

# Countdown to freedom



Debbie Hicks

Carbohydrate counting has been going in and out of fashion for years. The subject has appeared recently in *Balance*, and has had mixed reviews from the readers. However, this phenomenon is not new.

I learned carbohydrate counting 36 years ago when diagnosed with type 1 diabetes. I'll grant you it was restrictive; nevertheless, I learnt which foods, and what quantity of the food, equalled 10g of carbohydrate, also known as a black line. Refined glucose foods were never allowed in my daily diet back then, especially sweets. As a child I was never allowed sweets unless I was hypoglycaemic, but I still had them – I just used to hide away until I had eaten them. Even 36 years later I struggle to get away from the mindset of feeling guilty when I eat something sweet.

I am a huge fan of carbohydrate counting, and I strongly believe that everyone with type 1 diabetes should have access to education on the subject. I also think that people with type 2 diabetes who are using insulin with a basal-bolus regimen should have access to the same information.

I was very pleased when the DAFNE (Dose Adjustment For Normal Eating) educational programme for people with type 1 diabetes was rolled out across the UK. DAFNE's slogan "Eat what you like, like what you eat" has given people with type 1 diabetes the opportunity to learn carbohydrate counting and insulin adjustment, enabling them the freedom to choose to eat whatever they fancy, regardless of sugar content, without adversely affecting their glycaemic control. I found this concept completely liberating.

DAFNE paved the way for other similar educational programmes to develop, such as InSight from the Oxford Centre for Diabetes, Endocrinology and Metabolism, and BERTIE (Bournemouth Type 1 Intensive Education). Two members of our team visited the Bournemouth diabetes team to learn the BERTIE principles,

with the intention of providing a similar course at Enfield PCT. Currently, we use BERTIE principles in one-to-one sessions, and plan to implement it in a group setting in the future.

One resource that has proved invaluable to people with diabetes learning about carbohydrate counting is the Bournemouth team's website: [www.bdec-e-learning.com](http://www.bdec-e-learning.com). This website provides a step-by-step approach to the subject, including handy hints. I now give this website address to all individuals undertaking carbohydrate counting who have access to the internet. For those who are unable to access the internet, we have a printed version of the information.

I find it extremely rewarding when a person realises that they have gained the knowledge to free themselves from the dietary restrictions of diabetes and maintain good glycaemic control. The only downside for some people is that the freedom to eat what you like as often as you like may come with unwanted weight gain, but hey, that's the same for anyone, with or without diabetes! ■

## IMPROVE™ Control: A call to action.

For the past year, the *Journal of Diabetes Nursing* has been encouraging readers to participate in the IMPROVE™ Control initiative, aimed at providing solutions to the barriers to good glycaemic control faced by people with diabetes (see page 79).

This initiative will continue throughout 2009, and I would like to remind readers to please submit details of any initiatives, no matter how large or small, that you have used to help people with diabetes to improve their control. Submissions should be a maximum of 400 words, and will be published on the journal's IMPROVE™ Control page. To share your experiences, please contact us via email: [james@sbcommunicationsgroup.com](mailto:james@sbcommunicationsgroup.com), or by phone: 020 7627 1510.

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