

## Admin, LACO

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**Subject:** FW: Submission to the Inquiry into the role of diet in type 2 diabetes prevention and management.

**From:** Graham Lithgo

**Sent:** Saturday, 13 October 2018 4:50 PM

**To:** Committee, Education & Health Standing <[laehsc@parliament.wa.gov.au](mailto:laehsc@parliament.wa.gov.au)>

**Subject:** Submission to the Inquiry into the role of diet in type 2 diabetes prevention and management.

Hello

I was a borderline type 2 diabetic (fasting and GTT results). I was not and never have been overweight.

I have been able to pull myself back from the borderline status to normal by:

- Going on a website "Blood sugar 101" and educating myself. The following is an excerpt from that fantastic website.

*"I learned where the current practice recommendations most doctors follow came from and why they are inadequate to protect people with diabetes from complications. Fortunately, I also found some very solid information about what blood sugar levels seem to be low enough to prevent complications".*

- THEN
- Monitoring my blood sugar levels (Accu-Chek Performa) following food, until I learned what elevated my sugar levels.
- Changing my diet accordingly.
- Monitoring my blood test (fasting, Hb1Ac and GTT) results so I know how I am doing. Ie Not relying on my doctor.
- Reading the carbohydrate and sugar levels per 100g for everything I buy.
- Minimising my carbohydrate/sugar intake.
- Trying to exercise or carry out physical activity after eating.
- Spreading out my food intake to reduce spikes particularly at the beginning of the day.

It surprises me that Accu Chek strips are no longer subsidised (PBS) given the importance they have in prevention of becoming a type 2 diabetic.

Self education about the physical impact of ignoring Type 2 (ie provides motivation) and learning what you can do to possibly avoid it or turn it around, is essential to minimising the risk of living with the condition. I have friends relying on their doctors loose monitoring and I know it's not good enough. They are likely to end up beyond the point of no return (ie stuck with medication and its inconvenience and side effects).

All the best with this project. It's very necessary for what I see as a growing public health risk.

Yours truly,  
Graham Lithgo