial Relationships Disclosures

### Planners:

LaShonda Hulbert, MPH - None  
Lisa Graham, RN, BSN, CDE – None  
Sarah Piper, MPH, CDE – None  
CaSonya Green, MA, CHES, CDE – None  
Gerald Griffin, RPh – None  
Jessica Knopf, MSW – None  
Glenda Summerville, DNP, BC-ADM, CDE, FNP-C – None

### Presenters: Sarah Piper, MPH, CDE – None

Glenda Summerville, DNP, BC-ADM, CDE, FNP-C – None  
Darin Olson, MD, PhD – None  
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Whitney Wharton, PhD – None  
Michael Crooks, PharmD – None  
Yiling Cheng, MD, PhD – None  
Betsy Rodriguez, MSN, DE – None  
Carl Goolsby, MD – None  
Fritz Jean-Pierre, MD, FACS, FASMBS – Speakers Bureau – Ofirmev, Pacira  
Patricia Tatro, LCSW, MSW, MSM – None  
Michelle Bravo, RD, CDE – Employee, Stock – Dexcom  
Fadi Nahab, MD - None

# Disclosures to Participants

**Disclosure of Relevant Financial Relationships and Mechanism to Identify and Resolve Conflicts of Interest:** Undertaking review of the educational activity by a content reviewer to evaluate for potential bias, balance in presentation, evidence-based content or other indicators of integrity, and absence of bias, AND monitoring the educational activity to evaluate for commercial bias in the presentation AND reviewing participant feedback to evaluate for commercial bias in the activity.

**Sponsorship / Commercial Support:** Novo Nordisk, Inc., Southeastern Primary Care Consortium, Inc. Atlanta Area Health Education Center (SPCC Atlanta AHEC)

**Non-Endorsement Of Products:**

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Participants will be notified by speakers to any product used for a purpose other than that for which it was approved by the Food and Drug Administration.

**Activity-Type :** Knowledge-based



This continuing nursing education activity was approved by The American Association of Diabetes Educators, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. This program **2016-054** is awarded **6.0** contact hours of continuing education credit.

The AADE is also accredited by the California Board of Registered Nursing (CEP#10977).

The American Association of Diabetes Educators is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program provides **6.0** contact hours (**.60 CEU's**) of continuing education credit.



**ACPE Universal Activity Number: 0069-0000-16-255-L01-P; 0069-0000-16-256-L01-P; 0069-0000-16-257-L01-P; 0069-0000-16-258-L01-P; 0069-0000-16-259-L01-P; 0069-0000-16-260-L01-P; 0069-0000-16-261-L01-P; 0069-0000-16-263-L01-P; 0069-0000-16-264-L01-P; 0069-0000-16-265-L01-P**

**Effective Date: November 12, 2016 to November 12, 2017**



Sponsored by The Diabetes Association of Atlanta, a designated provider of continuing education contact hours (CECH) in health education by the National Commission for Health Education Credentialing, Inc. This program is designated for Certified Health Education Specialists (CHES) and/or Master Certified Health Education Specialists (MCHES) to receive up to **6** total Category I continue education contact hours.

# Objectives

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- Identify various systems influencing diabetes management
- Identify/Discuss psychosocial factors impacting diabetes care
- Discuss the role of Mental Health Providers in diabetes management



# Feelings at Diagnosis

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- Disbelief
- Anxiety
- Anger
- Sadness
- Guilt
- Loneliness



# Mood and Diabetes

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- Depression
  - Prevalence in people diagnosed with diabetes
  - Symptoms
    - Guilt
    - Thoughts of death or suicide
    - Decreased interest or pleasure
    - Poor attention
    - Sleep problems
    - Feeling slowed down or restless
    - Self blame or worthlessness
  - Diabetes related depression
    - Adjustment to chronic illness
    - History of depression prior to diagnosis





# Anxiety / Stress

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- Anxiety
  - Feelings of stress related to treatment demands
  - Worries related to having a chronic illness
  - Stress associated with incorporating diabetes into daily life of the family



# Stress

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- Physical symptoms
  - Headaches
  - Muscle tension
  - Nervousness
  - Rapid heartbeat
  - Stomach upset



# Stress

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## Feelings

- Resentment
- Guilt
- Denial
- Frustration



# Stress

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- Thoughts
  - Nobody understands
  - I'm all alone
  - I'm worried
  - I can't do this
  - I can't cope
- Behaviors
  - Sleep difficulties
  - Irritability
  - Impatience
  - Decline in diabetes care



# Psychosocial Factors Impacting Diabetes Management

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- Social Support Systems
  - Family members
    - Parents
    - Spouse
    - Extended family
  - Community organizations
    - Employers
    - Schools
    - Religious spiritual



# Psychosocial Factors Impacting Diabetes Management

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- Social Stigma
  - Judgmental reactions
    - Food selection
  - Dietary limitations
    - Family food preferences
    - Holidays
    - Work/School special functions
- Time limitations
  - Family responsibilities
  - School responsibilities
  - Limited time for exercise



# Barriers Impacting Diabetes Management

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- Financial Factors
  - Availability of health insurance
    - Co-pays
    - Deductibles
    - Out of pocket expenses
  - Ability to meet basic needs
    - Housing
    - Food
    - Utility bills
      - Electricity
      - Gas
      - Water
      - Phone
      - Internet



# Barriers Impacting Diabetes Management

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- Financial Factors
  - Employment
    - Availability of PTO
  - Available Transportation
- Communication Barriers
  - Health literacy
  - Learning styles





# Role of Mental Health Providers

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- Treatment of psychological problems
- Facilitate goal setting
- Reinforce health behaviors
- Collaboratively develop stress management strategies and coping skills
- Facilitate open communication between patient and providers



# Mental Health Providers

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- Clinical Psychologists
- Medical Social Workers
  - Diagnosis of mental health problems
  - Assessment
  - Treatment
    - Reinforcement strategies
    - Learning principals
    - Behavior modification
  - Concrete Services
    - Case management
    - Community Resources



# Treatment Approaches

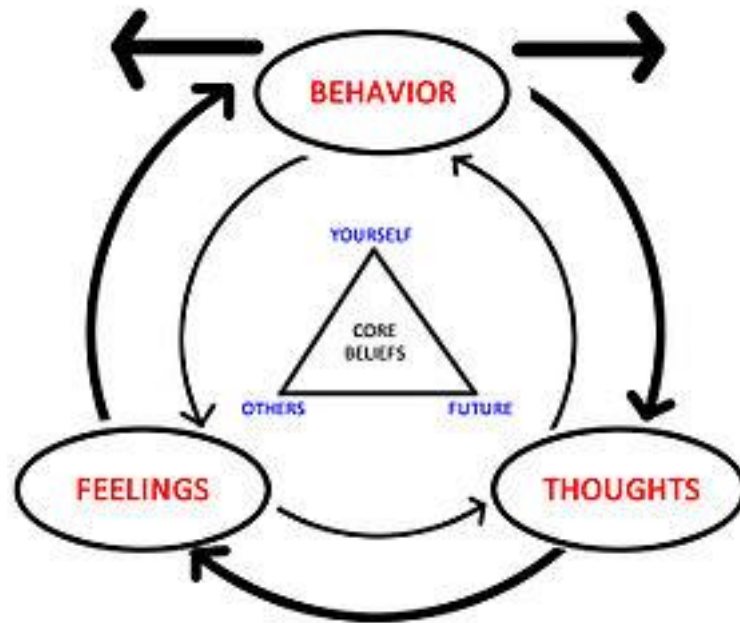
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- Psychotropic Medications
  - Referral to Psychiatrist – as needed
- Psychotherapy
  - Cognitive Behavioral Therapy
  - Motivational Interviewing



# Cognitive Behavioral Therapy

[https://en.wikipedia.org/wiki/Cognitive\\_behavioral\\_therapy](https://en.wikipedia.org/wiki/Cognitive_behavioral_therapy)



# Motivational Interviewing

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- Collaboration between the therapist and client
  - Therapeutic process focused on mutual understanding not on the therapist being right.
- Evocation
  - Drawing out rather than imposing ideas for change
  - Lasting change more likely if client comes up with their own reasons and determination for change
- Autonomy of the client vs authority of therapist



# Alternative Treatments

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- Exercise
- Pet Therapy
- Relaxation Techniques
- Meditation
- Mindfulness
- Music Therapy
- Support Groups
  - Type 1 Mom
  - Online Teens with Type 1



# Case Study

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Jayla is a 16 year old African American girl who lives with her mother. Maternal grandfather lived with them until his death this month.

Household is financially supported with mother's earnings as a school bus crossing guard. Grandfather who received Social Security Disability contributed financially until his death.

Household receives food stamps



# Case Study

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- Insurance
  - Medicaid coverage
- Education
  - 11<sup>th</sup> grader in public school
  - Has 504 plan
  - Bright
  - Makes good grades
  - Misses school (Diabetes related absences)
    - Always behind





# Case Study

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- Employment
  - Maintains a 20 hour/week job at a fast food restaurant
  - Helps household out financially
- Stressors
  - Biological father incarcerated for life (murder)
  - Grandfather's recent death
  - Financial
  - Depression
  - Maternal/child conflict



# Case Study

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- Interventions
  - Community Diabetes Educator
    - Attended two school meetings to facilitate a 504 plan and advocate for make up work and promotion to 11<sup>th</sup> grade denied because of absences.
    - Weekly contact with school's designated diabetes care provider.
  - Psychotherapy
    - Diabetes Support Program Psychologist (since 2/16)
      - Cognitive Behavioral Therapy
      - Family Systems Approach
      - Psychoeducation



# Case Study

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- Psychotropic Medications (Prozac)
  - Only taking it when she felt depressed (health literacy)
  - Mother not giving Prozac because she did not want patient to become addicted (health literacy)



# Case Study

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- Referrals to community resources
  - Medicaid non-emergency transportation
  - Children's Medical Services
  - Caregiver Training at Children's Healthcare of Atlanta
  - Camp Kudzu



# Case Study

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- Challenges
  - Patient routinely comes to psychotherapy without her meter and diabetes supplies
  - Patient has come to therapy sessions with large amounts of ketones discovered during visit with psychologist
    - Psychologist always has patient check blood sugars when she arrives and ketones if blood sugars are elevated or she is not feeling well
  - Patient admitted for treatment of DKA from last psychotherapy session – last week
  - HA1C >15 since starting the program



# Case Study

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- Variable Successes
  - Patient has maintained in target blood sugar results when she takes psychotropic medications regularly and is amenable to psychologist's recommendation to treat blood sugar results as data only, not assigning personal blame
    - One Week
    - Two weeks
    - Three weeks
  - Mother dedicated to bringing patient to weekly therapy sessions



# Questions

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# Thank you





# Web Resources

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- <http://care.diabetesjournals.org/content/24/7/1286>
- <http://www.socialworktoday.com/archive/090208p18.shtml>
- <https://www.dovepress.com/importance-of-familysocial-support-and-impact-on-adherence-to-diabetic-peer-reviewed-article-DMSO>
- <http://www.consultant360.com/content/barriers-effective-diabetes-care-how-recognize-and-overcome>
- [http://www.cdc.gov/pcd/Issues/2011/mar/09\\_0233.htm](http://www.cdc.gov/pcd/Issues/2011/mar/09_0233.htm)
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3825688/>
- <http://thebark.com/content/service-dogs-diabetics>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3609496/>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4674474/>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3696973/>
- <http://www.diabetesselfmanagement.com/diabetes-resources/definitions/cognitive-behavioral-therapy-cbt/>
- [https://www.umass.edu/studentlife/sites/default/files/documents/pdf/Motivational\\_Interviewing\\_Definition\\_Principles\\_Approach.pdf](https://www.umass.edu/studentlife/sites/default/files/documents/pdf/Motivational_Interviewing_Definition_Principles_Approach.pdf)



# Parting Wisdom

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