By Elizabeth Ndegwa



Mark in the hospital ward

The word of God, in 1 Corinthians 10:13 tells us "there hath no temptation taken you but such as is common to man: but God is faithful, who will not suffer you to be tempted above that you are able; but ye may be able to bear it."

The most important thing that I usually want people to know about me is that I am a born

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again Christian. And I also want to add that I believe in miracles. There is nothing too big for my Lord and me. I am married to Pastor John Ndegwa and the Lord has blessed us with three children; Grace, who is 14 years, Mark who is 11 years and Mercy, 8 years. We are a God fearing family and we daily continue to experience the goodness of God in our lives.

During the April 2009 school holidays, I noticed that my son Mark was not looking very healthy. I thought to myself that maybe he was not getting the right nutrients and even started planning how I could improve the children's diet. When the schools opened in May, Mark said that he usually got very thirsty during the day and I ensured that he carried water in a bottle to school every day. He started to take a lot of water when going to bed. Mark then started eating too much food without getting satisfied. Sometimes he would tell me that during the night he had gone to the kitchen and taken some milk. Other times very early in the morning he would say he is very hungry and would take some food. He also started complaining of an itching throat. All along Mark was going to school. Sometimes as he did his homework he used to complain of blurred vision and tiredness All these observations made the father and I to decide to take him to hospital..

The day before Mark was taken to hospital, I told a friend how Mark was getting very thirsty, and also having an itchy throat. She told me that it was most likely a cold. Easily cured by antibiotics. I think this is the kind of comfort that I wanted: somebody to tell me that Mark's problem was just something small. However, I decided not to buy the medicines off the shelf since the father had planned to take Mark to hospital following day.

During the night the day before Mark was taken to hospital, he was constantly going for a short call at night and this disturbed me very much because I noticed that he was going after a period of only thirty minutes. He was also taking too much water. In the morning, when I told a workmate what my son was experiencing, without beating about the bush, the workmate told me that he thought that my son had diabetes, that my son's pancreas may not be producing insulin. This kind of talk alarmed me probably because I had the same fears. However I got prepared to receive either a good report that my son only had a cold, or a bad report that he had diabetes.

Mark was taken to a doctor's clinic by his father on Thursday, 21st May 2009. I was attending class in the evening and did not accompany them. The father called me and told me that the

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doctor had advised that we take Mark to a large hospital. The doctor had said that Mark had diabetes. I came out of the class and we met in the church where he ministers.

After receiving the distressing report from the doctor, my husband like Ezekiel in 2 Kings 19:14 took it before the house of God and spread it before Him. It is good to cast all our cares unto the Lord for He cares for us as He assures us in I Peter 5:7. Also, when we acknowledge God in all our ways, He directs our paths (Proverbs 3:6).

After we sought for God's guidance, He directed us through one of my sisters to go to Gertrude's children hospital. The doctor had strictly advised my husband to ensure that Mark was taken to hospital immediately. We arrived at the hospital at around 8.00 p.m. Mark was again examined at the hospital and the report confirmed that he had high blood sugar.

The doctor told us that even though to us Mark did not look sick, he was indeed quite sick and needed to be admitted. He said that Mark needed special attention to ensure that he was given medication to lower his blood sugar as the blood sugar level was very high and was 53 compared to the normal range of 4 to 10. He was therefore admitted in the High Dependency Unit (HDU).

We called some of our friends to request them to stand with us in prayer for God to heal Mark which they faithfully did. During that night, I stood with the verse in Psalms 66:9 that it is God who holds our souls in life. I entrusted Mark to God who had held his soul in life even when he was in school and sick, yet we did not know it. I trusted that He who held him then, would still hold his soul in life even as he was in the hospital's HDU.

Early the next morning, I went to see Mark and he was doing well. Thanks be to God who is ever faithful. During the course of the day, the doctors called the Father and told him that Mark's blood sugar had gone down and therefore Mark would be transferred to an ordinary ward.

Mark's sugar level continued to stabilize. He however had to stay in the hospital for a period of five days for the doctors to be able to determine the insulin levels he would be receiving daily and also for him to learn how to inject himself and other ways to manage his condition.

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What concerned me most about the treatment of the disease is the many injections. I asked the doctors whether there was any other way for treating Type I diabetes. The doctors said there is no other way at present as the acids and digestive juices in the stomach and intestines can break down and destroy insulin if it is swallowed. So it can't be taken as a pill. The only way to get insulin into the body is by injection with a needle or with an insulin pump.

I thank God for enabling Mark to have a very positive attitude. Even in hospital he would tell me that the injections were not painful because the needles were so thin.

The doctors recommended for Mark a balanced diet and we were given a food programme. His food was to be rich in fiber which is found in whole grains. As a family we have adjusted to taking brown bread, brown rice, brown chapatti and Ugali from the posho mill.

A diagnosis of diabetes is not very easy to take. At the hospital, I was once requested by a counselor to talk with a mother whose child had also been diagnosed to be having diabetes. The mother was so shocked when she heard that her child had high blood sugar that she fainted. We went to see her daughter who was in the High Dependency Unit and we encouraged her that her child would be able to cope with the condition. We have been communicating and giving each other moral support and her daughter is doing fine.

Mark has coped well with the condition. He injects himself twice per day; in the morning and in the evening. He checks on his blood sugar level thrice per day to ensure that the sugar level remains within the normal sugar levels from 4Ml to 10 Ml. Sometimes his sugar level goes low and other times it is high but mostly it is at the normal range. If levels are too low one gets a condition known as hypoglycemia and if too high a condition known as hyperglycemia. Mark has learnt what he is supposed to do in each case. As a family we have also learnt the symptoms and treatment of both since either is dangerous to have.

In the case of low blood sugar (hypoglycemia) the early symptoms include hunger, irritability, tiredness, and poor concentration. Later symptoms include shaking, palpitation's nausea and

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confusion and if condition is left unchecked it leads to a coma. The treatment for early symptoms is to take a sandwich and fruits and for later symptoms to eat or drink immediately

sugar based foods such as table sugar, or honey followed by a sandwich and fruit. A coma is an emergency which requires urgent hospitalization.

Hyperglycemia (too much sugar in blood) is caused by too little insulin, illness, stress, etc. One may be passing too much water, feeling very thirsty, vision may be blurred, you may vomit, and feel tired. One should visit a health centre as soon as possible.

During the early days of treatment, Mark was injecting himself with a lot of insulin as directed by the doctor. This however used to make him wake up very weak and with the sugar level low. I even had to ensure that he carried sweets to school daily to check and ensure his blood sugar did not go very low. The amount of insulin he was to inject was subsequently reduced and all the weakness he used to experience in the morning disappeared.

A brother in Christ at my work place was mightily used by God to help me cope with Mark's case. He encouraged me with Proverbs 10:22 which says that "the blessing of the Lord maketh rich, and he adds no sorrow with it"

The word of God also assures us in Romans 8:28 that "all things work together for good to them that love God, to them who are the called according to his purpose" I believe that everything therefore is going to work together for the good of Mark and even to us, his family members.

The message that I would give to women who have children with diabetes is that they should continue to hope in God for the total healing of their children. Personally, I have heard testimonies of many people who have been healed of diabetes and God is no respecter of persons. The word of God in Romans 5; 8 encourages us that 'hope maketh not ashamed'.

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I usually encourage Mark to speak to himself and declare 'Healing is my potion, Diabetes is not my potion', for Jesus Christ has already paid the price for the total healing of our bodies. 1st Peter2: 24 assures us that by the thirty –nine stripes that Jesus received, we were healed. For us, it is to claim the healing for our children.

Habakkuk 2: 3 also encourages us that; "For the vision is yet for an appointed time, but at the end, it shall speak and not lie, though it tarry, wait for it, because it will surely come, it will not tarry."

Mark's class teacher has also been very co-operative. She allows Mark to take snacks even before break time if he so wishes. So it is good for mothers with children having the same condition to be communicating with their children's teachers, because they are with them most of the times

.Mark still plays as usual in school. I ensure that he takes a good breakfast after injecting himself in the morning, which mostly includes bread with margarine or Weetabix. He has to avoid things with sugar like cakes as they make the sugar level shoot very fast. He carries natural juices, natural yoghurt or plain milk. He also carries a fruit and enough snacks for the morning and afternoon break. His lunch and supper usually include cabbage or sukuma, ugali, brown rice, brown chapatti and lean meat/fish/chicken.

The diet for a family with one of the members being diabetic is expensive. A family therefore has to constantly believe God for provision of good diet which works for the good of the whole family as every one stays healthy.

It is not good to prepare special diet for one person, as the person may feel more special which should not be the case. Therefore, mothers should enlarge their hearts and believe God for provision of the food the family needs.

God is able and faithful, praise be to his great name.

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