Report: *Life for a Child (LFAC)*/ISPAD Workshop

National Institute of Medical Research (NIMRI) DSM
Dar es Salaam, Tanzania, April 26-28 2017

Local Organisers:
Dorothy McClarty, Tanzanian Diabetes Association (TDA)
Dr Kaushik Ramaiya, Tanzanian Diabetes Association

Faculty members:
Ms Angie Middlehurst (AM), Deputy Manager & Director of Education, IDF *Life for a Child* Programme
Dr Kenneth Robertson (KR) Paediatrician, Children’s Diabetes Service, Glasgow, Scotland
Ms Fiona Lamb (FL), Diabetes Nurse, Children’s Diabetes Service, Glasgow, Scotland
Dr Mariam Kolome, (MK), Paediatrician, NCD Diabetes Coordinator.
Dr Kande Muzee, Paediatrician/ Endocrinologist Muhimbili National Hospital, Dar es Salaam
Dr Edna Majaliwa, Paediatrician/ Endocrinologist Muhimbili National Hospital
Dr Faraja Chiwanga, Paediatrician. Muhimbili National Hospital
Sr Elizabeth Likoko, (EL), Education/ Nutrition, Tanzanian Diabetes Association
Ms Herieth Mganga (HM), Manager LFAC & Changing Diabetes in Children (CDiC) Programme

Participants:
- 25 doctors from Dar es Salaam and regional hospitals in Tanzania. Some were adult physicians, others Paediatricians.
- 6 Young Leaders from the newly formed Tanzanian Diabetes Youth Alliance (TDYA).
Dr Kaushik Ramaiya welcomed the faculty and opened the workshop by asking participants to provide their names and place of work.

All participants completed the mandatory pre-knowledge test before commencement of the 3 day programme – see attached.

The programme was designed to provide further knowledge and expertise on the management of diabetes in children and young people to the attendees.

All participants were very engaged, particularly during the practical session of injection technique and blood glucose testing.

The programme was altered daily, as we ascertained the local knowledge base which was quite varied.

Unfortunately there was insufficient time to include school issues and transition was briefly mentioned in the Puberty and Adolescence session.

Participants asked for more information on Carbohydrate Counting, so this was covered by KR on the final morning.

AM spoke about the LFAC Programme and it became obvious that some attendees were not well aware of the details of the programme, so the session was useful. It also provided an opportunity to stress the importance of annual data collection and reports.

Dr Kenneth Robertson, Ms Fiona Lamb, Angie Middlehurst with Young Leaders with Type 1 Diabetes, from the Tanzanian Diabetes Youth Alliance
Camps and LFAC Resources:

The TDYA were an impressive group, very engaged and keen to be involved. They joined in the Camp session with comments about the benefits they had gained from attending camp.

Each participant received a copy of the second edition of the ISPAD/LFAC Pocketbook Guidelines, in addition to the recently developed flow charts.

The “Professor Bumblebee’s Guide to Type 1 Diabetes DVD was shown and copies left to use at TDA. Dorothy is keen to have this translated into Swahili.

AM distributed copies of the Swahili version of “Moseka and her Friends” and highlighted the Swahili page on the LFAC Education website.

Participants completed their post-test which demonstrated an increase in knowledge of type 1 diabetes.

Since the workshop, the TDYA have been very active and enthusiastic on social media regarding carbohydrate counting, uploading food pictures and generating discussion.

Post workshop comments from participants via DM:

• Most Drs were stimulated, intensive practical training
• Drs would like to have access to recent publications and learn new things about T1dm research.

Local recommendations:

• Keep in regular contact with clinics
• Help them to conduct their own small research such as what is the eating habits of children at the clinic, support from family, facing stigma @ school, conducting meetings with head teachers of schools attended.
• Encourage the Drs to write this up and TDYA to organise regional meetings where data is presented.
• Encourage Drs to communicate with each other across country and share findings, experiences and difficulties etc.

Faculty recommendations:

• KR, FL and AM to mentor local H/P as required.
• Encourage the doctors to introduce a regimen of 3-4 injections per day, rather than bd mixed insulin, where this is practical.
• Encourage regular blood glucose monitoring as many times as strip availability allows. Generally, there seem to be enough strips to allow 4 tests per day.
• Immediate introduction of correction dosing – explained in detail on last day.
• Encourage commencement of CHO counting – Beatrice is adding to her already comprehensive list of local foods – she will send this to KR and he will discuss with his dietitian and add CHO content as this is currently lacking.
• Identified that it is vitally important to follow up the participants of the workshop in 6 months’ time and possibly repeat the post-test. Dorothy is keen to do this to ensure that care is improved and chase up data.
• Part of this should be indication of implementation of correction doses and/or CHO counting.
• Following AM’s LFAC session, Dr Robertson discussed the importance of “return on investment” on support received from LFAC. The TDA and Dr Ramaiya have an excellent rapport with the government and The NCD Coordinator, (MK), was keen to proceed further.
• Encourage the TDYA – they are a very sensible group of young people with type 1 diabetes, are keen to help and are great role models for other young people. TDA value their input, however, the local doctors may need persuading, and also accepting the multi-disciplinary team approach.
• AM to add DM to receipt of the bi-monthly LFAC Education Bulletin. She will send AM a list of the doctor’s emails so that they receive them too.

Faculty members and Participants of the workshop