

The Newsletter
of the Friends of
the Manx
Diabetic.
The diabetic
support Group
of the IOM

The Diabetic

All monies
collected are
spent on the Isle
of Man.
No monies are
sent
off Island

The Best and most Informative Diabetic Newsletter on the Isle of Man

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LEADING FROM THE FRONT

Caaryjn Lught Vannin yn Chingys Millish

A Charity registered in the Isle of Man. Charity number 894.

All monies collected from whatever source will be used exclusively on the Isle of Man for the benefit of diabetics and their medical carers.

Website: www.diabetes.org.im

e-mail: editor@diabetes.org.im

e-mail: secretary@diabetes.org.im

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No Room at the Inn

A Lady who unfortunately had split her Orthotic Shoe asked for an appointment to be seen at the Orthotic Clinic. She was told by Nobles’ Hospital: -

“We cannot give you an appointment, as we are not taking any more new patients”

As *The Diabetic* understands it, this lady had been looked after by Nobles’ since she was nine, she is now a grandmother, and even has Orthotic shoes supplied by them, so how can she be a new patient? But we know what they mean.



No Room at the Inn

Has the DHSS been made aware of what a Hospital is for, if not to take patients?

The problem is that there are now so many people attending the Orthotic and Prosthetic clinics, that they are unable to cope with the patients on the present system of their three weekly visits to the Island, which at times

**Feegans
Deli**

Food to eat in

Food to take away

Food for thought

Are all available at
Feegan’s Internet Lounge
8 Victoria Street, Douglas

extends to six and nine weeks to be seen, because there are no appointments readily available.

The Friends of the Manx Diabetic have been arguing for these good people to be here two days every week to alleviate this problem.

Even the Hospital Manager admitted at one of our meetings that there was now a considerable demand on the present facilities.

We started this argument when the now Chief Minister Mr Tony Brown was the Chairman of the Chronically Sick and Disabled Persons Committee, but he and his committee were unable to convince the DHSS of the necessity of expanding these two Clinics.

Then the Chronically Sick and Disabled Persons Committee was taken over by Mr Braidwood MHK as its Chairman.

The Committee as from 1st July last has changed its name and is now called the Tynwald Advisory Council for Disabilities.

When pressed we were informed by Mr Braidwood that the DHSS would be issuing a report.

When the report came, it included a statement to the effect that no one had complained about the Service for the past three years.

Who is living on cloud nine?

Only the Chairman took up issue with this statement with the DHSS, everyone else including the Chronically Sick and Disabled Persons Committee, now the Tynwald Advisory Council for Disabilities, did not raise a finger.

The Friends of the Manx Diabetic had many meetings with all and sundry, and yet no one, the DHSS claimed, had complained.

The DHSS probably thought we only went to these meetings because we had heard they may have wonderful cream cakes served by the DHSS at elevenses and not really to complain.

Well, now the chickens have come home to roost.

Now what The Friends of the Manx Diabetic has been maintaining all along has come to pass.

They can't take any **“more new patients”** because the present system is all clogged up and does not allow this to happen, but who suffers, the Manx people. Who cares, not the DHSS.

The Manx Government has spent 120 million pounds on a new hospital and now these clinics can't take new patients?

We reiterate we must have them here for two days every week so that they can cope with the Manx patients.

How can patients be turned away from our hospital facilities?

Again the DHSS takes the accolade for being the first, as no hospital in the world will turn away patients, except in Third World Countries who want payment up front or they will not touch you if you haven't got the money.

Is this what eventually is going to happen here to people who come to the Island from across the water and have no insurance? Will they have to pay up front to go into our hospital?

We are supposed to be a Nation, not a Banana Republic.

When the Chairman of the Friends of the Manx Diabetic and the lady's daughter vigorously complained, and insisted she must be seen, she was give an appointment for three weeks time. Three weeks of walking about with a split shoe because there is no one here to sort her out in between visits.

In this day and age, this is not acceptable.

What have we come to?

In the meantime if she falls and breaks a leg or her hip, how much will it cost the DHSS to sort her out in Hospital, thousands, and who would be responsible? Surely this appointment should have been given at the time of asking and not after complaints. Maybe in their next report the DHSS will claim this does not constitute yet another complaint.

It is about time that someone stood up to the plate and be counted.

This is a disgrace and an affront to the people of the Isle of Man, and it is about time that the Chief Minister stepped in and sorted out his DHSS Department.

What about it Chief Minister?

Plan for tomorrow and save money today.

Remember that when Noah started to build the Ark it was not raining.

We also must ensure that our Ark is ready for when it starts to rain in our old age.

Statement by Minister in the July Tynwald on the Rescinding of the Reciprocal Health Agreement

The following is the verbatim transcript of the Minister's Statement to Tynwald without comment.

“Mr President

By way of a motion carried in this Honourable Court at the sitting in April of this year, the Department was requested to report to the Court this month in respect of the termination, by the Government of the United Kingdom, of the Reciprocal Health Agreement, such termination taking effect from the first of April 2010.

A number of matters relating to the ending of the Reciprocal Health Agreement still require resolution, by the Department collaboratively with the working group addressing the matter, which is chaired by the Chief Minister.



The Minister for Health and Social Security Mr Eddie Teare

The working group has asked that the department prepare a report, which will then be considered by the Council of Ministers, with the intention of reporting to this Honourable Court in October.

I express my apologies Mr President that I am not in a position to give definitive comment on the matter at this stage, but I'm sure that Honourable Members will understand that various matters must be considered in full.

For example, the motion carried in this court in April required the department to explore with Ministers of the devolved United Kingdom Administrations the prospects for continuing reciprocal NHS Services.

Discussions with our colleagues in Scotland are under way, though we have followed up again our initial approach to both Northern Ireland and Wales.

This has significantly increased the work streams.

Members will, of course, be aware that one effect of the ending of the agreement is that emergency medical treatment for many Manx Residents visiting the UK, where such treatment requires the person to be admitted to hospital, will no longer be provided free of charge.

Equally, the Government of the United Kingdom will cease to make an annual contribution in respect of treatment provided on the Island to residents of the UK.

The Department will need to take account of what is thus, effectively, a reduction in its budget which comes on top of what is, as Honourable Members already know, a challenging financial time for the Department.

I thank you for the opportunity to make this statement Mr President and can reassure the Court that a report addressing all relevant factors, in full, will be provided”.

This is a verbatim transcript of the much expected statement on the Rescinding of the Reciprocal Health Agreement.

Not what the Manx Residents expected the Minister to announce for them being able to visit the United Kingdom.

After what the Minister for Health and Social Security Mr Eddie Teare said to the July Tynwald, his next statement in October, will once again probably turn out to be another damp squid.

Question?

Why is the Lone Ranger called the Lone Ranger, if he is always with Tonto?

How a Government Department arrives at decisions.

For those of you that don't know how decisions that affect your lives are arrived at by any Government Department, they operate like this: -

- 1) If the Department wants to implement anything the first thing that they do is to set up a Committee to look into the possibilities.

This Committee meets regularly for six months. Then they decide that because they haven't arrived at a decision on how to move forward, they agree that the best way to approach the matter is to:

2) **Appoint Sub-Committees** which again meet regularly for the next six months to look into the matter and report back to the Main Committee at intervals.

Meantime the Main Committee continues to meet regularly to receive the wonderful words of wisdom of the Sub-Committees.

As they are still getting nowhere, they decide to: -

3) **Appoint working parties** to advise the Sub-Committees to advise the Main Committee.

These working parties also meet regularly over a period of six months.

They report regularly to the Sub-Committees who in turn report regularly to the Main Committee who of course are still meeting at regular intervals to discuss what the Working Parties have come up with, and reported to the Sub Committees, who in turn are reporting to the Main Committee.

4) After over eighteen months of meetings the Main Committee takes on board what has been reported to them and they come to a decision.

The Main Committee then writes up the recommendations, and explain as to why it should be implemented, and if it is the DHSS, why it would be of benefit to the patients.

5) The recommendations are then passed to the Minister for him to have the necessary discussions and meetings with the Treasury, as funds will be required for the implementation and recommendations of the Working Parties, the Sub-Committees and the Main Committee.

6) The Minister then has meetings with the Treasury accompanied by members of the Main Committee, who are told by the Treasury that they need to take time to consider the recommendations and its financial implications.

7) Some two years after the initial Main Committee had been formed, the Treasury reports back to the Minister who in turn reports

to the Main committee, and informs them that the Treasury say, there is no money to implement their recommendations, and that the matter must be shelved until a more propitious time.

8) The Main Committee then winds up their proceedings on that particular issue and writes to inform all members of the Sub-Committees and all members of the Working Parties of the Treasury's decision, that there is no money to implement their recommendations.

9) The personnel who have over all this period been working on other committees, sub-committees, or working parties immediately start work on another Committee on other matters, and the whole process starts all over again, and after another two years come up with a similar outcome. Very rarely do these recommendations see the light of day, unless Tynwald itself is involved via a resolution in the House.

Please understand that these Committees, Sub-Committees and Working parties are constantly taking place on a daily, and hourly basis throughout all Departments of Government on a myriad of matters.

Noting happens if for over two years you are waiting for permission to build a garage but: -

In the meantime if this is a DHSS Department, the patient has seen no improvement to help their condition, and some of them have in the interim period DIED.

They have also done nothing for the environment, having cut down major forests for the paper mountains of minutes and unnecessary information being issued to and by all members of the Main Committee, the Sub-Committees and the Working Parties, not to mention letters here there and everywhere, phone calls, computer time, wages, (incidentally all staff at these meeting earn mega bucks), office space, electricity etc etc.

Oh and secretaries being paid to keep all this going, and to answer phones to tell you that the person you want to talk to is at a meeting.

That is why whenever you ring at any time, on any day of the week for someone at any Government Department, they are always at constant meetings, and their secretaries keep telling you they will ring you back when they finish their meetings.

They should have a recorded message like the talking clock, something like: -

“The person you want to talk to is at a meeting and will ring you back between their meetings, sometime today, tomorrow or the next day. Please leave your name and telephone number after the tone. Thank you”.

It would save a lot of money on secretaries.

It might look good on CV's, but this is where all the unnecessary Government expenditure goes, and why they are spending so much money, and therefore all departments particularly the DHSS keep pleading poverty, when with just one initial meeting everything should have been resolved.

And of course if there are medical people present, they are away from their patients and this exacerbates the waiting lists.

So now you know why the Minister has not been able to tell us in the House as to why no decision on the future of holiday travel to the UK for the Manx people has been arrived at, and why the Minister after a year of knowing what was going to happen, has done nothing.

Everyone has been having meetings with as yet no apparent resolution. But they have to keep employing top people to keep these meetings going.

Please understand that it is not the Minister's fault, *The Diabetic* exonerates him on this one, it's the endemic Committee System that he can't control and all those meetings that hamper progress, and he is powerless to do anything about it, but at the end of the day it reflects on the Minister.

He is the one that has to face the House and Tynwald, and to be re-elected, not the Civil Servants.

Nonetheless, after one year they should have come up with a system to help their own people.

On layers of Bureaucracy in the DHSS.

“We have to have a certain level of administration there to protect the Department, and also to provide back-up services for the medical consultants to enable them to spend more time with their patients”

Minister Eddie Teare defending DHSS bureaucracy in the House.

But he promised they are “dealing with the issue of administration”.

When? How? He has not said.

They will have to employ more administrators to look into the matter, so that they can have more administration meetings to decide how to “deal with the issue of administration”.

EDITORIAL

Since no one in the House other than Mr Houghton has asked the real questions of the Minister, it falls to *The Diabetic* to do so on behalf of the Manx people.

So we shall ask the question all over again.

“When is the DHSS going to address the issue of Isle of Man people being able to visit the UK to see their families or on holiday, without exorbitant insurance payments or penalised because of their age, irrespective of where the DHSS send their patients for treatment? As one thing has nothing to do with the other.

Of course the DHSS has to source out possibilities of other jurisdictions and hospitals to take the Manx people that the DHSS hasn't the facilities on the Island to look after.

This is essential for the DHSS to do, but the DHSS knew about this last October and by next October appear to have come to no resolution for over one year.

The Minister is going to make another statement next October one year after being informed that the UK Government were cutting them adrift.

One wasted year when everything should have been sown up by now.

The April motion in Tynwald the Minister claims, required the Department to explore with Ministers of the Devolved United Kingdom Administrations the prospect of reciprocal arrangements.

By implication, then they only started sourcing this out in April after the motion, because he says, they were told in a motion to do so by Tynwald.

He also says that this has significantly increased the work streams.....Since April?

He should employ more head honchos and have more meetings.

Also let us remind him that if he uses Wales, he may have to fly the patients to Liverpool and then taxi them to the nearest Hospital in Wales,

costing him at least £120 return to John Lennon per taxi.

And if he were to fly them to Ireland or Scotland he may have to renegotiate his deal with Flybe. Why wasn't this deal held in abeyance until a deal had been done with any of the devolved Governments?

The Diabetic hopes he has a get out clause.

But all the above is a DHSS problem and as usual they probably have not even considered the real implications or peripheral costs.

They are still having meetings.

Our main concern is that it does not matter to the people of the Isle of Man where the DHSS sends patients for treatment, what matters is that the Manx people will not be able to go to England without insurance, and if you have some medical problems or past a certain age excessive insurance at that, or no insurance at all.

Then you are stuck here without being able to get out of the Island. You are then trapped on the Island for life. So what is the DHSS doing about this? As usual nothing.

All his Department is doing is throwing up smokescreens and giving us red herrings by telling us that everything is OK, that they are making arrangements for patients to go somewhere else. That is not the answer for the Manx people.

We have had many questions in the House, by Mr Horton to which the Minister has not answered the questions and just side stepped the issue.

On 16th October 2008 the Chairman of the Friends of the Manx Diabetic at the Group's AGM, alive to this problem for the Isle of Man people, set out the problems that the Isle of Man would face. (See *The Diabetic* of December 2008), a year later the Government is still pussyfooting around the issue.

The Chairman even went on Manx Radio, last October, and the DHSS spokesman followed him the next day and said there was no need to worry everything was in hand.

Again ignoring the real issues.

A year has elapsed and what he claimed was in hand, is still in hand, and not seen the light of day.

This does not only affect the Isle of Man people but all visitors, even your own family coming to the Isle of Man who will need insurance to get here, when before they didn't.

Mr John Houghton MHK asked the Minister in the House if he had done anything to inform the UK public of the eventual need for insurance for them to come to the Isle of Man.

Because you have to give any Minister two weeks prior notice of a question, so that their department can answer the question for him, the DHSS in this interim two week period rushed out a Leaflet, so that they could say in the House that they were on the ball and doing something, when in fact they had done nothing.

We have to thank Mr Houghton because the Leaflet would not have even seen the light of day if the question had not been asked by him.

However the Leaflet as usual was all waffle and did not tell us what they were doing to inform the UK people that they needed insurance to come here, which was the object of the question, or how the Manx people who have medical problems and were of an advanced age needing insurance were going to manage to get to the UK, to visit their families etc, when the insurance companies would not take them on.

Why can't the Minister answer the question? This is what the people want to know.

It is about time he answered the question and not hide behind smoke screens and prevaricate on the issue.

Travelling figures will really collapse when people can't get here without insurance.

As for the TT next year we are wasting our money advertising, as unless the DHSS can resolve this insurance issue the figures will be the lowest ever.

Has the DHSS considered how many would come to the TT if the insurance companies did not insure them for hospital treatment on the Island arising from any bike incident, because they could get this for free before and of course in the UK?

We should stop trying to set up Theme Parks with Thomas the Tank Engine and instead Members of the House must demand from the Minister and his Advisors, what he intends doing for the Manx People who want to travel to the UK when they can't get insurance, and are trapped on the Island for the rest of their lives.

If our Senior Citizens can't go to the UK, take them to the Thomas the Tank Engine Theme Park, is that the answer?

In any event who in their right minds are

going to come to the Island to have rides on Thomas the Tank Engine, when no one can get here without insurance, and they can go to Theme Parks with Thomas the Tank engine in the UK without insurance.

The Friends of the Manx Diabetic has already lost four elderly members of the Group, (these are not anecdotal evidence as the Minister said in Tynwald that he had, these are facts), who have sold up and returned to the United Kingdom, because of the inability of the DHSS to make a statement, and as things stand at present they would not have been able to afford insurance to get across or get their family members over to the Island after April Fool's Day 2010.

The Friends of the Manx Diabetic has given the DHSS two proposals to cover this problem, and Mr Karran MHK has given them one.

How many have the DHSS come up with themselves?

The Diabetic knows it's April Fool's day in 2010, but Minister it's no joke! The people of the Isle of Man depend on and demand action from you.

See the comments, proposals and implications to the Island made by the Chairman of the Friends of the Manx Diabetic as published in previous *Diabetic* Newsletters.

If you haven't got one of the previous issues, then go to our website www.diabetes.org.im and look up Newsletters as from December 2008 to date.

In the meantime, we shall await with avid interest the Minister's next none event at the Tynwald sitting in October.

Who knows there might be a surprise for us all, though in the light of past experience we are not holding our breath or much hope.

Get onto your MHK and get them to pressure the DHSS.

**Sign at an Opticians window
Broken lenses duplicated here.**

The Proposed Shake-up of Elderly Care

The UK Health Secretary Mr Andy Burnham has come up with new ideas for Government Proposals for the care of the Elderly.

The following are the three main systems that the UK Government are toying with.

Proposal One: -

The Government would pay a quarter to a third of all future personal care leaving the patient to pay for the rest.

This would leave the average 65 year old paying between £20,000-£22,500 over their lifetime.

Of course, if the person needs no personal care, they pay nothing, but if they were unlucky enough to require personal care they could end up paying a very large amount.

The State would only contribute to 'personal care' costs, such as help to wash, eat, dress and move around.

Proposal two: -

A Voluntary **state-backed insurance scheme** could cover all your personal care.

To join, you would pay £20,000-£25,000 either up front at age 65, weekly through deferred pension payments, or on death via your estate.

Those who did not join would only get a quarter or a third of their care paid for as in option one.

Proposal three:

This the Minister calls the comprehensive model.

All those with assets worth more than £23,000 would have to join a **compulsory state backed insurance scheme.**

The greater risk base would mean the cost of joining would be cheaper, between £17,000 and £20,000. Payment methods would be the same as those for the voluntary insurance scheme. All Britons would then get free personal care.

The catch?

Please note that none of the above three options include the payment for accommodation costs.

Reliable sources are of the opinion that these average at £16,000 a year, or £28,000 for the typical person's care home stay.

Of course in all three options anyone with assets less than £23,000 would not have to pay either personal or accommodation costs, however anyone with assets above that amount will have to pay.

Whatever way Mr Andy Burnham may want to dress this up, Pensioner Groups say many in residential care will still have to sell their houses to pay for accommodation costs, lodging, food and heat, which makes up 70% of care home charges.

If this is put into effect in the United Kingdom, what is going to happen here?

Our Government, who claim we are an independent Nation, follow blindly what the UK Government do as regards health policy.

We allow the UK Government to dictate our health policy, and whenever they so desire kick us in the teeth, see the Rescinding of the Reciprocal Health Agreement.

It is about time we woke up to the reality of life.

So will all Manx residents that need care in our institutions have to pay either options 1, 2 or 3 above on the Isle of Man?

We shall have to wait to see what systems the local DHSS will hoist on the Manx people and will make us pay, for having the temerity to live into old age.

In the meantime Mr Teare the Minister for Health and Social Security has already warned us that his department may not be able to afford the services and treatments provided under the current system in the future.

The DHSS have now launched a Draft Social Services Bill for consultation, and comments on the Draft Bill are invited by 31st October 2009. (A consultative Document and a Draft Bill are available on www.gov.im/consultations.gov or you can phone O1624 685639)

Again those who have worked and been thrifty, saving all their lives for their retirement are going to be made to pay for everyone else.

Note: - In Scotland elderly care is different, not the same as the rest of the UK.

So if Mr Teare makes a deal with Scotland will our DHSS adopt their system of elderly care and implement it in the Isle of Man, and we shall all pay nothing in old age.

Or shall the DHSS continue to use the Scottish Hospitals for treatment and the UK system for elderly care because they will save monies, and make us all pay?

The Diabetic has spoken with the Information Officer of the Council of Voluntary Organisations Mr David Gawne regarding the information document they have released on the Pandemic Flu.

Mr Gawne told us that the Island’s Voluntary Organisations, faith groups and the community is a key provider of the many Isle of Man community services, supplying a wide range of support to improve and maintain the quality of life of the Island people.

Because of this, he is of the opinion that they will play a significant role in preparing for and responding to the effects of a pandemic.

Mr Gawne has prepared a comprehensive paper in which the Council of Voluntary Organisations sets out how the voluntary sector is planning for and will collectively and individually respond to the challenge.

He explained that there are six levels, in order to track the development and spread of the disease and that the Isle of Man follows World Health Organisation’s levels of alert .

After the World Health Organisation’s level six, which is a Pandemic-efficient and sustained human to human transmission, Mr Gawne points out that the Isle of Man has four further levels of alert in order to identify how the pandemic is affecting both the UK and the Isle of Man, they are: -

- Level A Virus is outside the UK and Isle of Man.
- Level B Virus is isolated in the UK.
- Level C Virus is isolated in the Isle of Man.
- Level D Virus is causing outbreaks in the Isle of Man.

The Isle of Man level of alert will be adjusted by the Public Health Pandemic Control Team in consultation with the Chief Secretary’s Strategic Co-ordinating Group.

Mr Gawne in his paper emphasises that the best way of limiting the virus is through thorough and efficient hygiene practices like:-

1. Use a tissue to cover your nose and mouth when coughing and sneezing, and it should be disposed in domestic waste. Do not use handkerchiefs or reuse tissues.

The Diabetic
Newsletter
There are important changes coming,
please see the last page of this
Newsletter for more information.

Flu Pandemic

2 Clean hands with soap and water, especially after sneezing, coughing and using tissue.

3 Minimise touching your mouth, eyes and nose.

4 Use normal detergents and water to clean surfaces frequently touched by hands, like door handles, telephones, keyboards etc.

5 Clean your hands as soon as you arrive home.

6 Do not go to work, or leave work immediately if you begin to display symptoms of the disease.

For more detailed information including the two UK Government publications regarding Pandemic Influenza, that published locally and the full document now issued by the Council of Voluntary Organisations in the Isle of Man please contact:

Mr David S Gawne,
Information Officer,
Council of Voluntary Organisations,
Nivison House,
Prospect Hill,
Douglas. IM1 1QS

The Diabetic is most grateful to Mr Gawne for bringing to our reader's attention the document on the Pandemic, released by the Council of Voluntary Organisations.

Question?

If the Isle of Man is not in recession why are people being laid off all the time, and why is Bank interest on the Island at 0.5%

The Disability Bill

Three years after a Bill was passed in Tynwald and **ten years** after it had been brought into operation in the UK, the Island is still awaiting its implementation.

The Minister for Health and Social Security got a rough ride in Tynwald and as usual promised us with his usual get out clause, that his department is looking into the matter and would be putting the matter out to tender to seek 'Expert Consultants' to draft the detail legislation.

More Bureaucracy, More Committees, More Sub-Committees and More Working Parties.

As usual money appears to be no object to the Minister and his Department, all they have to do is go to Tynwald cap in hand to get some more, yet they keep on bleating that they have no money for the things that matter.

The Friends of the Manx Diabetic have already explained to the Tynwald Advisory Council for Disabilities last May, when they were the Chronically Sick and Disabled Persons Committee, that if we follow the UK in everything the Government and DHSS do, why don't we get a copy of what the UK has already implemented **ten years ago** and is working admirably well, and just implemented it here with whatever modification is required, and forget about going to tender and spending unnecessary monies on more consultants.

Why do we have to spend more money in getting 'Expert Consultants' to tell us the same as what they are doing in the UK.

The Diabetic agrees and applauds Mr Eddie Lowey MLC, and we ourselves also don't understand why we have so many people doing so much strategy without any performance.

The only difference between the difficult and the impossible is that the latter takes a little longer.

Patients Transfer

Once again the Minister for Health and Social Security is in the headlines, regarding patient transfer for treatment in the UK.

In May last Mr Teare announced a proposed revised Patient Transfer system to the UK and indicated that ferry travel may, may, replace air travel.

Just in case he may still be on the same tack, has the Minister considered that the patients that travel to the UK are going there because he cannot provide the necessary facilities here and that therefore these patients are somewhat **sick**?

The Diabetic wonders whether if Mr Teare were to require treatment across, he would be prepared to be tossed about in the Irish Sea for two and a half hours, and may arrive there in no state to stand on his own two feet?

The Diabetic also wonders what it would do to his hypothetical medical condition.

Oh God, Health Chiefs we are told are looking at options (more Committee meetings).

The Diabetic knows that they get paid for all this, but nonetheless let's repeat again some advice, we have been giving these Health Chiefs, free, gratis and for nothing during the past year.

Remember you are carrying sick patients who need looking after in transit.

The Friends of the Manx Diabetic have already pointed out to them that:

1) When making the deal make sure that the plane that carries these sick Manx people has an airhostess, just in case someone needs help during the flight, and not as we have been told by the DHSS, the pilot will help them. The mind boggles.

2) If not, ensure that there is always a nurse on board.

3) Make sure that these planes have toilet facilities.

4) Make sure that these planes have basic food and drink facilities just in case someone needs something to eat or drink urgently.

We have been told diabetics should take food and drink with them.

5) Make sure that these planes have wheelchair facilities as otherwise you are spending double your money, having to send them over with other airlines at greater expense, thereby defeating the object of the exercise.

6) Make sure that if the patient finishes their appointments in Hospital earlier than expected, they can return to the Island on an earlier flight without the DHSS having to pay a penalty for their changed flight.

7) Ensure that you have a get out clause with any deals you make just in case you send patients to Scotland, Ireland or Wales, and you need another airline. (Flybe not flying to Belfast now)

8) Ensure that whoever does the transfers from the airport to Hospitals have the proper facilities for wheelchairs etc, and not mini buses as doing rounds from hospital to hospital the last patient may arrive late for their appointments.

9) And of course it has to be the cheapest option that takes into account all the above points.

The DHSS has announced that they have now entered into an agreement with Flybe for the next year from the Island to Liverpool and/or Manchester return, which we hope encompasses all The Friends of the Manx Diabetic recommendations as stated above.

Yet they are trying to make a deal for patients to go to Scotland, Northern Ireland or Wales, so where does Manchester and Liverpool come in, if any deal comes through, Manchester and Liverpool are not going to be used. Syllogistic logic.

Consequently we hope that if the DHSS decides to go to Scotland, Wales or Ireland they have the necessary get out clause with Flybe to be able to change routes to any of these new destination at the same price, as otherwise the DHSS will have an almighty headache trying to get out of their binding year long contract with Flybe from the Isle of Man to Liverpool and Manchester, which the DHSS would not be sending the patient to.

In the meantime if these all powerful and knowledgeable Health Chiefs need any more advice, before instructing the Minister, please give The Friends of the Manx Diabetic a ring.

The Friends of the Manx Diabetic don't mind if at the end of the day they pass it through as their own idea, provided it is taken up. Forget the meetings, just pick up the phone give us a ring and you'll get things moving.

In the National Health Service, for years there has been a sterile political debate.

Davis Mellor MP

Change in reporting of HbA1c (glycosylated Haemaglobin)

The following is a summary of the new system that is being adopted for the implementation of the HbA1c as reported by The Friends of the Manx Diabetic's medical Advisor, Dr Alison Blackman



Dr Alison Blackman

All diabetics should have a blood test at least once a year to test for the HbA1c which measures an 'average' of your blood sugar over the last 2-3 months and helps determine if you need a change in treatment.

The HbA1c measures the amount of glucose that is being carried by the red blood cells in the body.

Generally the HbA1c target is below 6.5 per cent, since evidence shows that this can reduce the risk of developing diabetic complications, such as nerve damage, eye disease, kidney disease and heart disease.

In older diabetics this may not be possible and diabetics at risk of severe hypoglycaemia should aim for an HbA1c a little higher but the closer to 6.5% the better.

HbA1c results are currently given as a percentage. However, the way in which HbA1c results are reported has changed. From 31 May 2011, HbA1c will be given in millimoles per mol (mmol/mol) instead of as a percentage.

In the transition phase from 1st July 2009 in the Isle of Man the results are being given in both percentage and mmol/mol until 31 May 2011.

Eg the equivalent of the HbA1c target of 6.5 per cent will be 48 mmol/mol.

The fact that the number is higher does not mean there is more glucose in your blood

So 6.5 %	is equivalent to	48 mmol/mol
7.0		53
7.5		58
8.0		64
8.5		69

We would like to thank Dr Blackman our Medical Advisor for bringing us up to date with the new readings for the HbA1c which will come into effect on 31st May 2011.

You heard about it first in *The Diabetic*.

Never take a Sleeping Pill and a laxative on the same night.

On the Buses

The Department of Tourism and Leisure announced changes to the Senior Citizens' concessionary bus fare scheme, which were due to come into effect on Monday 3rd August.

However the department has had second thoughts, and announced it was considering the postponement of the half fare charge for two hours in the afternoon peak period, until the Bus Review is considered and all other options explored.

They must have taken this action because all buses are completely full with people standing in the isles, sitting and clinging to the roofs during this two hour period.

Mr Cregeen MHK, member for Tourism and Leisure with delegated responsibility for Transport said: -

"Whilst making it clear that this was the third element of a three part change in fares that the Department considered necessary for the current financial year, I have now asked the new Director of Public Transport, to reconsider this issue as part of the bus review that is due to be completed later this year.

This will allow the stakeholders to be consulted and alternative options to be reviewed.

We will then be able to present a series of options designed to help choose how we balance our budget in these difficult economic times".

The Minister himself, not to be outdone also explained that: -

"It is already understood that the Department faces difficult financial decisions and whilst the long term issues of replacing and operating buses are still to be addressed, I entirely support Mr Cregeen in deferring his initial decision and incorporating the issue into the Bus Review.

The Department hopes to be able to consult on the initial results of the Bus Review in October 2009"

Did they say "difficult economic times", but we are not in recession so we should have no problems.

But hey, they are contemplating bus pass adjustments across the water, they are in recession, so why don't we do it here?

Jump on the buses, sorry the bandwagon.

Our recommendation: - What we really have to do is have free bus passes for all, and in this way there would be more people On the Buses and less in their cars on the road.

Carbon Footprints, Carbon Footprints! If you really want to be green.

This would help with global warming, the Government wants to appear green, how green do you want to get?

The Government have money to burn in Tynwald, so lets burn some more.

Note:- A reversal of the Government dictatorial decision? We thought there was no recession?

What is our Government up to?

The Senior citizens as from April's fools day in 2010 will not be able to go to the UK without travel insurance, if they can afford it or can get it.

Now our Government is going to make them pay for travel in the Isle of Man, in their own buses.

Lets bring on Thomas the Tank Engine!

We have lost our perspective entirely.

What is the point of having a Financial Sector if it doesn't work for the Manx people?

The Isle of Man Government have a duty of care to our senior citizens in all aspects of their daily lives.

**We may be small,
but our morality must be BIG**

What the Papers say

Commenting on a complaint from a Mr Arthur Purdey about a large gas bill, a spokesman for North West Gas said:

"We agree it was rather high for the time of the year, It's possible Mr Purdey has been charged for the gas used up during the explosion that destroyed his house"
(The Daily Telegraph)

Irish police are being handicapped in a search for a stolen van, because they cannot issue a description.

It's a Special Branch vehicle and they don't want the public to know what it looks like"
(The Guardian)

At the height of the gale, the harbourmaster radioed a coast guard and asked him to estimate the wind speed.

He replied he was very sorry but he didn't have a gauge.

However, if it was any help, the wind had just blown his Land Rover off the cliff.
(Aberdeen Evening Express).

Mrs Irene Graham of Thorpe Avenue, Boscombe, delighted the audience with her reminiscence of the German prisoner of war who was sent each week to do her garden. He was repatriated at the end of 1945, she recalled- "He'd always seemed a nice friendly chap, but when the crocuses came up in the middle of the lawn in February 1946, they spelled out 'Hail Hitler'". (Bournemouth Evening Echo)

**One can peel tomatoes easily by
standing in boiling water for a
minute.**

Cookery column of the Daily Mail

In Touch

New Service Level Agreement for Hospice Isle of Man

The Department recently announced the signing of a new five year Service Level Agreement with Hospice Isle of Man.

The Agreement equates to a cash grant plus other support in kind, such as help with drugs, laundry, clinical and sterile supplies, professional indemnity insurance, staff pensions provision, estates services along with other essential benefits.

The new agreement came into effect from Friday 24th July 2009 and is the result of a year long series of meetings between the Department and Hospice Isle of Man.

The working committee, led by Norman McGregor Edwards, Director of Health Strategy and Performance, along with members of the Board of Hospice, have worked hard over the last year to reach mutual understanding of the need for the agreement and the available budget.



Minister Eddie Tear MHK and John Quinn, Hospice Chairman, sign the Service Level Agreement.

Minister, Eddie Teare, MHK said “Officers from the DHSS have worked closely with representatives from Hospice in negotiations to prepare this Service Level Agreement, which has allowed a greater understanding by all of each of the organisations financial positions and the pressures placed upon the DHSS by competing demands.

The Department recognises the efforts made by Hospice to raise funds and hopes that support for Hospice by the Department will continue into the future.

I would like to personally thank Mrs Margaret Simpson, Mr Mike Bathgate and Mr Chris Hall for the contributions they have personally made “.

Chairman of Hospice Isle of Man, Mr John Quinn added, “I would like to take this opportunity, on behalf of Hospice Isle of Man, to thank the Minister, Eddie Teare MHK, David Killip, Norman McGregor Edwards, Lesley Keenan and Simon Jackson for all their hard work in bringing about this Agreement.

I would also like to thank Hospice Chief Executive, Mrs Margaret Simpson and the Board of Governors for their involvement and ongoing work.

As a charity we are particularly pleased to have reached agreement, as we are aware that this grant is given in a currently cautious climate on the Isle of Man.

Additionally, I would also like to thank the Isle of Man Government and the Isle of Man Treasury.

This grant will help Hospice to continue to provide excellent standards of care and allow our specialist staff to continue to develop both their skills and their education.”

The Diabetic is most grateful for the above article which has been supplied and published by courtesy of In Touch Magazine a DHSS publication.

**You gotta keep in shape.
My grandmother started walking five miles a day when she was sixty.
She’s ninety seven today, and we don’t know where the hell she is.
Ellen DeGeneres, actress and comedian**

News in Brief

One diabetes jab a day that also fights Obesity.

Scientists have developed a revolutionary once-a-day injection that both controls the symptoms of diabetes and also helps fight obesity.

The European Regulators have already given the drug the go ahead, and it is expected that the jab will soon be available on the DHSS.

Experts are of the opinion that this new drug, called Victoza, could help prevent thousand of Type 2 diabetics having to take insulin, which can cause weight gain.

The Diabetic is of the opinion that once this drug is made available on the Drug Tariff, that is will automatically become available on the Isle of Man DHSS.

The Isle of Man follows the UK Drug Tariff, so the DHSS will have no option but to make it available here.

Infrared Treatment for Diabetics

There is a new American Research trial using infrared light to treat eyes of patients twice a day for some 80 seconds at a time.

They are investigating the use of light therapy to tackle the common eye problem associated with diabetes.

It is thought that infrared light can promote healing and improve vision in patients with diabetes macular edema.

This is caused by blood vessels swelling and leaking fluid into the centre of the macula, the part of the eye responsible for seeing fine detail.

The fluid makes the macula swell, blurring vision.

Cocoa could help high blood pressure

In trials at the University of Cologne in Germany, 48 men and women with high blood pressure will be given a single capsule containing 1,000mg cocoa polyphenols. These are antioxidants that occur naturally in the cocoa bean.

It is thought they work by increasing levels of nitric oxide, which in turn dilate the blood vessels.

Grapefruit could be a route to beating Obesity

Scientists are now claiming that the humble grapefruit could prove to be an answer in the fight against diabetes.

A study has found naringenin a flavonoid found in citrus fruit, makes the liver burn fat instead of storing it after a meal.

Researches believe the chemical would also help obesity sufferers and even fight diabetes, because it also helped balance insulin and glucose levels.

Anyone wanting to try this will have to wait until scientists develop a concentrated supplement as they would need a higher dose than what is contained in a grapefruit.

Hope for Diabetics from Pigs

Pigs from a remote group of Islands, doctors believe, could hold the key to the cure of Diabetes.

The pigs are descendents of a herd that whalers had left on the Auckland Islands 300 miles of New Zealand in the 19th century.

Since then because they have had no human contact, this makes them virtually disease-free and a potential source for tissue for human transplant.

Scientists want to transplant cells into patients with Type 1 diabetes in the hope to make the pancreas to make insulin.

This radical treatment is unlikely to cure diabetes, but it could cut the amount of insulin diabetics may need to take.

A Drug used for Diabetics may limit MS damage

MS affects an estimated 85,000 people in Britain. It is thought to be caused by a natural chemical called Interferon-gamma.

Normally, this works to help activate the immune system to destroy nerves in the brain

and spinal cords, leading to a loss of balance, blurred vision and bouts of paralysis.

A study has found that Actos, which is a drug widely used to treat diabetes could also be a treatment for multiple sclerosis.

This study has found that the drug Actos can partly protect brain cells against damage caused by the Neurological disease, because of its powerful anti-inflammatory effects.

In a year long trial US Scientists have noticed that patients given the drug lost fewer brain cells.

Senior moments!

You notice you are getting older, when you are on holiday and your energy runs out faster than your money.

The Friends of the Manx Diabetic need a new Membership Secretary.

It is with regret that we have to inform you that our Membership Secretary has had to resign his post because of his elevated commitments to another Group, and we wish him well.

We are therefore in the market for another Membership Secretary.

In the meantime Jan in addition to her normal duties as Secretary, will be taking over once again as Membership Secretary.

She is on telephone 613702, address: 'Gibel Tariq', 17 Farmhill Park, Douglas. IM2 2EE, on e-mail secretary@diabetes.org.im and of course on our website www.diabetes.org.im

If anyone of you would like to be Membership Secretary of the Friends of the Manx Diabetic and help your Group, and Diabetics on the Island, please get in touch with Jan.

Thank you
Chairman

Logical Solution?

If the Hyperbaric Chamber needs £11,000 to keep going, why don't we get rid of one head honcho at the DHSS and the money they save will pay for 10 years to keep the Hyperbaric going.

Baldrine Afternoon Tea.

On Wednesday 19th August, the Friends of the Manx Diabetic were invited to the Baldrine Methodist Chapel for their annual charity event, which this year was in support of the Friends of the Manx Diabetic,

The event which had a raffle, cake and a brick-a-brack stall opened its doors to the public at 2.30 in the afternoon and was extremely well attended.

The entertainment opened with the Onchan Ladies Choir giving an excellent performance lasting some 45 minutes.

There were songs for everyone's taste, in addition to singsongs that those present sang along with gusto and enthusiasm.

This was followed by the Chairman of the Friends of the Manx Diabetic, who had been asked to give a short talk on diabetes and the work of the Friends of the Manx Diabetic.

The Chairman left those present in no doubt of the necessity to have a group like the Friends of the Manx Diabetic who he said "had no head office in the United Kingdom", their head office he pointed out was the "welfare of the Manx Diabetic" and therefore did not send any monies collected, off Island. The talk went down so well that following his address he was approached to give a talk to a ladies group.

There then followed tea, sandwiches and cakes, which were at par with the very best hotels on the Island, in their diversity and presentation.

A cheque will be presented to the Friends of the Manx Diabetic at a later date and we shall have information on that in our December Newsletter.

The Friends of the Manx Diabetic would like to thank the organisers of the event in particular Susan Corkill, their secretary for thinking of us and for helping us in our efforts to ensure that the Manx Diabetic have better facilities for their care in the Isle of Man.

The Last Laugh

A Primary School Teacher was encouraging her class to write a short story that included: religion, class, sex and mystery.

One minute later, little Johnny plonked his effort on her desk.

It read: -

"My God", said the Duchess, "I'm pregnant again. I wonder who dunnit this time?"

The Friends of the Manx Diabetic are the Group that will look after the interests of all diabetics on the Isle of Man.

Whether you are a registered member of our Group or not, if you have a diabetic problem, we are here to help you.

We have to keep up with improvements that are implemented world wide, and we must get them implemented on the Island.

We therefore must have somebody that will intervene on behalf of diabetic patients, and on the Isle of Man, there is no one better than the Friends of the Manx Diabetic.

So join us today, please ring (01624) 613702, or join online at www.diabetes.org.im

All monies we collect are spent on the Island for the benefit of the diabetic patient and their medical carers.

No monies are sent off Island.

THE DIABETIC **NEWSLETTER**

Dear Recipient of our Newsletter

Please note that due to the credit crunch, and the popularity of *The Diabetic*, printing and postage costs of producing *The Diabetic* have escalated out of all proportion.

The Committee after careful consideration, have unfortunately concluded that as from the Newsletter to be published on 1st December next, it will no longer be circulated in printed form, as the cost of printing and postage can be allocated to other good usages.

So as from 1st December 2009 *The Diabetic* Newsletter will still carry the arguments, stories and information but will only be on the net.

Those of you who already receive it in that manner will receive it as usual without any change.

However, those of you who have been receiving it in the printed form will have to notify us at editor@diabetes.org.im of your e-mail address as quickly as possible if you want to continue getting *The Diabetic*.

We shall notify you on your e-mail as we do those recipients already on the net, when it is posted on our website and all you have to do is go into our website at www.diabetes.org.im and click on Newsletters and go down to the last Newsletter which you can then read or print yourselves.

If you cannot receive it via the internet and want to continue to have it in a printed form, we would require a stamped addressed envelope of an A5 size and a contribution of £1.50 to cover the printing costs.

The Committee of the Friends of the Manx Diabetic apologises for any inconvenience caused but hope that you understand our increasing problem and that as a Charity we must maximise our funds.

Sorry but we must evolve with the times.

Thank you very much and we look forward to hearing from you.

Henry J Ramagge
Chairman/Editor

