



Keaton is your typical kid...trying to live a typical life! However...on May 14, 2009 he didn't have such a typical day. He was diagnosed with Type1 diabetes and his life was changed forever! It is a disease that he will never out grow and can never forget about. Type1 diabetes is a condition in which your pancreas no longer produces the insulin you need to survive, and you'll need to replace the missing insulin using shots or an insulin pump. This type of diabetes used to be known as juvenile diabetes or insulin-dependent diabetes. Keaton is the son of Kansas National Guard soldier SSG James Hintz.

The diagnosis of type 1 diabetes can be overwhelming at first. Suddenly, you and your child — depending on his or her age — must learn how to give injections, count carbohydrates and monitor blood sugar. Keaton has to check his blood sugar 9-15 times a day. He also wears an insulin pump which serves as his life support. Before he can even think about eating, he has to check his blood sugar first. It's a constant balancing act. Sometimes you win and vigilance has paid off. Other times you don't...despite all that hard work. There are no guarantees. Diabetes never sleeps. And never takes a vacation. Every day is a battle with a disease you can treat, but never control. The road ahead for people living with diabetes is long and uncertain...but you

can help! The Juvenile Diabetes Research Foundation (JDRF) is the world's largest charitable funder of diabetes research! To donate to our team, KICK'N IT 4 KEATON, go to www.tinyurl.com/TeamKicknit4Keaton . Keaton's LIFE and millions more depend on insulin and the CURE depends on EVERYONE! Thank you for helping us find a cure fast!

To really know what a diabetic goes through, wear a rubber band on your wrist and follow the schedule below. For the next 24 hours, you have type-one diabetes. Make sure that every time it indicates "Blood Glucose Check" or "Insulin Administered" you give yourself a **good snap** with the rubber band! You will learn a lot about what it is to have type1 diabetes, but there is one important difference: at the end of the 24 hours, you can take off the band and go on with your life. We hope that you will continue to wear it for the many people with juvenile diabetes, young and old, who cannot "take their diabetes off".

7:00 a.m. **Blood Glucose Check** (Reading: 269)
(Calculate carbohydrate) **Insulin administered** (Amount determined by # of carbs and anticipated activity)
(for every 27g of carbs you receive 1unit of insulin; for every 50 your blood glucose is over 150 administer 1 more unit)
Eat Breakfast

9:30 a.m. **Blood Glucose Check** (Reading: 60)
Have juice to bring Blood Glucose up. Recheck in 15min.

9:45 a.m. **Blood Glucose Check** (Reading: 100)
Have a 15g snack to keep the Blood Glucose level

11:51 a.m. **Blood Glucose Check** (Reading: 106)
(Calculate carbohydrates) **Insulin administered** (Amount determined by # of carbs and anticipated activity)
(for every 20g of carbs you receive 1unit of insulin)
Eat Lunch

2:05 p.m. **Blood Glucose Check** (Reading: 167)

3:30 p.m. **Blood Glucose Check** (Reading: 134)
Eat a 15g snack

5:45 p.m. **Blood Glucose Check** (Reading: 109)
(Calculate carbohydrates) **Insulin administered** (Amount determined by # of carbs consumed)
(for every 15g of carbs receive 1unit of insulin)
Eat Dinner

7:45 p.m. **Blood Glucose Check** (Reading: 56)
Have juice to bring Blood Glucose up.
Check Blood Glucose again in 15 minutes

8:00 p.m. **Blood Glucose Check** (Reading: 70)
Coming up, but not high enough yet. Have 15g snack whether hungry or not. Check again in 15 minutes.

8:15 p.m. **Blood Glucose Check** (Reading: 110)

9:00 p.m. Blood Glucose Check (Reading: 90)
Insulin administered (set amount for 24hr)
Have a 15g snack if Blood Glucose is 100 or above or 30g if it is below 100

12:03 a.m. Blood Glucose Check (Reading: 306)
Insulin administered to reduce high Blood Glucose.

3:00 a.m. Blood Glucose Check (Reading: 260)
Insulin administered to reduce high Blood Glucose.

If you have trouble getting back to sleep after that 3 am test, call us—we'll be up!

The signs and symptoms of type 1 diabetes in children usually develop quickly, over a period of weeks. Look for:

- Increased thirst and frequent urination. As excess sugar builds up in your child's bloodstream, fluid is pulled from the tissues. This may leave your child thirsty. As a result, your child may drink — and urinate — more than usual.
- Extreme hunger. Without enough insulin to move sugar into your child's cells, your child's muscles and organs become depleted for energy. This triggers intense hunger.
- Weight loss. Despite eating more than usual to relieve hunger, your child may lose weight — sometimes rapidly. Without the energy sugar supplies, muscle tissues and fat stores simply shrink. Unexplained weight loss is often the first symptom to be noticed.
- Fatigue. If your child's cells are deprived of sugar, he or she may become tired and lethargic.
- Irritability or unusual behavior. Children with undiagnosed type 1 diabetes may suddenly seem moody or irritable.
- Blurred vision. If your child's blood sugar is too high, fluid may be pulled from the lenses of your child's eyes. This may affect your child's ability to focus clearly.
- Yeast infection. A genital yeast infection may be the first sign of type 1 diabetes in a girl. In babies and young children, the first indication of type 1 diabetes may be a yeast infection that causes a severe diaper rash that's far worse than the common red, puffy and tender skin rash. In young children and infants, lethargy, dehydration and abdominal pain also may indicate type 1 diabetes.

Talk to your child's doctor if you notice any of the signs or symptoms of type 1 diabetes — increased thirst and frequent urination, extreme hunger, weight loss, blurred vision or fatigue.

For more information on Juvenile Diabetes visit their website at www.JDRF.org