The American Diabetes Association’s Scientific Sessions attracts attendees from all over the world, all with one goal: sharing research advances to improve the lives of people with and affected by diabetes. For the second time, the Association held its Scientific Sessions, the world’s largest meeting dedicated to diabetes, entirely virtually—and made it one for the record books! This year’s Scientific Sessions included:

• More than 11,500 participants from 119 countries
• More than 190 virtual educational sessions and award lectures
• More than 1,000 ePoster presentations
• 90 days of unlimited access to all online content

It was our honor to host 5 days of scientific advances and groundbreaking research presentations. We hope that attendees will take what they have learned and use it to help improve the lives of the more than 460 million people worldwide living with diabetes.

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The last few months have been exhilarating, as many of us have started to engage in the activities we love and have missed over the past 18 months. The acceleration of three COVID-19 vaccines to the American people has been a stunning achievement to witness.

We are fortunate to work in a profession undergirded by a distinguished history and an oath to do no harm. The Hippocratic Oath—one of the oldest binding documents in history—holds principles that are worth revisiting with our eyes now on the challenges of today: treat the sick to the best of one’s ability, refrain from causing harm or hurt, and live an exemplary personal and professional life.

Through this lens, I encourage us to think about and take action in support of the many people in our diabetes world who are profoundly struggling. Being true to our oath, we must continuously strive to help and support them.

Sadly, the pandemic revealed and amplified much that we previously suspected was wrong in our society: inequities in medical care, fractured trust in systems, misunderstanding of science, and insecurities in securing basic human needs.

Recently, the American Diabetes Association (ADA), in partnership with the market research platform Thrivable, shared the results of a survey in which people with diabetes reported financial, housing, food, and medical access challenges of crisis proportions and in numbers well beyond the impact of the pandemic on the public at large. Fully 7.6% of respondents said they had become temporarily or permanently homeless since the start of the public health emergency—a figure 48 times higher than the national average—while nearly 16% went into default on mortgages and other debt or said they would soon be in default. That figure is about twice the national rate.

In our quest to help, support, and care for our patients and train the next generation of health care professionals, we must recognize that, often, the art of medicine extends beyond the clinic and into the community. We must meet basic human needs first, before we can adequately address medical needs. Our ability to meet those human needs relies on human understanding.

As we move through our days, I challenge you to think creatively about how you might personalize medicine and science to help people understand, trust, and apply knowledge in ways that will support improved health and well-being. I challenge you to create opportunities for open communication so that individuals with disease feel comfortable sharing the day-to-day struggles they encounter. Often, our role must be more than prescribing medicine and engaging in scientific discovery; it must extend to helping individuals conceptualize how to attain more favorable personal circumstances and how to envision and achieve health for themselves. Finally, I challenge you to make a concerted effort to engage with young professionals in a way that inspires them to give of self, skill, and heart.

At the ADA, we are more committed than ever to shining a light on inequities and highlighting opportunities for professional growth. Some of the ways we are doing this include prioritizing early-career professional engagement, working in a determined manner to expand access to and ensure equity in the provision of diabetes care, and engaging our staff to develop ever stronger knowledge and skills and to approach their work in diabetes with compassion and empathy. Won't you join us in this mission?

We have published a Health Equity Bill of Rights that will be helpful as you think of ways you and your colleagues might approach our shared challenges with renewed determination.

Robert Gabbay, MD, PhD, ADA Chief Scientific & Medical Officer
Interest Group Leadership Teams Welcome New Members

The American Diabetes Association’s 16 members-only Interest Groups provide a forum for the exchange of information in specific areas of diabetes research and care. With thousands of members, these groups contribute to the Association in valuable ways and offer a variety of professional development, networking, engagement, and recognition opportunities. In July, the Interest Group Leadership Teams each gained a new position: Early Career Representative. Each team welcomed a leadership team member to this new role to provide perspective and guidance on resources needed to support the next generation of diabetes leaders.

In addition to adding members for the new position, the Interest Group Leadership Teams also brought in new members to serve in the in the Chair-Elect, Advisor, and Communication Director positions. Previous Chair-Elects in the following seven Interest Groups rotated to the Chair position, and the Chair rotated to the Immediate Past Chair position: Behavioral Medicine and Psychology, Diabetes Self-Management Education & Support, Exercise Physiology, Foot Care, Health Care Delivery & Quality Improvement, Immunology, Immunogenetics, & Transplantation, and Islet Biology, Development, & Function.

Recent changes to the Leadership Teams are summarized in the table below. For more information about the Interest Group Leadership Teams and the current roster for all of their positions, please visit http://professional.diabetes.org/InterestGroups.

<table>
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<tr>
<th>Interest Group &amp; Leadership Team Position</th>
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| Behavioral Medicine & Psychology       | Chair-Elect Marisa Hilliard, PhD
|                                         | Communications Director Jennalee Wooldridge, PhD
|                                         | Early Career Representative Samantha Carreon, PhD
| Clinical Centers & Programs             | Advisor Jacqueline Lonier, MD
|                                         | Early Career Representative Mark Porter, MD, MBA, MHS
| Diabetes & Cardiovascular Disease       | Early Career Representative Madhumita Basu, BS, MS, PhD
| Diabetes in Primary Care                | Early Career Representative Sarah Cote, NP-C, CDCES
| Diabetes in Youth                       | Early Career Representative Catherine Cohen, PhD, RD
| Diabetes Self-Management Education & Support | Early Career Representative Gina Bartindale, RN, BSN, PHN, CDCES
| Diabetes Technology                     | Early Career Representative Stephanie Kim, MD, MPH
| Exercise Physiology                      | Chair-Elect Lisa Chow, MD, MSC
|                                         | Early Career Representative Roeland Middelbeek, MD, MSc
| Eye Health                               | Early Career Representative Risa Wolf, MD
| Foot Care                                | Chair-Elect Laura Shin, DPM PhD
|                                         | Early Career Representative Chia-ding Shih, DPM, MPH, MA
| Health Care Delivery & Quality Improvement | Chair-Elect Rajesh Garg, MD
|                                         | Advisor Joanna Mitri, MD, MS
|                                         | Early Career Representative Diana Alba, MD
| Immunology, Immunogenetics, & Transplantation | Chair-Elect Brian Fife, PhD
|                                         | Advisor Maureen Su, MD
|                                         | Advisor Maria Bettini, PhD
|                                         | Early Career Representative Meaghan Stumpf, MD
| Islet Biology, Development, & Function   | Chair-Elect Jeffery Tessem, PhD
|                                         | Communications Director Nikki Farnsworth, PhD
|                                         | Career Representative Jennifer Ilke, MD PhD
| Nutritional Science and Metabolism       | Early Career Representative Daisy Duan, MD
| Pregnancy & Reproductive Health         | Early Career Representative Maria Vamvini, MD
| Public Health & Epidemiology             | Early Career Representative Sara Cromer, MD
Professional Interest Groups and WIN ADA Announce Award Recipients

The American Diabetes Association’s (ADA’s) professional Interest Groups presented four awards at the 81st Scientific Sessions. These awards recognize and honor individuals in the diabetes scientific and medical community who have demonstrated exceptional leadership and who have made significant research contributions and outstanding career achievements in the areas of behavioral medicine and psychology, podiatry, pregnancy and reproductive health, and macrovascular complications of diabetes. The Women’s Interprofessional Network of the American Diabetes Association (WIN ADA) recognized the recipient of the Lois Jovanovic Transformative Woman in Diabetes Award, which honors a woman scientist, clinician, educator, or other female professional who has made a significant impact in the field of diabetes and in the lives of people affected by the disease.

Edwin Bierman Award—Presented by the Diabetes and Cardiovascular Disease Interest Group

Russell A. DeBose-Boyd, PhD, is the recipient of the 2021 Edwin Bierman Award. This award recognizes a leading scientist who has made outstanding contributions to the field of diabetes-related macrovascular complications and related risk factors.

Dr. DeBose-Boyd is a professor of molecular genetics and the Beatrice and Miguel Distinguished Chair in Biomedical Science at the University of Texas Southwestern Medical Center at Dallas. He also serves as an associate editor of the Journal of Lipid Research and Science Advances. His research focuses on the feedback regulation of HMG CoA reductase, the rate-limiting enzyme in the synthesis of cholesterol. Understanding mechanisms for feedback control of HMG CoA reductase may lead to new therapies that prevent its statin-induced accumulation, allowing for more efficient inhibition of the enzyme and lowering of plasma LDL cholesterol.

Using cultured cells and in vitro assays, the DeBose-Boyd laboratory discovered that certain types of sterols cause HMG CoA reductase to bind to two ER membrane proteins, Insig-1 and Insig-2. This binding leads to the polyubiquitination of HMG CoA reductase by Insig-associated E3 ubiquitin ligases, marking the enzyme for recognition and subsequent ER-associated degradation (ERAD) that is mediated by 26S proteasomes. This ERAD reduces the half-life of HMG CoA reductase protein, slowing the rate-limiting step in cholesterol synthesis. The DeBose-Boyd laboratory is now investigating how sterol-accelerated ERAD contributes to the overall regulation of HMG CoA reductase and cholesterol synthesis in whole animals.

Norbert Freinkel Award—Presented by the Pregnancy and Reproductive Health Interest Group

Denise Feig, MD, MSc, FRCPC, is the recipient of the 2021 Norbert Freinkel Award, which honors a researcher who has made outstanding contributions to the understanding and treatment of diabetes in pregnancy.

Dr. Feig is a professor of medicine in the Division of Endocrinology and Metabolism at the University of Toronto and holds cross-appointments in the Department of Obstetrics and Gynaecology and the Department of Health Policy, Management, and Evaluation. She is a senior clinician scientist at the Lunenfeld-Tanenbaum Research Institute, an adjunct scientist at the Institute for Clinical and Evaluative Sciences, head of the Diabetes and Endocrinology in Pregnancy Program at Mount Sinai Hospital, and chair of the University of Toronto Diabetes in Pregnancy Study Group.

Dr. Feig was the principal investigator of the MiTy trial, a multicenter, international, randomized trial of metformin use during pregnancy in women with type 2 diabetes. She was principal investigator of the CONCEPTT trial, which examined the effectiveness of continuous glucose monitoring on maternal glucose control and obstetric and neonatal health outcomes in pregnancies complicated by type 1 diabetes. She is currently involved in hybrid closed-loop studies during pregnancy, health services research in the area of diabetes in pregnancy, and follow-up studies of the offspring of women in the CONCEPTT and MiTy trials.

Lois Jovanovic Transformative Women in Diabetes Award—Presented by WIN ADA

Linda M. Siminerio, RN, PhD, CDCES, is the recipient of the 2021 Lois Jovanovic Transformative Woman in Diabetes Award. This award in honor of Lois Jovanovic, MD, an iconic scientist who passed away in September 2018, recognizes a woman who has made a significant impact in diabetes care, research, education, or public health.

A professor of medicine and a professor of nursing, health and community systems at the University of Pittsburgh, Dr. Siminerio has had an impressive career in diabetes research and education. An internationally recognized expert on diabetes self-management and care delivery models in both pediatric and adult populations, she has served as principal investigator on many studies.

Dr. Siminerio has authored many publications and served as editor of several diabetes journals. She was ADA President, Health Care & Education, and Senior Vice President of the International Diabetes Federation (IDF). In these positions,
she led efforts to develop numerous programs, standards, and care models. Dr. Siminerio served as organizing chair for the IDF World Diabetes Congress and the IDF translation research program Building Research in Diabetes Global Environments and Systems (BRIDGES). She is past chair of the U.S. National Diabetes Education Program. Dr. Siminerio serves as a role model for women in diabetes, in both the scientific and multidisciplinary clinical care realms.

The chairs of WIN ADA presented Dr. Siminerio with this award at the WIN ADA Networking Reception during the Scientific Sessions.

**Richard R. Rubin Award—Presented by the Behavioral Medicine and Psychology Interest Group**

David G. Marrero, PhD, is the recipient of the 2021 Richard R. Rubin Award. This award recognizes a behavioral researcher who has made outstanding, innovative contributions in the study and understanding of the behavioral aspects of diabetes.

A professor of public health at the University of Arizona Mel and Enid Zuckerman College of Public Health, Department of Health Promotion Sciences, and a professor in the UA College of Medicine–Tucson, Department of Medicine, Division of Endocrinology, Dr. Marrero has studied medication adherence, community health programs, early diabetes intervention, and translational medicine. His research interests also include strategies for promoting diabetes prevention, improving diabetes care practices used by primary care providers, and the use of technology to facilitate care and education.

As director of the University of Arizona Health Sciences Center for Border Health Disparities, Dr. Marrero guides the development of programs and strategies to improve health and well-being along the U.S.–Mexico border and across the greater Southwest.

While serving as director of Indiana University’s Diabetes Translational Research Center, Dr. Marrero was instrumental in the development of the Diabetes Prevention Program and the TRIAD study, which evaluated strategies to improve diabetes care delivery in managed care settings. In 2008, he was selected for the ADA's Outstanding Educator in Diabetes Award, and in 2016, he served as the Association’s President, Health Care & Education.

**Roger Pecoraro Award—Presented by the Foot Care Interest Group**

Edward J. Boyko, MD, MPH, is the recipient of the 2021 Roger Pecoraro Award. This award recognizes a researcher who has made significant scientific contributions and demonstrates an untiring commitment to improving the understanding of the detection, treatment, and prevention of diabetic foot complications.

A professor of medicine and adjunct professor of epidemiology at the University of Washington and a staff physician and primary care internist at the VA Puget Sound Health Care System in Seattle, Dr. Boyko focuses his research on the epidemiology of type 2 diabetes and its complications. He led a prospective study of risk factors for foot complications among 1,487 primary care patients with diabetes that examined multiple potential factors, including neuropathy, peripheral artery disease, transcutaneous oxygen pressure, foot deformity, plantar pressure, and diabetes characteristics.

Dr. Boyko has held multiple national and international positions, including associate editor of Diabetes Care; chair of the National Institutes of Health Kidney, Nutrition, Obesity, and Diabetes (KNOD) study section; president of the International Diabetes Epidemiology Group; scientific program chair of the 2019 International Diabetes Federation Congress; and co-chair of the *International Diabetes Federation Atlas*, 10 edition. In 2013 he received the ADA's Kelly West Award for Outstanding Achievement in Epidemiology.

**Michaela Modan Memorial Award – Presented by the Public Health and Epidemiology Interest Group**

Each year, one outstanding abstract is awarded the Public Health & Epidemiology Interest Group’s Michaela Modan Memorial Award in honor of Michaela Modan, an Israeli epidemiologist who made major contributions to the understanding of type 2 diabetes, insulin resistance, hypertension, and diabetes complications. This award is selected by a committee of Israeli scientists from the top abstracts submitted to the American Diabetes Association in the areas of human studies on the epidemiology, complications, and prevention of diabetes.

This year’s award was presented to Allison Shapiro, PhD, MPH, Anna Bellatorre, PhD, Dana Dabelea, MD, PhD, Jeanette M. Stafford, MS, Ralph Dagostino Jr., PhD, Amy Shah, MD, MS, Elaine M. Urbina, MD, MS, Catherine E. Barrett, PhD, Catherine Pihoker, MD, Santica M. Marcovina, PhD, ScD, Angel D. Liese, PhD, MPH, Amy K. Mottl, MD, MPH, FASN, Elizabeth T. Jensen, MPH, PhD, and Greta Wilkening, PsyD, for the abstract titled, “Diabetes Complications and Cognitive Function in Youth with Type 1 and Type 2 Diabetes: The SEARCH for Diabetes in Youth Study.”

**Nominations are currently open for the 2022 Interest Group Awards and the WIN ADA Lois Jovanovic Award. Visit the Professional Membership Awards webpage to learn more.**
WIN-ADA Welcomes New Advisory Group Members

The Women’s Interprofessional Network of the American Diabetes Association (WIN ADA) Advisory Group meets regularly to plan WIN ADA activities, vote on award nominations, and discuss strategies for advancing women’s careers in diabetes. On July 1, the group, which includes expert clinicians, scientists, educators, public health practitioners, and other diabetes professionals, welcomed six new members:

Jean M Lawrence, ScD, MPH, MSSA
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), National Institutes of Health

Rebecca Scalzo, PhD
University of Colorado Anschutz Medical Campus

Jennifer Lee, PhD
Beth Israel Deaconess Medical Center and Harvard Medical School

Chinelo Okigbo, MD, PhD
Eastern Virginia Medical School

Laya Ekhlaspour, MD
Stanford University

Jacqueline Lonier, MD
CUIMC Columbia University Irving Medical Center – Naomi Berrie Diabetes Center

In addition, the Advisory Group welcomed Brigid Gregg, MD, to join Brenda Montgomery, RN, MSHS, CDE, as co-chair and Durga Singer, MD, MA, as co-chair-elect.

ADA thanks the following individuals whose terms on the Advisory Group recently ended: Judy Regensteiner, PhD, Ruth Weinstock, MD, PhD, Sharon Edelstein, ScM, Senta Georgia, PhD, Maureen Monaghan, PhD, CDE, and Shallini Jaggi, MBBS, FRSSDI, FRCP, FACE. The Association appreciates their dedication and service to this Advisory Group throughout the past few years.

Next Step Eye Challenge Raises Awareness of Diabetes-Related Eye Disease

People living with diabetes or prediabetes are at an increased risk for developing a diabetes-related eye disease such as diabetic retinopathy, diabetic macular edema, glaucoma, or cataracts. Yet, recent polls indicate that one in four people with diabetes are putting off annual eye exams because of the COVID-19 pandemic. Fortunately, vision loss from diabetes-related eye disease is 95% preventable with early detection, timely treatment, and appropriate follow-up care. That’s why it’s imperative for people with diabetes to prioritize eye care.

Focus on Diabetes—a multi-year initiative of the American Diabetes Association (ADA) and its Visionary Partners VSP Vision Care and Regeneron—is working to spread that message. The initiative recently launched The Next Step Eye Challenge, an awareness campaign emphasizing the steps people can take to maintain better eye health regardless of where they are on their diabetes journey. To bring the challenge to the community, the ADA welcomed a new cadre of Focus on Diabetes Champion patient advocates for 2021, joining the three 2020 Champions to share their stories of living with diabetes and eye health issues across many ages, stages, and walks of life.

In observance of Healthy Vision Month, Focus on Diabetes kicked off the campaign with a virtual educational roundtable on diabetes and eye health. The May 5 event featured a retina specialist, a diabetes health expert, an optometrist, and two patient advocates discussing the impact the COVID-19 pandemic has had on people living with diabetes, and especially on their eye health. For those who missed the event, a recording is available here.
Know Diabetes by Heart Updates

Know Diabetes by Heart (KDBH), the joint initiative of the American Heart Association (AHA) and the American Diabetes Association (ADA), has produced several new resources that focus on the intersection of diabetes and cardiovascular disease (CVD).

“The Know Diabetes by Heart resources highlight key issues clinicians face daily when treating people with diabetes,” Robert Gabbay, MD, PhD, ADA’s Chief Science and Medical Officer said.

“In the past few months, we’ve focused on critical topics such as mental health, older adults, and renal disease and how they all relate to diabetes and CVD. These resources have been created in such a way that busy health care professionals can easily access them on the go.”

Some highlights from the past few months include:

Webinars

Emerging Links Between Mental Health, Diabetes, and Heart Disease

This virtual salon, co-hosted by Scientific American, featured Kenneth Freedland, PhD, Lawrence Fisher, PhD, ABPP, and Paula M. Trief, PhD, in a discussion focusing on the latest research linking mental health, diabetes, and CVD, as well as interventions in the clinic and community that can ease the burden on people with diabetes.

Managing Type 2 Diabetes and Cardiovascular Disease in Older Adults

Panelists Darren K. McGuire, MD, MSc, Medha Munshi, MD, Neil Skolnik, MD, and Tracey Taveira, PharmD, CDOE, talked about the medical, psychological, functional, and social domains that need to be considered when treating older adults with diabetes and CVD.

ADA Scientific Sessions Recap—Latest Research on CVD and Diabetes including Renal Risk Management

Jennifer Green, MD, Sanjay Kaul, MD, FACC, FAHA, and Neda Rasouli, MD, led a robust discussion on new science related to CVD and renal risk management, including how these new findings can be incorporated into clinical practice to improve patient outcomes.

Podcasts

FAQs for Patients with Renal Disease, Heart Failure, and Type 2 Diabetes

Robert Eckel, MD, revisited some of the most frequently asked questions from previous webinars on managing renal disease in patients with heart failure and type 2 diabetes.

Metformin: Is It Always First?

George L. Bakris, MD, FAHA, FASN, Cecilia C. Low Wang, MD, FACP, and Neda Rasouli, MD, highlighted updates made to the ADA’s Standards of Medical Care in Diabetes—2021 related to metformin use and considerations for when the guidelines recommend use of a sodium–glucose cotransporter 2 inhibitor or a glucagon-like peptide 1 receptor agonist independent of A1C or metformin use.

New Partnership Engaging Underserved Communities

KDBH recently partnered with the National Association of Community Health Workers (NACHW) to expand the initiative’s Community Grants project targeting people living with type 2 diabetes in underserved communities nationwide. Outreach efforts focus on engaging Black and Latino populations, using community health workers (CHWs), promotoras de salud, community health representatives, outreach specialists, and peers.

These frontline public health workers, who serve as a link between health/social services and the community, facilitate access to services and improve the quality and cultural competence of service delivery. This partnership aims at building individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support, and advocacy.

Know Diabetes by Heart Founding Sponsors include Boehringer Ingelheim, Lilly and Novo Nordisk, along with National Sponsors Sanofi, AstraZeneca and Bayer.

Test Your CVD Knowledge

KDBH provides several interactive case studies to test your knowledge about diabetes and CVD.

Meet Sterling

Click here to manage this patient’s journey as he meets with his clinician who assesses his health issues and develops a treatment plan for him to follow. Learn how different factors such as medication adherence and lifestyle interventions affect Sterling’s glycemic control, CVD risk management, and overall outcomes.

A1CVD Pro

Click here to download this app to improve clinical decision-making and understanding of current AHA and ADA practice guidelines with real-life case studies and a series of treatment decisions.
ADA Studies Ways to Increase Retention in National Diabetes Prevention Program Lifestyle Change Programs

As part of a cooperative agreement with the Centers for Disease Control and Prevention (CDC), the American Diabetes Association (ADA) has been working with affiliate sites in underserved areas across the country to implement and sustain CDC-recognized lifestyle change programs (LCPs) serving under-represented populations as part of the evidence-based National Diabetes Prevention Program (National DPP). The ADA is working with organizations to implement LCPs in community health centers or health care systems at eight sites, including one each in California, Arizona, Oklahoma, Kansas, and Connecticut and three in Texas. These programs aim to serve specific under-represented populations in their community, including individuals who are Hispanic, ≥65 years of age, or male. These subpopulations and others have been identified as under-represented in previous National DPP initiatives, and the CDC/ADA cooperative agreement is dedicated to improving those numbers.

The National DPP was designed to address modifiable risk factors that contribute to the development of type 2 diabetes such as being overweight, eating unhealthily, and being physically inactive. Participants in the program learn to make healthy food choices, be more physically active, and find ways to cope with problems and stress. These lifestyle changes can cut their risk of developing type 2 diabetes by as much as 58% (71% for those ≥60 years of age).

The Importance of Retention in the National DPP

Retention in the National DPP LCPs is essential for the success of both the participants and the programs, as well as other stakeholders. Published studies have shown that most participants who remain in an LCP for at least 6 months are more likely to reach goals for weight loss (>5% baseline body weight) and physical activity (>150 minutes/week). Program success and sustainability are also dependent on participant retention because many reimbursement models are based on pay for performance or value-based payment. Under these models, programs are paid when participants meet certain goals, including attendance and weight loss. Understanding participant barriers and facilitators to retention, especially among high-risk groups, could ultimately strengthen programs and help more people prevent or delay type 2 diabetes.

Study Purpose

The ADA worked with evaluation contractor Shattuck and Associates to better understand why some participants enrolled but did not complete the National DPP LCPs delivered by ADA affiliate sites. Specifically, the study examined these participants’ characteristics and experiences with the program, as well as staff experiences with program retention and suggestions for the future. The full National DPP Drop Out Study can be viewed online.

Study Population and Methods

An in-depth, telephone group discussion with staff from the seven study sites was conducted to inform the definition of completers and dropouts and gain feedback about staff experiences and recommendations related to program retention. ADA identified 584 dropouts, and an online survey was used to collect data from all participants who did not complete the program. A total of 97 dropouts from the seven ADA sites responded to the survey. After the survey, in-depth interviews were conducted with a random sample of all the
participants who did not complete the program. Although interviews occurred during the coronavirus disease 2019 pandemic, they focused on prepandemic participation in the program.

**Key Findings**

**Demographics**

Overall, program completers were significantly older and more educated than those who did not complete the program. Most survey respondents were either 45–64 years of age or 18–44 years of age. Most reported being female and Hispanic/Latino, and White/Caucasian. Almost half were college educated, and another 30% completed high school or had a general education diploma.

**Recruitment**

Over half of the survey respondents heard about the program from a health care professional (HCP), whereas about 40% learned about the program from an employer or employer’s wellness program, a community-based organization, and/or family or friends. Almost 60% were told about the program through an in-person talk or over the phone. Interviewees had heard about the program through work, community/health center HCP, a health fair, or a family member.

“Recruits” Versus “Participants”

ADA is in a unique position to study retention in the LCP through DPP Express, its data collection and reporting tool, which allows data extraction on participants who do not complete the program. DPP Express is a user-friendly, Health Insurance Portability and Accountability Act–compliant, Web-based charting platform that allows users to collect data and generate reports that align with Diabetes Prevention Recognition Program requirements.

DPP Express allowed ADA to glean a key finding in the study related to how a participant enters the LCP. Within the platform, affiliate sites can identify how a person enters their program, either as a “recruit” or “participant.” A “recruit” is a potential participant who may have expressed interest in the program and is actively encouraged to join. If they join the program, they are converted to a “participant.” Sometimes, people come in directly as a “participant” without the recruitment phase. ADA learned that those completing the LCP were more likely to come into the DPP Express system as a “recruit” than as a “participant.” Almost 52% of completers were entered as a recruit compared to 29% of those who dropped out of the program. This finding suggests that participants who learned about the program and contemplated and investigated it before joining might have been more prepared to complete all classes.

**Attendance and Motivation**

About half of the survey respondents reported attending 5–12 program sessions, with another 35% attending 1–4 sessions. Interviewees were evenly split between those who attended 5–12 (38%) and those who attended 13–17 sessions (38%), with 23% attending 1–4 sessions. This finding suggests that most participants who dropped out did so before completing the first half of the program. More than 65% of survey respondents said their motivation to attend the first session was to prevent diabetes, and about 40% said their motivation was to lose weight and be healthier for family members. Interviewees also endorsed being motivated to attend the first class for diabetes prevention and education, as well as to improve health behaviors and outcomes. Most survey participants stated that they were not eating healthily when they joined the program but were thinking about making changes. Half stated they were not physically active before joining but had been thinking about becoming more active. Interviewees also described being ready for behavior change.

**Reasons for Dropping Out**

Most study participants were highly satisfied with various aspects of the LCP, and most study participants reported that schedule conflicts and class timing were the main factors that interfered with program attendance and completion. Coaches agreed that dropping out in most cases could be attributed to schedule changes, family issues, and commitment levels. Most staff reported that the largest number of dropouts occurred when participants were transitioning from weekly core sessions to monthly core maintenance sessions.

**Suggestions for Improvement**

Both participants and staff said flexibility would be key to improving retention in the program. This could entail switching from in-person to virtual continued on next page
classes or allowing participants to change to a new cohort. Participants suggested that more one-on-one coaching and a more personalized curriculum would be appealing. Interview respondents also emphasized the importance of incentives for program retention.

Persistence was identified as being crucial in reaching out to participants who did not successfully complete the program and encouraging them to re-enroll. These individuals already understand the expectations of the program and may be more ready to change, with 87% of those interviewed expressing interest in rejoining the program in the future.

**Next Steps for ADA**

The ADA will continue to study dropouts and explore ways to address this issue. The ADA National DPP team is discussing the results with affiliate sites during monthly meetings and developing ideas for overcoming the challenges the study identified.

Improvements have been made to DPP Express so that the system can be more flexible and provide real-time information related to retention, including the ability to:

- Transfer participants to another cohort
- Text and email participants
- Document notes related to retention
- Track when and why participants drop out

The ADA team is also providing advanced skills trainings to all of the affiliate sites to help them improve their skill set and the quality of program. In addition to the full report, an infographic summarizing its key findings is available online.

*This article was supported by Cooperative Agreement Number NU58DP006364 03 00, funded by the CDC. Its contents do not necessarily represent the official views of the CDC or the U.S. Department of Health and Human Services.*

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**Your help is their first hope.**

Learn what you need to know to optimize care for people with diabetes with the American Diabetes Association®’s new online certificate programs.

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This program is supported, in part, by Merck and Co., Inc., and Novo Nordisk, Inc. Additional support for Diabetes is Primary comes from The Leona M. and Harry B. Helmsley Charitable Trust.

**AVAILABLE NOW!**

Learn more: professional.diabetes.org/meetings/online-programs
DPP Express—Do More With Your Data

Simplify data collection and reporting for your Centers for Disease Control and Prevention (CDC)–recognized lifestyle change programs with DPP Express.

If you have a CDC-recognized lifestyle change program as part of the National Diabetes Prevention Program, you know how difficult it can be to collect and report data accurately and meet all the requirements of CDC’s Diabetes Prevention Recognition Program (DPRP). If you tired of spending hours tracking the evaluation data required by the DPRP and manually generating required reports, then it is time to try the American Diabetes Association’s (ADA’s) DPP Express!

DPP Express has always been a user-friendly, Health Insurance Portability and Accountability Act (HIPAA)–compliant, Web-based charting platform that allows users to collect data and generate reports that align with DPRP requirements. However, soon the ADA will be launching its newest version of DPP Express. This version will allow an unlimited number of users to access the platform with features that include:

- A unified class documentation page, allowing you to quickly chart across an entire cohort of participants
- The ability to move a participant from one cohort to another quickly and easily
- Documentation of patient biometric data such as A1C, blood pressure, and lipid panels.
- Powerful reporting features including:
  - Accurate comma-separated value reports available at the click of a button to meet all current and future CDC guidelines
  - Medicare Diabetes Prevention Program (MDPP) billing and cross-walk reports for easy Medicare reporting submissions
  - Comprehensive program metric reporting showing your program’s performance

» Multiple report filters allowing you to focus on specific segments of your program
» Detailed participant summary reports showing progress over time in a polished PDF format suitable for sharing with participants and health care providers
» At-a-glance participant attendance reports by cohort

The ADA will also be offering optional advanced features to help increase the efficiency and success of your program. Some of these features include:

- Recruitment features allowing you to record recruitment activities and track potential participants and their level of interest in enrolling in your program
- The ability to send texts and email messages to several or all your recruits and participants directly from DPP Express
- Identification and tracking of who is referring participants to your program
- Additional billing functionality

ADA’s complete onboarding process will get you up to speed quickly, with monthly training seminars to ensure that you are always supported. DPP Express also includes access to a support site that will walk you through all of the platform features, with helpful videos and tutorials to make using DPP Express a breeze. If you need additional assistance, our friendly customer service staff are happy to help at no additional charge.

DPP Express is available for a minimal fee to all CDC-recognized lifestyle change programs, including ADA-recognized diabetes self-management education and support services. To learn more about DPP Express and its capabilities or to join email DPPExpress@diabetes.org or visit diabetes.org/dppexpress.

Be an Influencer to Further the Diabetes Cause

Health care professionals and other American Diabetes Association (ADA) members can play an important role in support of legislation and public policy to advance diabetes research, treatment, and other crucial priorities on Capitol Hill and in state capitols around the United States.

With the launch of the ADA’s new Communications & Engagement Platform, diabetes professionals can sign up to receive updates and information about upcoming high-impact advocacy opportunities. If you are looking for new ways to support the diabetes community through advocacy, becoming an ADA Influencer may be just the ticket. Sign up today!
Missed something during the meeting? There’s still time to view it! Registered attendees have unlimited access to all virtual content through September 29, 2021. In addition to all of the great sessions, don’t forget to visit the virtual Exhibit Hall, Product Theaters, Corporate Symposia, Diabetes Learning Bytes, ePosters, and abstracts. To access the virtual content, go to www.ADA2021.org and click Log In using your last name and registration confirmation number.

If you have not yet registered, it’s not too late to access the meeting virtually. Register today.

Earn Continuing Education Credits

Get the latest science and earn credit while you’re at it. Continuing Education (CE) credit is available for physicians, international physicians, physician associates, nurses, pharmacists, dietitians, psychologists, social workers, and certified diabetes care and education specialists.

- Up to 34.25 CE credits are available from the Live Virtual Meeting (June 25-29, 2021).

- Up to 331 CE credits are available from the Virtual Meeting Archive (June 30 to September 29, 2021).

You must be a registered attendee to earn credit. Learn more here.

ADA 2021 Highlights—Now Available!

The ADA and Infomedica announce the availability of the official highlights of the 81st Scientific Sessions. Access the free highlights to learn about key topics in diabetes and review the clinical insights and current research discussed at this year’s meeting. Along with conference summaries and slide sets from key presentations, the online program features English-language and localized versions of interviews with a selected faculty in multiple languages. Participate today.

Session Coverage of the Virtual Scientific Sessions

Read session coverage of the latest groundbreaking science from this year’s Virtual 81st Scientific Sessions by visiting the meeting’s official online news source.

A Special Thank You!

The Scientific Sessions Meeting Planning Committee volunteered countless hours to ensure the success of this year’s Scientific Sessions. Together, they compiled a program of world-class, groundbreaking science and education representing the most important work in the field. The ADA thanks the members of the committee for planning this year’s event.

Dana Dabelea, MD, PhD (Committee Chair)
Stephanie A. Amiel, BSc, MD, FRCP
David A. Baidal, MD
Joan Bardsley, MBA, RN, DMCES, FAADE
Alan Chait, MD
Alice Y.Y. Cheng, MD, FRCPC
Sheri Colberg, PhD, FACSM
Peter A. Crawford, MD, PhD
Aaron M. Cypess, MD, PhD, MMSc
Ian de Boer, MD, MS
continued from previous page

Thomas W. Gardner, MD, MS
Michael J. Haller, MD
Michael A. Harris, PhD
Matthew Hirschey, PhD
Marie-France Hivert, MD, MMSc, FRCPC
Crystal Holmes, DPM, CWSP
Rebecca L. Hull-Meichle, PhD
Elizabeth T. Jensen, MPH, PhD
Sanjay Kaul, MD, FACC, FAHA
Neda Laiteerapong, MD, MS, FACP
Jiandie Lin, PhD
Aaron W. Michels, MD
Joshua J. Neumiller, PharmD, CDE, FASCP
Rodica Pop-Busui, MD, PhD
Andrew M. Posselt, MD, PhD
Stephen S. Rich, PhD, FAHA
Michael R. Rickels, MD, MS
Julio Rosenstock, MD
Amy E. Rothberg, MD, PhD, DABOM
Donna B. Ryan, RN, RD, MPH, CDCES
Karen K. Ryan, PhD
Scott A. Soleimanpour, MD
Deborah J. Wexler, MD, MSc

81st Scientific Sessions Contest Winners
Congratulations to the following attendees for winning the Refer a Colleague and Leaderboard promotions:

Refer a Colleague Winners:
Meital from New York (Grand Prize Winner)
Addie from California
Barak from Wisconsin
Darleen from Maryland
Jamillah from New York
Ya-Ching from Texas

Leaderboard Winner:
Michelle from North Carolina

Health Disparities–Related Abstracts Recognized for Excellence

The American Diabetes Association’s (ADA’s) National Health Disparities Committee recently recognized 10 abstracts accepted for the virtual 81st Scientific Sessions that highlight significant research promoting better understanding of factors that contribute to health disparities/inequities and/or studies that describe innovative initiatives to address such factors.

“This year, we had numerous abstracts from which to choose from researchers working to make a difference in the lives of people with diabetes by targeting inequitable distribution of social determinants of health or other factors that contribute to inequitable care and outcomes in diabetes. Our Top Ten honors the best of these efforts,” committee Chair Dr. Enrique Caballero said.

The National Health Disparities Committee reviewed health disparities–related abstracts based on newly established criteria, including abstracts having relevance to health equity/disparity or social determinants of health and abstracts that had been scored as “outstanding” or “very good” by the Scientific Sessions Planning Committee. Reviewers assessed abstracts that focused on key components or domains of social determinant of health and cultural aspects in diabetes care, including but not limited to socioeconomic statues; neighborhood and built environment; food environment; health care access and quality; social and community context; biological and behavioral influences as well as cultural factors in the health care setting.

Members of the National Health Disparities Committee help to shape the Association’s efforts to reduce inequities facing populations disparately affected by diabetes. They provide expert guidance on effective community support, program evaluation, the development of strategies to reduce disparities and improve health equity across the spectrum from consumers to providers and clinics to communities.

Click here for more information and to view the National Health Disparities Committee’s top 10 recommended abstracts in their entirety.
2021 National Scientific & Health Care Achievement Award Recipients Honored

Presented to recognize and honor individuals in the diabetes scientific and medical community, the American Diabetes Association’s (ADA’s) National Scientific & Health Care Achievement Awards are bestowed on individuals who have demonstrated exceptional leadership in their fields. Specifically, these awards honor individuals who have made significant contributions through their outstanding career achievements and support in the areas of diabetes research, clinical care, and education, including training, mentoring, and international impact. The following diabetes professionals were honored in 2021. A recording of the awards ceremony can be viewed here.

Banting Medal for Scientific Achievement

**Jens Juul Holst, MD, DrMedSci**

Dr. Holst, a professor in the Department of Biomedical Sciences and leader at the Novo Nordisk Foundation Center for Basic Metabolic Research, University of Copenhagen, has focused his scientific work on the regulatory peptides of the pancreas and the gut and their importance in the regulation of the functions of the gastrointestinal tract and metabolism. A particular emphasis has been on the role of the incretin hormones of the gut. Dr. Holst made the discovery that glucagon-like peptide 1 (GLP-1) is a gut hormone contributing to the glucose-induced gastrointestinal stimulation of insulin secretion and to the regulation of postprandial satiation and that these effects can be exploited in the treatment of type 2 diabetes.

Currently, Dr. Holst is engaged in research related to the mechanisms, including GLP-1, behind extreme weight loss and diabetes remission after bariatric surgery. He is striving to develop new pharmacological diabetes and obesity treatments.

_Congratulations to Dr. Jens Juul Holst._

Outstanding Scientific Achievement Award

**Kristen J. Nadeau, MD, MS**

Dr. Nadeau is the research director for the pediatric endocrinology and bariatric surgery programs at the University of Colorado and focuses on understanding mechanisms of youth-onset diabetes, obesity, and insulin resistance.

Through her roles as pediatric chair of the National Institute of Diabetes and Digestive and Kidney Diseases’ RISE study and a cardiorenal/metabolic outcomes leader in the TODAY trial, Dr. Nadeau has demonstrated that youth-onset type 2 diabetes is more aggressive and treatment-resistant than in adults.

_Congratulations to Dr. Kristen J. Nadeau._

Albert Renold Award

**Bruce M. Spiegelman, PhD**

Dr. Spiegelman is the Stanley J. Korsmeyer Professor at Harvard Medical School and the Dana-Farber Cancer Institute.

The creator of the field of adipose cell biology, his discoveries have changed our understanding of adipose tissue such that it is now considered an endocrine and energy organ with a strong impact on metabolic and related diseases.

The Spiegelman lab is focused on the molecular basis of adipose tissue development and function, including systemic metabolism and mitochondrial-dependent energy balance.

_Congratulations to Dr. Bruce Spiegelman._

Outstanding Achievement in Clinical Diabetes Research Award

**Hans-Henrik Parving, MD, DMSc**

A professor and chief physician in the Department of Endocrinology, University of Copenhagen, Dr. Parving has focused his research on diabetic micro- and macroangiopathy since 1975.

Early in his career, he demonstrated the importance of early intensive antihypertensive treatment in diabetic nephropathy and the importance of microalbuminuria as a risk marker for the development of diabetic kidney disease.

_Congratulations to Dr. Hans-Henrik Parving._

Outstanding Educator in Diabetes Award

**Denise Charron-Prochownik, PhD, CPNP, RN, FAAN**

A professor at the University of Pittsburgh School of Nursing, Graduate School of Public Health, and chair of Health Promotion and Development, Dr. Charron-Prochownik focuses her research on adolescent reproductive health and preconception counseling.

As a pediatric diabetes clinical nurse specialist, nurse practitioner, and behavioral scientist, she has received multiple ADA Clinical Research and National Institutes of Health awards for work on preconception counseling and educational interventions for adolescent girls with type 1 or type 2 diabetes. Her program, READY Girls, is distributed by the ADA as their endorsed pre-conception counseling program for adolescents with diabetes.

_Congratulations to Dr. Denise Charron-Prochownik._
**Outstanding Physician Clinician in Diabetes Award**

**Silvio E. Inzucchi, MD**  
A professor at Yale School of Medicine, director of the endocrine fellowship program, and clinical chief of Endocrinology, Dr. Inzucchi maintains both an academic clinical practice and a research program.

He assembled the first inpatient diabetes management service in Connecticut. His group developed the Yale Insulin Infusion Protocol, and in 2008, Dr. Inzucchi founded the Yale Diabetes Center.

His research has focused on optimal selection of glucose-lowering medications in patients with type 2 diabetes and cardiovascular disease.

*Congratulations to Dr. Silvio Inzucchi.*

**Harold Rifkin Award for Distinguished International Service in the Cause of Diabetes**

**Juleen R. Zierath, PhD**  
Dr. Zierath is a professor of experimental physiology at Karolinska Institute in Stockholm and professor of integrative physiology and the executive director at the Novo Nordisk Foundation Center for Basic Metabolic Research at the University of Copenhagen.

Dr. Zierath performs translational research to delineate mechanisms for the development of insulin resistance in type 2 diabetes. Her work focuses on the role of epigenetic modifications in insulin resistance and the interaction between circadian rhythms and exercise in metabolism.

Dr. Zierath is a past president of the European Association for the Study of Diabetes and past editor-in-chief of *Diabetologia*.

*Congratulations to Dr. Juleen Zierath.*

**Kelly West Award for Outstanding Achievement in Epidemiology**

**Nicholas J. Wareham, FMedSci, FRCP, FFPHM, MBBS, MSc, PhD**  
Dr. Wareham is the director of the Medical Research Council Epidemiology Unit, co-director of the Institute of Metabolic Science, honorary consultant at Addenbrooke’s Hospital, and a professor of epidemiology at the University of Cambridge.

He undertakes research to understand the etiology of type 2 diabetes and develop strategies for early detection and prevention, including individual and societal-level interventions.

*Congratulations to Dr. Nicholas Wareham.*

**C. Everett Koop Medal for Health Promotion and Awareness**

**Ann Albright, PhD, RDN**  
The C. Everett Koop Medal for Health Promotion and Awareness has been given to Ann Albright, PhD, RDN, for her excellence in wellness promotion and disease prevention. Recipients of this award are selected for their significant contribution to increasing public awareness about lifestyles and activities that pose potential hazards to general good health and well-being.

As director of the Division of Diabetes Translation at the Centers for Disease Control and Prevention (CDC), Dr. Albright led a team striving to eliminate the preventable burden of diabetes through leadership, partnerships, research, programs, and policies that translate science into practice. Before starting her post at CDC, she served as chief of the California Diabetes Program for the California Department of Health Services.

Dr. Albright has served as ADA’s President, Health Care & Education and received the Lifetime Achievement Award from the American Association of Diabetes Educators and the Lenna Frances Cooper Memorial Lecture Award from the Academy of Nutrition and Dietetics.

**Call for Nominations: ADA 2022 National Scientific and Health Care Achievement Awards**

The ADA is seeking nominations for the 2022 National Scientific and Health Care Achievement Awards. Awards will be presented at the 82nd Scientific Sessions in New Orleans, LA, 3–7 June 2022. Learn more about requirements and download award information and profiles [here](#).
Research News

Request for Applications Now Open: Leveraging Nutrition and Lifestyle for Diabetes Prevention Across the Life Span Research Awards

The American Diabetes Association is now requesting applications and letters of intent for research proposals that seek to improve adoption of healthy diets and lifestyles at the individual and community level, with interventions tailored to different racial and socioeconomic groups across the life span. The goal of this request for applications (RFA) is to identify person-centered, yet scalable, dietary and lifestyle interventions with the greatest potential for adoption and maintenance of diabetes-preventing or diabetes-mitigating lifestyles by individuals at greatest risk.

The award process will prioritize:

• Nutritional and/or physical activity interventions that more effectively incorporate cultural or personal preferences, psychological supports, comorbid conditions, socioeconomic status, food insecurity, and other factors that may impact consistency with an eating and/or exercise plan and its effectiveness.

• Approaches that better tailor medical nutrition therapy (MNT) and diabetes self-management education and support (DSMES) to different racial and socioeconomic groups in sustainable real-world settings.

• Behavioral interventions that help encourage and sustain health diet and increased physical activity.

• Comparison and/or utilization of different delivery methods aided by wearable technology (e.g. accelerometers, continuous glucose monitors, etc.)

• Cost-effectiveness studies to support third-party coverage and policy change.

The award types and application process are summarized in the table below. More detailed information is available online at diabetes.org/grants.

<table>
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<tr>
<th>Award Type</th>
<th>Open Date</th>
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<th>Award Start Date</th>
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<tr>
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<td>Postdoctoral Fellowship</td>
<td>August 30, 2021</td>
<td>Grant Application: November 1, 2021 (LOI not required)</td>
<td>• Up to 3 years&lt;br&gt;$53,760–$65,292/year salary stipend, plus $5,000/year research and $5,000/year fringe allowances</td>
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<td>• LOI: November 22, 2021&lt;br&gt;• Invited Grant Applications: March 7, 2022</td>
<td>• Up to 3 years&lt;br&gt;$138,000/year, plus student loan repayment ($10,000/year)</td>
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<td>• Up to 3 years&lt;br&gt;$200,000/year</td>
<td>July 1, 2022</td>
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The Women’s Interprofessional Network of the American Diabetes Association (WIN ADA)

LEARN MORE AT professional.diabetes.org/winada
Request for Applications Now Open: Leveraging Precision Medicine to Improve the Lives of People with Diabetes

The American Diabetes Association (ADA) is now requesting applications and letters of intent for research proposals that leverage precision medicine–based approaches at all stages of the type 1 and type 2 diabetes disease course. The concept of precision medicine takes into account the broad variation in lifestyles, environments, genes, and other factors to better tailor interventions to deliver the right therapy, at the right time, to the right individual. Although this call is wide-ranging in scope, emphasis will be placed on clinical research and translation with the greatest potential to ultimately improve the lives of people with diabetes through precision medicine approaches. The award types and application process are summarized in the table below. More detailed information is available online at diabetes.org/grants.

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<tr>
<td>Innovative Basic Science</td>
<td>• Letter of Interest (LOI): August 30, 2021&lt;br&gt;• Invitation to apply from ADA: January 31, 2022</td>
<td>• LOI: November 22, 2021&lt;br&gt;• Invited Grant Applications: March 7, 2022</td>
<td>• Up to 3 years&lt;br&gt;• $115,000/year</td>
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ADA Mental Health Provider Directory

Living with diabetes can be stressful and, at times, exhausting.

Find a mental health professional in our Mental Health Provider Referral Directory.
The American Diabetes Association (ADA) has selected three award recipients for its Health Disparities and Diabetes Research Postdoctoral Fellowship Awards. These fellowships support postdoctoral researchers for high-quality training in disciplines and topics relevant to health disparities and diabetes, in an environment conducive to beginning a career in diabetes research. These awards, which commenced on July 1, 2021, provide up to $65,292 per year for up to 3 years. The recipients of the ADA Health Disparities and Diabetes Research Postdoctoral Fellowship Awards are:

**Kimberly Garza, PhD, MPH**
Ann and Robert H. Lurie Children’s Hospital of Chicago

*Increasing Access to Diabetes Technology: A Multidisciplinary Intervention to Reduce Disparities and Improve Outcomes*

**Jody Grundman, MD**
Children’s Research Institute

*Group visits to improve technology use, glycemic control, and quality of life in high-risk patients with type 1 diabetes*

**Tamaki Hosoda-Urban, PhD**
Massachusetts General Hospital

*Traumatic stress, resilience, and health disparities in youth with diabetes*

The ADA Welcomes Dr. Marlon Pragnell, Vice President of Research & Science

With more than 20 years of experience in research and science, Marlon Pragnell, PhD, comes to the American Diabetes Association (ADA) with deep knowledge about diabetes, metabolism, genetics, kidney function, eye disease, and behavioral science. As a leader in diabetes research internationally, he has lead efforts focused on diabetes complications and glucose control worldwide.

As a senior scientist and program director for JDRF and Genzyme, Dr. Pragnell led efforts aimed at preserving kidney function and vision, as well as initiatives aimed at improving glucose control in people with diabetes through more effective drug and device-based therapies. He also participated in international efforts to accelerate the development of an artificial pancreas and served on JDRF’s multi-million-dollar Artificial Pancreas Project, which he actively managed before the successful commercialization of the first closed-loop system in 2016.

Dr. Pragnell brings extensive biotech experience to the ADA team. As a principal scientist in renal and metabolic diseases at Genzyme, he focused on the bone-kidney axis and managed company-sponsored research collaborations in the United States and internationally to complement in-house research and development.

He earned his doctorate in neuroscience from the University of Iowa and completed postdoctoral training at Columbia University, both in the Howard Hughes Medical Institute, where he focused on the structure-functional relationships of ion channels.

“I’m incredibly honored to become part of the ADA team and serve as Vice President, Research & Science, Dr. Pragnell said. “I can’t think of a more exciting opportunity, or greater privilege, than to help improve the lives of people, including many in my own family, who have or are at risk of diabetes.”

New Portal Opens for Continuing Education Opportunities

The American Diabetes Association’s (ADA’s) new Professional Education Portal offers health care professionals a wealth of interactive webcasts, bundled pricing for continuing education courses, and integration with the American Board of Internal Medicine and the Accreditation Council for Continuing Medical Education’s Program and Activity Reporting System for recording Maintenance of Certification credits. A new search option makes it easier than ever to find downloadable PowerPoint presentations, lecture recordings, and educational resources. Learners can test their knowledge of diabetes care through the ADA’s case-based self-assessment programs and participate in live webinars featuring diabetes experts. For all of your professional education and development needs, please visit the new portal at [https://professionaleducation.diabetes.org](https://professionaleducation.diabetes.org).
Prediabetes: A Fundamental Text

Are your patients overweight? 45 years, or older? Have a parent or sibling with type 2 diabetes? Not as active as you (or they) would like? Then, they are at risk for Prediabetes.

It is probable that prediabetes will have no clear symptoms, and will have no serious health problems, such as, type 2 diabetes for years. Yet, as a physician, you want to help your patients be aware and prepare for all their health care possibilities. The good news is that prediabetes is reversible, but it does require an immediate diagnosis.

ADA Books is pleased to announce a new publication, Prediabetes: A Fundamental Text (Pathophysiology, Complications, Management, Reversal), by Sam Dagogo-Jack, MD, DSc. Dr. Dagogo-Jack is the A. C. Mullins Endowed Professor in Translational Research, Professor of Medicine, and Chief of the Division of Endocrinology, Diabetes and Metabolism at the University of Tennessee Health Science Center, Memphis, TN. He is also the Director of the General Clinical Research Center at UTHSC. Dr. Dagogo-Jack’s research focuses on the interaction of genetic and environmental factors in the prediction and prevention of prediabetes and diabetes. His clinical practice includes management of diabetes, metabolic and hormonal disorders.

Get your copy today and save 30%* when you purchase from ShopDiabetes.org or call 800-232-6733. Use promotion code PRE2021 at check out.

*Some exceptions apply. Membership and other discounts not applicable
Registration Open for More Focus on Fellows Sessions

After offering sessions in June as part of the American Diabetes Association’s (ADA’s) virtual 81st Scientific Sessions, Focus on Fellows, the Association’s career development program for new and recent diabetes fellows hosted an additional virtual sessions on Aug. 27. The afternoon program included sprint lectures, mini workshops and networking opportunities for early-career professionals.

“The Focus on Fellows program provides practical guidance on career development,” ADA Early Career Advisory Group member Dr. Meltem Zeytinoglu said. “The program is so important to foster relationships with senior leaders in the field, helping to support the next generation.”

More than 115 fellows participated in the first sessions of the 8th annual Focus on Fellows program in June. Fellows heard from leading diabetes experts such as Dr. Allison Goldfine with Novartis Institutes of Biomedical Research and Dr. Louis Philipson with the Kovler Diabetes Center at the University of Chicago who presented on “What Drives Exciting and Field-Furthering Research?” A presentation titled “First Steps in Job Expectations and Job Search,” featuring Dr. Aurelia Wood of the Nationwide Children’s Hospital, was another highlight of the June sessions.

“The breakout rooms were the best way to get tailored guidance in areas that I need specific information on,” said one attendee. “I learned more about early-career grant funding in a 20-to 30-minute Focus on Fellows session than in everything I’ve read or attended at my university.”

“I especially liked the workshops that discussed negotiating during your job search and the breakout workshop on developing a good hypothesis for research grants,” another attendee said. “These will be very useful in my future career, and both are topics on which it can be difficult to find information.”

The August program featured multiple sessions and workshops, including “Identifying Funding & Grant Preparation” and “Developing Job Search Strategies.”

The 2021 Focus on Fellows program was developed by the Early Career Advisory Group, including:

Anila Bindal, MD - Rush University Medical Center
Brittany Bruggeman, MD - University of Florida
Daisy Duan, MD - Johns Hopkins University School of Medicine
Robert H. Eckel, MD - University of Colorado School of Medicine
Felona Gunawan, MD - UT Southwestern Medical Center

Stephanie Kim, MD - University California, San Francisco
Bhargavi Patham, MD, PhD -Houston Methodist Specialty Physician Group
Jane E. B. Reusch, MD - University of Colorado at Denver
Anthony Sallar, MD - University of Tennessee Health Sciences Center
Ankit Shah, MD - Rutgers Robert Wood Johnson Medical School
Amy Vora, MD - UT Southwestern Medical Center
Meltem Zeytinoglu, MD, MBA - The University of Chicago Medicine Kovler Diabetes Center
Rong Mei Zhang, MD - Washington University

“We want to ensure that the Focus on Fellows program is accessible to early-career fellows, with pertinent topics that will be useful for their career development, and also help with networking opportunities,” Dr. Bhargavi Patham, an Early Career Advisory Group member said.

“The program has had a fantastic mix of career development topics and discussions over the past 3 years, and it has boosted my confidence in my ability to continue an academic career in the diabetes field,” another attendee said. “Each speaker was enthusiastic and approachable, and the programs have had nice diversity in terms of speaker backgrounds and career paths.”

Participating fellows received a complimentary registration to the ADA’s 81st Scientific Sessions, held virtually on June 25–29. Fellows also received a complimentary 1-year ADA professional membership, with benefits that include access to ADA members-only webinars, interest groups, DiabetesPro Quarterly newsletter, professional journals, and more.

Eligibility for this program is limited to U.S.-based early-career professionals who meet any one of the following criteria:

• Currently or recently enrolled in a pediatric endocrinology, adult endocrinology, diabetes, or other related fellowship program
• Medical resident confirmed in a program Accredited by the Accreditation Council for Graduate Medical Education
• Researcher from select ADA research programs

Learn more at professional.diabetes.org/fellows

Focus on Fellows is supported by The Leona M. and Harry B. Helmsley Charitable Trust.
Special Report Calls for Unified Public Health Response to NAFLD and NASH

In collaboration with seven professional associations including the American Diabetes Association, the American Gastroenterological Association recently convened an international conference comprising 32 experts in gastroenterology, hepatology, endocrinology, and primary care providers from the United States, Europe, Asia, and Australia. Informed by the results of a national NASH (nonalcoholic steatohepatitis) Needs Assessment Survey, the participants reviewed and discussed published literature on global burden, screening, risk stratification, diagnosis, and management of individuals with NAFLD (nonalcoholic fatty liver disease), including those with NASH. The group identified promising approaches for clinical practice, as well as specific high-yield targets for clinical research. Ultimately, the group formulated a comprehensive strategy for primary care providers and relevant specialists encompassing the full spectrum of NAFLD/NASH care and called for a unified, international public health response to liver disease. The resulting special report is available on Diabetes Care online at https://doi.org/10.2337/dci21-0020 and is jointly published with Gastroenterology, Metabolism: Clinical and Experimental, and Obesity: The Journal of the Obesity Society.

Expert Panel Outlines Definition and Interpretation of Remission in Diabetes

The American Diabetes Association recently convened an international expert group to review language describing the process for improvement of glucose levels into the normal range in some people with diabetes, known as remission of diabetes. The group determined that “remission” is the most appropriate descriptive term and discussed objective measures for defining remission, as well as long-term risks versus benefits of its attainment. The information gathered is intended to be used as a base to support future clinical guidance. The group also made suggestions for active observation of individuals experiencing a remission and discussed further questions and unmet needs regarding predictors and outcomes of remission. The resulting expert consensus report, published jointly in Diabetes Care, The Journal of Clinical Endocrinology & Metabolism, Diabetologia, and Diabetic Medicine, was posted online on August 30 at https://doi.org/10.2337/dc21-0034.

Clinical Compendium: Chronic Kidney Disease and Type 2 Diabetes

Earlier this year, the American Diabetes Association (ADA) published a clinical compendium to review in depth the topic of diabetic kidney disease in patients with type 2 diabetes. The compendium describes opportunities for determining risk with regard to biomarkers and genetics, developing better clinical care models to address socioeconomic and racial disparities, and making use of new therapeutics to improve clinical outcomes. This publication offers a timely and thorough review of important considerations and practical strategies for clinicians to improve clinical outcomes in their patients with types 2 diabetes and chronic kidney disease. Online access is free, supported by unrestricted education grants from AstraZeneca and Bayer. To access this and all ADA-published compendia, visit https://professional.diabetes.org/monographs.
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