

# TRANSCRIPT EP6

## Diabetes and Mental Health

[00:00:00] **Dr Darren Green:** Hello and welcome. I'm Dr Darren Green, your host of this mini-series of The Health Rap, powered by Mediclinic. Today we're looking at how to support people living with diabetes and the mental health side of this condition. There's so much to unpack here and I'm sure we're all going to learn a lot from our expert guest.

[00:00:21] **Dr Darren Green:** Just a reminder that the views shared by any of our guests in this podcast may not necessarily reflect So please consult a medical professional if you have any concerns and in particular if you want to change your medication in any way. Diabetes is a fascinating condition because you can't just take your medication and forget about it.

[00:00:44] **Dr Darren Green:** It lives with you every single day. You do have to take medication, of course, but you also have to be aware of what you eat all the time and check your blood glucose all the time and be aware of how weather and stress and hormones and even sleep and a whole list of other things affect your blood glucose.

[00:01:05] **Dr Darren Green:** All while balancing on a tight rope between that blood glucose going too low or too high. Can you imagine? It is exhausting. So when we talk about how to support people living with diabetes, we're talking about having the right medical team of experts of course. Your doctor, your endocrinologist, a diabetes nurse educator, a dietician, podiatrist for an annual foot check-up, an ophthalmologist for an annual eye check, as well as a psychologist.

[00:01:38] **Dr Darren Green:** If possible, it's the last thing that we're talking about today, the link between mental health and diabetes, which can be quite significant with mental health America reporting that people living with type one or type two diabetes are at an increased risk for depression, anxiety, and even eating disorders.

[00:01:59] **Dr Darren Green:** There's also diabetes burnout or diabetic distress. Which we discussed in our episode on type 1 diabetes. That's when the emotional burden of managing diabetes every day becomes too much. The CDC, the Centres for Disease Control and Prevention, describe diabetes burnout in this way. So far you've had diabetes, it hasn't had you.

[00:02:25] **Dr Darren Green:** You've been watching what you eat, making time for physical activity, taking meds, checking your blood sugar, checking your blood sugar again. But then, something takes the wind out of your sails. Maybe you've been trying hard but not seeing any results or you developed a health problem related to diabetes in spite of your best efforts.

[00:02:49] **Dr Darren Green:** You're in the land of diabetes burnout. Now a South African study showed that 44 percent of participants with type 2 diabetes had moderate to high levels of

diabetes-related emotional distress. Worldwide, the prevalence of diabetes burnout is 25 percent for type 1s and 20 percent for type 2s. This is a very, very common problem.

[00:03:16] **Dr Darren Green:** So what can we do about it? How can we support people with diabetes, particularly when it comes to our mental health? Let's hear from Kirsten de Klerk, who has been living with type 1 diabetes for 13 years and has an interesting perspective on diabetes and mental health.

[00:03:33] **Kirsten de Klerk:** My name is Kirsten de Klerk and I've been living with type 1 diabetes for 13 years.

[00:03:38] **Kirsten de Klerk:** My experience with diabetes and mental health is that the connection between these two topics is not communicated well enough by our healthcare system in South Africa. In my 13 years of living with this condition, I've never once been screened for diabetes distress or referred to a psychologist or a trauma counsellor, not even during my diagnosis.

[00:03:55] **Kirsten de Klerk:** I also wish that someone had explained diabetes burnout to me so that I could be aware of the symptoms when they happened. If you are living with diabetes and experience strong negative feelings about diabetes, feel controlled by diabetes, or feel alone and are avoiding some or all of your diabetes management activities and you feel unmotivated to change this behaviour, please speak to your doctor about getting help or reach out to someone in the diabetes community.

[00:04:18] **Dr Darren Green:** To further unpack this topic, we're joined by Type 1 Diabetic Psychologist, Daniel Sher, and Daniel practices diabetes-focused psychotherapy, using evidence-based approaches to help people living with diabetes to thrive. He works with children, adolescents, and adults who have diabetes, that's both Type 1 and Type 2, as well as with families when needed.

[00:04:48] **Dr Darren Green:** And Welcome, Daniel.

[00:04:50] **Daniel Sher:** Thank you, Dr Green. Really wonderful to be here.

[00:04:53] **Dr Darren Green:** Great to have someone with your skill set and set of expertise on this podcast. And so excited to hear from you. I want to know, however, how did you end up moving into this super-specialised field?

[00:05:06] **Daniel Sher:** Sure. So I was diagnosed with type 1 diabetes at 1.

[00:05:12] **Daniel Sher:** 5 years of age. So I was an 18 month. Old baby at the time that of course was a very much pre psychology pre many things But I was introduced to What is required in terms of diabetes management from a very young age? Which I think really orientated my thinking going forward Moving on then into going through school, going through varsity, I'm a brain science nerd.

[00:05:42] **Daniel Sher:** I love understanding. Yes, yes. Any of my patients that you speak to, they'll probably get quite irritated and explaining how I always whip out the brain at some point in their process. They've all come to accept it. It's inevitable. But, you know, those two passions, those two areas of interest, thriving with diabetes and understanding the science of the brain.

Those culminated quite nicely in becoming a clinical psychologist and specializing further. It also, of course, is convenient. I mean, it makes a lot of sense to go in that direction as I'm sure we'll touch on mental health needs and diabetes management needs often go hand in hand.

[00:06:29] **Daniel Sher:** And there's a huge demand that those needs often go unmet, especially in this country.

[00:06:36] **Dr Darren Green:** I know people look at diabetes as quite a physical disease. And how do we look at linking mental health and the mental health aspect with diabetes itself?

[00:06:48] **Daniel Sher:** Thinking about that link, and this is the sort of topic that we could fill an entire session with, so I'm going to try to be as concise as possible, but we need to think about three different factors.

[00:07:00] **Daniel Sher:** The biopsychosocial model tells us we need to consider firstly the psychological Aspects of diabetes that make it difficult. It's a tough condition to manage. You're always online, there are no holidays, there are many factors which one needs to balance. It's tough, but there's no ambivalence about that.

[00:07:20] **Daniel Sher:** But beyond that, there's a biological element. So, A person with diabetes is inevitably going to have varying blood sugar levels. That's the name of the game, that, that's what this condition is. Even your best-controlled diabetic is still going to have more variability than somebody who doesn't have diabetes.

[00:07:39] **Daniel Sher:** That variability in blood glucose concentration affects the brain. We're understanding more and more about the impact that that can have Biologically speaking, it makes a lot of sense. You know, the brain is fuelled primarily by glucose. It doesn't have its own fuel source. So, if there's not enough glucose in the blood, or if there's too much glucose in the blood, then brain regions are going to get affected.

[00:08:05] **Daniel Sher:** And what we've seen is that brain regions involved with mood and thinking are particularly vulnerable to those variations. So we've got then the biological side, the psychological side, the third important element is the social side. And this is where things like reduced access to health care, um, societal stigma, reduced social support, not being understood by other people, not having sufficient psychologists specialized in this area.

[00:08:33] **Daniel Sher:** Those are all the social variables. So these things then come together in that way and help us understand this intersection between mental health difficulties, and diabetes.

[00:08:47] **Dr Darren Green:** Sure. So many aspects to consider, you know, in terms of underplaying the social aspect as well and the relationships involved here.

[00:08:55] **Dr Darren Green:** So, I mean, let's start off by just looking at what advice you have for someone experiencing a period of what we referred to earlier on as being diabetes burnout or diabetes distress.

[00:09:08] **Daniel Sher:** Right. So diabetes distress, diabetes burnouts. I'm going to refer to them interchangeably. In the research world, there's a distinction, but basically we can look at those as being the same thing.

[00:09:20] **Daniel Sher:** Now, the first thing that I would recommend is to acknowledge that burnout is a part of having diabetes rather than some sort of a complication. I mean, that's relevant. When we look at the statistics, at any given time, you know, one in five type twos, one in four type ones will have elevated diabetes burnout.

[00:09:45] **Daniel Sher:** And that's incredibly common. When you look at them over the course of, say, ten years of living with diabetes, the chances of having been burnt out at some point increase exponentially. And as you get on with having diabetes, the chances of at some point being burnt out, they just continue to rise. And it's important for us to recognize that, because we need to acknowledge that Emotionally feeling a bit burnt out at the demands of this condition are very common.

[00:10:18] **Daniel Sher:** They're perfectly normal. They're not pathological in that they don't indicate a disease. And importantly, they are treatable. There are ways that we can move forward from that. So my first piece of advice would be to keep that in mind. You're not alone and you're not pathological or problematic.

[00:10:41] **Dr Darren Green:** Yes. So is the advice the same for a family member or a friend of someone that is living with diabetes?

[00:10:47] **Dr Darren Green:** And how can you help a loved one through a tough time with their diabetes?

[00:10:53] **Daniel Sher:** In many ways, yes, the advice is the same, in that we need to acknowledge that diabetes is tough, and therefore people who have it will be prone to struggling at times. As the loved one of somebody, we need to understand that it's normal, it's okay to struggle.

[00:11:11] **Daniel Sher:** Beyond then actually identifying, okay, this is where we're at, and this is an inevitable part of learning to thrive with diabetes. Of course, communication is key. We want to be communicating with a loved one. We want to, for example, be asking them, what is this like for you? What can I do differently? Is there anything that I can be doing to support you?

[00:11:36] **Daniel Sher:** What do you feel like you need? And these questions, they're open conversations. The purpose isn't to solve problems. It's simply to communicate that you care. That in and of itself is important. Is, I would argue, the most important thing that you can do to support a loved one with diabetes.

[00:11:54] **Dr Darren Green:** Sure. Wow. And sometimes, as you said, just validating and recognizing that they actually are going to experience difficult times, just makes it more human, the component of not having this perfect line of, you know, just non-challenging situations, which is not realistic, is it?

[00:12:13] **Daniel Sher:** Exactly. Hundred percent.

[00:12:13] **Dr Darren Green:** We have a lot more to talk about with Daniel, but before we dive back in, I wanted to share the Mediclinic 24/7 helpline with you. If you have a medical question that needs an answer or you need to make a doctor's appointment, you can call the Mediclinic 24 7 helpline on 0860 233 333. Now let's get back to Daniel for his best advice on supporting people living with diabetes.

[00:12:45] **Dr Darren Green:** You're in the unique position of both living with type 1 diabetes and working with people who have diabetes. So what are some of the best ways to support a person with diabetes, in your opinion?

[00:12:58] **Daniel Sher:** With diabetes, we hear about blood sugar day in and day out. Our medical consults are focused on blood glucose management, our blood tests look at how we've been faring with blood glucose concentration.

[00:13:14] **Daniel Sher:** So there's no shortage of conversation around that topic specifically. What we really need, though, is to hold that in mind alongside our psychological needs. We need to find a balance between looking after our blood glucose management, but ensuring that our psychological needs are being met. Ensuring that we're not forsaking emotional freedom for absolute rigid perfectionism.

[00:13:42] **Daniel Sher:** So my advice definitely would be to encourage all people with diabetes to think beyond purely blood glucose management, and to think about the emotional side of the condition as well.

[00:13:55] **Dr Darren Green:** Yeah, I think you've mentioned now about just considering the holistic approach, because the impact of it in terms of your life, in terms of the sense of responsibility that you constantly feel pressured to maintain, and the fact that you might not live up to your expectations all the time, could lead to quite a significant emotional response of falling short of the mark in terms of your own standards. I mean, that in itself can be quite a challenge, I'm sure.

[00:14:22] **Daniel Sher:** Yes. Yes, absolutely. And you know, when we look at the data, what we see is that the vast majority of people with diabetes are actually not meeting the goals that their medical team is setting them.

[00:14:37] **Daniel Sher:** So, the average is elevated, essentially, and yet many of us carry this expectation that we need to be not just average, but well below that, which sometimes is achievable, but not always.

[00:14:53] **Dr Darren Green:** Yeah, and I suppose there comes in the wonderful thing of teaching someone that it's not just a number. And not just living your quest for zero defects by looking and focusing at the number.

[00:15:04] **Dr Darren Green:** Because I think there must be lots of other small gains in terms of one's taking ownership of the condition. Besides just treating that number and the average blood sugar level that comes down, truly.

[00:15:16] **Daniel Sher:** Absolutely. Absolutely. I mean, it's like any relationship in life. If we think about work, if we're fueled purely by the numbers, it can tend to be a little bit unfulfilling and we're always at times going to fall short of what would be ideal.

[00:15:33] **Dr Darren Green:** Incredible. So what are some of the coping strategies then for mental wellness and diabetes?

[00:15:39] **Daniel Sher:** There's a very extensive list, which I'm quite pleased to say, and that's thanks to research that's been done in psychological sciences, particularly over the last 10 to 15 years. One of my top recommendations is to keep active physically and to develop a healthy relationship to exercise.

[00:16:00] **Daniel Sher:** That is basic. You know, one of the interventions that gives us a huge bang for our buck in that it helps both with the numbers and with the emotional component of diabetes exercise, having, you know, mood-boosting and antidepressant effects beyond exercise, which unfortunately isn't everybody's cup of tea, we want to think about the social side of things. Diabetes can be incredibly isolating. And that isolation can really fuel poor mental health and difficulties with mental health. On the other end of the spectrum, we see that learning to connect socially with other diabetics, with loved ones about our diabetes, or, you know, even in the context of support groups, if indicated, and advocacy.

[00:16:49] **Daniel Sher:** Those are all incredibly empowering social interventions that can help us with mental wellness. Then other little interventions which often form a part of the therapy that I do involves increasing self-knowledge. What are our emotional triggers? What is likely to derail us in terms of our emotional well-being or blood glucose management?

[00:17:16] **Daniel Sher:** What are any possible traumatic associations that we might have with diabetes? A lot of people end up having PTSD around their diagnosis. So we want to increase our personal understanding of where those sore spots are so that we can bring in other interventions that can help us there. Other skills that we might draw on in therapy would include things like meditation, self-compassion, gratitude, cognitive reframing, which is essentially guiding our thoughts to find a different and more adaptive way of thinking about the condition.

[00:17:57] **Daniel Sher:** Then, sleep hygiene interventions. Sleep is a massively important thing for anybody. Most certainly that's the case for diabetes.

[00:18:06] **Dr Darren Green:** Well, that makes complete sense. I find quite often that people that are going through a challenging time, when managing a chronic lifestyle disease with so much commitment and focus that's required, people often lose energy, wax and wane in terms of their wins in coping, living with a disease like diabetes.

[00:18:25] **Dr Darren Green:** So, to those people that isolate themselves and often suffer alone or suffer in silence in terms of managing the condition. What would you say to them? How should they go about reaching out and moving to the next useful steps?

[00:18:42] **Daniel Sher:** Talk about it, bring it up with a loved one, bring it up with your doctor.

[00:18:46] **Daniel Sher:** Express what you're struggling with so that we can find a way forward. Remember that the emotional difficulties that you feel, it's necessary to work with those if you want to manage the condition that is diabetes to the best of your abilities.

[00:19:03] **Dr Darren Green:** No, that makes sense. I think many people, they consider showing vulnerability or weakness and not being perfect in their management of a condition like this.

[00:19:13] **Dr Darren Green:** They consider it a sign of weakness to talk about it and reveal, you know, some of their fears and anxieties, when in fact, obviously it just actually empowers them so much to share it and to take the help that's available in the community. Absolutely. It

[00:19:29] **Daniel Sher:** can feel scary to bring up these sorts of topics if we don't feel that it's appropriate to our medical management, or if we don't feel that there are ways to move forward.

[00:19:39] **Daniel Sher:** But it is appropriate. It's a part of the condition, and there are things that we can do to help.

[00:19:44] **Dr Darren Green:** I just wanted to ask, is there anything that one should not say to somebody who is living with diabetes?

[00:19:50] **Daniel Sher:** Yes, there certainly are some things that we should not say and if you really want to understand what those things are, I'd encourage you to ask your diabetic friend or partner What do you not like to hear?

[00:20:08] **Daniel Sher:** There has been beautiful research on this topic specifically from my colleagues over in San Diego who do absolutely phenomenal work in this area. They've actually brought out a product which they refer to as etiquette cards. It's an NGO, so this is not for profit, but they put out these cards which people with diabetes are intended to give their loved ones to guide them in their etiquette.

[00:20:35] **Daniel Sher:** So conversations that you don't want to be having with somebody who has diabetes, you don't want to be saying things that are going to be judgmental or punitive or dismissive or controlling. The most common one that comes up for me in therapy, should you be eating that? That's not a hopeful question.

[00:20:55] **Dr Darren Green:** Yeah.

[00:20:56] **Daniel Sher:** For anybody.

[00:20:57] **Dr Darren Green:** I can imagine.

[00:20:58] **Daniel Sher:** At that rate. Specifically for people with diabetes. Are they examples of poor etiquette? Did you get diabetes because you ate too much sugar? The reality is so much more complex than that. And that statement is highly irrelevant in the context of type 1 diabetes. No one wants to hear about your grandmother's horror stories.

[00:21:21] **Daniel Sher:** It's not reassuring or affirming for us. So kindly try to keep those to yourself. Just take your medication and everything will be fine. Diabetes is a lot more complex than just taking a medication. I'm fortunate. Take

[00:21:38] **Dr Darren Green:** your meds and have a few more sugary drinks with me as we watch the sunset.

[00:21:43] **Daniel Sher:** That's a recipe for disaster.

[00:21:45] **Daniel Sher:** Yes. And then, what else? I mean, look, I think this is a very understandable question to ask, but I very often get asked, What else do you have? The bad type of diabetes. People understand the distinction between type one and type two, but there's no bad diabetes. Any form of diabetes can be harmful if we don't look after it properly.

[00:22:08] **Daniel Sher:** Any form of diabetes can be a source of resilience and empowerment if we use it as a catalyst for

[00:22:16] **Dr Darren Green:** You make a good point. There's so many aspects to what we call the chronic lifestyle diseases like diabetes, hypertension, heart disease, etc. As you rightfully say, I mean, some of us need a little bit of a wake-up call sometimes to initiate change or just to create a sense of self-awareness.

[00:22:36] **Dr Darren Green:** But when it comes to, you know, diabetes and type 1 diabetes, I think a lot of people are absolutely oblivious to the fact that the actual patient with diabetes has not necessarily done anything to so-called deserve diabetes. And I think a lot of people struggle with that concept. I've got quite a few friends that are living with diabetes and type one diabetes with that.

[00:22:58] **Dr Darren Green:** And I found that clear communication and actually asking them, so, you know, we planning a meal together, a dinner party for supper. And what are options that you would enjoy for dessert? Uh, for example, and it's just so simple. Once you put it in the light and have a comfortable, easy, honest conversation about, you know, what falls into your frame of reference.

[00:23:19] **Dr Darren Green:** And often they'll say to me, don't worry about dessert. I'll bring my own. And that's so easy, you know, in many cases, but just opening those conversations and not staying away from the topic or allowing the stigma to sway us. I think that's so, so vital. So, Daniel, I think you've put it into the limelight for us.

[00:23:38] **Dr Darren Green:** But any last words about mental health and diabetes that you'd like to leave with closing thoughts for our listeners today?

[00:23:45] **Daniel Sher:** Yes, absolutely. There are many things that can be said here, and there's a lot more that can be discussed. But one or two important statements, which I think they're reflecting on, it's important to remember that.

[00:24:00] **Daniel Sher:** Emotional difficulties and diabetes co-occur very frequently, and this hasn't been given enough attention in the past. As science develops and as practitioners are



trained, we're finding better and better interventions. But what we have already is incredibly powerful, and there are options for people who struggle with the emotional side of diabetes.

[00:24:27] **Daniel Sher:** The other reminder that I'd like to put forward is that science-based technology for managing diabetes along with psychological interventions, it has developed in an incredible way. And we really do have the tools which we require as diabetics these days to be able to look after our condition in a way that ensures that our life is going to be long, fulfilling, healthy, and enjoyable.

[00:24:58] **Daniel Sher:** We have those tools at our disposal. We just need to find the right way to access them.

[00:25:03] **Dr Darren Green:** Absolutely. Thank you so much. I find your practical tips and insights so helpful. So let me remind all our listeners that we'll be sharing more information about all the things we've discussed here today in the show notes, as well as in the links to resources you might find very helpful.

[00:25:21] **Dr Darren Green:** So, from my side, Dr Daniel Schur, thank you so much for your input. We really appreciate the time you've taken for today.

[00:25:29] **Daniel Sher:** That is such a pleasure, Dr Green. Thank you for having me on the podcast. It's been nothing short of a pleasure.

[00:25:37] **Dr Darren Green:** Believe it or not, that brings us to the end of this series on diabetes. A massive thank you to Daniel for sharing his wisdom with us today.

[00:25:45] **Dr Darren Green:** He's given us so much to think about, including the do's and the don't's in supporting those who are living with diabetes. It can be really difficult to watch someone struggle with their mental health and not want to swoop in and try and fix it for them. But Part of the diabetes journey is finding individual coping mechanisms that work when you inevitably hit a period of diabetes burnout.

[00:26:10] **Dr Darren Green:** So one thing that has been proven to help is a diabetes community. Whether that's in person, online, on WhatsApp, or even on social media, it can be such a relief to meet others who understand what a life with diabetes is like. You can check out South Africans with Diabetes on Facebook to find all the options.

[00:26:34] **Dr Darren Green:** Thank you so much for joining us on this important diabetes journey. From me, your host, Dr Darren Green, that's it for the series of The Health Wrap Podcast, powered by Mediclinic. Don't forget to subscribe to our podcast channel so you'll know when we bring out a new series. And sign up for the Mediclinic Prime newsletter, full of helpful health information.

[00:26:58] **Dr Darren Green:** The link is in the show notes. So until next time, stay happy and stay healthy.