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Have you struggled with a difficult health problem? We want to tell your story Contact our health /correspondent Cathy Buss on/0116/222 1261, e-mail/catherinebuss

> **GETTING ON WITH** LIFE: Joanne Appleby

As a 10-year-old, a doctor gave me an injection of insulin and almost immediately I began to feel fantastic. I just remember how good it was to feel 'normal' again

Over the years, Joanne Appleby, from Wymeswold, has found that the public has grown in

here can be few people today who have not had heard of diabetes or know someone affected by the condition. At the same time. it is often associated with lifestyle and being over-

This is just the tip of the iceberg. Many people are not aware of the serious and potentially life-changing and life-threatening complica-tions to which it can lead, including blindness and ampu

Joanne Appleby has lived with diabetes for more than four decades.

She was just 10 when she was diagnosed with Type 1 diabetes, which is unprevent able and can affect anyone, at any age.

Joanne, from Wymeswold, said: "I don't remember very much about it at the time

"But I lost a lot of weight and did nothing but drink. I can also remember becomin quite lethargic and it was very noticeable because I used to do a lot gym and sports.

"I had a test done through

awareness of diabetes and its life-changing and complications. She talks to CATHY BUSS our GP and I can remember one evening the doctor, who

was a leading specialist in diabetes, coming to our house in Rushey Mead, where we were living at the

"I can remember him explaining to my parents what life would be like going for-

"I was feeling quite ill at the time and had never heard of diabetes, it came out of the

VISTA is the Leicestershire

charity for people with vis-

ion impairment or sight

loss. It helps people cop-

emotionally and with prac-

A phone helpline is open

Monday to Thursday, 9am-

4.30pm on 0116 249 8839.

tical support.

The doctor took the youngster aside to explain what it

would mean for her. Joanne, now 51, said: There was a big glass syringe and I think I was quite scared and shocked.

"But then he gave me an in-jection of insulin and almost mmediately I began to feel antastic.

"I just remember how good

DIABETES UK

helps people

both Type

and Type 2

diabetes.

It also

provides in-

formation on

complications

including dia-

it was to feel 'normal' again. "I think my parents were

Joanne was the first person in her school to be diagnosed

with Type 1 diabetes. She said: "I had to stand up in assembly and tell people about it, which I didn't really

"I can also remember having to sit by the side of the and made to eat a Kit-Kat – no-one really understood

diabetes in those days. "I was quite shocked when I got to senior school and there

phone helpline

for anyone af-

and friends

It is open

Monday to Fri-

betes, from pa-

was another girl with dia-

But the past 40 years have seen great strides in treat-ment for Type 1 diabetes. When Joanne was first dia gnosed, needles were reused

to administer the muchneeded insulin. She said: "The syringes had to be kept in surgical spirit and sterilised in boiling wa-

"Then I remember some

careline@diabetes.org.uk www.diabetes.org.uk

THE Royal Institute of Blind People offers help, information and support. It also 0303 123 9999 or by e mail

> helpline@rnib.org.uk www.rnib.org.uk

rather a like a gun and you pulled the trigger. "Now I have small sort of pen device which you can

carry in your bag.
"There is a cartridge with a needle and you can dial in to see how much insulin you

need to take. It is fantastic. While Joanne, who has two grown-up daughters, "just gets on with it" there is a constant reminder of the

She has to have regular blood tests and check-ups.

One of the most important is a check for diabetic retinopathy, as persistently high blood sugar levels can damage blood vessels in the eye.

If left untreated, this can Joanne said: "I did have to

have laser treatment about 20 years ago as there were some tiny bleeds in my eye. They have been fine since then but I do have to have regular

"I am not the best in the world with my diabetes and there are some difficult days but I do just try and get on



DIABETIC retinopathy is a complication of diabetes and needs to be regularly checked.
High blood sugar levels can,

over a period of time, damage blood vessels in the eye. There are three stages.

Firstly, tiny bulges develop in the blood vessels which may bleed slightly but do not usually affect vision. Secondly, there can be more severe and widespread

changes, including bleeding vision loss, blurred or patchy Thirdly, scar tissue and new blood vessels which are weak and bleed easily develop on the retina and can result in

some loss of vision. to detect changes. People with Type 1 and Type 2 diabetes are at risk from diabetic retinopathy. The risk is greater in those



CHECK-UP: Screening for diabetic retinopathy

with high blood pressure and cholesterol and a persistently nigh blood sugar level.

People from Asian or Afro Caribbean communities are also at greater risk. Signs can include gradually vorsening vision or sudden

vision, eye pain or redness. Anyone over 12 should be offered regular screening which involves taking a photograph of the back of the eye

The main treatments are with a laser, injections or an operation to rémove blood or

ASK THE EXPERT

AMAR Alwitry is a consultregularly sees patients with diabetic retinopathy.

He said: "Diabetes is becoming more common and we could soon be facing increasing patient

"Diabetes causes malblood vessels supplying the retina - this is what is know as diabetic retino

pathy.
"The fine blood vessels at the back of the eve can which results in poor vis-

"Burst blood vessels. leaky blood vessels and the formation of fragile new blood vessels that the signs of diabetic ret-

"If the leaky blood yes-

macula - the central por-**NUMBERS:** vision can go down. 'However, often pa-Amar Alwitn tients would not know there is a problem.

"This is why It is vital that they have their eyes checked regularly if they have

Checks are usually carried out within the diabetic retinopathy screening ser vice or at hospital with an ophthalmo-

logist.
The risk of retinopathy and sight loss can if the patient has good control over their diabetes.

said: "It is also important for patients to

cholesterol levels are okay "It goes without saying but smoking is a big no in diabetics.

their blood pressure and

"Patients from, who have family from, India, Pakistan, Bangladesh or Sri Lanka are more at risk of developing diabetes and the sight-threatening conditions diabetes can

While most patients will have only minimal changes sight-threatening problems can occur and they need to be detected and treated.

Mr Alwitry said: "Treatment is by laser but more recently new injection therapies have come to the fore.

"If people attend the screening service regularly safe and protect their vis-