



T1DOC OF THE ROCKIES

OPTIMISTS FOR CURING TYPE 1 DIABETES

NOVEMBER 2014

Volume 2 Issue 1

THERE ARE TWO NEW EXCITING ARTICLES ON PAGE 3-6 ABOUT DIABETES

MARK BRIGGS TALK ABOUT T1DOC

T1DOC: What is your connection to T1D?

MB: My son Brewer, 15 has had T1 for 6 years.

1DOC: What led you to become an Optimist?

MB: I used to do business through my company Distinctive Threads with Jeff Gartz, doing logo's on Wagner Equipment's, shirts and caps. I helped Jeff with his shirts for the JDRF walk one year. I then started saving all my samples, and I donate them to the JDRF store, and now the clubs store. When Jeff started this club, I became a founding member.

T1DOC: What is your personal mission/vision as it relates to T1DOC?

MB: I believe that while it is important to spend money and resources on all aspects of T1D, education, patient support, medical devices, better insulins etc. I feel the true cure will come from genetic manipulation. Someday science will figure out how to turn off the Tcells that are responsible for T1D. Stanford U has done some groundbreaking work, and is already in a phase 2 study:
<http://www.bizjournals.com/sanfrancisco/blog/biotech/2013/06/type-1-diabetes-vaccine-standford.html?page=all>

T1DOC: Please share with the club something most people don't know about you.

MB: I believe that You Become what You Think About, so think positively, and think about what you want to happen.

IN THIS ISSUE:

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FACEBOOK

A reminder for you to look at our Facebook page that Hannah created for T1DOC. Please "like" our page at: <https://www.facebook.com/T1DOC> **ALSO** check for cancellations.



HAPPY BIRTHDAY

- | | |
|----------------|--------|
| David Goldman | Nov. 3 |
| Michael Chavez | Nov 15 |

OFFICERS FOR T1DOC

- | | |
|----------------|---------------|
| President | David Cooper |
| Vice President | Richard Cohen |
| Vice President | Jeff Gartz |
| Secretary | Diane Brown |
| Treasurer | Ron Gustas |
- Meetings at Perkins-1995 S Colorado Blvd Denver, CO 80222. Newsletter Deadline is Nov.. 20. Email stories & Pictures to kpmca@comcast.net

BOARD OF DIRECTORS

- | | |
|--------------|----------------------|
| Dan Thompson | Aaron Knox |
| Gary Bowman | Tammy Miller-Davison |
| Greg Young | Douglas Smith |



Happy Thanksgiving

EVERYONE IS INVITED TO ATTEND OUR MEETINGS 6:30 PM EVERY 2 AND 4TH WEDNESDAY



If you have a suggestion for a speaker or a topic you would be interested in please call Gary Bowman at 720-635-7122

COMING EVENTS

DATES TO SAVE

ADA STEP OUT: WALK TO STOP DIABETES November 1, 2014 Downtown Aquarium

We Step Out to do our part to Stop Diabetes! Participants are changing the future and making a positive impact in the lives of those who are affected by diabetes. Step Out participants are committed to walk and raise money in this inspirational event not because 26 million people in the United States have diabetes, but because they walk among us in our lives and at the event.

Hannah Hoogenboom has created a Team. If you want to join or donate please go to [pwww.diabetes.org/stepoutdenver](http://www.diabetes.org/stepoutdenver) and select the "Join the team or donate" Then you will enter "Team Happy Feet" Questions? Please call 720-855-1102 x7023. It's free to register and participate in this Saturday of fun!

JEWELS FOR HOPE JEWELRY SALES TO BENEFIT THE BARBARA DAVIS CENTER

November 8th - Jewels for Hope celebrates their 10th Birthday
Crazy Merchant, 10am to 4pm
1700 W. Belleview Ave., Littleton, CO 80120

November 21st - Pinehurst Country Club
Holiday Bazaar - 10am to 4pm
6255 W Quincy Ave, Denver, CO 80235
This is an elegant bazaar and really worth attending

VOLUNTEERS NEEDED

ADA is looking for volunteers to attend and represent the American Diabetes Association at these Health Fairs. All of these fairs are general health information fairs. Please contact Kathryn Holabird KHolabird@diabetes.org. or call 720-855-1102 ext 7017 Kathryn will provide volunteers with flyers and materials.

NOVEMBER

The next Board meeting will be held **November 5th** at 6:30 at 3540 S. Poplar, Denver. All are encouraged to attend.

November 12th Brian Wilcomb will tell about his adventures climbing 14er to support ADA Camp. Brian is a T1D

November 15th (Saturday), we will be putting together the little wooden cars. Anyone and everyone is invited. Details in Optimist Outlook page 7

December 10th Sonia Chritton will speak to us about the fantastic news for diabetes (Page 3) and diabetic research. Sonia has a T1D son.

December 14th, we have a fun social time planned. More info to follow

Colorado Access Health Fair

Holiday Inn Denver Cherry Creek
455 S Colorado Blvd, Denver, CO 80246
Date: November 4, 2014
Time: 2:00pm to 4:00pm

Department of the Interior, Interior Business Center (IBC) Health Fair

Location: TBD
Date: November 6, 2014
Time: 2pm to 3pm

Senior Health & Information Fair

Highlands Ranch Senior Outreach
62 W Plaza Drive, Highlands Ranch, CO 80129
Date: November 8, 2014
Time: 9:00am to 12pm

BRAIN BOWL WILL BE STARTING IN JANUARY

The first Brain Bowl at which we will work concessions is January 10, 2015 at Standley Lake High School in Westminster.

The second is January 31st at Heritage High School in Littleton.

The web-site for the Brain Bowl is www.optimistbrainbowl.org. It has other dates and info about the competitions.

JDRF DREAM GALA 2015

We have set the date for the 2015 Dream Gala. It is taking place on Saturday, April 11 at the Sheraton in downtown Denver.

PAST SPEAKERS



October 8th The CDF's President of the Guild Dalyla Craghe talked about all The Guild does for the Barbara Davis Center. Dalyla has also joined our T1DOC.

➤ **Helping Hand Committee:** This committee meets regularly to determine how to assist families in times of exceptional need, including purchasing diabetes supplies and covering travel expense for those coming from out-of-town. This program also provides additional assistance during the holiday season. **There are more families in need with ACA than ever.** Helping Hand and the medical staff are trying to meet the needs for the

families. With the increased deductibles on the new plans families are struggling with co-pays.

- **Staffing for the Barbara Davis Center:** Guild volunteers provide special services on a daily basis to help the clinical staff. They assist the clinical team with the children, staff the playroom, and perform various clerical assignments. Literally, thousands of volunteer hours are devoted to the Barbara Davis Center,
- **Charlotte Tucker Scholarship:** Through an application process each year, The Guild grants higher education scholarships to patients at the Barbara Davis Center.
- **Education Committee:** This committee conducts a widespread campaign for awareness of symptoms, treatment and life skills for diabetes. This dedicated group endeavors to find ways to continuously inform the public concerning the signs and symptoms of type 1 diabetes, in hopes of stimulating awareness and diagnosis.

See more at: <http://www.childrendiabetesfoundation.org/the-guild/how-we-help/#sthash.VJoTxshO.dpuf>

October 22nd: Mark Hardcastle spoke about his life experiences, as described in his book "The Symphony of Your Life - Restoring Harmony When Your World is Out of Tune". After several years of journaling about that reality, Mark broke his neck in a mountain biking accident near Moab, UT. An event like that has the effect of powerfully focusing one's attentions. And now, almost two years later, Mark has written a book about his life experiences and he travels around the country speaking to groups of all sizes about how the Wheel Of Fortune turns, and how we can create great lives. Mark graduated from the USAF Academy in 1982. After nine years as a pilot on active duty, he left the military to join a commercial airline. In addition to flying B-777s around the world, Hardcastle invests in real estate and enjoys spending time in the Rocky Mountains and serving on the artistic staff of the Colorado Children's Chorale. He lives in Centennial, Colorado, with his wife and four children. Mark Hardcastle, President, Symphony Books, LLC <http://www.symphonyofyourlife.com>
mark@symphonyofyourlife.com 720.263.0301 (Cell) 5994 S. Holly St. #112 Greenwood Village, CO 80111 ***The Symphony Of Your Life: Restoring Harmony When Your World Is Out Of Tune.***

EXCITING NEWS FOR ALL DIABETICS In my 67 years living with diabetes I've been told many times that something is coming to cure T1D. It never happened. At one point I was promised there would be a cure within 25 years. There wasn't. What follows are 2 separate articles that are very real. The Stem cell is the most important – but that isn't RIGHT NOW. The other is now and has a completion date – so I am more excited about that one. PLEASE SEND THIS TO EVERY DIABETIC YOU KNOW.
Pat McAlister

David A. Cooper, AAMS®
Financial Advisor

Edward Jones
MAKING SENSE OF INVESTING

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JDRF Speakers Bureau
Specializing in T1D



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Rocky Mountain Chapter
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Denver, CO 80237
www.jdrfrockymountain.org
Phone: 303.770.2873

COMPUTER INSTRUCTOR

Pat McAlister
Phone 303-756-6691
Email
kpmca@comcast.net
For donations to T1D



The Boston University Bionic Pancreas Project The Boy Who Lived

Nearly 14 years ago, when he was just 11 months old, my son, David, developed type 1 diabetes (T1D). Had it not been for the discovery and purification of insulin 80 years earlier, David certainly would not have survived past infancy. Thanks to the magic of insulin, David, like so many others, survived that initial encounter with diabetes. However, ever since that fateful day of diagnosis, he carries with him the burden and the risks of self-managed diabetes care every day and every night of his life. Soon after David was diagnosed, I set my sights on building a bihormonal bionic pancreas and making it available to people with T1D by the time David would head off to college in the fall of 2017.

The Bionic Pancreas

My engineering team at Boston University set out to build the bionic pancreas over ten years ago. In deference to millions of years of evolution, our bionic pancreas mimics biology and uses both insulin and glucagon to automatically regulate glycemia in T1D. The system consists of three components: a continuous glucose sensor, an infusion system to pump insulin and glucagon through the skin, and a mathematical algorithm transcribed in software that makes therapeutic decisions every five minutes to determine each dose of insulin and glucagon.

Over the years it has evolved from a crude and clumsy system of interconnected components of pumps and sensors cobbled together around a laptop computer, then to a system that runs on an iPhone that can be carried in your pocket, and finally to its ultimate embodiment as a dual-chamber infusion pump, a sensor, and a mathematical algorithm all housed within a single compact integrated device.

Our bionic pancreas continuously adapts to your everchanging insulin needs automatically, without the need to know your carb-to-insulin ratios, your basal rates, or your correction factors. Newly diagnosed people with T1D would never need to learn these concepts; and those who have lived with T1D will never have to think about them again. Our bionic pancreas asks only for your weight to get to know you, and then it does the rest. It's truly a turnkey solution for people with T1D.

Past Clinical Trials

We began testing early versions of our bionic pancreas in pre-clinical trials in diabetic pigs at Boston University in 2005. In 2006 we began a collaboration with our clinical team at the Massachusetts General Hospital. In 2008 we began our first of three inpatient trials in adults and adolescents with When tested in real-world outpatient settings, where subjects were free to eat and exercise as much and as often as they wished over five continuous days and nights, the bionic pancreas was able to maintain near-normal blood glucose levels with virtually no hypoglycemia. In 20 adults living in downtown Boston for five days, the mean glucose level was 132 mg/dl (which corresponds to a mean HbA1c of 6.2%) with glucose levels below 60 mg/dl only 1.5% of the time. In 32 adolescents living in a diabetes summer camp for five days, the mean glucose level was 142 mg/dl (which corresponds to a mean HbA1c of 6.6%) with glucose levels below 60 mg/dl only 1.3% of the time. Such safe and effective glycemic control would put an end to all long-term complications of T1D and at the same time eradicate any risk of severe hypoglycemia.

Future Clinical Trials

In 2014 we will conduct two more outpatient trials. One of these will test the bionic pancreas in 24 preadolescents with T1D living in a diabetes summer camp for five days. The other will be our first multi-center trial in which we will test the bionic pancreas in 48 adults with T1D throughout the course of two of their routine work weeks. In the second half of 2015 we are planning to begin our final pivotal trial testing the bionic pancreas in hundreds of people with T1D over the course of several months. This trial will conclude in the second half of 2016.

Building the Bionic Pancreas

Together with our industrial collaborators, we are in the process of building the ultimate embodiment of our bionic pancreas. The dual-chamber infusion pump and the custom dual-cannula infusion set that goes with it, will be completed in the first half of 2015. The bionic pancreas will use insulin lispro and pumpable glucagon. The pharmaceutical company we are collaborating with is already in clinical trials testing their glucagon in people with T1D. The pivotal trial of 2015 and 2016 will provide all of the clinical data necessary to qualify both the bionic pancreas and this pumpable glucagon for FDA review of the drug-device combination product

Continued page 5



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**John donated \$200 to T1DOC.
(\$50 for each job referred to
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The Road Ahead

The bionic pancreas brings us nearer to a practical cure for T1D than anyone thought possible just a few years ago. We are less than 18 months from beginning our final pivotal trial and less than 42 months away from widespread availability in the US. We no longer need to talk in the vagueness of years – now we can talk in terms of months. We have raised all of the funding necessary to conduct the clinical trials of 2014 and are looking to philanthropic foundations and the NIH to provide the funding necessary for the final pivotal trial of 2015 and 2016. However, we are still in need of funding to complete the design, construction, testing, and regulatory work for the bionic pancreas. To avoid delay, this work needs to be completed before the third quarter of 2015. Financing should not be cause for delay.

A Call to Action

We look to the T1D community to provide the remaining financial resources needed to build the bionic pancreas. By supporting the bionic pancreas development effort, the T1D community itself participates in the self-empowering act of bringing about an historic and profoundly positive transformation in all of our lives. We must commit not only to raising the funds necessary to build the device, but to protect it, in perpetuity, from any and all forces that would seek to usurp our rightful access to the best medical technologies the modern world has to offer. We build the bionic pancreas, we own it, we protect it, and in return it will take care of us, our children, and our families for as long as should be necessary, until a more elegant biological solution can be found.

The CWD Foundation is most grateful for the brilliant work of Ed Damiano and his team at Boston University in their mission to create a bionic pancreas. They are in need of funding to complete the design, construction, testing, and regulatory work for the bionic pancreas. **Financing should not be cause for delay.** By supporting the bionic pancreas development effort, the T1D community itself participates in the self-empowering act of bringing about an historic and profoundly positive transformation in all of our lives. <http://www.cwdfoundation.org/BionicPancreas.html>

Any donation made to the CWDF Bionic Pancreas Fund will be given 100% to the Bionic Pancreas project and is tax deductible. Our staff is made up of volunteers and have no overhead charges.

The chart is left out, but you can see the complete article on the website above.

STEM CELL RESEARCH

Douglas Melton, Harvard Stem Cell Institute, stem cell, stem cell and regenerative biology, stem cells, type 1 diabetes
In what may lead to the biggest breakthrough in the treatment of Type 1 diabetes in three decades, Xander University Professor Douglas Melton and colleagues have figured out the complex series of steps necessary to turn stem cells into beta cells. Beta cells are the sugar-sensing, insulin-secreting cells of the pancreas that are missing in Type 1 diabetics, casualties of the body's own immune attack on itself.

Scientists first discovered in the 1920s that insulin is the necessary substance most diabetics lack. For decades thereafter, physicians purified the protein from animals and injected it into patients as a treatment. In 1978, the gene for human insulin was cloned, says Melton, leading in the early 1980s to what is now a major industry: the production of injectable human insulin. "While there have been continual improvements in the types of insulins—long and short-acting—fundamentally since the 1980s, there have been no advances other than providing insulin to inject into patients," Melton explains. "This is a kind of life-support for diabetics. It doesn't cure the disease and leads to devastating and very costly complications...such as heart failure and peripheral neuropathy, and other unpleasant consequences of patients not being able to accurately control their blood sugars or their metabolism."

"We wanted to replace insulin injections" with "nature's own solution," says Melton, who has been a leading scientist in and advocate for the field of stem-cell biology ever since he switched from studying developmental biology in frogs after his young son, and later his daughter, were diagnosed with Type 1 diabetes.

He is now co-director of the Harvard Stem Cell Institute (HSCI) and co-chair of the Harvard department of stem cell and regenerative biology (in the Faculties of Medicine and of Arts and Sciences).

What Melton reports in the journal *Cell* on October 9 is that his lab, including co-first authors Felicia W. Pagliuca, Jeff Millman, and Mads Gurtler (as well as a Harvard undergraduate and others), have succeeded in developing a procedure for making hundreds of millions of pancreatic beta cells in vitro. These cells, Melton explains, "read the amount of sugar in the blood, and then secrete just the right amount of insulin in a way that is so exquisitely accurate that I don't believe it will ever be reproduced by people injecting insulin or by a pump injecting that insulin."

The cells share key traits and markers characteristic of beta cells with those from healthy individuals, including the packaging of the insulin they secrete in granules. In diabetic mice, they cure diabetes right away, in fewer than 10 days, Melton reports.

The challenge of creating such cells was described in this magazine in 2004:

Type 1 diabetes, the problem that concerns Melton, is well-suited to stem-cell therapy. It involves a single cell type, the beta cell, that is either missing or present in numbers too low to regulate blood-sugar levels. "If you could place that cell type back into a person [so] that it was not subjected to autoimmune attack, where it could be healthy and thrive, even outside the context of the pancreas, then you could cure diabetes." One current therapy for Type 1 diabetes — the Edmonton protocol— involves injecting beta cells from three cadavers into a patient's vein; the cells seed the liver and work from within that organ. But nonsteroidal immunosuppressants are required to control both autoimmune attacks and

rejection of the foreign cells by the patient's body. Nevertheless, a first test of beta cells created through directed differentiation of human [embryonic stem] cells might be to use them in the Edmonton protocol. The next step might be to create a device—beta-cell tissue grown on a synthetic three-dimensional biomatrix—and encapsulate it in a Gore-Tex-like membrane that would allow glucose and insulin, but not immune cells, to pass through.

But the how of creating beta cells from embryonic stem (ES) cells—directing the process of differentiation in either embryonic stem cells or induced pluripotent stem cells (derived from adult cells) to make any specific cell type, for that matter—has eluded scientists for more than a decade. Recapitulating the normal development program in a petri dish has proven extremely complicated, because a protein signal that has a certain effect at one stage of the process—guiding an ES cell to become, for example, one of the embryonic “germ layers” such as endoderm (from which the gut, liver, and pancreas develop)—might have an entirely different effect at a later stage, or in a higher concentration, or within a different environmental niche in the body.

The discovery reported today in *Cell* was thus not the result of serendipitous biological code-breaking, says Melton, but rather of “hard work.” “What we did to solve this problem is study all the genes that come on and go off during the normal development of a beta cell in mice and in frogs and in the human material that we could get access to. Once we knew which genes come on and go off, we then had to find a way to manipulate their activity...with inducing agents.” Melton and his team tested hundreds of combinations of small chemicals and growth factors before hitting on a six-step procedure in which two or three factors are added at each step, and in which the factor, its concentration, and the duration of its application all mattered.

The result was a scalable differentiation protocol that will be usable in industrial production of beta cells. “We are very excited about this,” Melton says, because “it provides for Type 1 diabetics, in my view, half of the solution to their problem”: victims lack beta cells, and have an immune system that attacks and kills those cells. “So problem one is replacing [beta cells], and these cells are suitable for that kind of replacement” in combination with some kind of immune protection.

Melton thanked not only the 50 or more students who have worked on this problem in his lab during the past 15 years, but also the philanthropists (including the Juvenile Diabetes Research Foundation, the Helmsley Trust, numerous donors to the Harvard Stem Cell Institute, the National Institutes of Health, the JPB Foundation, and Mike and Amy Barry) who supported it, especially during the period when government restrictions made work with human embryonic stem cells nearly impossible.

How soon could a transplant therapy protocol be ready for type 1 diabetics?

“Patients ask when these cures are coming,” Melton said in a conference call with reporters, “and none of them touch me more than my own children, who ask me that all the time. I would say this. We now know we can make these cells. We have to transfer the protocol to what is called GMP, good manufacturing practice, so that it can be compliant with the very reasonable FDA regulations. So the protocol has to be done with highly purified factors. That is likely to take us about a year. And then...we have to choose the method for Type 1 diabetes that will allow us to put the cells in the patients and protect them from an immune attack.”

While that could be achieved with immunosuppressants, Melton favors an encapsulation device and cited an “encouraging collaboration” with the lab of Daniel Anderson [Goldblith professor of applied biology at MIT's Koch Institute for Integrative Cancer Research], who has developed a chemically modified alginate that coats and protects islets, clusters of beta cells. Melton estimates that an encapsulation device would be about the size of a credit card.

Elaine Fuchs, Lancefield professor at Rockefeller University and a Howard Hughes Medical Institute Investigator who is not involved in the work, hailed the discovery as “one of the most important advances to date in the stem-cell field, and I join the many people throughout the world in applauding my colleague for this remarkable achievement. For decades, researchers have tried to generate human pancreatic beta cells that could be cultured and passaged long term under conditions where they produce insulin. Melton and his colleagues have now overcome this hurdle and opened the door for drug discovery and transplantation therapy in diabetes.”

Jose Oberholtzer, associate professor of surgery, endocrinology and diabetes, and of bioengineering at the University of Illinois at Chicago, director of its islet and pancreas transplant program and chief of its division of transplantation, said the work described in today's *Cell* “will leave a dent in the history of diabetes. Doug Melton has put in a lifetime of hard work in finding a way of generating human islet cells in vitro. He made it. This is a phenomenal accomplishment.”

Stem-Cell Breakthrough in Treatment of Diabetes

Harvard Public Health's \$350-Million Infusion <http://harvardmagazine.com/2014/10/melton-creates-beta-cells>

OPTIMIST OUTLOOK

T1DOC Welcomes two new members to our club:

David Goldman
Gina Abou-Jaoude

Dalyla Creaghe and Paul Santa Maria were inducted into the club.

OPTIMIST OF THE YEAR

Gary Bowman was presented the Optimist of the Year plaque. A first for our club!

BANDIMERE

David announced that we had received a check for \$1,000 from Bandimere for driving carts this summer

SOCIAL

December 14th, we have a fun social time planned. More info to follow.

A PROJECT

On November 15th (Saturday), we will be putting together the little wooden cars from www.toysforgodskids.com. Anyone and everyone is welcome! We'll be putting these cars in the Barbara Davis Center bags and more! We'll be at Council District 4 office, 3540 S. Poplar, Denver. Come for the fun, fellowship, pizza and more! Starting at 4 p.m.

OPTIMIST HELPING OTHER OPTIMIST

Our club financially supported the Academy Optimist Club Walk Team at the JDRF Walk in Colorado Springs

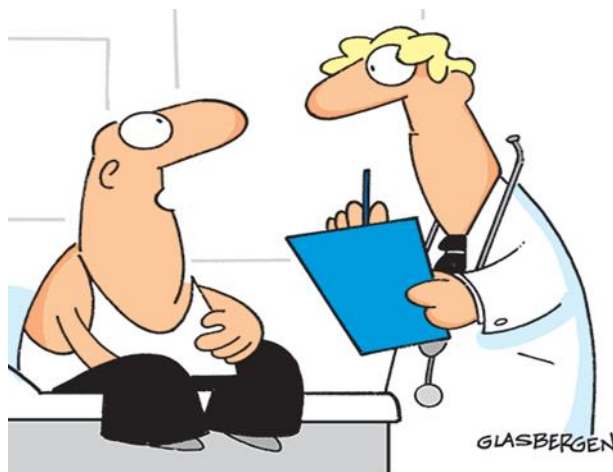
COLORADO/WYOMING OPTIMIST WARRIORS FIRST

QUARTER GAME (CONFERENCE)

OCTOBER 25, 2014

7:30 a.m. to 4:00 p.m.

Littleton United Methodist Church, 5894 So. Datura St. It's \$35 to register early and the Club will pick up the tab. Diane will send out the official email/forms.



"I try to eat healthy. I never sprinkle salt on ice cream, I only eat decaffeinated pizza and my beer is 100% fat free."

"Life is not over because you have diabetes. Make the most of what you have, be grateful." — Dale Rogers

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DIABETES?**



**Then please read on about the new
“Type 1 Diabetes Optimist Club” (T1DOC).**

Mission of the T1DOC?

The T1DOC is a newly formed Optimist Club organized to provide support to JDRF, and the entire T1 community to improve the lives of those with T1D.

Purpose of an Optimist Club?

Optimist Clubs are dedicated to "Bringing Out the Best in Kids" and do their part through community service programs. Since each Club is autonomous and run by their members, Optimists have the unique flexibility to serve the youth and community of their area in any way they see fit.

What Does the T1DOC Do To Help Those with T1D?

- Assist in providing educational outreach and awareness to school communities.
- Help raise research funds seeking a T1 cure and improved treatment options.
- Raise scholarship funds to allow T1D kids to attend special diabetes camps.
- Establish a speaker's bureau to educate about T1D and JDRF.
- Provide a cadre of motivated volunteers to assist JDRF and other T1 organizations.
- Whatever our creativity develops to provide help to the T1D community.

How Does the T1DOC Operate and What are the Costs?

- Meetings are held at 6:30 P.M. on the 1st and 3rd Wednesday of each month at a central Metro location normally with a speaker program.
- Projects are scheduled between meetings to accomplish program goals.
- There is a nominal one-time \$35 fee when joining the T1DOC.
- Club dues are currently \$10 or less per month to fund operating costs.
- Anyone with an interest in helping the T1 community is welcome.

How Do I Get More Information About the T1DOC?

To get more information about the T1DOC and its goals please contact any of the following-

- Jeff Gartz, jeffgartz@gmail.com 303-987-8224
- David Cooper, david.cooper@edwardjones.com 720-621-2739
- Dick Cohen, rmcohen234@gmail.com 303-320-1767
- Ron Gustas, rgustas@earthlink.net 303-770-9640

**Thanks for your interest in helping improve the
lives of those with T1D.**

