

My sweet

Aishath Shiruhana and Aminath Abdul Rahman

Aminath Abdul Rahman (Aana) was born in 1985 in Malé, the capital of the Republic of the Maldives Islands situated just southwest of Sri Lanka in the Indian Ocean. Her country's national tourism campaign – *'the sunny side of life'* – reflects the island nation's international reputation as the ultimate tropical luxury for newlyweds in search of paradise. Consisting of 1190 islands of which only 200 are inhabited, the Maldives was designated as a 'least developed country' (LDC) by the United Nations until 2011 when it graduated to upper middle-income status. Prevalence of diabetes in the Maldives (pop. 316,000) is 9.8% and the total number of people living with undiagnosed diabetes hovers just above 8%.¹

Today, the greatest challenge faced by people with diabetes in the Maldives is the lack of access to medically necessary diabetes medications or supplies. Multiple injections based on basal-bolus therapy are impossible to administer because even today the only available insulin is long acting insulin. To make matters worse, insulin is only available in the capital because delivery to other outlying islands in the Maldives is too difficult. Learn about one young woman's journey with type 1 diabetes in the Maldives as told by Aana Rahman with the help of Aishath Shiruhana, CEO of Diabetes Society of Maldives.



family

I was diagnosed with diabetes at the age of nine in 1994. Back then most people living in Malé, including health-care professionals, were not aware of type 2 diabetes, let alone type 1 diabetes. Unfortunately, no one told my family much about my condition when I was first diagnosed. My mom and dad did not receive any information about the basics of diabetes from the doctors and the only tertiary care hospital in Maldives did not have the necessary tests to determine whether I had developed type 1 diabetes or type 2 diabetes. Instead, I was put on type 2 oral medication based on my

commercially available insulin in Malé, Human Mixtard 30/70, dispensed at the government pharmacy. This was the only insulin available if you lived with diabetes in the Maldives at the time.

It took more than ten years, but things were going to get better for me. My first experience learning about diabetes was in 2005 when I joined the Diabetes Society of Maldives (DSM). It was very exciting and worthwhile for me because I was given free medical supplies, such as blood glucose testing kits, right after I registered. I immediately got involved

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hyperglycaemic or high blood glucose symptoms and the wrong medication ultimately led to diabetic ketoacidosis (DKA). Due to my constant fluctuating blood glucose levels and after one too many hospitalizations, I was finally put on insulin therapy and told I had type 1 diabetes. Unfortunately, the doctors had no choice but to give me the only

in DSM activities as a volunteer and the Society became my second family and my virtual cheerleading team on the diabetes battlefield. Since I joined DSM, I have never stopped learning. I know that there are many children like me who are grateful for diabetes assistance from the Society. In 2008, DSM established a programme for children living with



Diabetes Society of Maldives (DSM) was established in April 2000 and became a member of IDF in 2002 to establish greater awareness in the Maldives about diabetes, help patients lead a full and healthy life with diabetes and emphasize the importance of diabetes prevention.

DSM, with a current membership of approximately 1200 people, is the centre for information on diabetes in the Maldives and we educate the community through free consultations, screening programmes, and presentations all related to health education. This year, we had well over 100 new members join the society and generally had about 1250 follow-up appointments at the clinic. In addition, DSM is continually working to generate awareness and improve diabetes care throughout the Region. The result of this effort is best reflected in the 2012 diabetes screening and awareness programmes which found that 50% of nearly 4000 participants screened were at high risk for developing type 2 diabetes.

type 1 diabetes called 'Save a Diabetic Child'. Funded by the International Diabetes Federation's Life for a Child (LFAC) Programme and other local donors, 'Save a Diabetic Child' ensures that all registered children living with type 1 diabetes in the Maldives are provided with insulin and testing kits.

Campers at the first diabetes youth camp in the Region understood the important relationship between diabetes self-management and the promise of a successful future.

My relationship with DSM continued to thrive for a few years, but my connection to the International Diabetes Federation (IDF) began when I was given the opportunity to attend the first Young Leaders in Diabetes (YLD) Programme held concurrently with the World Diabetes Congress in Dubai 2011. I was the only member representing the South East Asian (SEA) Region and because of this, I was selected to be the SEA representative for the YLD Council. One of my first assigned projects was to conduct a five-day diabetes youth camp for 18 children living with diabetes from across the Maldives. As the first diabetes youth camp in SEA, the main goal of the programme was to foster diabetes acceptance and help participants feel at ease in a community where having diabetes is the rule, not the exception. The campers went home feeling more self-confident, and self-reliant having understood the important relationship between diabetes self-management and the promise of a successful future. I hope to facilitate more diabetes camps



in the future with the support of DSM and YLD. As a yearly programme, and with the help of DSM, I also established a youth group for diabetes called 'My Sweet Family' which acts as an outreach programme all over the Maldives.

For so long I thought having an insulin pump was an impossible dream.

This year, I have been selected as an organizing committee member for YLD Leadership Training at the World Diabetes Congress in Melbourne 2013. It is also an amazing year for a different reason. For so long I thought having an insulin pump was an impossible dream until this May when a donor selected me as the recipient of my very own pump. I am happy to report that I have finally

been able to achieve my glycaemic targets with my new pump!

I am going to work hard with DSM to make every effort possible to provide insulin pumps to all children in the Maldives. There is nothing more important than making the dreams of children with diabetes a reality.

Aishath Shiruhana and Aminath Abdul Rahman

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References

1. International Diabetes Federation. *IDF Diabetes Atlas, 5th edn*. IDF, Brussels, 2011.