

### Dr. Michelle Reiss GP and Lifestyle Medicine Physician

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- General Practitioner South Africa (1997)
- Canadian College of Family Physicians (2003)
- Fellow of the Royal Australian College of General Practitioners (2008)
- International Certification in Lifestyle Medicine IBLM (2017)
- Fellow of the Australasian Society of Lifestyle Medicine FASLM (2018)
- Director:
  - Life Medical Centre (hybrid General Practice and Lifestyle Medicine "specialist" practice)- 2021
  - "I Can Change Me" Program 2018
  - Lifestyle Medicine Centre 2019



#### What is T2DM REMISSION?

#### Type 2 diabetes remission is defined as<sup>1</sup>:

- HbA1c of less than 6.5%
- Sustained for at least three months
- After stopping glucose-lowering medication

#### Important to note:

- Remission may not be a permanent
- Still requires ongoing diabetes management and regular diabetes healthcare checks



#### **T2DM REMISSION OR REVERSAL?**

Remission, reversal or cure? – a note on language

The accepted thought per Diabetes Australia, etc. is that we should not use the word "reversal"

"Remission in type 2 diabetes is not a cure and there is not necessarily permanent reversal of the underlying cause or pathology. Remission simply means that the person has a HbA1c less than 6.5%"

Personally, I don't agree..... Will explain why.

What do you think after this talk?



#### **Improved HbA1C**

Better daily glucose readings

Reduce or come off medications

What could a patient achieve?

**Save doctor visits** 

No longer have Diabetes - REMISSION

Reduce the complications: blindness, kidney failure, heart attacks, stroke, toe amputations

Save money



Have more energy





Lean M, Leslie W, Barnes A, et al. Primary care-led weight management for remission of type 2 diabetes (DiRECT): an open-label, cluster-randomised trial. The Lancet, 2018; 391(10120): 541-551.

Taheri S, Zaghloul H, Chagoury O, et al. Effect of intensive lifestyle intervention on bodyweight and glycaemia in early type 2 diabetes (DIADEM-I): an open-label, parallel-group, randomised controlled trial. Lancet Diabetes Endocrinol 2020; 8: 477-489.
Hallberg S, McKenzie A, Williams P, et al. Effectiveness and safety of a novel care model for the management of type 2 diabetes at 1 year: an open-label, nonrandomized, controlled study. Diabetes Therapy, 2018 9(2): 583-612.

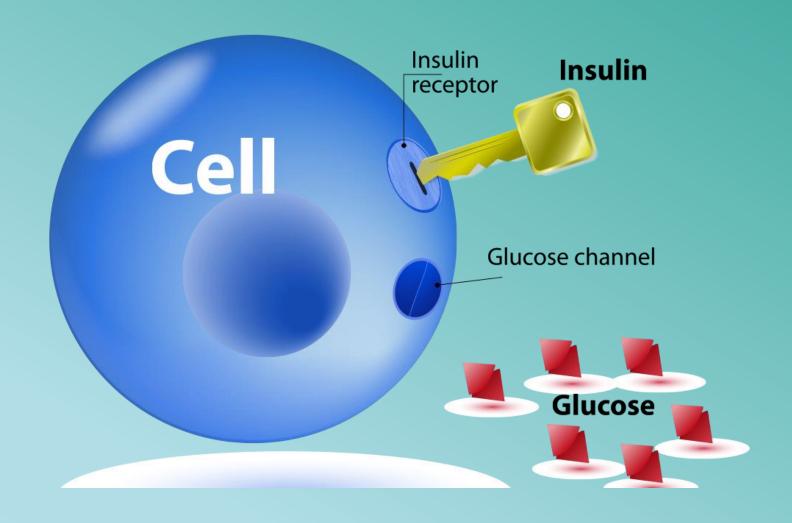
Athinarayanan SJ, Adams RN, Hallberg SJ, et al. Long-Term Effects of a Novel Continuous Remote Care Intervention Including Nutritional Ketosis for the Management of Type 2 Diabetes: A 2-Year Non-randomized Clinical Trial Front. Frontiers in

Endocrinology, 2019; 10: 348. doi: 10.3389/fendo/2019/00348.

Goldenberg J, Day A, Brinkworth G, et al. Efficacy and safety of low and very low carbohydrate diets for type 2 diabetes remission: systematic review and metaanalysis of published and unpublished randomized trial data. BMJ, 2021; 372 m4743 doi: 10.1136/bmj.m4743.

#### **INSULIN**

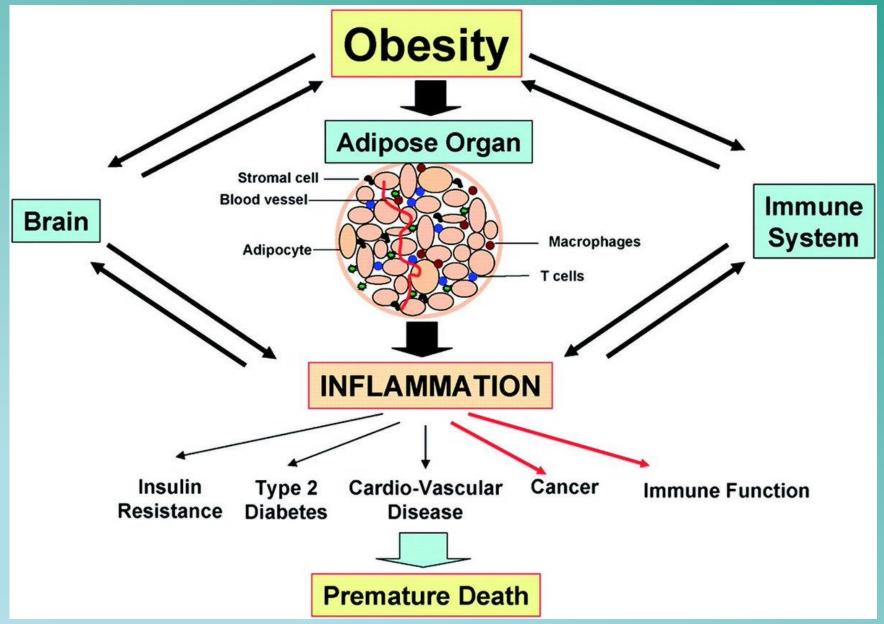
#### HOW DOES WORK?





#### **Insulin Resistance** Normal Insulin Insulin Resistance Metabolism Glucose Glucose Bloodstream To the transfer of the contract of the contrac Functioning insulin receptor site Malfunctioning insulin-receptor site Normal Low Intracellular Intracellular Glucose Glucose

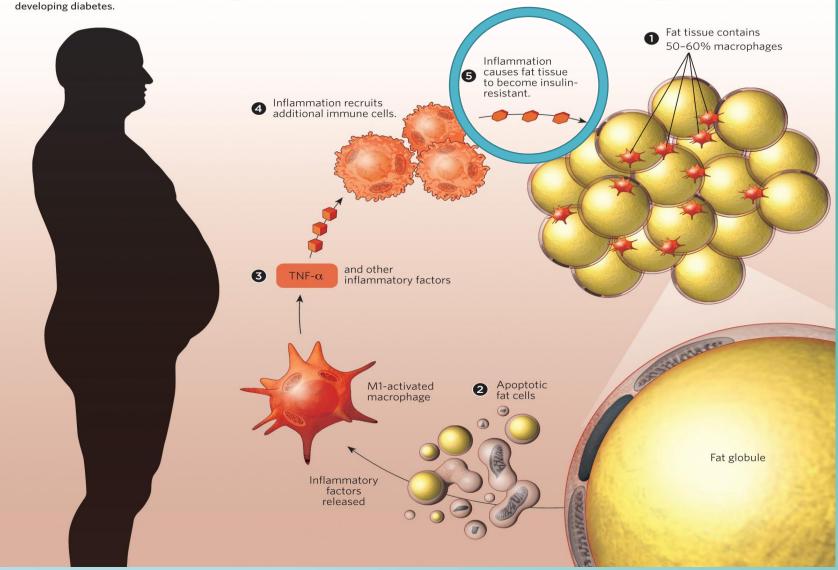






#### ADIPOSE TISSUE METABOLISM IN OBESE INDIVIDUALS

The adipose cells in obese individuals are both greater in number and size than in lean individuals, and the tissue contains a much higher percentage of macrophages 1. As a result of storing excessive amounts of fat, the stressed adipose cells release inflammation-inducing factors and undergo apoptosis 2. Both outcomes activate macrophages in a traditional M1 inflammatory state 3 in which they release tumor necrosis factor-α (TNF-α), which recruits and activates additional immune cells to the site 4. This low level sustained inflammation causes tissues to become resistant to insulin 5, the first step in

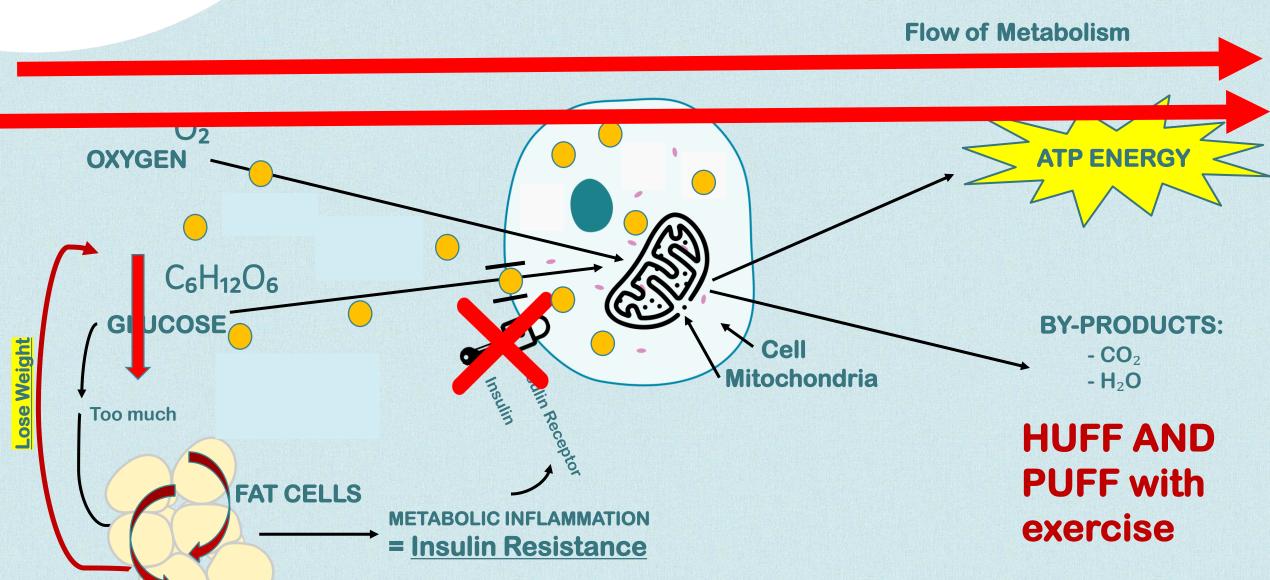




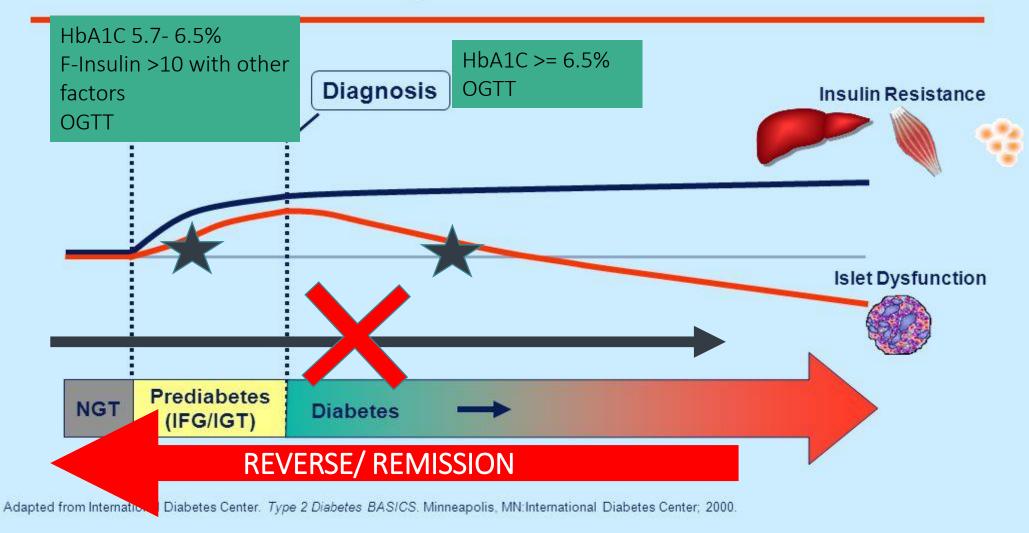


### **METABOLISM**

converting what you eat or have stored into energy



## Natural history of type 2 diabetes: progressive deterioration of Islet Cell Function in the Setting of Insulin Resistance



# Of the increase in Type II diabetes between 1950 - 2000,

100% percent was largely due to lifestyle choices.



#### Remission, reversal or cure? – a note on language

Type 2 diabetes remission is defined as:

- HbA1c of less than 6.5%
- Sustained for at least three months
- After stopping glucose-lowering medication

Personally, I don't agree.....

Why aim for only less than 6.5%? ..... They are still Insulin Resistant! But this is because most literature reflects studies done using bariatric surgery/ VLEDs and Keto.....most of these are non-sustainable, have the financial backing and are easily quantifiable.

Any "reversal" in HbA1c more than 1% has significant complication reductions, reduces medication and side effect burden, reduces co-morbity, lowers ED admissions and improves QOL..... so why not use both terms <u>and address both</u> reversal and remission

3 months is really clinically <u>in</u>significant ..... If patients make sustainable lifestyle habit and behaviour change, then significant remission is probable.



#### What does Lifestyle modification mean?

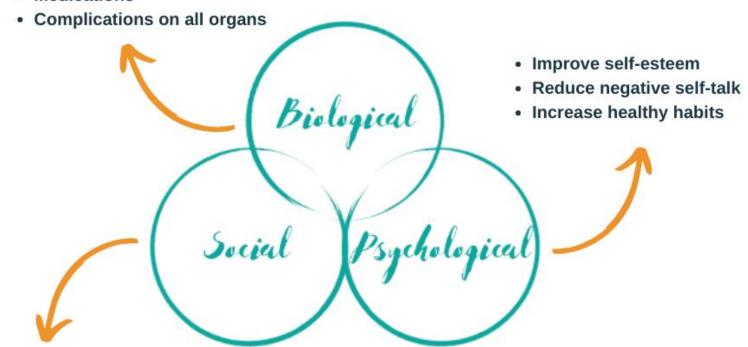
- Doesn't just "manage disease"
- Addresses the CAUSE
- Evidence-based approach to Lifestyle modification and behaviour change
- Lose weight through gut-health change, reduced energy-excess food intake, exercise to lift Basal Metabolic Rate
- Ultimately reduce *Metabolic Inflammation by addressing all lifestyle factors Bio-Psycho-Socially*
- Does no harm and has no Side Effects
- Probably: The best Medicine we have







- Improve sugar control
- · Reduce metabolic inflammation
- · Excess fat
- Medications



- Save money
- Add more energy & sense of vitality
- · Add quality of life





When we help **ourselves**, we find moments of **happiness**.

When we help **others**, we find lasting **fulfillment**. - simo

- Simon Sinek



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