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The CanScreen T1D inaugural conference attendees at The Hospital for Sick Children on September 23, 2024.

Welcome to the CanScreen T1D Quarterly Newsletter!

The Canadian Population for Risk of Type 1 Diabetes (CanScreen T1D) research consortium is proud to launch its quarterly newsletter, delivered to your inbox.

Stay tuned for further updates from our research project teams and the latest developments in type 1 diabetes (T1D) research.



Preview of the CanScreen T1D website homepage banner.

CanScreen T1D Website Launch

The CanScreen T1D website is up and running! Be the first to explore our site, showcasing our team's work, the significance of our research, and more.

If you're a member of the CanScreen T1D team, please visit the Member Dashboard page and create an account to access your member-exclusive shared content.

Explore our Website Now

Our new CanScreen T1D social media channels are a fantastic way to connect with our consortium activities, broaden the impact of our work, and stay updated with news from our team. We invite you to follow us on social media and tag us in your CanScreen T1D-related posts and stories. Your support helps amplify our message!







CanScreen T1D Inaugural Conference

The CanScreen T1D research consortium held its inaugural conference at The Hospital for Sick Children on September 23, 2024, welcoming team members, funders, and partners from across Canada.

The goal of this event was to enhance connections between consortium members, develop a shared understanding of the research projects and provide progress updates to the other teams. Here are some takeaways from the conference presentations:

- · Identifying children at an increased risk of developing T1D enables follow-up to detect rising blood sugar levels and initiate early treatment. This also allows access to therapies that can delay or prevent the onset of diabetes, which are currently available in the US but not yet in Canada.
- In the CanScreen T1D pilot screening program, it is estimated that 10% of participants with the highest genetic risk scores (GRS) will move to the follow up autoantibody testing phase.
- Multiple studies have shown that screening for autoantibodies, coupled with education and regular follow up, leads to a lower rate of diabetic ketoacidosis.
- Insights from citizen dialogue reveal that most individuals have reservations about using self-administered home test kits. Additionally, all respondents expressed a preference for screening to be conducted by trained healthcare professionals in a controlled and professional environment.
- A significant challenge identified in T1D research is the need for the GRS to perform equally well across different ancestries, specifically validating it beyond non-white European populations.

Check out our latest news article for more information about the event.

Read More in our News Article

Recent T1D Publications

Explore research, treatment advances, and key findings shaping the field of T1D:



Insights into Knowledge and Attitudes About <u>Autoantibody Screening from People Affected</u> by Type 1 Diabetes: A Brief Report.

This paper examines the effectiveness of screening for islet-specific autoantibodies to identify individuals at risk for T1D. It highlights the gap in participation rates for nationwide screening efforts and emphasizes the need to understand knowledge and perceptions regarding autoantibody screening.



Preferences for Peer Support Amongst Families
Engaged in Paediatric Screening Programmes:
The Perspectives of Parents Involved in
Screening for Type 1 Diabetes in Children Aged
3-13.

This study presents a secondary analysis of qualitative data exploring parents' preferences for peer support in a pediatric screening program for T1D. From interviews with parents, a framework emerged highlighting the value of shared experiences, accessibility, and integrated peer support, suggesting that these elements are crucial for families receiving a positive screening result. The findings indicate that the need for peer support is consistent across various life-altering conditions, providing valuable insights for designing support systems in T1D and similar screening programs.



Protocol for the Australian Type 1 Diabetes
National Screening Pilot: Assessing the
Feasibility and Acceptability of Three General
Population Screening Models in Children.

This pilot study evaluates the feasibility and acceptability of three different models for a routine, population-wide screening program for T1D in Australia, aiming to reduce the incidence of lifethreatening diabetic ketoacidosis at diagnosis. Conducted from July 2022 to June 2024, the study assessed screening uptake and other outcomes among up to 9,000 children across multiple states. The findings informed the development of a potential national screening program for children in Australia.



Presentation and Characteristics of Children with Screen-detected Type 1 Diabetes:
Learnings From the ELSA General Population Pediatric Screening Study.

The study examines 14 children diagnosed with stage 3 T1D through a general population screening initiative, revealing that screening leads to earlier identification of the disease, characterized by shorter symptom duration and lower insulin requirements. Key insights include the rapid progression of single autoantibody seropositivity to insulin dependency and the importance of educating families on recognizing symptoms throughout the screening process.

If you are looking for weekly updates on the latest T1D publications, consider signing up for <u>The Sugar Science newsletter</u>.

Call for Future Materials

We want to hear from you! Share your ideas for content, including T1D resources, information about grants received, upcoming presentations, workshops, or noteworthy publications. We will feature your contributions on our social media channels, newsletter, website, and more.

Please email Lushi Aumeer, Knowledge Mobilization and Communications Lead, at can screen. t1d @ sickkids. ca~by November 25, 2024, to~have~your~materialsfeatured in the next edition of our newsletter.

Email Your Content











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