Picture This: Diabetes
Picture This: Diabetes
Entertainment Industries Council, Inc.
www.eiconline.org

Picture This is a guide to the key issues related to diabetes as identified by physicians, advocates, patients, policy-makers, and others working to improve public awareness about diabetes.
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Researching health issues can be as basic as finding resource articles on the Internet or as complex as delving into public policy and the philosophical positions of interest groups. Most important is the perspective of people who, for one reason or another, make a deep commitment by dedicating their personal and professional time to a cause.

This document is a publication resulting from a formal meeting of experts in the field of diabetes research, diabetes management, and public health. Numerous individuals and organizations provided insight into the complex issues concerning diabetes as we created *Picture This: Diabetes*.

Special Thanks to Our Participants!

American Academy of Family Physicians
American Academy of Nurse Practitioners
American Academy of Physicians Assistants
American Association of Clinical Endocrinologists
American Association of Diabetes Educators
American College of Physicians Foundation
American Diabetes Association
American Osteopathic Association
American Pharmacist Association
American Public Health Association
Department of Health and Social Services/
Office of Women’s Health
Diabetes Advocacy Alliance
Endocrine Society

Juvenile Diabetes Research Foundation
National Association of School Nurses
National Association of Social Workers
National Council of La Raza
National Eye Institute of the
US National Institutes of Health
National Hispanic Medical Association
National Kidney Foundation
National Medical Association
National Women, Infants, and Children Association
Pediatric Endocrine Society
US Department of Health and Human Services
YMCA

Dr Danilo Verge discusses the reality of diabetes and its effects on those diagnosed.
Thank you to the **National Cable & Telecommunications Association (NCTA)** for hosting *Picture This: Diabetes*. We would also like to thank **Rob Stoddard**, Sr. VP Communications and Public Affairs for NCTA; our Diabetes Celebrity Ambassador **Stephen Wallem**, actor; our entertainment media panelists: **Renee Intlekofer**, writer for *One Tree Hill*; **Sandy Isaacs**, writer and consulting producer for *Drop Dead Diva*; **Duane Tollison**, writer and editor for CBS Radio News; **Mark Stegemann**, writer and co-executive producer for *Men of a Certain Age*; **Wyndham Lewis**, writer for *Nurse Jackie*; and our *Picture This: Diabetes* table facilitators **Dr. Gary Kreps**, chair of the Department of Communication at George Mason University; **Dr. Kathy Rowan**, professor of communication at George Mason University; **Dr. Anne Nicotera**, associate professor of communication at George Mason University; and **Dr. Christy Ledford**, fellow at the Center for Health and Risk Communication at George Mason University.

**Special Thank You to Our Collaborator, Novo Nordisk Inc.**

**Picture This Staff**

Brian Dyak, President, CEO & Co-Founder  
Marie Gallo Dyak, Executive Vice President, Program Services & Government Relations  
Larry Deutchman, Executive Vice President, Marketing & Industry Relations  
Ashley Jupin, Program Manager  
Shawn King, Administration, Assistant to the President & CEO  
Jeff Coppola, Program Assistant  
Sabiheen Abdul, Program Assistant  
Mary Klein, Program Assistant

**Project Team**

Gina Charusombat  
Erin Cushing  
Matthew Fons  
Shannon Kovach  
Lauren Ransom  
Heather Wagner  
Stephanie Cox  
Jeffrey Dastin  
Upma Kapoor  
La Keiia Penson  
Kiley Vorndran
Special Message to the Creative Community

Diabetes is a chronic illness that affects 26 million people, who are currently diagnosed, and another 57 million who are at risk for developing it. In fact, the prevalence of diabetes has exponentially increased so much over the last few years that it is projected to increase by 64% by the year 2025. The time for action is inarguably now and I am proud to submit this Action Strategy to you, the creative community, in order to engage you in our efforts to increase awareness and understanding among your audiences in regards to diabetes.

The media has great potential to educate the masses, but in order to be successful, your audiences must be exposed to accurate information, realistic depictions and positive messages.

In a step towards achieving this goal, Novo Nordisk and the Entertainment Industries Council (EIC) joined together to engage diverse diabetes stakeholders, the entertainment creative community and news media for a common purpose: to determine the most pressing concerns related to depicting diabetes onscreen.

This publication is the result of that meeting. It is intended to enhance your creative palette, not inhibit it. Within these pages you will find surprising information about diabetes that you may not know, as well as input from experts and the communication priorities that must be addressed if we are going to get this problem under control. It is my hope that this resource will provide you with the tools and inspiration necessary to generate social change through your work.

The time is now to head off this crisis. Based on current projections, in just over a decade 1 in 3 people will have diabetes. Realistically, that’s 1 in 3 of your characters as well. If we start addressing this condition in our productions – prevention, management, treatment – perhaps the viewing public will start to address it in their own lives and behaviors and we can prevent these projections from becoming a reality.

Thank you for your efforts in contributing to the ART of making a difference!

Sincerely,

Brian L. Dyak
President, CEO & Co-Founder
Entertainment Industries Council, Inc.
Dear Friends and Colleagues,

Diabetes is one of the most urgent public health issues of our time, with 26 million Americans now living with diabetes and another 57 million at risk. The impact of diabetes on personal health and on public health is huge and, in the public health sphere, growing rapidly. As a world leader in diabetes care, we at Novo Nordisk are continuously working to change the course of the disease through research, treatments, education and advocacy.

Diabetes deserves full-court pressure at this point in time to reach the millions affected by this disease so that they are aware of the consequences of the disease and their ability to affect a positive outcome. At Novo Nordisk, we believe action defines leadership. Our collaboration with the Entertainment Industries Council (EIC) on Picture This: Diabetes is one of the ways we put our belief in the ability to change diabetes into action.

Together with EIC, we are engaging diverse diabetes experts, the entertainment creative community and news media in reaching consensus about communications challenges surrounding diabetes. This is all in an effort to strengthen public understanding of the disease. Working collaboratively, we have the ability to bring together our shared expertise and perspectives to help identify ways to bring the realities of diabetes to the forefront of American consciousness.

Entertainment has a disproportionately loud voice among the US population and a voice that can move the curve of public perception. We view art as a representation of life, and while it often is a fictional representation, at the end of the day, it can reflect what is happening in our world. We are very fortunate to have found willing partners in the entertainment and news media to help accurately depict the way diabetes affects our lives.

We thank EIC for bringing this important collaboration to life. We look forward to continued partnership, and sincerely hope that this process will offer stories that will inform and educate the public about the realities of diabetes and inspire individuals to make the changes necessary to assure better health.

Sincerely,

Alan C. Moses, M.D.
Global Chief Medical Officer, Novo Nordisk
About Picture This: Diabetes in Washington, D.C.
Introduction and Event Description

EIC and Novo Nordisk have joined together to engage diverse diabetes experts, the entertainment creative community and news media in reaching consensus about diabetes communications challenges and ways to strengthen public understanding about the disease.

This collaboration began with a national Picture This Forum held at the National Cable & Telecommunications Association (NCTA) in Washington, D.C. where a group of 35 nationally-recognized diabetes experts engaged a panel of writers and producers from leading television programs about diabetes communications priorities. Creative talent included: Celebrity Diabetes Ambassador Stephen Wallem, actor Nurse Jackie; Entertainment Media Panelists Renee Intlekofer, writer One Tree Hill; Sandy Isaac writer/consulting producer Drop Dead Diva; Duane Tollison, writer/editor CBS News; Mark Stegemann, writer/co-executive producer Men of a Certain Age; Wyndham Lewis, writer Nurse Jackie.

Please read on to better understand the conversations that took place at this engaging forum and the top priorities that were identified by the experts in attendance about changing the way the public understands diabetes.
Our *Picture This: Diabetes* Entertainment Panelists

**Renee Intlekofer, Writer, *One Tree Hill***

I write for a show called *One Tree Hill*. In our particular case, it takes three weeks to write an episode, with one week of shooting, and within a couple of months it’s airing on TV. Writing for television is a very fast-paced process, and there is not a lot of time to really do a ton of research. Within TV you have restrictions. Sometimes it is tough, without just being stereotypical, to try to really show the right facts and be honest to the disease, which is why coming to these forums as writers and having that research and gaining that knowledge helps with developing characters. Often, I become more passionate about pitching story ideas about certain characters. My dad has type 2 diabetes, and I don’t have a lot of personal knowledge on it, which is why I’m here today. Being here, I can get more attached and be able to go write stronger characters. The best thing as a writer is to really personalize it.

**Sandy Isaac, Writer & Consulting Producer, *Drop Dead Diva***

I work for a show called *Drop Dead Diva*. Our writer’s room is a windowless room that’s about 12 by 14 and all the walls are covered in white boards. At certain times during the year, all the boards are covered in words and we go from board to board and as each board fails someone has to get up and erase it. Then we start again...There’s always that chance if someone doesn’t like what has just happened, they are going to pick up the clicker and move on. As writers we have to have timing, it’s called an act out, in which you make something compelling and a bit of a cliffhanger to keep them from breaking away. The question is how do you do this? How do we go into a room and have a group of really creative people and come up with these stories that are similar yet completely different? How do we entertain our audience who expects certain required things from each episode? The answer, you have to laugh, you have to tear up, and you have to fall in love. You have to do all these things and do them differently every week, just enough so it’s not repetitive.
Duane Tollison, Writer & Editor, *CBS Radio News*

We’re looking for things that are very specific. The audience wants to know about people, they want examples and personal life experiences. Sometimes a story just calls out to be covered. Sometimes you need a hook. The sad part about it is diabetes affects so many different people, but it is almost stagnant at a certain point. You need something to really hook the audience, a new thing. We have a saying, you always want to advance the story. If there’s a new study, if it’s a big study, that’s just one part of it. We must ask can it be relatable? We always say at our network, because we’re centered in New York and a lot of things happen there; does the guy in Kansas care? Does he relate to that? Can we make him care? Those are the certain considerations we are taking into account.

Mark Stegemann, Writer & Co-Executive Producer, *Men of A Certain Age*

One of our main characters in *Men of A Certain Age* is Andre Braugher who plays Owen Thoreau. He’s a middle-aged African-American character who’s diabetic. In the pilot episode of the show you meet him and he’s not dealing with his diabetes very well. He's not dealing with his life very well. He views himself as a victim. He works for his father. His father doesn’t respect him. He’s falling asleep at his desk, and he’s sort of here and there with his treatment. He is sort of out of control. What we, as writers, have done over the course of two seasons is to have him start to take charge of his life by being more responsible about his diabetes. By getting on a treatment plan, exercising more, and paying more attention to what he’s eating. We got to do a great story in the middle of the storyline where his kid caught him in the middle of the night sneaking Fiddle Faddle. The character was stressing out at work and he went in and he sort of did it, and his wife had to confront him about it. They had the conversation that all diabetics have, and I know because I am also a diabetic.

Wyndham Lewis, Writer, *Nurse Jackie*

It's funny, *Nurse Jackie* is the first television show I've ever worked on. Along with several of the other writers, it's the first show they've worked on. I think all of us came in with a similar concern, which is we’re writers first; we are far from knowledgeable about the medical profession. I wondered if it would be a hindrance coming in and writing for a show that takes place in a hospital... Like what has been said before, a lot of the stories and number of the patient stories that we deal with are drawn from people’s lives, and then we have to make sure that the medical elements that we deal with are accurate.
Real People Real Stories
A Letter from Celebrity Diabetes Ambassador Stephen Wallem

I was first diagnosed with Type 1 diabetes when I was ten. Initially, I ran the gamut of emotions, not knowing what to think. Neither my parents nor I knew anything about the condition, which made it very difficult for us to cope with the news. Additionally, I had no family members or friends living with diabetes who could be a resource for how to manage this disease. As a result, I began to feel isolated, alone and like no one knew what I was going through. As I got older, I realized those feelings are very common among people living with diabetes because we are faced with unique challenges.

Living with diabetes means constantly scrutinizing what you eat: Was it too much? Was it enough? What will my blood sugar be? One of the biggest challenges of living with diabetes is that I can never take a break from it. I find myself thinking about my condition every waking moment.

As the Celebrity Diabetes Ambassador, I feel it is important for people to know that diabetes is a serious condition that, if left untreated, can cause adverse health outcomes. The key to avoiding such complications is through educating people so that prevention, early detection and proper management can be utilized.

I am so proud to represent the entertainment industry’s involvement in this initiative. As a person living with diabetes, I can’t recall a single character on television that I could identify with. This lack of character representation has always been a source of frustration for me, and when I was approached about incorporating my diabetes into Thor’s storyline in the second season of Nurse Jackie, I was thrilled. For me, it is a huge responsibility to accurately portray Thor as a person with diabetes, I jumped at the opportunity. The fact that the writers at Nurse Jackie wanted to portray a person living with diabetes with an attention to accuracy speaks volumes about how far the industry has come in terms of using their entertaining power to educate. Thor has the potential to do for someone what I wish could’ve been done for me: offer a sense of support.

I want to thank EIC and Novo Nordisk for involving me in their collaboration. I am beyond elated to have the opportunity to accurately inform the public about diabetes and be a part of the call to action for my industry. Although watching television characters living with diabetes will not eliminate all of the negative emotions of those living with the condition, an accurate portrayal can at least help educate the public and serve as a source of support for people living with diabetes.

Sincerely,

Stephen Wallem
Picture This: Diabetes Speakers Provide a Call to Action!

**Rob Stoddard, Senior Vice President**  
**Communications and Public Affairs**  
**National Cable and Telecommunications Association**

This event is a real call to action to our constituents, the cable content providers and companies, to address a serious health concern that does impact so many millions of people. We like to think that the content that we provide really enhances people’s lives and their lifestyles, but I’m the first to tell you, as someone who represents the industry, that not all of what we do is characterized as good stuff. That’s why it’s vital to us to integrate the ideas and the concepts that you will generate today. Ideas that will flow through to the creative community, and ultimately find their way onto programs like *Nurse Jackie* and other content that’s available on cable. We need to be a socially responsible industry, and we have an extremely powerful tool to reach people. In this day and age we reach audiences not just at home, but on their iPads, on their PDAs, on their desk tops and laptops, wherever people are watching television and video content.

**Dr. Danilo Verge, Vice President of Medical Affairs,**  
**Novo Nordisk**

26 million people in the United States have diabetes. That’s roughly 10 percent of the population, but diabetes is not just a collection of numbers. It is real people. The thing about diabetes is it affects everyone in completely different ways. As a world leader in diabetes, Novo Nordisk is very proud to be associated with the entertainment industry and EIC. We have the ability to bring together our shared expertise and perspectives to identify ways to strengthen understanding about diabetes, and hopefully, inspire stories that will lead to social change and empower people with diabetes.
Dr. William Rowley, Senior Fellow, Institute for Alternative Futures

When it comes to diabetes there are a lot of numbers. They are all big and they are all different. The number of people with diabetes over the next 15 years is going to grow by about 64 percent. We might have 53 million Americans with diabetes by 2025. The cost of diabetes to our country will also significantly increase by 72 percent. By 2025, over half a trillion dollars a year will be spent on people with diabetes, both for their medical care and the societal cost for loss of work and disability. If we could get 50 percent of the 79 million Americans with pre-diabetes to take better care of themselves, we would reduce about 44,700,000 cases, but by 2025 we would still have 48 million Americans with diabetes. The most challenging thing that we face as a society is not only preventing people with pre-diabetes from developing it, but we’ve got to prevent people from getting pre-diabetes in the first place. It’s not just a matter of individual responsibility. I think the messages that I have heard at this forum all tie into each other. Diabetes affects everybody. We know what we should do about it. It is a matter of public awareness and getting our society to change.
**Diabetes Myths/Realities**

- **Myth:** Isn’t diabetes just “a touch of sugar.”
  **Fact:** Diabetes is a serious chronic medical condition that if left untreated can be life threatening. Diabetes develops when your body is unable to use insulin properly, doesn’t make enough insulin, or both. The two most common types of diabetes are type 1 and type 2. Type 1 diabetes (formerly known as juvenile diabetes) is characterized by the body’s inability to produce insulin; the cause of this condition is currently unknown. Type 2 diabetes (formerly known as adult onset diabetes) is characterized by a resistance to insulin; 90% of people diagnosed with diabetes are diagnosed with type 2. Because obesity is a common risk factor of type 2 diabetes, the prevalence of type 2 diabetes among young people is increasing as the number of overweight youth rises.

- **Myth:** Diabetes isn’t a serious disease – cancer and HIV/AIDS affect many more people than diabetes.
  **Fact:** While cancer and HIV/AIDS may seem more prevalent due to the resources and attention they receive, diabetes is actually more common than either of these diseases in the U.S., with nearly 26 million Americans diagnosed and undiagnosed. On its current course, the number of people with diabetes is projected to nearly double to 44.1 million by 2034 due in large part to the aging baby boomer population and increased rates of overweight Americans and obesity.

- **Myth:** Diabetes rarely goes undiagnosed.
  **Fact:** There are 7 million people in the United States living with diabetes who are undiagnosed. The American Diabetes Association recommends that all adults who are overweight and have at least one additional risk factor be tested for diabetes. These risk factors include physical inactivity, immediate relative (immediate = 1st degree relative) with diabetes, member of a high-risk population (e.g. African American, Latino, Native American, Asian American, Pacific Islander), diagnosed hypertension (at least 140/90 mmHg or on therapy for hypertension), HDL cholesterol levels (HDL is < 35 mg/dL), history of cardiovascular disease and women with polycystic ovarian syndrome. In the absence of known risk factors testing is recommended beginning at age 45 and should continue every three years.

- **Myth:** Diabetes is a death sentence.
  **Fact:** Diabetes cannot yet be cured, but it can be managed. With the proper diet, exercise, regular blood sugar testing, and treatment therapy, people living with diabetes can lead full and active lives. However, if left untreated, diabetes can lead to serious and life threatening complications including, stroke, kidney disease, high blood pressure, blindness, nerve problems and amputations.
• **Myth:** If I have type 2 diabetes and my doctor prescribes insulin, it means I failed in managing my diabetes.

• **Fact:** Medical guidelines and recommendations aimed at curbing the progression of type 2 diabetes have included earlier introduction of insulin for patients who have not succeeded in improving glycemic control with exercise and oral medication alone. As type 2 diabetes progresses, the body’s ability to make enough insulin declines. Over time, non-insulin medicines may not be enough to bring down blood sugar levels. Insulin injections become necessary. This does not mean you have failed to control your diabetes. It simply means that your body has changed and needs a different type of treatment.

• **Myth:** No one in my family has diabetes, so I am not at risk.

• **Fact:** Healthcare providers are still unsure exactly what causes diabetes, although both family history/genetics and lifestyle factors may play a role. Genetics and lifestyle factors including, age, lack of physical activity, obesity, high blood pressure and ethnicity are thought to have an especially important role in triggering type 2 diabetes.
Diabetes Basics Backgrounder

What is Diabetes?

- Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. There are two types of diabetes.¹
  - Type 1 Diabetes: Type 1 diabetes (formerly known as juvenile diabetes) is characterized by the body’s inability to produce insulin. Why the body does not produce insulin is currently unknown.²
  - Type 2 Diabetes: Type 2 diabetes (formerly known as adult onset diabetes) is characterized by a resistance to insulin; 90% of people diagnosed with diabetes are diagnosed with type 2.³ Type 2 diabetes is increasing among young people as the amount of overweight youth increases.³

- Diabetes Symptoms
  - Symptoms of type 1 diabetes may include frequent urination, unusual thirst, extreme hunger, unusual weight loss, extreme fatigue and irritability.¹
  - Symptoms of type 2 diabetes may include frequent urination, unusual thirst, extreme hunger, unusual weight loss, extreme fatigue and irritability, frequent infections, blurred vision, slow healing cuts and bruises, tingling/numbness in the hands and feet, recurring skin, gum, or bladder infections.⁴

Prevalence and Cost of Diabetes

- In the U.S., diabetes impacts millions of people annually, with 1.9 million people aged 20 years or older newly diagnosed each year. While cancer and HIV/AIDS may seem more prevalent due to the resource and attention they receive, diabetes is actually the more common chronic disease in the U.S. with nearly 26 million Americans – over 8% of the population – suffering from the disease.⁴
  - On its current course, the number of people with diabetes is projected to nearly double to 44.1 million by 2034 due in large part to the aging of the baby boomer population and increased rates of overweight Americans and obesity.⁴
  - Diabetes is one of the costliest diseases in America, with total direct and indirect costs for diabetes and pre-diabetes estimated at $218 billion in 2007.¹¹

Understanding Diabetes Treatment & Management

- Diabetes cannot yet be cured, but it can be managed.⁵ With the proper diet, exercise, regular blood sugar testing and treatment therapy, people living with diabetes can lead full and active lives.⁴
- When left untreated or poorly controlled, diabetes can have serious complications, including stroke, kidney disease, high blood pressure, blindness, nerve problems and amputations. If detected early and treated properly, complications can be prevented or delayed.²
- Good blood glucose control, or glycemic control has long been established as the cornerstone of successful diabetes treatment, however many patients in the U.S.
are not achieving recommended A1C targets, which are a measure of a person's average blood glucose control for the past 2 to 3 months.7
  o Adequate patient self-management has been identified as a critical component for successful short- and long-term treatment of diabetes and its complications.2

• For people living with diabetes, healthy eating, physical activity, blood glucose and one or more diabetes medicines including, insulin, pills and other injectable medicine to control blood glucose levels, are the basic management tools for diabetes.2
  o Insulin therapy, discovered nearly 90 years ago remains one of the most significant discoveries in the field of medicine and continues to be a mainstay of diabetes treatment as a way to reduce the risk of developing serious complications.12
    o Despite the effectiveness of insulin treatment, several factors have been suspected to impact insulin usage, including needle anxiety, fear of injection pain and inconvenience coupled with psychological barriers to insulin initiation (e.g. social embarrassment).13
  o Insulin plays an important role in managing diabetes. To get the full benefits of insulin therapy, people with diabetes need to take it exactly as directed by their physicians. For many patients, it will be important to choose an insulin delivery method that works for their lifestyle, whether it be a vial and syringe or an easy-to-use insulin delivery device.14
    o Insulin delivery devices are an integral part of diabetes treatment and the successful outcome of treatment today; however, the adoption rates among physicians and patients in the U.S. are still relatively low.15
    o Today in the U.S only 17% of insulin units are delivered through insulin pens (durable, refillable or prefilled disposable insulin pens) compared to 95% and 88% in Japan and Europe, respectively, according to a September 2009 study.16
    o Today there are approximately 10 insulin delivery pens available on the market providing options to diabetes patients to help them actively manage their own health.

**Diabetes Impact: Multicultural & Generational Reach**2

• In the U.S., diabetes prevalence increases with age:
  o 25.6 million or 11.3% of all people 20 years of age or older have diabetes
  o 10.9 million or 26.9% of people age 65 or older have diabetes

• Diabetes disproportionately affects minority communities in the U.S. including, African Americans, Hispanics, Asians and Pacific Islanders, American Indians, and Alaskan Natives. The increasingly diverse population of people living with diabetes has created new variables for healthcare professionals to consider when treating patients to ensure they address the beliefs, attitudes and practices of each unique culture or background.

• 2007–2009 national survey data for people aged 20 years or older indicate that:2
  o 7.1% of non-Hispanic whites had diagnosed diabetes
  o 8.4% of Asian Americans had diagnosed diabetes
  o 11.8% of Hispanics had diagnosed diabetes
12.6% of non-Hispanic blacks had diagnosed diabetes
Compared to non-Hispanic white adults, the risk of diagnosed diabetes was 18% higher among Asian Americans, 66% higher among Hispanics, and 77% higher among non-Hispanic blacks.

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3 NIH Fact Sheet: Type 2 Diabetes. Accessed at: www.nih.gov/about/researchresultsforthepublic/Type2Diabetes.pdf
7 Cobden et al. Health Outcomes and Economic Impact of Therapy Conversion to a Biphasic Insulin Analog Pen Among Privately Insured Patients with Type 2 Diabetes Mellitus. Pharmacotherapy, 2007, Vol. 27, Number 7.
A Commitment to Change:  
About Novo Nordisk

Currently, 26 million people in America are living with diabetes – and of those, 7 million remain undiagnosed and are not receiving treatment. On its current course, the number of people with diabetes is projected to nearly double to 44.1 million by 2034. To make a real difference, we must drive change. Our history tells us it can be done. For nearly a century, Novo Nordisk has been at the forefront of diabetes management, research, and care.

Our approach has always been rooted in the philosophy that the patient should be at the center of care. Our founders could not have foreseen the global diabetes pandemic we face today. But our mission remains the same: to provide care and treatment for people with diabetes around the world, and to put their needs at the center of everything we do.

- Our commitment to research is reflected in our full portfolio of diabetes pharmaceuticals and delivery devices and the many new treatment options in our pipeline.
- Novo Nordisk takes a leadership role in helping patients effectively integrate diabetes into their lives and strives to deliver programs and support services that meet their needs.
- Our commitment to building sustainable partnerships and expanding access to diabetes treatment is a primary goal of our long-term effort to change the diabetes epidemic.

Visit novonordisk-us.com.

Stephen Wallem, Nurse Jackie and Rob Stoddard, NCTA
Diabetes Facts and Figures: Did You Know?

Diabetes:

Age-adjusted percentage:
25.8 million people suffer from diabetes in the United States. This is 8.3% of the population. However, roughly 7.0 million are undiagnosed.
215,000 people younger than 20 have either type 1 or type 2 diabetes.
16% of patients do not take any medication. 12% take insulin only, 58% take oral medication, and 14% do both. (Data from 2007 to 2009).
Diabetes was the seventh-highest cause of death in the United States in 2007.
The total (direct and indirect) cost of diabetes on American families was $174 billion in 2007. Direct costs included medical bills, which were on average 2.3 times higher than the bills of non-diabetics, whereas indirect costs included disability, work loss, and premature death.
Questions to Ask of Your Characters and Storylines Involving Diabetes

1. Does your storyline depict your character actively managing their diabetes (i.e. through lifestyle change, doctors visits, monitoring blood sugar daily, etc.)?

2. Does your storyline remain positive and educational without blaming the patient for their diagnosis?

3. Does your character have a supportive family and care team that is actively involved in their management plan?

4. Do you explore the importance of early screening and diabetes diagnosis for those individuals who are at risk by showcasing the increased or decreased risk for complications they could encounter?

Entertainment Panelists from Left to Right Renee Intlekofer, One Tree Hill; Sandy Isaac, Drop Dead Diva; Duane Tollison, CBS Radio News; Mark Stegemann, Men of a Certain Age; Wyndham Lewis, Nurse Jackie.
Depiction Priorities

The entertainment industry continually makes positive contributions addressing health and societal issues in the United States. With the ability to reach millions, such a powerful tool is a welcome help to address the need to increase accurate storytelling through depictions of people living with diabetes, and to enhance public dialogue about the key issues associated with the disease. Identified by national diabetes experts at the Picture This: Diabetes forum in Washington, D.C., these priorities and depiction suggestions outline top issues diabetes experts believe need further public awareness. The priorities below are in order of importance and are accompanied by depiction suggestions to provide industry professionals context and ideas in an effort to inspire stories that could lead to social change.

Diabetes is a serious chronic medical condition that if left untreated can be life threatening. With early detection and treatment, the serious health consequences of diabetes can be prevented or delayed.

- 26 million Americans are living with diabetes, and another 57 million are at risk for developing the disease. Think about how many of your characters could be at risk for diabetes or how they could advocate for diabetes screening for their loved ones who may be at risk.

- There are many myths and misconceptions regarding diabetes, and the public may not be fully aware of the potential symptoms of the disease. By depicting a character with accurate symptoms such as, experiencing unusual weight loss, frequent urination, extreme hunger, unusual thirst or extreme fatigue, the audience could potentially identify symptoms personally, or in a loved one.

- When left untreated or poorly controlled, diabetes can have serious complications, including stroke, kidney disease, high blood pressure, blindness, nerve problems and amputations. These complications could all be prevented through proper treatment. Consider depicting the activities that are crucial to diabetes management such as doctors visits, treatments, monitoring blood sugar daily, and changing their diet based on the recommendations of their treatment team.

- Understanding the importance of early detection and treatment is a key to preventing complications. Consider including a scene where diabetes risk factors and symptoms are introduced in an educational setting such as a health class or PTA meeting. Due to an increased understanding of the disease, your character may reach out to support a newly diagnosed friend or family member, or even seek screening for themselves or a loved one.

- Consider portraying advice to get screened coming from an unlikely place such as a sports coach, schoolteacher, barber shop patron or congregation member. This type of portrayal could motivate individuals in a leadership position to become more aware of diabetes considering they could be the catalyst to help someone receive an early diagnosis.

Families and local communities need to become involved in diabetes education and awareness in order to break the cycle of late diagnosis and complications.

- Families play a key role as part of the diabetes care team (see chart). When portraying a patient living with diabetes, their support system in each step of his or her understanding, treatment, and management of the condition may be an interesting avenue to explore.

The Diabetes Care Team

| Primary Care Physician |
| Endocrinologist |
| Nutritionist |
| Social Worker |
| Certified Diabetes Educator |
| Pharmacist |
| Supportive Family and Friends |
• Consider storylines that increase awareness regarding the seriousness of this disease. One suggestion would be to showcase character(s) dealing with a diabetes diagnosis with their family and community rallying around them in support as they begin to manage their condition.

• Those recently diagnosed with diabetes often struggle with the news. Managing this disease requires a lifestyle change, and it may be difficult for an individual to adjust. Consider exploring family members changing their lifestyles alongside their loved one in order to be more supportive. Illustrating family units exercising, removing unhealthy foods from their kitchen, and attending meetings with a diabetes educator could lead to heartwarming, funny, or informational storylines.

• If left unmanaged, diabetes can lead to severe health complications. As part of the patient’s support system consider portraying family members dealing with the diagnosis of a complication which could include blindness, kidney disease, amputations, heart disease and stroke.

• Education and awareness regarding a healthy lifestyle begins at the grassroots level with community leadership and family relationships. Consider showing your characters engaging in conversations and efforts both in their homes and local communities that encourage children and adults to lead healthy lifestyles to prevent diabetes and its complications.

Each patient should feel empowered to manage his or her diabetes.

• Consider depicting your characters making simple adjustments to their lifestyle such as taking the stairs instead of the elevator or switching out candy for fruit. These simple changes make a huge difference over time and your audience will appreciate the relatable emotions your character could exhibit as they take steps toward a better future.

• In order to responsibly manage their condition patients and their families must have an understanding of diabetes and what a diagnosis means. Consider depicting your character taking the necessary steps to fully understand their diagnosis by engaging the help of a Registered Dietician (RD) or Certified Diabetes Educator (CDE) to help them to make the necessary changes to live a fulfilling life despite this diagnosis.
National Diabetes Resources

American Academy of Family Physicians
[aafp.org]
Improves the health of patients, families, and communities by serving the needs of members with professionalism and creativity.

American Academy of Nurse Practitioners
[aanp.org]
Promotes excellence in NP practice, education and research, shapes the future of healthcare through advancing health policy, and builds a positive image of the NP role as a leader in the national and global healthcare community.

American Academy of Physicians Assistants
[aapa.org]
The leader in providing support and advocacy for physician assistants, the primary organization advancing the profession, a premier participant in health care transformation and passionate champion of patient-centered health care.

American Association of Clinical Endocrinologists
[aace.com]
A professional community of physicians specializing in endocrinology, diabetes, and metabolism committed to enhancing the ability of its members to provide the highest quality of patient care.

American Association of Diabetes Educators
[diabeteseducator.org]
Provides resources for diabetes educators to help patients change their behavior and accomplish their diabetes self-management goals.

American College of Physicians Foundation
[acpfoundation.org]
Supports the mission of American College of Physicians and strives to improve health communication by addressing the problem of low health literacy.

American Diabetes Association
[diabetes.org]
Provides comprehensive information on diabetes and background on the organization’s activities.

American Pharmacist Association
[pharmacist.com]
Provides information, education, and advocacy to empower its members to improve medication use and advance patient care.
American Public Health Association
[apha.org]
Promotes the scientific and professional foundation of public health practices and policy, advocates the conditions for a healthy global society, emphasizes prevention, and enhances the ability of members to promote and protect environmental and community health.

American Osteopathic Association
[osteopathic.org]
Advances the philosophy and practice of osteopathic medicine by promoting excellence in education, research, and the delivery of quality, cost-effective healthcare within a distinct, unified profession.

Centers for Medicare and Medicaid Services
[cms.hhs.gov]
Includes the latest information on Medicare enrollment, benefits, and other helpful tools.

Diabetes Advocacy Alliance™
[diabetesadvocacyalliance.org]
Works to increase awareness of, and action on, the diabetes epidemic among legislators and policymakers.

Endocrine Society
[endo-society.org]
Works to foster a greater understanding of endocrinology amongst the general public and practitioners of complementary medical disciplines and to promote the interests of all endocrinologists at the national scientific research and health policy levels of government.

Juvenile Diabetes Research Foundation
[jdrf.org]
A leader in setting the agenda for diabetes research worldwide, and is the largest charitable funder advocate of type 1 diabetes research.

National Association of School Nurses
[nasn.org]
Improves the health and education success of children and youth by developing and providing leadership to advance school nursing practice by specialized registered nurses.

National Association of Social Workers Foundation
[naswfoundation.org]
Promotes, develops, and protects the practice of social work and social workers; and seeks to enhance the effective functioning and well-being of individuals, families, and communities through its work and through its advocacy.
National Council of La Raza  
[nclcr.org]
Conducts applied research, policy analysis, and advocacy, providing a Hispanic American perspective in five key areas—assets/investments, civil rights/immigration, education, employment and economic status, and health.

National Diabetes Education Program  
[ndep.nih.gov]
Contains information on diabetes, including ways to control or prevent the disease for patients, parents, children and high-risk minority populations.

National Eye Institute of the US National Institute of Health  
[nei.nih.gov]
Conducts and supports research, training, health information dissemination, and other programs with respect to blinding eye diseases, visual disorders, mechanisms of visual function, preservation of sight, and the special health problems and requirements of the blind.

National Hispanic Medical Association  
[nhmamd.org]
Dedicated to empowering Hispanic physicians to be leaders who will help eliminate health disparities and improve the health of Hispanics. NHMA's vision is to be the national leader to improve the health of Hispanic populations.

National Institute of Diabetes and Digestive and Kidney Diseases  
[diabetes.niddk.nih.gov]
Provides a wealth of information about diabetes for patients, health care professionals, and the general public.

National Kidney Foundation  
[kidney.org]
Dedicated to preventing kidney and urinary tract diseases, improving the health and well-being of individuals and families affected by kidney disease and increasing the availability of all organs for transplantation.

National Medical Association  
[nmanet.org]
Promotes the collective interests of physicians and patients of African descent by serving as the collective voice of physicians of African descent and a leading force for parity in medicine, elimination of health disparities and promotion of optimal health.
National Women, Infants, and Children Association
[nwica.org]
Works on behalf of the WIC Program to gain bipartisan support in the US Congress, the support of successive Administrations and a broad coalition, including advocacy groups, health care and religious organizations and the CEOs of Fortune 500 corporations.

Pediatric Endocrine Society
[lwpes.org]
Advances the care of children and adolescents with endocrine disorders.

US Department of Health and Human Services
[hhs.gov]
The United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.

US Department of Health and Human Services/Office of Women’s Health
[womenshealth.gov]
Provides leadership to promote health equity for women and girls through sex/gender-specific approaches. OWH achieves its mission and vision by developing innovative programs, educating health professionals, and motivating behavior change in consumers through the dissemination of health information.

YMCA
[ymca.net]
An inclusive organization of men, women and children joined together by a shared commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility.

Novo Nordisk Patient Support Resource
Cornerstones4Care™ (cornerstones4care.com)
Novo Nordisk understands that while millions of people have diabetes, each person living with diabetes has individual care needs. For today’s diverse diabetes patient community, Novo Nordisk offers Cornerstones4Care™, a best-in-class patient support and education program. Tools offered through Cornerstones4Care.com include:

- Healthy Eating: Menu planners, food look up and other resources to help make healthy eating choices easy
- Being Active: Offering creative ways to stay physically active and fit
- Taking Medicine: Helping people with diabetes understand different treatment options and that diabetes changes over time, and so can their medicine
- Diabetes Self-Management: Resources to help members take an active role in their diabetes care based on their unique profile; including downloadable coupons and offers
Helpful Terms and Definitions

Adapted from www.webmd.com and www.cdc.gov

**Anomaly**: A condition or defect present at birth that differs from the norm.

**Asymptomatic**: A lack of symptoms. No clear signs that disease is present.

**Basal Rate**: The base level of insulin needed to manage daily blood glucose levels.

**Carbohydrate**: One of the three main classes of food and the body’s preferred source of energy. Composed of sugars and starches that are broken down into glucose after being ingested.

**Certified Diabetes Educator (CDE)**: A healthcare professional that is certified by the American Association of Diabetes Educators (AADE) to teach people with diabetes how to manage their condition.

**Dehydration**: A common symptom of diabetes caused by excessive water and fluid loss due to high blood sugar levels.

**Diabetic**: Commonly used to identify a person with type 1 or type 2 diabetes. Often discouraged in use due to an effort to not define a person by their diagnosis.

**Fasting Plasma Glucose Test (FPGT)**: The preferred method of diabetes screening, which measures a person’s blood sugar levels following eight hours of fasting or not eating.

**Gangrene**: The death of body tissues caused by decreased blood flow. Often occurs as a complication of diabetes in the legs and feet.

**Glucose**: The simple sugar found in blood; the body’s main source of energy.

**Human Insulin**: Bio-engineered insulin that is comparable to the insulin made naturally in the body.

**Hyperglycemia**: A term used to describe high blood sugar. Occurs when the body cannot produce enough insulin (see Insulin) or cannot use the insulin it does produce effectively.

**Hypoglycemia**: A term used to describe low blood sugar. Occurs when too much insulin (see Insulin) is present in the blood and, therefore, too little glucose.

**Insulin**: A hormone produced in the pancreas that allows for the transport of glucose into the body’s cells to be broken down and used as energy.

**Insulin Shock**: A severe reaction that occurs when blood sugar levels drop suddenly.

**Juvenile-Onset Diabetes or Insulin-Dependent Diabetes**: Former term for type 1 diabetes.

**Late-Onset Diabetes** or **Adult-Onset Diabetes**: Former term for type 2 diabetes.

**Pancreas**: An organ in the endocrine system that is located in the abdomen and produces insulin.

**Pre-diabetes**: A condition often diagnosed prior to type 2 diabetes, characterized by higher than normal blood sugar levels that are not yet high enough to be considered diabetic.
**Type 1 Diabetes:** A condition in which the insulin-producing cells known as beta cells, located in the pancreas, are not able to produce insulin or produce only limited amounts not sufficient for normal bodily function. This condition is often present at birth and is managed with daily insulin injections.

**Type 2 Diabetes:** A condition that occurs later in life in which the body is able to produce insulin, but it is no longer effective in allowing for the absorption of glucose by the cells in the body. This condition can be caused by a high level of body fat or genetics and is normally treated with lifestyle modification and, sometimes, prescription medication.
Notes
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  - Drug Abuse
  - Smoking and Tobacco Use
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  - Treatment and Recovery

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  - Seat Belt Use

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  - Conflict Resolution
  - Domestic Violence

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