

New study calls for greater awareness of food supply for children with diabetes

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Managing diabetes in a child requires a careful balance of insulin, diet, and exercise. Buying essential medical supplies, such as needles and testing strips, adds a financial burden to families. According to a new study soon to be published in *The Journal of Pediatrics*, the resulting food insecurity that arises from the financial burden of diabetes management increases a child's risk of being hospitalized due to complications from diabetes.

According to study author Dr. Elizabeth Cummings, "A household is food secure when all members have access to food that is safe and varied enough to meet their nutritional needs. Families who are hungry, who use food banks or food stamps, or those who worry about affording food are considered food insecure."

Drs. Cummings and colleagues from Dalhousie University, the IWK Health Centre, and Mount Saint Vincent University interviewed 183 Canadian families with at least one child with diabetes over a 16 month period. They completed a survey that assessed their food security, demographic information (e.g., income, education levels), and strategies used to mitigate the financial burden of their child's diabetes.

The researchers found that 22% of the families they interviewed were food insecure, a significantly higher percentage than the national Canadian rate of 9.2%. Food security is not just a problem in Canada, however. A report released by the U.S. Department of Agriculture's Economic Research Service states that 17.4 million households had

difficulty providing enough food [due to lack of resources in 2009](#). According to Dr. Cummings, "Children from food insecure families had poorer diabetes control and were 3.7 times more likely to require hospitalization for diabetes within the past year."

Almost all the families interviewed received some financial support for their diabetes supplies. However, many reported that someone in the family ate less so that the child with diabetes would have enough. "A small number of families reported that they tested their child's blood sugar less often than recommended," co-author Dr. Stacey Marjerrison reports, "or used needles more than once to help manage the cost of their child's [diabetes](#)."

Dr. Cummings believes that health professions should be more aware of this issue. "A review of financial support available to families is needed," she asserts. "Improvement of support may result in fewer hospitalizations and thus lower health care costs."

More information: The study, reported in "Prevalence and Associations of Food Insecurity in Children with Diabetes" by Stacey Marjerrison, MD, FRCPC, Elizabeth Cummings, MD, FRCPC, N Theresa Glanville PhD, PDt, Sara FL Kirk, PhD, and Mary Ledwell, MSW, RSW, appears in *The Journal of Pediatrics*, [DOI:10.1016/j.jpeds.2010.10.003](https://doi.org/10.1016/j.jpeds.2010.10.003)

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