

# Diabetes changed their lives, but they're not giving up

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Typical symptoms of diabetes may seem obvious in retrospect but at the time Theresa Hardiker attributed them to fatigue and a host of other possibilities.

On June 24 she'd been for a blood test and had an appointment with her family doctor for the following Monday.

"That day my speech was slurred, my balance was not good and I was feeling really tired," said Hardiker,

who thought she might need a shot of vitamins. A few hours later she reported to the emergency unit at her doctor's instructions.

Hardiker was shocked when the physician on duty asked her how long she'd had diabetes.

"My blood sugar level was at 42 and should have been four," said Hardiker. "I was admitted that day. They told me without treatment I would never have made it to the doctor's office on Monday morning."

Life changed radically as Hardiker learned to check her blood about four times a day and gave herself insulin injections five times a day.

"And I used to be so scared of injections," said Hardiker.

She recently went into a cold

sweat, had stomach pain and felt confused to the point of not even recognizing she was in a hypoglycemic state.

"My daughter recognized what was happening and immediately brought me some jelly beans," said Hardiker. "My diagnosis has meant the whole family has had to learn about diabetes."

Hardiker has made significant strides and only requires insulin once a day now.

"You learn what your trigger foods are, increase your physical activity and how all of these aspects affect your sugar levels," she said.

Michael McRoberts was diagnosed with diabetes at the age of two. He says he's grown-up with restrictions and disciplines already in place but getting an insulin pump earlier this year has meant he can make spur of the moment decisions.

"You can go off with friends to have a drink or a meal without first injecting insulin and calculating what you need," said Michael.

"My medical plan was prepared to partly cover the cost of the \$7,000 pump but they needed a letter from my doctor to say Michael was diabetic," said his mother Marion. "The same plan had been paying for his insulin and supplies for years and years.

My family doctor charged \$25 to prepare the form letter for the insurance plan."

Steve Beriault, author of "Tales in the Insulin Vial," can't remember a time when he did not have diabetes.

"There isn't a day that passes that a diabetic child doesn't dream, deep in his or her heart, that he or she will never have to take insulin injections again," says Beriault.

Diagnosed with type one diabetes before he was two years old and now in his late 50s, Beriault has accumulated life experiences of living with diabetes that are fascinating and inspiring to read.

"With type one diabetes, the body destroys pancreatic cells that produce insulin, a hormone that helps cells absorb the glucose they use for energy," said Beriault. "Without insulin, glucose stays in the bloodstream and damages organs, among other harmful effects."

Beriault didn't allow diabetes to prevent him from cycling across Canada in 1975.

"You don't give up and you just have to keep going with your life," said Beriault. "Right now we are the closest to finding a cure."

For information about the author and to order his book check his website [www.talesintheinsulinvial.com](http://www.talesintheinsulinvial.com) or [www.amazonbooks.ca](http://www.amazonbooks.ca)

## TALES IN THE INSULIN VIAL



STEVE BERIAULT

# Early seasonal flu vaccinations may prevent first heart attack

Scientists have observed increased incidence of heart attacks (acute myocardial infarction) and stroke during the winter months. The exact reason why this happens is not completely known. But it has been thought that it is due to cold weather or due to metabolic activity in the body or due to infection such as respiratory infection.

It has also been observed that significant increases in acute heart attacks occur during peak winter incidence of pneumonia and influenza, particularly during years dominated by epidemic of influenza A. So it is surmised that this association supports the notion that the increase in heart attacks during winter months is caused by influenza rather than cold weather.

Why? The favoured hypothesis is that infection triggers atherosclerotic (the stuff that clogs the arteries) plaque to rupture and cause heart attack.

A study done in the U.K.,



**Dr. Noorali Bharwani**

What's Up Doc?

using a large database of general practice patients, found that heart attacks occurred less frequently in people who had had a recent influenza vaccination than in those who had not. But the same could not be said for pneumococcal vaccination.

If influenza vaccination does have the added benefit of reducing heart attacks, then it may be important to vaccinate early in the season.

Other studies have shown

influenza vaccination within the past year was associated with a 19 per cent reduction in the rate of acute heart attack among patients aged 40 years and over. Influenza vaccination administered within influenza season was also associated with a significant reduction (20 per cent) in the rate of acute heart attack.

Similar findings by other researchers reinforce current recommendations for annual influenza vaccination of target groups, with a potential added benefit for prevention of acute heart attack and stroke in those without established cardiovascular disease.

So, how are we doing with our annual influenza vaccination programs? Which one is better – targeted high risk groups or universal vaccination program?

In 2007, Statistics Canada said that despite increases in influenza vaccination rates across the country, the rates for high-risk groups are falling

short of national targets.

Ontario — which since 2000 has provided free flu shots for residents aged six months and older — led the provinces, with vaccination rates rising from 18 per cent to 42 per cent between 1996/97 and 2005. Newfoundland and Labrador, with a 22 per cent rate in 2005, ranked lowest. Nationally, the rates of influenza immunization increased to 34 per cent in 2005.

In 1993, a national consensus conference on influenza set target vaccination coverage rates of 70 per cent for adults aged 65 or older and for all adults with chronic medical conditions. These targets were raised to 80 per cent in 2005.

An article published in 2003, compared Alberta's regional coverage rates of influenza vaccination among Alberta seniors during the period April 1, 1999 to March 31, 2001. The rates of immunization in the health regions varied from 30 per cent to 80 per cent (mean 70 per

cent).

Their conclusion was that some parts of Alberta can do better. Under-utilization of preventive influenza vaccination in Alberta seniors is associated with increased utilization of health services for community-acquired pneumonia. The per capita vaccination cost (about \$10) was small in relationship to the per capita cost of hospital care for pneumonia (about \$100).

There is no doubt that in the elderly, vaccination against influenza is associated with reductions in the risk of hospitalization for heart disease, cerebrovascular disease and pneumonia or influenza. The vaccination also reduces the risk of death from all causes during influenza seasons. So get yourself immunized today.

Dr. Bharwani is a general surgeon, freelance columnist and author of "A Doctor's Journey." For his articles, video blogs and other information please visit [www.nbharwani.com](http://www.nbharwani.com).

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### Christmas Carrot Pudding

- 1 cup grated carrots
- 1 cup grated potatoes
- 1 cup suet or 1/2 cup butter or margarine
- 1 cup brown sugar
- 1 1/2 cups raisins
- 1 tsp grated lemon rind
- 1 cup glazed mixed fruit
- 1/2 cup blanched sliced almonds
- 1 1/2 cups flour
- 1/2 tsp salt
- 1 tsp baking soda
- 1 tsp cinnamon
- 1/2 tsp nutmeg
- 1/4 tsp cloves

Mix first eight ingredients together well in a large bowl. Sift flour, salt, baking soda and spices together blending well. Add these dry ingredients

to ingredients in the large bowl and mix until well blended.

Put mixture into greased pint or quart jars. Cover with the lid or you can use foil secured with an elastic or string. Steam jars for four hours by placing them in a large pot of gently boiling water that can be covered with a lid. The water level should be considerably lower than the level of the jars. The water should boil gently for the entire time and should be checked periodically to be sure the pot does not boil dry. Add more boiling water from a kettle if the water level is getting low.

These jars will keep for several months on the shelf if you used a lid and they have sealed (the top of the lid curves in).

To serve, heat the pudding in the jar in a pot of boiling water. Place in individual serving dishes – it is very rich so you won't need much – and top with warm sauce.

#### Brown Sugar Sauce

- 2/3 cup brown sugar
- 1 cup boiling water
- 2/3 Tbsp cornstarch
- Dash of salt
- 1 Tbsp cold water
- 1 Tbsp butter
- 1/2 tsp vanilla

Put brown sugar and boiling water in a small pot over medium heat. Dissolve cornstarch and salt in the cold water then add to pot. Stir well and cook until thickened. Add butter and vanilla and stir well. Serve warm over pudding.

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Sharie Hohn is a Certified Blood & Biological Terrain Analyst, Iridologist and Master Herbalist with over 19 years experience in the natural health field

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- \* Headaches
- \* Pain/Inflammation

Have you ever wondered why some people get sick more often than others, even though their lifestyles and diets may be fairly similar? One person may have a set of symptoms that are identical to another, yet screening tests such as Live & Dried Blood Cell Analysis and Biological Terrain Analysis will reflect completely different views of each individual. This is not contradictory, in fact quite the opposite and shows just how each and every individual is unique. (\*NOTE: These are not diagnostic tests)

Journey to health

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