

# It's a New Year and we are appealing to you

The New Year is an opportunity to thank all the members who made donations.

A new year is also an opportunity to look back over the previous year, the positives and the negatives, and a chance to plan for the coming year.

- IDDT formed in 1994 with five founding members and we now have over 21,000 members – certainly a positive. This success meant that the costs of free booklets and Newsletters increased tremendously.
- Health professionals requested over 135,000 Information booklets to give to their patients, the most popular being Diabetes Everyday Eating to GP practice nurses. This is certainly a success in that we reached more people with diabetes. However, the negative is the cost to IDDT of about £70,000 a year, a cost that surely should be met by the NHS.
- Finally, the economic climate has affected us all and charities are no exception. We received fewer legacies, and they are taking longer to complete resulting in a cash flow problem.

IDDT's aims have always been to help and support people living with diabetes

by supplying free information through booklets, newsletters and our website, because we have always believed that this help should not be dependent on someone's ability to pay. Importantly, we also provide a listening ear so people can call us and talk to a 'real' person without going through a modern telephone system! However, we are now in a position where we are having to dig into our reserves because our success has meant that our costs have gone up. For example, with 10,000 members we could cover our costs of printing and postage etc but with 20,000 members we can't!

While I don't like doing this, for the first time since we formed, I am having to ask for your help to secure the future of IDDT.

### **We can all do the sums, so can you help?**

- If 10,000 people give £2.00 a month, this will raise £240,000 a year.
- If 20,000 people give £2.00 a month, this will raise £480,000 a year.
- The same sums could be raised by an annual donation of £24.00.
- Anything you can afford will help.

**See overleaf for the ways you can help**



# Support IDDT – We Welcome Donations

Payments can be made in the following ways; cheque, postal order, major credit and debit cards, by standing order and by bank transfer (see details below).

For alternative options please visit our website [www.iddt.org](http://www.iddt.org)

**By cheque/postal order: please make payable to "IDDT"**

**By credit card or debit card: Visa or Mastercard.**

Card No \_\_\_\_\_

Expire Date \_\_\_\_\_ Security Code \_\_\_\_\_

**By Standing Order at your bank: please complete the Standing Order Mandate and return to IDDT.**

## STANDING ORDER MANDATE

Account to be debited.

Sort Code \_\_\_\_\_

Account Number \_\_\_\_\_

Account Name \_\_\_\_\_

Bank \_\_\_\_\_

Address \_\_\_\_\_

## IDDT Bank Details

Virgin Money

Northampton NN1 1EN

Sort Code: 05-06-33

Account Number: 41121523

Account Name: Insulin Dependent Diabetes Trust

**Direct bank transfers can be made to the above account.**

## PAYMENT DETAILS

Amount of first payment £ \_\_\_\_\_

Date of first payment \_\_\_\_\_

Amount of usual payments in words \_\_\_\_\_

When paid (monthly/annually) \_\_\_\_\_

Date of usual payment \_\_\_\_\_

PLEASE CONTINUE PAYMENTS UNTIL FURTHER NOTICE

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

## Gift Aid

**Choosing to Gift Aid your donation to IDDT will allow us to reclaim the basic rate of income tax paid on your donation without any cost to you. For every £10.00 that is donated, we can reclaim an extra £2.50**

I am a UK taxpayer. I would like all donations I make to the InDependent Diabetes Trust to be treated as Gift Aid without further notice. I understand that if I pay less Income Tax and/or Capital Gains Tax in the current Tax year than the amount of Gift Aid claimed on all my donations, it is my responsibility to pay any difference.

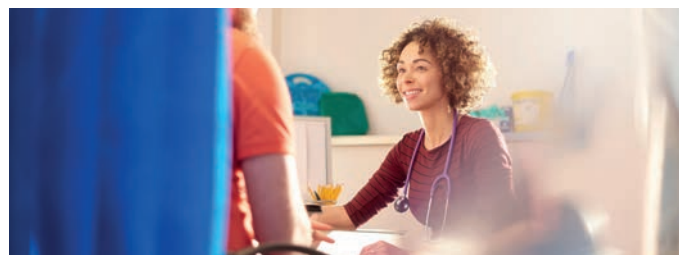
Signed \_\_\_\_\_ Date \_\_\_\_\_

# NICE sets out a shake-up in Type 2 diabetes care

**Press Release: National Institute for Health and Care Excellence (NICE) August 2025**

Millions of people are set to benefit from earlier access to newer Type 2 diabetes treatments as part of NICE's commitment to the 10-Year Health Plan for the NHS. The draft guidelines from NICE moves away from a 'one-size-fits-all' approach, shifting from automatically starting everyone on one medicine to personalised treatment plans that aim to prevent heart failure, heart attacks and other serious medical problems.

NICE's guidelines have expanded access to the newer diabetes medicines called SGLT-2 inhibitors (names like canagliflozin, dapagliflozin, empagliflozin and ertugliflozin) from being second-choice treatments to first-choice treatments. The same groups of patients also stand to benefit from the much talked about type of medicine called GLP-1 receptor agonists (such as liraglutide or semaglutide), instead of keeping them for later stages of treatment.



## **New evidence**

- For patients who cannot tolerate metformin, previously the traditional first line diabetes medicine, the new guidelines recommend starting with an SGLT-2 inhibitor on its own. This is because growing evidence shows they protect the heart and kidneys, as well as controlling blood sugar.
- New evidence also suggests that nearly 22,000 lives could be saved once uptake of the recommended changes for SGLT-2 inhibitors as a joint first-line treatment option with metformin reaches 90% of the patient population.

**People with Type 2 diabetes should speak with their GP or diabetes team at their next annual review meeting to discuss what treatment option is right for them.**

The guidelines also address concerns about the under-prescribing of SGLT-2 inhibitors, with evidence showing these medicines are not being offered equitably across the UK. NICE analysed records of almost 590,000 people and found that SGLT-2 inhibitors are under-prescribed, particularly to women, older people and black people.

## **Northampton in the news!**

### **Near to home - first raid on UK illegal weight loss drug factory!**

In October 2025, the first illicit production facility for weight loss medicine found in the UK was dismantled.

The discovery in Northampton led to the largest single seizure of trafficked weight loss drugs ever recorded by a law enforcement agency worldwide being reported to the Medicines and Healthcare Products Regulatory Agency (MHRA).

It said it seized tens of thousands of empty weight loss pens ready to be filled, raw chemical ingredients and more than 2,000 unlicensed Retatrutide and Tirzepatide pens due to be sent to customers. The haul was estimated to be worth more than £250,000.

The MHRA warned that people should be "extremely cautious" when buying medicines online and only get them from a registered pharmacy.

# More on weight-loss drugs

## **Type 2 diabetes – intentional weight loss linked to fewer complications**

In adults with obesity and Type 2 diabetes, a reduction in BMI during intentional weight loss was associated with a reduced risk for retinopathy, neuropathy, chronic kidney disease and peripheral artery disease, regardless of changes in HbA1c levels.

This study analysed real-world data to evaluate whether intentional weight loss reduced the risk for microvascular and macrovascular complications in 100,507 people with obesity and Type 2 diabetes with average ages of 53.3 years and BMI of 35.8. The weight loss period was over 4 years.

### **Results**

After this 4-year period:

- The average relative reduction in BMI was 2.2% from the beginning and the average absolute change in HbA1c levels was 0.0% from the beginning.
- Each 1% decrease in BMI was associated with a lower risk for retinopathy, neuropathy, chronic kidney disease and peripheral arterial disease with no significant association observed for MI or stroke.
- Every percentage point decrease in HbA1c levels was linked to significant risk reductions across all these primary outcomes, including MI and stroke.
- Reductions in both BMI and HbA1c levels were associated with a lower risk for microvascular and macrovascular complications.

The researchers concluded that this study highlights the potential benefit of a combined approach to actively reduce both BMI and HbA1c in people with Type 2

diabetes to reduce the risk of complications and the burden on healthcare systems.

*(Diabetes, Obesity and Metabolism, December 2025)*

### **Just a reminder of the NICE guidance:**

Under NICE guidance, semaglutide can be prescribed for weight management in patients along with a reduced-calorie diet and increased physical activity in adults for a maximum of 2 years and within a specialist weight management service. The patient must have at least one weight-related comorbidity and a BMI of at least 35.0, or if their BMI is over 30.0, they must meet the criteria for referral to specialist overweight and obesity management services. NICE guidance for tirzepatide has some slight variations from that for semaglutide.

It is important to remember that Integrated Care Boards impose their own limits on prescribing and NICE guidance is not mandatory, it just provides clinical standards. NHS England controls the rollout budget, creating tension between guidance and capacity.

### **Weight-loss drugs (GLP-1s) may affect libido**

GLP-1s have been associated with shifts in sexual desire in some patients, so it is important that we understand the effects of these drugs on the brain and hormones.

### **An overlooked adverse effect**

The gastrointestinal adverse effects of GLP-1s are well known but their effect on patients' libidos may go unnoticed. Some patients report a noticeable change in sexual desire which may be tied to how these drugs affect their brain chemistry.

GLP-1s mainly act in the gut but also affect the reward pathways in the brain. Research

suggests that dampening dopamine signalling and enhancing serotonin, may reduce cravings for sex as well as food.

**Influence on hormones** - GLP-1s shift hormone levels that can affect libido as a result of which, men with low testosterone levels or women who are menopausal may experience a reduced sex drive. While some people may lose interest in sex, others may have the opposite experience as weight loss can boost mood, self-esteem and hormonal balance, which in turn could improve sexual desire.

**The way forward** – to address libido changes, patients and their clinicians should discuss treatment strategies, which may include adjusting the dose, managing fatigue or nausea and optimising hormone levels. In most cases, libido-related adverse effects are reversible once the drug is stopped.



While GLP-1s can affect patients' libido through their effects on the brain and hormones, the impact varies, and the advice is that doctors should explain to patients the reason for such changes and adjust medication if needed.

*(October 2025)*

**Note:** IDDT has a booklet entitled 'Sexual Dysfunction in Men and Women' and if you would like a free copy, call IDDT on 01604 622837 or email [enquiries@iddtinternational.org](mailto:enquiries@iddtinternational.org).

## GPs suggest specialist clinics for weight-loss drugs

Specialist primary care clinics for prescribing and managing weight-loss drugs received widespread support in a debate at the Royal College of General Practitioners Annual Conference 2025 on the role of GPs in prescribing such treatments. Below are some of the points made:

- Any prescribing should come with dedicated funding, resources and multidisciplinary input and this included nutritional and psychological support.
- There was both enthusiasm and unease about the expanding use of weight loss drugs such as semaglutide (Wegovy) and tirzepatide (Mounjaro).
- Pharmacies are basically just selling it, doing a basic health questionnaire. Nearly every GP acknowledged receiving daily alerts that their patients had started weight loss drugs privately. Recent data shows that only 188,000 patients currently access Mounjaro through the NHS but about half a million obtain it privately.
- The side effects are real - gastrointestinal upset, pancreatitis and gallbladder disease and it is contraindicated with certain types of thyroid cancer. There are more subtle concerns, including hair loss, muscle loss and bone density decline, especially for older users.
- In the fight against obesity and Type 2 diabetes, Mounjaro offers real hope. However, letting people buy powerful medications without guidance is like handing over a surgical tool to anyone who asks for it. It doesn't make treatment easier; it makes it dangerous.

# Foody bits and pieces

## Eating eggs

Most of us have a box of eggs in the refrigerator almost all of the time. Eggs are a breakfast staple but they are also used in many lunch and dinner meals and of course are an essential ingredient of many baking items. So we probably eat eggs everyday in one form or another. Over the years, eggs have had a mixed press so we should look at the pros and cons of eating eggs.

### Egg nutrition

Eggs are sometimes referred to as a 'nutritional powerhouse' and this is because they provide protein and fat. They are also a good source of micronutrients such as choline, selenium, calcium, iron, zinc, vitamin D, vitamin B12, folate, biotin, vitamin B6, omega-3 and omega-6 fatty acids.

These nutrients have a positive impact on health in various ways:

- The high-quality protein in eggs supports muscle maintenance and keeps you full.
- Choline supports brain health.
- Vitamin D encourages immunity and bone health.
- Antioxidants such as lutein and zeaxanthin protect eye health, memory and nerve signalling.
- The other nutrients in eggs also combine to support heart, metabolic, immune, brain, bone and cell health.



The criticism of eggs that there has been is due to their five grams of fat per large egg, with 1.5 grams of saturated fat. They are also higher in dietary cholesterol with 200 milligrams per egg. However, research shows that for most people, saturated fat, not cholesterol, is a stronger driver of raised LDL (bad) cholesterol and eggs contain only modest amounts of saturated fat.

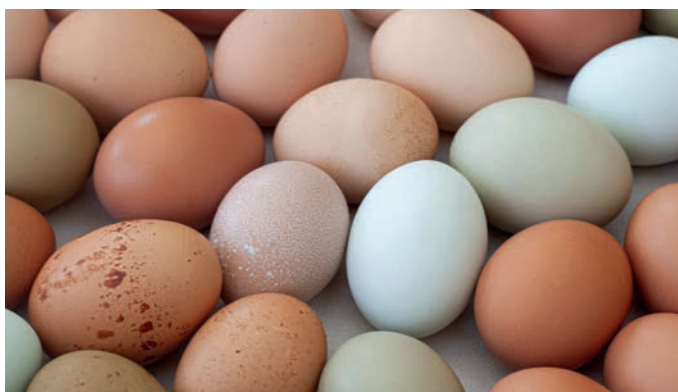
The American Heart Association (AHA) now recognises that the dietary cholesterol in the foods we eat is different from blood cholesterol and one may not affect the other. In addition, it may not be as detrimental as we first thought but the AHA still recommends keeping cholesterol intake as low as possible. Cholesterol is actually needed to make hormones and help in digestion.

Like many other foods, moderation is key to how many eggs we should eat.

## Ultraprocessed foods – are they responsible for the risk of Type 2 diabetes?

A large study has taken place on the intake of ultraprocessed foods (UPFs), weight gain and risk of Type 2 diabetes in a high-risk group of women with previous gestational diabetes. The researchers included more than 4000 women with a history of gestational diabetes and there were more than 1000 incident cases of Type 2 diabetes during long-term follow up.

UPFs are known to be associated with higher caloric intake, added sugar, saturated fats, sodium, other additives and low dietary



fibre but the relationship between UPFs and Type 2 diabetes has not been rigorously investigated. This study found:

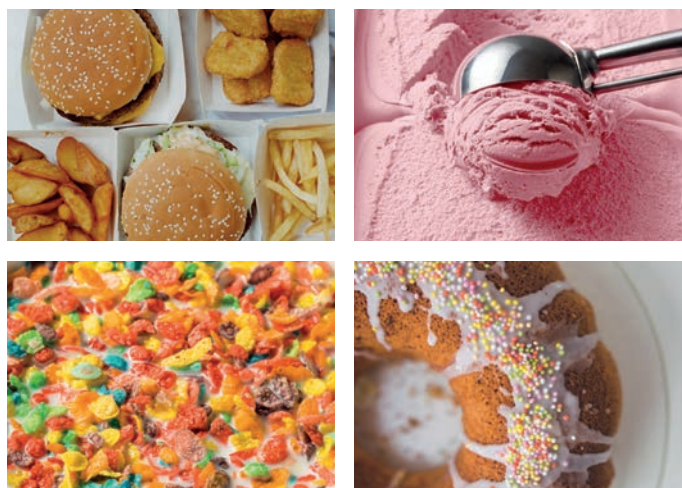
- A strong link between higher regular UPF intake and both weight gain and increased risk of developing Type 2 diabetes compared to low UPF intake.
- Women with low UPF intake had only about 1 lb of weight gain every 4 years, while women with higher UPF intake had steady weight gain during midlife of about three to four times that size.
- Among the women with higher UPF intake, the risk of Type 2 diabetes was increased by 20%-25% which suggests UPFs may be responsible for millions of the cases of diabetes.

Therefore, the study suggests that higher regular intake of UPFs is contributing to both weight gain and Type 2 diabetes risk, especially in high risk groups. Additionally, more work is needed to change the US food supply to reduce the population's exposure to UPFs.

*(Diabetes Care, November 2025)*

### **What are ultra-processed foods?**

In order to counter the effects of ultra-processed foods (UPFs) we need to understand what they are. The definition is that they are ready-to-eat items heavily modified with additives, sweeteners and oils, including soft drinks, packaged snacks (chips, cakes, biscuits), breakfast cereals, processed meats (hot dogs, nuggets, sausages), most



mass-produced breads, ice cream and instant meals, all designed to be convenient but often high in sugar, fat and salt. They differ from less processed food such as fresh fruit, fresh or frozen vegetables, pasta, plain yogurt or homemade meals.

### **Vitamin C – an antioxidant**

We frequently hear about Vitamin D but not so often about Vitamin C so here is some information that helps us know more about it and the roles it plays in keeping our body healthy. The body cannot produce Vitamin C but it is essential for optimal health. Vitamin C is also known as ascorbic acid and is a water-soluble essential nutrient that plays crucial roles in various bodily functions. Here are some of the key benefits of Vitamin C:

- It supports the production of white blood cells, which are crucial for fighting infections.
- It is a powerful antioxidant that protects cells from oxidative damage caused by free radicals.
- It can reduce the risk of chronic diseases such as cancer, heart disease and aging.
- It can increase blood antioxidant levels by up to 30% which helps the body to fight inflammation.
- It is essential for collagen production, which keeps the skin firm and elastic.
- It also helps protect the skin from sun damage and promotes wound healing.

### **Who has Vitamin C deficiency?**

- In the UK it is estimated that 1 in every 20 people has vitamin C deficiency, whereas in countries like India, over a third of the population have this deficiency.
- Men and young middle-aged adults are more likely to be Vitamin C deficient

### **Risk factors for vitamin C deficiency**

- Poor diet, alcoholism, anorexia, severe mental illness, smoking and dialysis.
- Smoking and a low intake of fruits and vegetables increase the risk of deficiency.

## Symptoms of vitamin C deficiency

Symptoms of severe Vitamin C deficiency can take months to develop. In severe cases, deficiency can lead to scurvy which is fatal if not treated. Eating 5 to 9 servings of fruits and vegetables a day can help to reduce the risk of having a deficiency.

### Symptoms include but are not limited to:

- Fatigue
- Headaches
- Anxiety and depression
- Imbalance
- Easy bruising
- Dry and/or bumpy skin
- Corkscrew-shaped body hair
- Bright red hair follicles
- Splitting hair
- Spoon-shaped fingernails with red spots or lines
- Red or purple spots on skin
- Swelling and discolouration of the gums
- Painful, swollen joints
- Poor wound healing, poor moods, poor immunity
- Loose teeth
- Sudden and unexpected bleeding

## Sources of Vitamin C

Some people take supplements to meet the daily requirements for vitamin C but getting your intake from food sources is recommended.

- Fruit is a rich source of vitamin C and is abundant in citrus fruits (oranges, grapefruits, lemons, limes), berries (strawberries, raspberries, blueberries), kiwi, papaya, and mango
- Vegetables such as bell peppers (red, yellow, green), broccoli, Brussels sprouts, cabbage, cauliflower, potatoes (sweet and white) and tomatoes are also good sources of vitamin C.
- Other sources include tomato juice, orange juice, spinach, kale, and mustard greens. Some nuts and seeds also contain traces of vitamin C although it is in smaller amounts.

### Important note

The recommended daily intake of vitamin C can vary by person so that it is always best to consult with a healthcare professional for personalised advice. However, general recommendations are that most adult females intake 75 mg a day and most adult males intake 90 mg a day.

It is important to note that Vitamin C must be consumed in moderation. Excessive intake can lead to gastrointestinal issues such as diarrhoea and nausea.



# Be warned - AI chatbots fall short in health advice

As healthcare costs rise and waiting lists grow, many people turn to AI chatbots, like ChatGPT, for medical advice. However, a new Oxford-led study suggests chatbots may not improve and could even hinder health decision-making.

People using AI models such as GPT-4o, Cohere's Command R+ and Meta's Llama 3 often missed key health conditions or underestimated their severity. The study showed:

- Users struggled to provide complete information to chatbots and sometimes received confusing, mixed-quality responses.
- AI chatbots performed no better than traditional methods like online searches or personal judgment.

Experts caution that current chatbot evaluations fail to reflect the real-world complexity of human-AI interaction.

While tech giants like Apple, Amazon and Microsoft push AI-driven health tools, professionals remain wary of applying such technology to serious medical decisions and the American Medical Association advises against using chatbots for clinical decision-making.



## Making your will for free

Each year we write to you about the importance of making a Will to protect the future of your loved ones. We also explained about how important it is to consider leaving a gift to charity and how reliant IDDT is on the generosity of people who have remembered us when drafting their Will.

With this in mind, IDDT has joined with The Goodwill Partnership to offer members the opportunity to draft a new Will at no cost.

The Goodwill Partnership is a well-established organisation that currently works with over 150 charities to assist their supporters to make their Will at no or reduced cost. All Wills are drafted by fully qualified solicitors.

the  
**Goodwill**  
Partnership

In recognition of the value IDDT places on the support it receives from its members, we are not making this offer open to the general public, unlike other charity schemes

you may have seen advertised on television.

If you are considering making, or updating, your Will, we do hope you will take us up on this offer and possibly give us favourable consideration when you do so.

If you would like to discuss making your Will for Free, then please call The Goodwill Partnership on 01492 437005 or visit [www.thegoodwillpartnership.co.uk/iddt/](http://www.thegoodwillpartnership.co.uk/iddt/) to arrange an appointment. If you have any questions, you can call IDDT on 01604 622837.

# Keeping active, staying safe: a guide to exercise and footcare for people living with diabetes

Staying active is one of the most powerful things you can do to support your health when living with diabetes. Regular exercise helps improve blood glucose control, supports heart health, boosts mood and energy levels and reduces the risk of long-term complications. But while movement is essential, it's equally important to look after your feet - particularly as diabetes can increase the risk of foot problems.

With the right approach, you can enjoy the benefits of exercise while keeping your feet healthy and protected. Here's what you need to know.

## Why your feet need extra care

Diabetes can affect the feet in two key ways: Reduced sensation (peripheral neuropathy) - damage to nerves can make it harder to feel pain, heat, rubbing or small injuries. This means blisters or cuts may go unnoticed.

Reduced circulation - poor blood flow can slow healing, making even minor injuries more likely to develop into more serious problems.

Because of these factors, a proactive approach to footcare is essential-especially if you're increasing your activity levels.



## Choosing the right exercise

The best exercise is the one you enjoy and can maintain, but some activities place more pressure on the feet than others. Here are some considerations:

Low-impact - ideal if you have neuropathy, balance issues or a history of foot problems.

- Walking (with supportive footwear)
- Cycling
- Swimming
- Chair-based exercises
- Pilates or yoga

## Higher-impact activities

Running, court sports, gym classes and hiking can all be enjoyed safely - provided your footwear is suitable and your feet are checked regularly. If you already have active foot problems, speak to a podiatrist before starting higher-impact exercise.

## Footwear matters more than you think

Good footwear is one of the most important tools in preventing complications.

### What to look for:

- A secure fit - not too tight, not too loose
- A deep, roomy toe box to stop rubbing and pressure
- Cushioning and shock absorption for comfort
- Laces or straps for stability
- Breathable material to reduce moisture
- A supportive heel counter for improved alignment

If you're unsure whether your shoes are right for you, consider bringing them to your next podiatry appointment. A professional can check the fit, wear pattern and suitability.

### Daily foot checks: A non-negotiable habit

When you're exercising regularly, daily foot checks are essential. Look for:

- Redness or pressure marks
- Blisters or callus
- Cracks or dry skin
- Cuts, sores or areas of warmth
- Changes in nail colour or shape

If you struggle to see the soles of your feet, use a mirror or ask a family member for help.

**Seek medical advice immediately if you notice:**

- An open wound
- A blister that is not healing
- Swelling, increasing redness, or heat
- Sudden changes in sensation
- Any injury that doesn't improve within 24 hours

Prompt attention prevents small issues becoming serious complications.

### Socks and insoles: small details, big difference

Choose soft, seam-free socks that wick moisture away from the skin. Change them daily and avoid tight elastic tops that restrict circulation.

If you experience pain, pressure points or recurring callus, podiatrists may recommend custom insoles. These help redistribute pressure and support your foot mechanics - particularly helpful for walking or running.

### After exercise: caring for your feet

A few simple habits can keep your feet healthy post-exercise:

- Wash and gently dry your feet, especially between the toes
- Apply a moisturising cream to prevent dry skin (avoid between toes)
- Check your feet again for any signs of irritation
- Air out footwear and change socks

### When to see a podiatrist

Even if your feet feel fine, having regular podiatry check-ups is vital. A podiatrist can assess:

- Sensation and circulation
- Joint mobility
- Pressure distribution
- Footwear
- Overall risk level

If issues are identified early, you can often prevent more serious problems.

Exercise and excellent footcare go hand in hand for people living with diabetes. With the right footwear, regular checks and professional support where needed, you can stay active confidently and safely.

Your feet are your foundation-look after them, and they'll support you to stay strong, healthy and active for years to come.

***Thank you to Randell's Footcare in Norwich for this very helpful article.***



# Ways to sleep better when you have Type 2 diabetes

We all need good sleep and it is particularly important when you have Type 2 diabetes because sleep is as essential for your health as nutrition and exercise.

- Too little sleep puts stress on the body which causes the release of the hormone, cortisol and this increases insulin resistance and increases blood sugar levels.
- Too much sleep may also cause health issues for people with Type 2 diabetes as a study has shown that sleeping less or more than seven hours a night was associated with a raised risk of dying early, compared with sleeping seven hours.

## Strategies to help you get optimal rest when managing Type 2 diabetes

**Check for sleep apnoea** – this is a sleep disorder that's common among people with Type 2 diabetes. In fact, people with Type 2 diabetes have a higher risk of sleep apnoea and vice versa.

People with sleep apnoea experience the repeated collapse of their upper airway, causing them to stop breathing temporarily during sleep which impacts on the body's oxygen supply and sleep quality. The symptoms include loud snoring, excessive sleepiness during the day, irritability and morning headaches.

**Prioritise blood sugar management** – if blood sugars are too high or too low, it can wake you up during the night, so keeping blood sugars within your target range is one of the best ways to give you a good night's sleep.

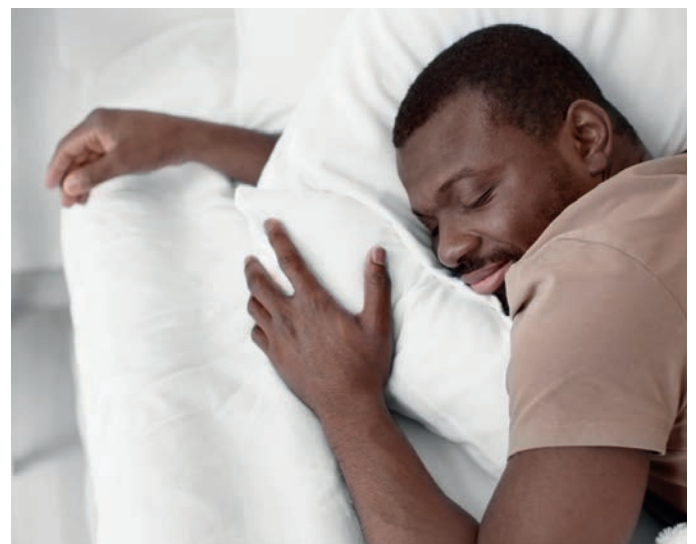
**Practice good sleep hygiene** – most adults need at least seven to nine hours of

sleep a night, but many people don't allow themselves adequate time for sleep, but if you have Type 2 diabetes, it's important to do so.

It's also important not to overdo it with naps. Limit your midday rest to no more than 30 minutes in the early afternoon. Napping any later is likely to throw off your ability to get to sleep that night.

**Keep a regular bedtime** – have a regular routine for the time you go to bed and the time you wake up, both on weekdays and weekends. When your sleep schedule is consistent, it helps your body's internal clock (circadian rhythm) work best. This stable bedtime and wake time is associated with better sleep quality and shorter sleep onset. It is also important for overall health, supporting the optimal functioning of your heart, lungs, metabolism, immune system and more.

**Turn off electronic devices** – bright light from televisions, smartphones and tablets not only disrupts sleep but can also alter your metabolism and affect your weight. Blue light exposure in the evening is linked to an increase in insulin resistance, which



is the body's decreased ability to move glucose from the bloodstream to cells to be used for energy.

To reduce these effects, experts recommend turning off blue light sources well before bedtime, the ideal being to avoid these devices for two to three hours before bed. Keep your bedroom dark throughout the night too, using dim red night lights if necessary to protect the quality of sleep.

**Don't drink alcohol before bed** – alcohol impairs the release of glucose into the bloodstream which can lead to drops in blood sugars once you are already asleep (night hypoglycaemia). If you drink alcohol, do so in moderation and only with food. To reduce your risk of sleep disturbances as a result of alcohol consumption, stop drinking at least three to four hours before bedtime.

**Exercise during the day** – you may sleep better at night if you get some physical activity during the day, just 10 minutes of aerobic exercise can make a difference. Exercise increases both your internal body temperature and endorphin levels temporarily, and as they return to normal,

this shift can trigger a feeling of drowsiness that may help you drift off to sleep more quickly.

**Find ways to de-stress** – everyone has some stress but people with Type 2 diabetes are often under more pressure because they are managing a chronic condition as well as 'normal' life.

Stress causes the nervous system to release hormones cortisol and adrenaline, which regulate the fight-or-flight response in stressful or dangerous situations. Chronic stress aggravates the nervous system and this doesn't go away, and the body's sustained increases in adrenaline and cortisol can lead to tossing and turning and feelings of restlessness at night. For this reason, it's important to find ways to de-stress before you go to bed, such as deep breathing, visualisation and meditation, which can improve sleep quality and reduce insomnia.

**Note:** IDDT has a free booklet 'The Importance of Sleep' and if you would like a copy, just call IDDT on 01604 622837 or email [enquiries@iddtinternational.org](mailto:enquiries@iddtinternational.org).

## IDDT donated supplies get to Ukraine

Again, we have to thank everyone who has sent unwanted diabetes supplies to IDDT to help people with diabetes in Ukraine.

Our latest collection was made just before Christmas and the picture shows them being delivered to a hospital for distribution to people in need. We also have to thank our knitters for all the hats, scarves and toys they have made – these have been given to children in orphanages.

**A huge thank you for the supplies you are sending!**



# Soft drinks tax to be extended

A press release from the Department of Health and Social Care in November 2025 made the following announcements to help children have a healthier start in life and to make it easier for families to buy less sugary products:

- The soft drinks levy will be extended to cover more products, including sugary milk-based drinks.
- Changes could cut 17 million calories a day from the nation's daily intake, helping to prevent cancer, heart disease, and stroke and take pressure off the NHS.
- Companies have until January 2028 to remove sugar or face the new charge which will add £1 billion in health and economic benefits.

The changes will apply the charge to pre-packaged milk-based and milk-alternative drinks with added sugar like supermarket milkshakes, flavoured milks, sweetened yoghurt drinks, chocolate milk drinks and ready-to-drink coffees.

Many of these products can contain as much

added sugar as fizzy drinks, where much of that sugar is added to the milk. Plain, unsweetened milk and milk-alternative drinks are not and will not be included.

The intention is that this will reduce obesity rates and dental decay in children as the UK is now having the third highest rate of adult obesity in Europe and costing the NHS £11.4 billion a year, three times the NHS budget for ambulance services.

The threshold is being lowered from 5g to 4.5g of sugar per 100ml. This means more high-sugar drinks will fall under the levy unless manufacturers reduce sugar, with businesses given until 1<sup>st</sup> January 2028 to reduce sugar in their drinks.

The existing sugar tax has led manufacturers and importers to act by halving sugar content in popular drinks to avoid the tax. The government expects companies to do the same with the extension.

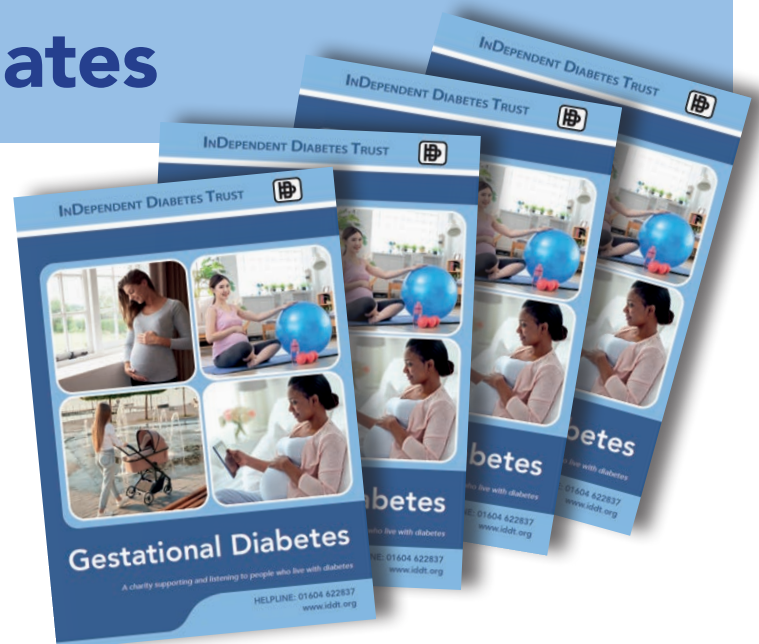


## IDDT booklets updates

We have recently updated the following booklets:

- Looking After Your Feet
- Gestational Diabetes
- Diabetes and Pregnancy
- Holiday Tips

For copies of any of these updated booklets call IDDT on 01604 622837, email: [enquiries@iddtinternational.org](mailto:enquiries@iddtinternational.org) or write to IDDT, PO Box 294, Northampton, NN1 4XS.



# IDDT Get Together October 2025

## “It’s Never Too Late to Learn”

Summary of the day, written by Anne Aubin

Members, staff and speakers arrived at the Kettering Park Hotel and Spa on a glorious and colourful autumn morning. After informal chats over coffee, we started with the Trust’s annual general meeting.



### AGM

Jenny Hirst, co-chair, welcomed everyone and reminded us that we have been getting together since 1994 when the Trust was formed to fight for continuing availability of animal insulin – which we still have, thanks to lobbying. The Trust’s focus remains supporting anyone living with diabetes and one way in which it does this is by annually sending out 135,000 printed leaflets to healthcare professionals to pass to their patients. However, this is very costly to the charity so needs to be kept under review. The Trust also continues to collect donated diabetes supplies and knitted treats to send to Ukraine.

The meeting went through the formal AGM business with approval of the annual accounts which showed an overall decreased income but next year’s accounts will show

the eventual receipt, after 20 years, of a sizeable legacy. Fundraising has doubled and costs were lower last year as the massive advertising campaign was wound down. The existing Trustees and new Trustees, Karen Merrey and Mabel Blades, were voted in.

The floor congratulated the Trust on achieving so much with so few dedicated staff, and Jenny affirmed that the key is good teamwork and staff being happy to be adaptable and take on new challenges.

### During the day

There were discussion groups where a variety of topics relating to living with diabetes were discussed.

### The following healthcare professionals made presentations:

- 50 Shades of Diabetes – Tamsin Fletcher-Salt, Diabetes and Endocrinology Nurse Clinical Lead
- Diabetes and Eyes – Dr Rebecca Thomas
- The importance of diabetes foot screening and assessment – Gemma Andrews
- The GP Perspective on Treating Diabetes – Professor/Dr Sam Seidu

If you would like to receive the full write-up of the day and the talks, please contact IDDT by calling 01604 622837 or email [enquiries@iddtinternational.org](mailto:enquiries@iddtinternational.org).

### A date for your diary – IDDT’s Get together for 2026

It may seem a long way off but our Get Together for this year will be on Saturday, October 3<sup>rd</sup> at the same venue, The Kettering Park Hotel and Spa. Keep the date free if you would like to join us!

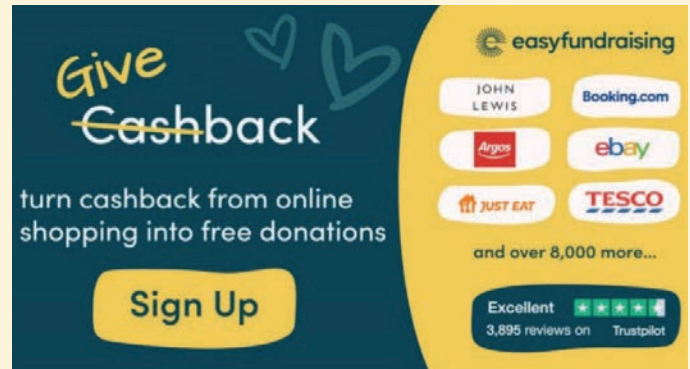
## An easy way to raise funds for IDDT – hence the name 'easyfundraising'

Sign up to easyfundraising and when you shop online with your favourite retailers, they'll donate to us.

It's free and your shopping won't cost you any extra - the retailers you shop with will donate, not you!

Create an account at:

<https://tinyurl.com/4bj46uxa>



## IDDT Lottery Results

### WINNERS OF THE OCTOBER 2025 DRAW:

- 1st Prize of £453.60 goes to Sharon from Rochester
- 2nd Prize of £340.20 goes to Anon from Stratford-upon-Avon
- 3rd Prize of £226.80 goes to Rosemary from Newtownabbey
- 4th Prize of £113.40 goes to Mark from Leeds

### WINNERS OF THE NOVEMBER 2025 DRAW:

- 1st Prize of £448.32 goes to Patrick from Durham
- 2nd Prize of £336.24 goes to Anon from Colchester
- 3rd Prize of £224.16 goes to Suzie from Peterborough
- 4th Prize of £112.08 goes to Pauline from Doncaster

### WINNERS OF THE DECEMBER 2025 DRAW:

- 1st Prize of £446.88 goes to Anon from Newcastle upon Tyne
- 2nd Prize of £335.16 goes to Robert from Southgate
- 3rd Prize of £223.44 goes to Anon from Darlington
- 4th Prize of £111.72 goes to Michael from Bradford-upon-Avon



Note: The winners of the draws for January, February and March 2026 will be announced in our Summer 2026 Newsletter and on our website.

A huge 'Thank You' to everyone who supports IDDT through the lottery.

If you would like to join in for just £2.00 per month, then give us a call on 01604 622837 or email [karl@iddtinternational.org](mailto:karl@iddtinternational.org)