

Type 1 Diabetes

- an auto-immune disease
= the body's immune system attacks and kills the insulin-producing β -cells in the pancreas
- very little to no endogenous insulin production
= dependent on synthetic insulin
- insulin dosing is **not easy!**
 - basal insulin
 - bolus insulin
 - = matched to carbohydrates consumed, roughly

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My Type 1 Diabetes

- diagnosed 12/2003 at age 19
- as of 11/2006, positive C-peptide
= still producing *some* insulin
- using an insulin pump since 12/2006:



My Type 1 Diabetes, Cont'd

started using a Dexcom Continuous Glucose Monitor last year:



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About the Dexcom

- the Dexcom provides:
 - an (approximate) blood glucose reading every five minutes
 - an arrow indicating
 - trend (= up, down, or steady)
 - rate-of-change
- audible and/or vibrating alerts when blood glucose is
 - too high
 - too low
 - or changing very rapidly
- ability to download data!



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Blood Glucose Management

- non-diabetics blood glucose: between 70-130 mg/dL
- my goals:
 - as many readings in the “target” non-diabetic range as possible
 - keep the % of readings *below* 65 mg/dL to a minimum
 - reduce standard deviation (as measured on a day’s worth of readings)
 - reduce mean

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My Experiment

- first experience with Dexcom = *shock*
- next = **frustration**

My Experiment, Cont'd

Hypothesis

Carbohydrate restriction is an effective way to improve blood glucose outcomes.

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Inspiration

Good Calories, Bad Calories by Gary Taubes

When I hear a physician saying to a type 1 diabetes patient, "Go ahead and eat whatever you want, just make sure you cover your glucose with insulin," it's like telling a firefighter, "Just go ahead and pour as much gasoline as you like on that fire you're trying to put out, as long as you cover it with enough water."

— Dr. Peter Attia

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Statistical Significance

Question

Did adopting a carbohydrate-restricted diet starting January 1st, 2012 result in a statistically significant difference in blood glucose?

Wilcoxon rank-sum test:

- similar to the Student's t-test, but for non-parametric (= non-normally-distributed) data
- p-value < 2.2e-16
- **Conclusion:** change in diet resulted in significant (negative) change in blood glucose values
- estimate of the median of the difference between a sample from regular diet blood glucose data and a sample from low-carb diet data is **about -19 mg/dL**

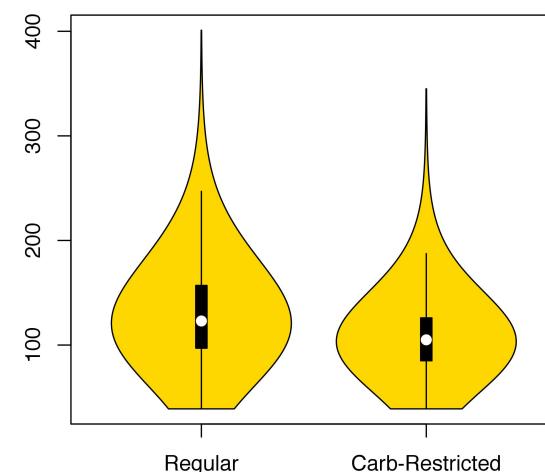
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Tools

- Dexcom data export formats:
 - XML files, useful for manipulating in Python with [BeautifulSoup](#)
 - tab-delimited .csv files, useful for direct importing into R
- in R:
 - built-in non-parametric statistical functions
 - built-in plotting functions: `boxplot()`, etc.
 - [ggplot2](#)

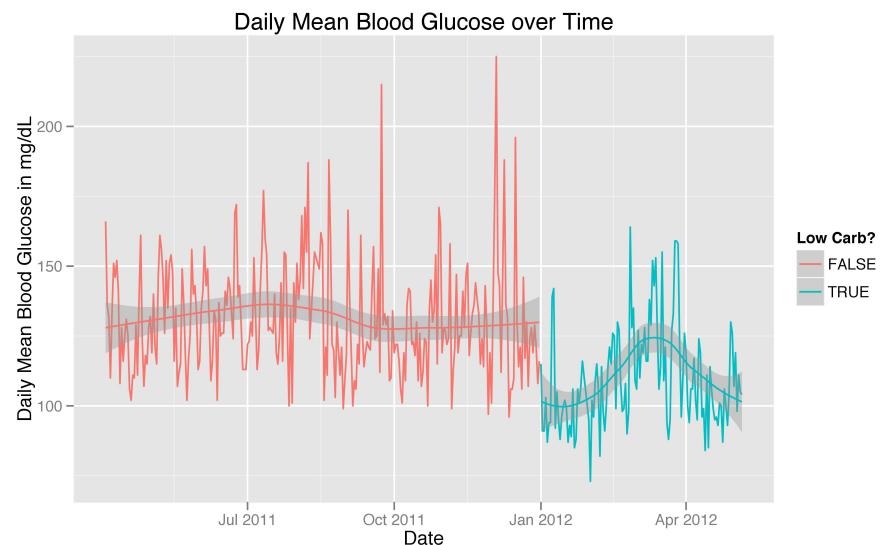
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Visualizing Change: Violin Plot



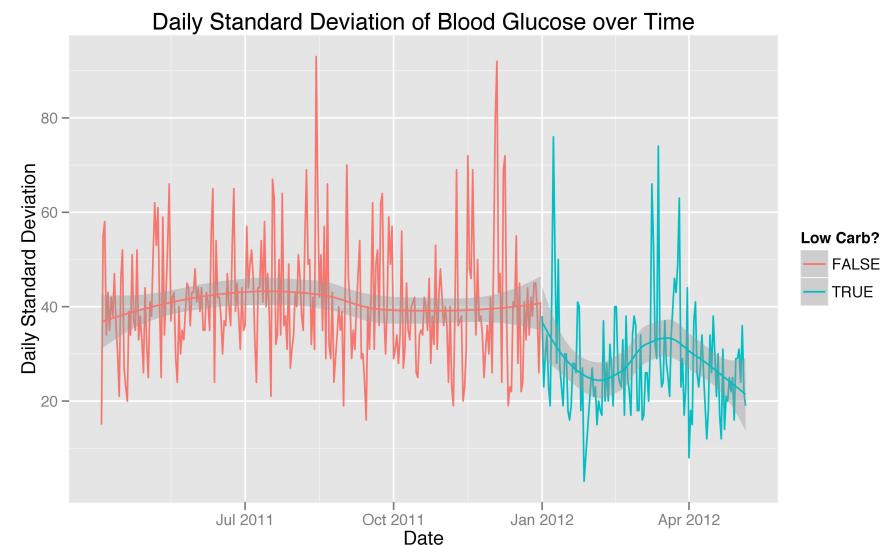
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Visualizing Change: Daily Mean over Time



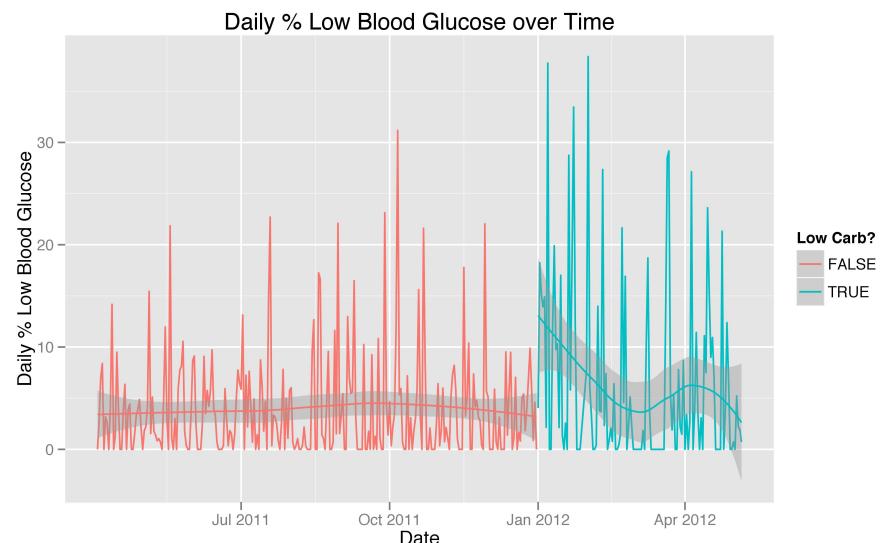
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Visualizing Change: Daily Std. Deviation over Time



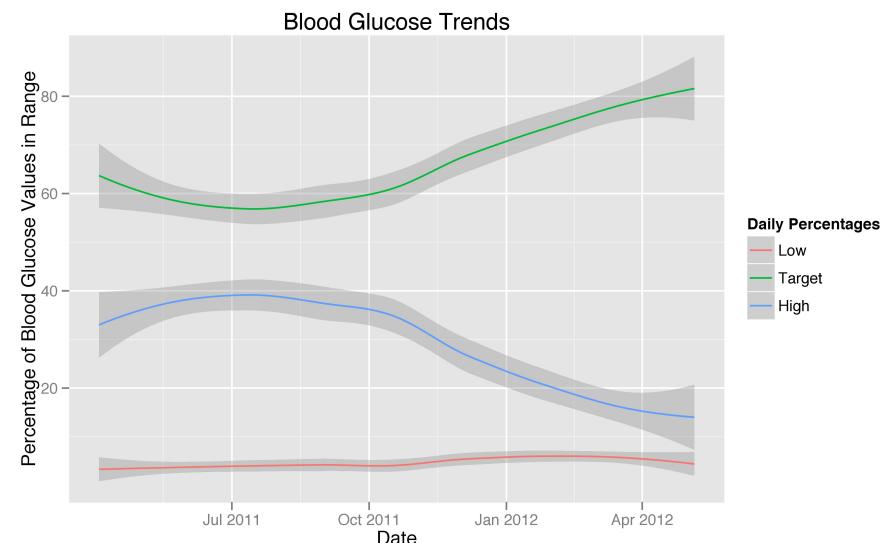
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Visualizing Change: Daily % Low over Time



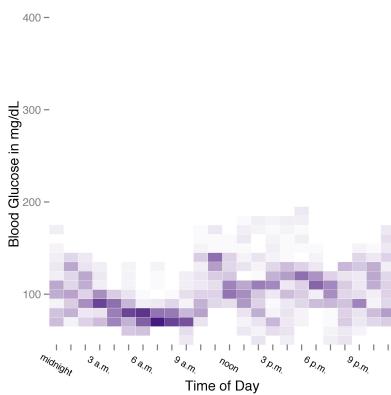
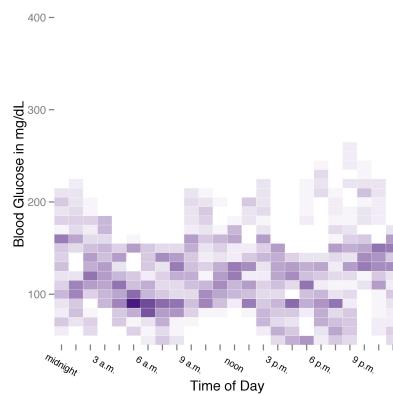
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Visualizing Change: Daily Percentages over Time



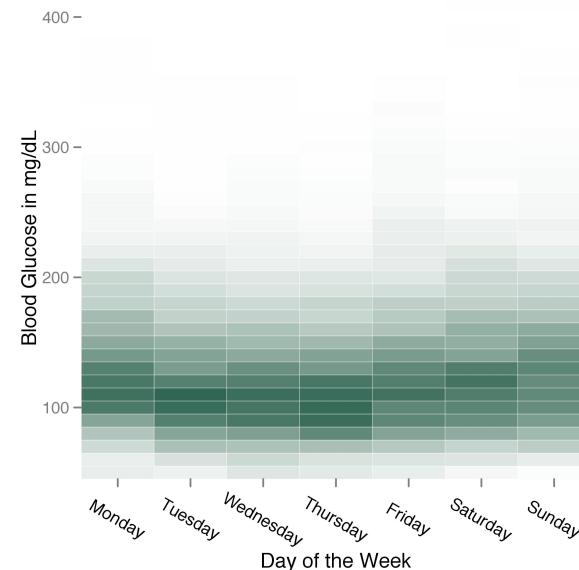
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Visualizing Change: Heatmaps



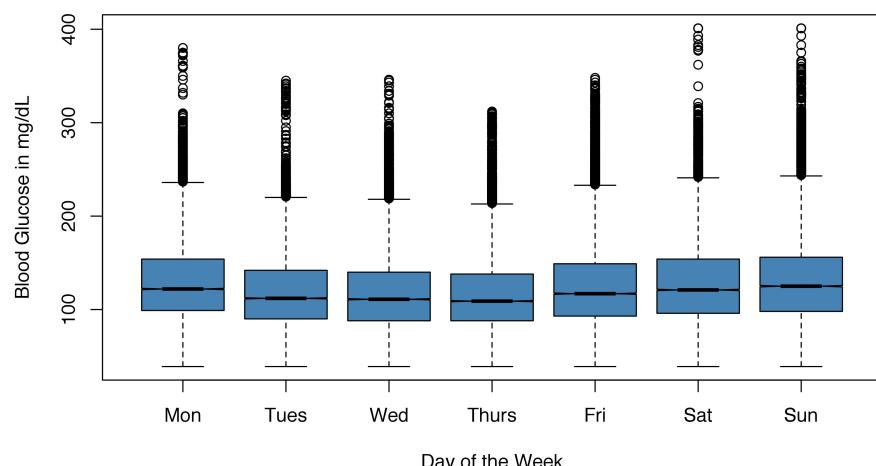
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Patterns: Day of the Week



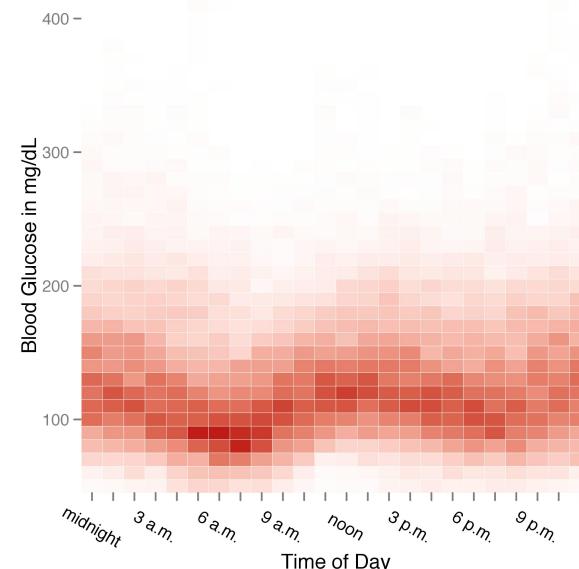
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Patterns: Day of the Week Cont'd



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Patterns: Time of Day



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Thanks!

Contact: jana.eliz.beck@gmail.com

Upcoming Project: <https://github.com/jbeck/iPancreas>

(Description here: <http://jbeck.github.com/iPancreas/>)