

# R o a d T o A C u r e



2008 ANNUAL REPORT

DIABETES  
RESEARCH  WELLNESS  
FOUNDATION®



**An Organization for People Who Live with Diabetes Every Day.**  
The mission of Diabetes Research & Wellness Foundation<sup>®</sup> (DRWF) is to help find the cure for diabetes, and until that goal is achieved, to provide the care and self-management skills needed to combat the life-threatening complications of this terrible disease.

### To accomplish this mission...

- DRWF provides funds to researchers whose work offers the best hope and most expedient path to a cure for diabetes.
- DRWF provides funds to researchers whose work has already provided substantial insight into the causes, early detection, or treatment of diabetes and its complications.
- DRWF encourages and facilitates the development of fledgling researchers in the field of diabetes research.
- DRWF promotes public education about the causes, prevention, and treatment of diabetes and its complications.
- DRWF provides services and products to people with diabetes.
- DRWF supports the education and training of health care professionals in order to improve the quality of the diabetes care they deliver.
- DRWF provides hope to millions of diabetes sufferers.

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## A Message from John Alahouzos, Chairman

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Dear Friends,

Throughout 2008 the Diabetes Research & Wellness Foundation™ (DRWF) has held true to its mission of helping to fund the cure for diabetes and until that goal is achieved, to provide the care and self-management skills needed to combat life-threatening complications of this terrible disease.

2008 has truly been a year of milestones in carrying out this mission, and it gives me great pride to submit to you and all of our friends who have so generously supported our work, this Annual Report for 2008.

First and foremost, during 2008, the Islet Resource work being conducted by Dr. Bernhard Hering and his Spring Point Project team continued on schedule. They are now one year closer to our goal of doing the first transplants into humans in September 2009! The goal of providing the world with a safe and abundant source of islet cells for transplanting into patients to make them free from the need for insulin shots is closer than ever thanks to your support.

Dr. Gordon Weir, the Diabetes Research & Wellness Foundation Chair – Harvard Medical School, and head of Islet Transplantation at Joslin Diabetes Center, continued work in 2008 to perfect islet encapsulation as well as work on islet regeneration. Dr. Weir's team feels that their work has made it clear that new islet cells can be generated in the pancreas during adult life, so they are working on ways to promote the replication and expansion of existing islet cells in those with diabetes.

All of this promising work will – we hope and pray – lead to the cure for diabetes, but in keeping with our mission to provide care to combat the terrible complications of diabetes we continued funding the Wilmer Eye Institute's Free Diabetic Retinopathy Screening Clinic in Baltimore, Maryland. With diabetes being the leading cause of new blindness in adults 20-74 years of age, DRWF and the Wilmer Eye Institute are doing their part to prevent further blindness in the U.S. In 2008, a record number of new and returning patients were seen and treated.

As you read this 2008 Annual Report you will learn more about these important projects and about all of our other self-management educational and assistance programs. You should be proud of all this work, because without you we could not have accomplished so much. I thank each and every one of you for your generosity and applaud the tremendous efforts of DRWF's Volunteer President, W. Michael Gretschel; the Board of Directors, the Medical Advisory Board, and Executive Director Andrea Stancik and her dedicated staff.

With your continued faith and support DRWF will continue to carry out its mission to fund the research that will bring us THE CURE for diabetes, and help those with diabetes stay healthy until THE CURE is found.

Sincerely,

A handwritten signature in black ink that reads "John Alahouzos, Jr." The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

John Alahouzos, Jr.  
Chairman, DRWF Board of Directors



## A Message from Michael Gretschel Volunteer President

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Dear Friends of Diabetes Research,

2008 will be a year we won't forget for quite some time!

A new president; a new paradigm of Federal government involvement in our economy. A new world of bank failures. A new world without an automobile industry.

A new world where a minimally invasive islet cell transplant changes the liver of a patient. I urge you to go to our website and see for yourself the three interviews that tell the stories of lives lost by diabetes and regained by transplants.

It is incredible to hear; I'm so charged by these three transplant recipients I want you to read about that I can hardly take the time to write this note.

We are so close to the day when any and all patients can take advantage of this wonderful procedure.

Your generous gifts to our Foundation have fueled this progress. I thank you for all your sacrifices and I thank you for standing by us in the days when we were nothing more than a hope and a dream.

Today, we are the new diabetes reality.

Human trials will start in 2009 for patients accepting biosecure pig islets from our islet resource facility in New Richmond, Wisconsin.

We have literally spent every cent we've raised on this and other key programs. We have only weeks of operating monies in the bank at any one time.

We don't invest in the stock market and we have no interest in maintaining endowments for the future. I know most nonprofits seek to save and invest for their future staff salaries and buildings to aggrandize their future.

To us, the FUTURE IS NOW!

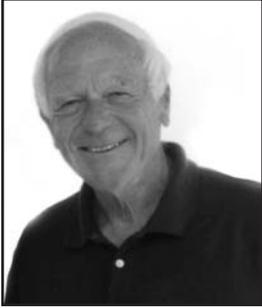
The cure is needed NOW!

Thank you for being with me and our modest staff and organization on the road to a cure.

Walter M. Gretschel

A handwritten signature in black ink that reads "W. Gretschel". The signature is fluid and cursive, with a long, sweeping tail on the final letter.

Volunteer President



## A Message from Walter M. Bortz II, MD Chairman, DRWF Medical Advisory Board

### Economic Crisis and Diabetes

Philosopher William James is my personal, private philosopher. His overriding theme was pragmatism: "The truth is that which works." His concept informs and steadies my life. His most famous essay was The Moral Equivalent of War, which says that mankind thrives when there is conflict, disorder, and war.

In this way, our present fiscal crisis – as perceived by many others – presents the real opportunity to change what has been previously, steadily unacceptable for a long while. The colonists put up with King George for only so long.

What has this crisis to say about diabetes? God knows we need major change there. The economic stimulus package gives early evidence of producing substantially greater funds for medical research and the electronic medical records. A few days ago I heard of a program for diabetes Type 1 children in San Mateo, California where the kids were given their own cell phones; into which they are obligated to insert their test results in an effort to enter into a management scheme. Bravo.

To me, the hope of this electronic medical record is less as a helpmate to the physicians for more efficient clinical record-keeping than a technique to encourage people to take better care of themselves. Someone observed that health literacy is more important to your welfare than disease state. This means that if people had more knowledge of their own health, such as the Greek Delphi Oracle said – "This above all, know thyself," we would be at an advantage.

The larger issue, however, is the increased funding for medical research. Everyone knows that our country is expert at mispending generous research money. So it is critical that this new research targets its investments wisely. What this means for diabetes is particularly acute because the dollars are immense. In my judgment, many critical decisions depend on what the support will support. Medicine has two principal strategies: repair and prevention. This is a critical differential issue. Because the two diabetes – 1 and 2 – are categorically different, approaching each of the two requires either repair or prevention – repair for Type 1, prevention for Type 2. Using the same broad brush for both types of diabetes is not appropriate.

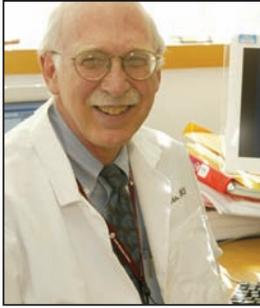
Medical science is very experienced at high-tech approaches that are required for Type 1. The stem cell issue has been getting a lot of press on that front. I am still hesitant to embrace it with enthusiasm. It certainly needs a full-court press. Other high-tech techniques such as islet cell or pancreas transplants are similarly cutting edge, the value and appropriateness of which are still to be demonstrated. But Type 2 is much more complex with multiple – mostly behavioral – components. The obvious truth is that the Type 2 challenge is much more difficult than Type 1.

The mission of DRWF is to keep abreast – not only of our own context of what is going on, but in the rest of the world as well.

Please help us lead the way, again.

Know yourself.

Walter M. Bortz II, MD  
Chairman, Medical Advisory Board



## Gordon C. Weir, MD

Diabetes Research & Wellness Foundation Chair; Professor of Medicine at Harvard Medical School;  
Head Section of Islet Transplantation and Cell Biology, Joslin Diabetes Center



**Joslin  
Diabetes  
Center**

### Clinical Trials and work to improve outcomes:

Although providing people with type 1 diabetes with islet transplants and getting them off insulin represents a major advance, we now find that most patients return to insulin in less than two years. In addition, the side effects of the immunosuppressive medications continue to be troublesome. At Joslin we are finishing up years of work done to evaluate the potential of human islet preparations in collaboration with co-workers at the Massachusetts Institute of Technology (MIT) and the University of Minnesota. We have worked out ways to accurately assess the cellular composition of islet preparations that can be done rapidly prior to the performance of the transplants. Another important advance has been in finding a way to accurately determine the number of insulin-producing cells in an islet preparation.

### Alternative Sources of Insulin-Producing Cells:

The quest to find a new source of insulin-producing cells continues to be a top priority of the diabetes community and the highest priority at Joslin. There are not nearly enough cadaver donors to meet the demand of all those who could benefit from islet transplantation. The team of Drs. Weir, Bonner-Weir, and Sharma continue to pursue this goal on several fronts, often in collaboration with scientists in different parts of the world. The Joslin efforts include:

#### Human pancreatic precursor cells to make new islets.

Dr. Susan Bonner-Weir, who has been able to make new islets from precursor cells of human pancreases in laboratory tissue culture dishes, has led this pioneering work. One of the most important questions has been the identity of the precursor cells. We have had several lines of evidence indicating that pancreatic duct cells are the source, and now Dr. Bonner-Weir has used the powerful molecular technique of lineage tracing to provide further proof for this hypothesis. This culminated in a high profile paper published in the Proceedings of the National Academy of Science.

Another project has advanced our understanding of the potential to convert liver cells to beta cells through the process of transdifferentiation. The first phase of this work was published. The laboratory of Dr. Doug Melton has had impressive success in generating new beta cells from pancreatic acinar cells, which normally make digestive juices, by simply injecting three transcription factors into the pancreas. This approach is similar to what we have been using for liver, so we are now working to apply this to both pancreas and liver.

#### Stimulating replication of existing beta cells.

The project is a collaboration between the laboratories of Dr. Melton, Weir and Lee Rubin of Harvard to determine the potential of beta cell replication continues. The goal is to identify molecules that can stimulate beta cell replication and therefore expand beta cell number for the purposes of transplantation.

#### Protection of Islets from Immune Destruction:

Work with immunobarrier protection of islets continues. The technology has employed alginate, which is a gel obtained from seaweed. Islets are contained within small gel beads and are protected from immune destruction.

#### Clinical project to slow the progression of newly diagnosed type 1 diabetes

Dr. Weir tested the efficacy of alpha-1-anti-trypsin (AAT) to slow the process of autoimmunity in patients. He is now leading what will become a multicenter NIH trial through the Immune Tolerance Network (ITN) to test AAT in subjects with newly diagnosed type 1 diabetes. AAT is a natural product, which has been used safely for years to treat people with AAT deficiency, who are prone to pulmonary disease. Work carried out in a mouse model of type 1 diabetes (NOD) by our colleagues Drs. Terry Strom, Maria Koulmanda and Susan Bonner-Weir, showed the remarkable finding that established diabetes could be reversed. The protocol is being developed and will soon be presented to the FDA. It is hoped that the first work in human subjects will commence in early 2010.



THE WILMER OPHTHALMOLOGICAL INSTITUTE  
THE JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE  
THE JOHNS HOPKINS HOSPITAL

In the United States, diabetes is responsible for eight percent of legal blindness, making it a leading cause of new cases of blindness in adults 20-74 years of age. Each year, from 12,000 to 24,000 people lose their sight because of diabetes. People with diabetes are twice as likely to be diagnosed with glaucoma or cataracts as those without diabetes, and contribute to the high rate of blindness.



The key to preventing diabetes-related eye problems is good control of blood glucose levels, a healthy diet, and good eye care. The Wilmer Eye Institute is doing its part to help prevent further blindness in the U.S. The number of people being seen at The Wilmer Eye Institute's Free Diabetic Retinopathy Screening Clinic in Baltimore, Maryland continues to increase with each year. In 2008, 245 new patients received treatment at the clinic, and 22 were diagnosed with retinopathy. There were 289 patients seen in return visits and 121 of those patients were diagnosed with retinopathy. On average, the clinic sees three to four patients a day for the care and treatment of diabetic retinopathy. In 2008, ten retinopathy patients needed and received laser treatment.

The clinic, run by Daniel Finkelstein, MD, is a godsend for those needing care ... but unable to afford it. Testing and treatment are available at the clinic for anyone seeking care. Patients with diabetes should have an annual eye exam by a medical specialist who has laser treatment available. This is very difficult for people who have no insurance. To our knowledge, The Wilmer Eye Institute is the only free screening service for diabetic retinopathy in this part of the country, perhaps in the entire United States. Without support from the Diabetes Research & Wellness Foundation, we would not be able to provide this lifesaving service.

### How can we prevent retinopathy and other eye diseases?

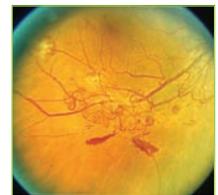
Diabetic retinopathy is the most common cause of blindness or visual impairment in someone with diabetes. The disease presents no symptoms in the early stages but, left undiagnosed and untreated, puts a person at a high risk for blindness. A person with diabetes can have retinopathy and not know it. Having a regular eye exam could help detect retinopathy early and possibly prevent that person from becoming blind; but the sad fact is that people do not routinely get their eyes examined, and this is why the public needs to be made aware of the danger and problems that could be in store. People with diabetes can reduce their risk for complications if they: 1) are educated about their disease, 2) learn and practice the skills necessary to better control their blood glucose levels, and 3) receive regular dilated eye exams from their health care team.

The goal of Dr. Finkelstein and the Diabetes Research & Wellness Foundation is to prevent blindness. Dr. Finkelstein and all of the trained professionals at the free eye clinic welcomed many new and return patients throughout 2008 and continue to provide their patients with expert eye exams, specific education regarding the condition and care of their eyes, and the necessary treatment – at the highest level – on all visits. It is so very important to have programs like this to educate, prevent blindness, and to provide health assistance to those in need.

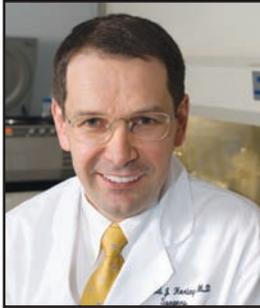
Diabetes Research & Wellness Foundation provides funding to the Wilmer Eye Institute's Free Screening Clinic because we want to do everything in our power to see that the tragedy of unnecessary blindness does not continue. Vision is too often taken for granted, but just for a moment imagine life without it. DRWF is happy to be a part of this process to help make it possible for those who would otherwise have to risk their precious eyesight, get the help they need. Thank you for contributing to DRWF to help bring us closer to our goal.



Background retinopathy - microaneurysms and hemorrhages



Proliferative retinopathy - new vessels develop on the retina and start to bleed



## Bernhard Hering, MD

Professor of Surgery; Eunice L. Dwan Diabetes Research Chair; Director, Islet Transplantation; Scientific Director, Diabetes Institute for Immunology and Transplantation; Co-founder of Spring Point

"We have the capacity to cure this devastating disease and help people enjoy a happy and productive life no longer constrained by diabetes and constant fears and worries," says Bernhard Hering, M.D., an internationally recognized diabetes researcher and scientific director of the Schulze Diabetes Institute. "Curing Type 1 diabetes is possible. We only need to declare it possible, engage the brightest minds, be contagiously committed, and break all barriers. This gift is breaking big barriers by boosting resources, raising awareness, and injecting a sense of urgency and responsibility."



## Imagine the Cure for Diabetes

Current diabetes treatments attempt to regulate blood glucose levels via insulin administration. Transplantation of insulin-producing islet cells from the pancreas offer a biological means to normalize blood glucose levels without constant monitoring – a cure.

Islet cell replacement in patients with diabetes promises to cure diabetes in its entirety, eliminating complications and improving quality of life. Clinical islet cell transplantation (using islets from the pancreas of human cadaveric donors) has improved substantially after an acceptable immunosuppression regime, the so-called "Edmonton Protocol," was implemented in 2000. Today, successful islet cell transplants are performed at more than 35 institutions worldwide. The Schulze Diabetes Institute at the University of Minnesota was the first to achieve consistent diabetes reversal using transplantation of islets from a single donor (so-called marginal-dose islet transplantation). The first patient who received her single-donor transplant at the Schulze Diabetes Institute celebrated her seventh year of insulin independence in October 2008. "Replacing pancreatic islets is the only way to restore normal blood glucose levels and insulin independence," says David Sutherland, MD, PhD, Head of the University of Minnesota's Division of Transplantation and Director of the Schulze Diabetes Institute, and widely regarded as the world's pioneer of pancreas and islet transplantation. Final clinical trials in human islet transplantation are ongoing with much success, and the procedure is on its way to becoming approved as a practice of medicine by the FDA.

But the widespread applicability of these islet-replacement therapies suffers from the limited supply of donor tissue. To solve this, researchers considered using islets from another animal – pigs.

Research conducted by Dr. Bernhard Hering, Scientific Director and Director of Islet Transplantation at the Schulze Diabetes Institute, and his colleagues resulted in a landmark achievement on the path to a cure: pig islet transplantation reversed diabetes for more than six months in diabetic monkeys, who were no longer dependent on insulin after transplantation. These unprecedented results in an animal model most close to the human situation is regarded proof-of-concept, enabling us to proceed and prepare for clinical studies.

## What is being done now?

To move this research breakthrough towards a clinical applicability, work has continued to refine a safe immunosuppression regime. Dr. Hering, and his group at the Schulze Diabetes Institute have launched a fast-track project to refine and reduce the immunotherapy needed to prevent rejection of transplanted pig islets. Second, attention is given to the supply of pigs to serve as pancreas donors from which islets are to be isolated. Pigs need to be of high health "medical-grade" status so as to avoid potential disease transmission upon transplantation in patients. This requires special biosecure (barrier) facilities in which air is filtered, water is disinfected, food is irradiated, etc. and staff enters and exits via shower in/shower out and bears special clothing. Spring Point Project has been established as a nonprofit organization to build and operate such biosecure facilities to raise these high-health pigs. Spring Point Project has the mission "to provide an unlimited source of pig islet cells to accelerate the availability and affordability of islet transplantation to cure diabetes," and has the task to supply suitable pigs, from which islet tissue is isolated, at the time clinical trials are to commence.

To make this possible business executives and leading scientists have joined forces, capitalizing on their complementary expertise to make the cure a reality. In partnership between the Schulze Diabetes Institute and Spring Point Project, the two initiatives: perfecting the scientific breakthrough and producing high health pigs, proceed on a parallel track. The goal is to have suitable donor pigs available by the time the scientists have refined the immunosuppression to a point that makes it safe for use in patients. "With Dr. Hering's breakthrough science and Spring Point's relentless pursuit of the supply source, we are moving from hope to a cure. We have slightly more than one year to go before Phase I clinical trials can begin. I don't make this claim lightly. We are also most grateful to the Diabetes Research & Wellness Foundation® for their generous donation to the construction and operations of this state-of-the-art animal facility." said Thomas Cartier, founder and Chairmen of Spring Point Project.

## Spring Point Project in 2008: Major Accomplishments

The first animals in the second generation were born by the end of April 2008! This was an important date in our history, as regulatory authorities prescribe that animals used as donor should be in the second or higher generation. In early 2009, we plan to be in full operation with our internal breeding; the facility is fully populated and we are ready to supply our colleagues at the Schulze Diabetes Institute.

At the end of 2008 we had a meeting with the Food and Drug Administration and gave an update on our "medical-grade" pigs. We received a favorable response, in particular regarding the so-called "designated pathogen-free" status of our animals. The review panel of the Food and Drug Administration answered positive on our question whether we can use the animals as donors in clinical islet transplantation; evidently the team was very pleased with this response!

It may seem as though insuring that the pigs are "pathogen-free" is a simple process because we speak about it in such simple terms—actually it is not. Our staff is constantly on alert, taking every precaution to block any disease-inducing pathogen from entering the protective barrier. All operations are in compliance with the Good Manufacturing Practice. Spring Point Project has an excellent staff, and extensive testing of animals has shown that all animals fulfill these conditions. The animals are kept under humane conditions in full compliance with guidelines of regulatory authorities. We implement an environmental enrichment program as well to foster the general well-being of the animals.



Second generation pigs in nursery, 4 weeks of age



Announcement of the major pledge by the Richard Schulze Family Foundation Dick Schulze addressing the audience at the ceremony. In the background Dr. Bernhard Hering from the Schulze Diabetes Institute and Dr. Mary Firpo from the Stem Cell Institute

There is also important news from our partner, the Schulze Diabetes Institute. In December 2008, the Richard M. Schulze Family Foundation announced a major \$40 million pledge to support diabetes research, and at this occasion the institute changed its name to the Schulze Diabetes Institute. This pledge is the second largest in the history of the University, and the second largest in the history of diabetes research in the United States. One of the programs that will be supported by this major pledge is pig islet transplantation. The Spring Point Project is heavily committed to advancing this critical research forward to clinical application status to benefit diabetes patients as early as possible.



# Community Outreach

## Making a difference one day at a time

Diabetes Research & Wellness Foundation's outreach efforts continue to grow. In 2008 we experienced a growth in health fairs, presentations and outreach activities. Our staff attended over 80 health fairs, and our diabetes educator gave over forty presentations. We also partnered with various organizations and groups to support ongoing diabetes initiatives. We offer tips on diabetes prevention and make presentations on diabetes self-management as well as distribute free diabetes educational materials to local businesses, government offices, senior centers, schools, universities, churches, and health professionals throughout Maryland, Virginia and the District of Columbia. DRWF is regularly invited to and attends Combined Federal Campaign and United Way health fairs, luncheons and speakers bureau's programs to promote DRWF as well as diabetes awareness throughout the year.

### Unity Care Clinic at the Center for Creative Nonviolence Homeless Shelter – Ten Years of Committed Service

Over the past year our diabetes nurse educator, Kathy Gold, has counseled over 300 men and women who receive services at Unity Healthcare Clinic. We have provided counseling at Unity for over ten years. The patients' progress is tracked to them, using the latest technology available, along with an explanation of the role that insulin and other drugs play in their care. Using these tools has helped both the patients and the health care professionals in assessing their diabetes self-management skills and improving their care.

### Jean Schmidt Free Clinic

DRWF has increased its outreach efforts at the Jean Schmidt Free Clinic in Herndon, Virginia. This newly established clinic serves an ethnically diverse population that does not qualify for health insurance in Virginia. DRWF helps to provide group classes in English and Spanish twice a month.

### Sarah's Circle

DRWF provides a monthly health and wellness educational program to this senior center in Washington, DC. More than 25 people benefit from this program each month.

### WE CAN Program

DRWF partnered with a Georgetown University Family Practice Resident, the YMCA, and Unity Healthcare Upper Cardoza Clinic to educate parents of overweight children is served – by the clinic – on the importance of healthy eating and physical activity. The educational program is based on the WE CAN curriculum. DRWF provided healthy meals to the attendees. This program was a great success and the parents became actively engaged in changing the eating habits of their children. The children also learned about the importance of physical activity and families began to plan physical activity into their day.

# Memberships

## Combined Federal Campaign/United Way/America's Charities

DRWF is proud to be a charity within the Combined Federal Campaign, United Way and America's Charities each year. We are honored to receive employee donations via payroll deduction from government employees and private sector employees. Your kind and generous donations to DRWF provide funding for various diabetes research projects for the cure. We appreciate your ongoing support. Please remember us in the upcoming campaigns. Our designation is #11629 for CFC and #8588 for United Way.



### Virginia Diabetes Council (VDC)

The Virginia Diabetes Council is a nonprofit foundation made up of over 130 diabetes stakeholders; including the Department of Health, insurance companies, pharmaceutical companies, diabetes educators, and various other health professionals. Kathy Gold, our certified diabetes educator, served as Chairperson of this council to help develop and disseminate the Virginia Diabetes Plan 2008-2017. This Plan has eight initiatives – Prevention, Education and Empowerment, Access to Care, Quality of Care, Research, and Advocacy to name a few. This forward-thinking plan will impact the citizens of Virginia and improve the health and wellness throughout the state. This plan is a model for other states to demonstrate to individuals steps that can be taken to improve the care of their diabetes by coordinating successful programs in their area.

DRWF partnered with the VDC and the Capitol Association of Diabetes Educators to provide a continuing education program – Gestational Diabetes and Beyond in Northern Virginia for over 100 health care professionals. The program helped to raise the awareness of the need for preventive education for women with gestational diabetes and the importance of lifestyle changes such as losing weight and staying physically active to reduce their risk of developing Type 2 diabetes.

### American Association of Diabetes Educators (AADE)

On a national level, DRWF's diabetes nurse educator is the incoming Chair of the Advocacy Committee. She will with other diabetes educators to lobby congress for legislation that would reimburse certified diabetes educators for diabetes education.

Each year DRWF attends the Annual AADE Conference for training and new techniques on how better to care for diabetes patients. The foundation also exhibits at the EXPO where we meet more than 3,000 educators from all over the United States. This year the conference was held in our own backyard of Washington, DC. Kathy, our nurse educator, Kathy had the opportunity to serve as the Host Committee Chair. At the EXPO we distributed diabetes brochures, our monthly newsletter, ID kit materials, pocket diaries, calendars and other essential tools to educators at the EXPO.

We thank the diabetes educators for the service that they provide to the millions of people who have diabetes. We appreciate their dedication to those with diabetes.



Our certified diabetes educator, Kathy Gold (right) is recognized by Amparo Gonzalez, President of AADE as Host Committee Chair for American Association of Diabetes Educators Annual Meeting in Washington, DC.

# Diabetes Wellness Network

## A Penny for your thoughts?

For less than a penny a day, we share with our readers the thoughts, insight and knowledge of our writers, researchers, medical practitioners, certified diabetes educators, and other readers. Our monthly newsletter provides current information on the latest research in the fight against diabetes, new treatments and care that will be made available in the future, new medications, and other useful tips.

Diabetes Wellness Network® provides a one and only full-time, interactive personal health network for people like you with diabetes, run by our team of seasoned experts.

Our newsletter speaks directly to the diabetes patient. We provide information for the newly diagnosed diabetic, as well as the veteran sufferer.



With each month’s mail, the Diabetes Wellness Network® will bring you leadership, encouragement, and the latest scientific and practical information on important topics like: the latest research news, new diabetes medications, new products, exercise and healthy recipes, travel tips, and personal stories from people just like you.

You are encouraged to call to ask questions to our toll-free helpline

for any non-urgent medical questions and give your feedback.

The membership also includes a pocket-sized quarterly diary to use to record – on a daily basis – blood glucose readings, medications, weight, physical activity and appointments. This diary works as a companion tool for patients to carry along with them to their regular doctor’s appointments.

Call today for your free sample issue of the Diabetes Wellness News. Please contact our subscription line at 1-866-293-3155.

## Diabetes Helpline



Our toll-free Diabetes Helpline has serviced more than 500 individuals regarding diabetes self-management. Callers have the opportunity to speak to a registered nurse, who is a Certified Diabetes Educator, to help them gain further understanding of their diabetes. Our helpline has been a unique benefit for all our members

since 1993.

We invite you to take advantage of the Diabetes Helpline at 1-800-941-4635 for any non-urgent medical questions that you have concerning your diabetes.

## Diabetes Education

Get informed about YOUR diabetes with DRWF’S professionally authored series of educational brochures – The Diabetes Wellness Series – that can be downloaded at [www.diabeteswellness.net](http://www.diabeteswellness.net) or are available by request via our online order form. Please allow 4-6 weeks to receive your brochures. A shipping fee applies.

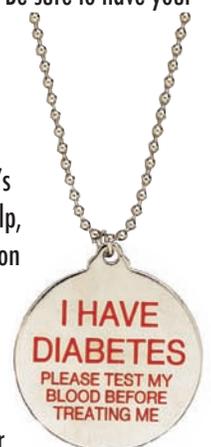
## The series is currently comprised of:

- What is Diabetes?
- What is Pre-Diabetes?
- Diabetic Retinopathy
- Periodontal Disease and Diabetes
- Illness and Diabetes
- Your Feet and Diabetes; Injecting Insulin



## Diabetes Identification

Are you prepared in case of an emergency situation? Be sure to have your diabetes identification with you at all times. DRWF is proud to offer this diabetes identification to all those in need. We have distributed more than 800,000 necklaces. Diabetes is a condition that has the potential to change from day to day, year to year. It’s unpredictable. The day may come when you need help, and are unable to speak for yourself. The identification necklace could be a lifesaving device at a critical moment when you cannot help yourself. By offering this service, we are doing all we can to see that each and every person with diabetes has some form of diabetes identification. Visit our website to order your necklace today. It can save your life.



## DRWF Events

Seventh Annual F. Keane Eagen Diabetes Golf Classic takes place on July 14, 2008 – Leesburg, Virginia



Diabetes Research & Wellness Foundation® kicked off the Seventh Annual F. Keane Eagen Diabetes Golf Classic to benefit the programs and services of the foundation. The tournament raised over \$85,000 to benefit diabetes research.

These funds will be donated to the islet research projects at Spring Point Project in collaboration with Diabetes Institute for Immunology and Transplantation at the University of Minnesota.



### 33rd Annual Marine Corps Marathon and 10K Event “Thank you for your participation and support”

On Sunday, October 26 at the sound of the gun ... near the Iwo Jima Memorial, our DRWF Marathon and 10K Team began its challenge with more than thirty thousand fellow runners at the 33rd Annual Marine Corps Marathon and 10K event. It was the first time DRWF became a charity partner and put together a team in this event to run for a diabetes cure.

The race took place on a perfect, sunny autumn day on a course that took the runners past historical monuments, the US Capitol and the Pentagon. For many of our participants it was their very first marathon/10Krun!

One of our DRWF team runners, Sid Subramanyam, noted: “This was truly an amazing experience and I am honored to have been a part of it. Also, what made it even more special was the fact that I raised money for a great organization. Diabetes has affected so many individuals who are close to us and it means a lot to finish this race in their honor.”



DRWF team members tested their abilities and set their goals high, and in the end they had raised more than \$6,000 for diabetes research. The money raised from this event will be used to fund critical research for a cure for diabetes.

Congratulations to the 33rd Annual Marine Corps Marathon/10K runners, and a special congratulations to our DRWF team!! We appreciate your dedication to DRWF and diabetes research. A special thank-you goes out to all of our sponsors and donors. We truly appreciate your support.

If you would like to be a part of the DRWF team please contact Valerie Jeremiah at 1-866-293-3155 or email to: [rvjeremiah@diabeteswellness.net](mailto:rvjeremiah@diabeteswellness.net)

# Paddle for the Cure

The First Annual Paddle for the Cure for Diabetes Research  
"It was a good time for a good cause"



On Saturday, August 23rd, DRWF successfully launched our very first Paddle for the Cure on the beautiful Wye River in Queenstown, Maryland. It was a sunny and perfect day for an outdoor healthy activity. For many of our participants, it was their very first kayak trip! Family, friends and colleagues enjoyed the adventure of paddling on the river, taking in the fresh air, sights and sounds of nature while having the opportunity to support diabetes research. The participants had set their goals high and raised over \$6,000 for a diabetes cure!

The Wye River Park rangers and their staff were extremely helpful. Their gracious hospitality and customer service made it a safe and successful experience. The scenery was beautiful and the facility were antique. A special thanks to our friends at Return to Nature, a kayaking rental company, who generously donated the use of their kayaks and services. The day began

with a crash course from one of the staff member from Return to Nature who instructed first-time time kayakers; and ended with everyone sharing their experiences on the river over a delicious lunch in the afternoon followed by a volleyball game. It was a good time for a good cause. The funds raised from this event will go directly towards islet cell transplant research. We believe efforts in this area to be the most promising strategy in the search for a CURE.

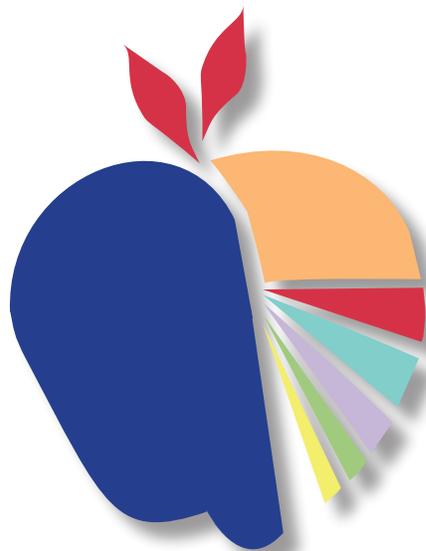
**Congratulations to all the paddlers and sponsors for help making this event a success. Thank you!**

# Become a DRWF Legacy today.

The foundation would like to honor each donor who has named the foundation in his or her will. We will announce the members in our Annual Report. We hope that you will let us recognize your wonderful pledge to the foundation in this special way. If you would like to be a part of the Legacy Program, please contact our office at 202-298-9211 for more information.

## 2008 Use of Funds

-  Direct medical services (47.3%)
-  Diabetes identification and guidance (20.8%)
-  Fund-raising (5.6%)
-  Diabetes self-management research and services (3.2%)



-  Medical research grants (5.4%)
-  Management and general (.4%)
-  Educational events (1.1%)
-  Global Outreach Assistance (16.2%)



## Grants (partial listing of grants)

### American Association of Diabetes Educators

Sponsorship of Educational Conferences for Health Care Professionals (1996)

### American Diabetes Association, Maryland Affiliate

Diabetes Education Projects at Camp Glyndon (1993)

### American Diabetes Association, Washington, D.C. Area Affiliate

Peer Pals Project (1996)

### Baylor College of Medicine

Studies of the Genetics of Type 1 Diabetes (1993)

Principal Investigator: Kenneth Gabbay, M.D.

### California College of Podiatric Medicine

Free Foot Screening and Research Project (1996)

### Catholic Charities Spanish Diabetes Clinic

Diabetes Clinic (2008)

### Case Western Reserve University

Diabetic Neuropathy Clinical Studies (1993-1996)

Principal Investigator: Liliana Berti-Materra, Ph.D.

### Children's National Medical Center

Clinical Research with Diabetic Children (1993)

Principal Investigator: Audrey Austin, M.D.

### Barbara Davis Center for Childhood Diabetes

Laboratory Equipment for Genetic Research (1998)

Principal Investigator: John Hutton, Ph.D.

### Diabetes Institute at University of Minnesota

Islet Transplantation Research & Trials (2004-2007)

Principal Investigator: Bernhard J. Hering, M.D.,

David E.R. Sutherland, M.D., Ph.D.

### Diabetes Research Institute

Islet Cell Transplantation Studies (1993, 2000, 2001, 2004)

Principal Investigator: Camillo Ricordi, M.D.

### Diabetes Research Institute

Immune System Monitoring (2004-2005)

Principal Investigator: Norma Sue Kenyon, Ph.D.

### Emory University

Studies in the Immunology of Type 1 Diabetes (1993)

Principal Investigator: Peter Jensen, M.D.

### International Diabetes Center

Design and Development of Educational Program for Diabetic Children (1993)

Project Director: Kathy Mulcahy, R.N., M.S.N., C.D.E.

### Jeanie Schmidt Free Clinic (2008)

Provided C.D.E. (2008)

Clinical Administrator: Meagan Ulrich

### Johns Hopkins University -Wilmer Eye Institute

Free Diabetic Retinopathy Screening Project (1993-2008)

Program Director: Daniel Finkelstein, M.D.

### Joslin Diabetes Center

Islet Cell Transplantation Research Program (1996-2008)

Program Director: Gordon Weir, M.D.

Genetic Causes of Diabetic Renal Disease (1996)

Principal Investigator: Masakazu Hattori, M.D.

### Medical University of South Carolina

Diabetic Retinopathy Research (1993-2001)

Principal Investigator: Timothy Lyons, M.D.

### New England Medical Center

Mechanisms of Pancreatic Insulin Secretion (1993)

Principal Investigator: Aubrey Boyd, M.D.

### Oregon Health Sciences University

Research into Causes of Diabetic Renal Disease, (1993)

Principal Investigator: Sharon Anderson, M.D.

### S.O.M.E. Medical Clinic – Washington, D.C.

Laboratory Equipment for Measurement of Glycated

Hemoglobin Levels (1995-1998) Provided C.D.E.

### Spring Point Project

Pig islets for clinical trials research (2005-2008)

Principal Investigator: Bernhard J. Hering, M.D.

### State University of New York at Stony Brook

Diabetic Renal Disease Studies (1993)

Principal Investigator: Kathleen Dickman, Ph.D.

### Unity Health Care Clinic Federal City Shelter

Provided C.D.E. (1998-2008), Diabetes Clinic (1999-2008)

Clinical Administrator: Sister Eileen Reid

### University of Miami

Family Intervention for Youngsters With Diabetes Study (1995 and 1996)

Principal Investigator: Alan Delamater, Ph.D.

### University of Mississippi Medical Center

Mechanisms of Kidney Disease in Type 1 Diabetes (1993-1996)

Principal Investigator: Jane F. Reckelhoff, Ph.D.

### University of Nebraska College Of Nursing

Diabetes Rural Mobile Clinic (1995 and 1996)

Project Director: Kathleen Mazzucca, R.N., Ph.D.

### University of Pittsburgh

Epidemiology Studies of Childhood Diabetes in the Caribbean (1993)

Principal Investigator: Eugene Tull, Ph.D.

### Vanderbilt University School of Medicine

External and Implantable Insulin Pump Research (1993)

Principal Investigator: Roger Chalkeley, Ph.D.

### Visiting Nurse Association of Northern Virginia

Sponsorship of Educational Programs

Related to Diabetes (1995)

### Washington Regional Transplant Consortium

Public Education Initiatives Promoting Organ Donation (1993)

Project Coordinator: Lori Brigham

### Washington University

Research into Renal Growth Factors (1993)

Principal Investigator: Marc Hammerman, M.D.

# Memorium for 2008

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