ᒋᔅᑫᔨᐦᑖᑯᐦᑖᑫᐧᐃᓐ ᐁ ᓂᔅᑐᐧᐄᐧᑖᐤ ᐄᔫ ᒋᔐᐄᔫᒡ
ᒋᔅᒑᔨᐦᑖᑯᐦᑖᒑᐧᐃᓐ ᐋ ᓂᔅᑐᔨᒡ ᐄᔨᔨᐤ ᒋᔖᔨᔨᐅᒡ
Information for the Regional Elders’ Conference

ᐧᐋᐱᑯᓂᐲᓯᒻ
ᒧᔖᐧᐋᐦᔮᐅᐲᓯᒼ
June
2008

ᒋᔅᑫᔨᐦᑖᑯᐦᑖᑫᐧᐃᓐ ᐁ ᓂᔅᑐᐧᐄᐧᑖᐤ ᐄᓅ ᒋᔐᐄᓅᒡ
ᒋᔅᒑᔨᐦᑖᑯᐦᑖᒑᐧᐃᓐ ᐋ ᓂᔅᑐᔨᒡ ᐄᔨᔨᐤ ᒋᔖᔨᔨᐅᒡ
Information for the Regional Elders’ Conference

ᑳᓈᑖ ᐋᐸᑎᓰᐧᐃᓐ ᐁ ᐅᐦᒋ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓅᐦᒡ ᒥᔦᐱᒫᑎᓰᐧᐃᓐ ᐊᓂᒌ ᑳ ᐋᐸᑎᓰᐦᑲᐦᑎᐦᐧᑳᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐁ ᒫᓯᐦᑫᐸᔨᓃᐦᐧᑳᐤᐦ ᐁ ᔔᐧᐋᑲᒥᐦᐧᑫᓅᐦᒡ
ᒥᔅᑎᓯᓃ, ᐧᐋᐱᑯᓂᐲᓯᒼ 24-27, 2008

ᑳᓈᑖᐦ ᐋᐱᑎᓰᐧᐃᓐ ᐋ ᐅᐦᒋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᒥᔦᐱᒫᑎᓰᐧᐃᓐ ᐊᓂᒌ ᑳ ᐋᐱᑎᔒᔅᑎᐦᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐋ ᒫᓯᐦᒑᐱᔨᔨᒡᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ
ᒥᔅᑎᓯᓃ, ᒧᔖᐧᐋᐦᔮᐅᐲᓯᒻ 24-27, 2008

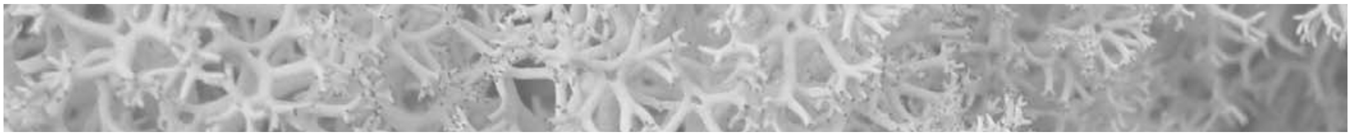
CIHR Team in Aboriginal Anti-Diabetic Medicines
Mistissini, June 24-27, 2008

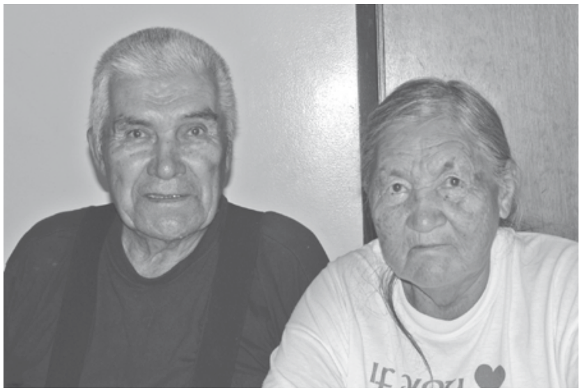
ᑳ ᓂᓯᑐᐦᑖᑯᐦᑖᑦ ᑎᐹᒋᒨᓯᓇᐦᐄᑲᓐᐦ: **ᐁᓚᓐ ᐧᐹᐯᑦ**
Plain-language summaries: **Ellen Bobet**

ᐄᔨᔨᐤ/ᐄᓅ ᐃᐧᑖᔅᑎᒫᒑᓯᐤ: **ᐸᕌᔨᓐ ᐧᐁᑉ**
Cree translations: **Brian Webb**

ᒥᓯᓈᐱᔅᑭᐦᐄᑭᓐᐦ: **ᐋᓛᐃᓐ ᑰᕆᔦᕐ**
Photos: **Alain Cuerrier**

ᑳ ᒥᔦᓈᑯᐦᑖᑦ ᒥᓯᓂᐦᐄᑭᓂᔨᐤ: **ᑳᑎᔮ ᐯᑦᐧᕉᕝ**
Design and page layout: **Katya Petrov**






Meechum Reg'd

ᑫᐧᑳᓐ ᑫ ᐅᐦᒋ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒫᔥᑯᒡ ᑫ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ?

ᒋᔅᑫᔨᐦᑕᒧᒡ ᐄᓅᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᑌ ᐁ ᐅᐦᒋᐸᔨᐦᐧᑳᐤᐦ ᒋᔐᒪᓂᑑ ᐁ ᐃᐦᑖᑦ ᑲᔦ ᐁᔫᒄ ᑫ ᒌ ᐋᐸᒋᐦᑖᐧᑖᐤ ᒥᓯᐧᐁ ᐄᓅᒡ ᑫ ᒌ ᐧᐄᒋᐦᐄᓱᐧᑖᐤ᙮ ᐸᔅᒡ ᒫᒃ ᐊᐧᐁᓂᒌ ᒌ ᒦᔮᑲᓅᐧᐃᒡ ᐅᔫ ᒋᔅᑫᔨᐦᑕᒧᐧᐃᓂᔫ ᐁᒄ ᒫᒃ ᑫ ᒌ ᐧᐄᒋᐦᐋᐧᑖᐤ ᑯᑕᒃᐦ ᐊᐧᐁᔫᐦ ᑫ ᒌ ᒥᔪᐱᒫᑎᓯᔨᒡᐦ᙮ ᐊᓄᐦᒌᔥ ᒫᒃ, ᒥᐦᑫᑐ ᐄᓅᒡ ᓂᑐᐧᐁᔨᐦᑕᒧᒡ ᑫ ᒌ ᐊᔑᒋᐸᔨᓂᔨᒡ ᐊᓂᔫ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑌ ᐁ ᐅᐦᒋ ᐧᐄᒋᐦᐋᑲᓅᐧᑖᐤ ᓂᑐᐦᑯᔨᓂᑲᒥᑯᐦᒡ ᑲᔦ ᐊᓂᔫ ᒌᑰ ᑫ ᒌ ᐋᐸᒋᐦᑖᐧᑖᐤ ᒣᐧᑳᒡ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮ ᐁᐅᒄ ᒫᒃ ᐆ ᓃᔥᑕᒻ ᑫ ᐅᐦᒋ ᒋᐦᒋᐸᔨᐦᒡ ᐆ ᑫ ᒌ ᐱᒥᐸᔨᐦᒡ᙮

ᐆ ᒫᒃ ᐁ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ, ᒫᒨ ᐋᐸᑎᓰᐦᑲᐦᑕᒧᒡ ᒋᔐᐄᓅᒡ, ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᑲᔦ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᐊᓂᒌ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ, ᐁᐅᑯᓂᒡ ᐧᐄᐧᐋᐤ ᐁ ᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐧᐁᔥᑲᒡ ᑳ ᐄᔑ ᐋᐸᑎᓅᐦᐧᑳᐤᐦ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ, ᐁᔫᒄ ᐊᓂᔫ ᐋᓂᔅᑫ ᑳ ᐄᔑ ᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐧᐁᔥᑲᒡ ᐄᓅᒡ᙮ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᐧᐄᐧᐋᐤ ᒋᔅᑫᔨᐦᑕᒧᒡ ᑖᓂᑌ ᐃᔅᐸᔨᑦ ᐊᐧᐁᓐ ᐲᐦᒋᔫ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ, ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ, ᑫᐧᑳᓐ ᐁ ᐊᑕ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ, ᐁ ᒥᔪᒦᒋᓱᓈᓅᔨᒡ ᑲᔦ ᑖᓂᑌ ᐃᔅᐸᔨᑦ ᐊᐧᐁᓐ ᐲᐦᒋᔫ ᑫ ᒌ ᒥᔪᐱᒫᑎᓯᑦ᙮ ᐁᑯᑦ ᐧᐁᐦᒋ ᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᒌ ᒋᔅᑯᑕᒫᓱᐧᑖᐤ ᒪᓯᓇᐦᐄᑲᓐᐦ ᐁ ᒌ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑫᐧᑳᓐ ᐊᓂᑌ ᐄᔑ ᐅᑖᐦᒡ, ᑲᔦ ᐁᔫᒄ ᐧᒣᐦᒡ ᐋᓂᔅᑫ ᐁ ᐄᔑ ᐱᒥᐸᔨᐦᑖᓂᔨᒡ ᐊᓂᔫ ᐅᒋᔅᑫᔨᐦᑕᒧᐧᐃᓂᐧᐋᐤ᙮

ᐆ ᒫᒃ ᐧᐁᐦᒋ ᐋᐸᑎᓰᐦᑲᐦᑖᑲᓄᐧᐃᐦᒡ, ᐁᔫᒄ ᑫ ᒌ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅᒡ ᑲᔦ ᑯᑕᑲᒡ ᐊᐧᐁᓂᒌ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁᒄ ᒫᒃ ᑫ ᒌ ᐧᐄᒋᐦᐄᑯᐧᑖᐤ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ᙮ ᐧᒫᐅᔫ ᐁ ᐄᔑ ᐋᐸᑎᓰᐦᑲᐦᑕᐦᐧᑳᐤ ᐊᓂᒌ ᑳ ᒫᒨ ᐧᐄᒋᐦᐄᑐᐧᑖᐤ:

- ᑫ ᒌ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᐄᓅ ᓂᐦᑖᐅᒋᐦᒋᑲᓐ ᓂᑐᐦᑯᔨᓐᐦ ᑫ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ
- ᑫ ᒌ ᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑖᓂᑌ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ
- ᑫ ᒌ ᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑖᓂᑌ ᐁ ᐧᐄᐦ ᐄᔑ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅᒡ ᐅᔫ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ (ᐧᒣᐦᒡ ᐁ ᑏᐧᔮᐳᐦᑫᓄᐧᐃᐦᒡ ᓀᔥᑦ ᒫᒃ ᐋᐦᒌᐤᐦ ᐁ ᐄᔑ ᓂᑐᐦᑯᔨᓂᐦᑫᓄᐧᐃᐦᒡ)
- ᑫ ᒌ ᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑖᓂᑌ ᐋᓂᔅᑫ ᑫ ᒌ ᑲᓇᐧᐁᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐊᓐ ᒋᔅᑫᔨᐦᑕᒧᐧᐃᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ᙮

ᒑᐧᑳᓐ ᒑ ᐅᐦᒋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐧᑳᐧᔖᓐ ᒑ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ?

ᒋᔅᒑᔨᐦᑎᒧᒡ ᐄᔨᔨᐅᒡ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᑖᐦ ᐋ ᐅᐦᒋᐱᔨᒡᐦ ᒋᔖᒥᓂᑑ ᐋ ᐃᐦᑖᑦ ᑭᔮᐦ ᐋᔪᐧᐃᒄ ᒑ ᒌ ᐋᐱᒋᐦᑖᒡ ᒥᓯᐧᐋ ᐄᔨᔨᐅᒡ ᒑ ᒌ ᐧᐄᒋᐦᐄᓱᒡ᙮ ᐱᔥᒡ ᒫᒃ ᐊᐧᐋᓂᒌ ᒌ ᒦᔮᑭᓂᐧᐃᐧᐃᒡ ᐅᔮ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓂᔨᐤ ᐋᒄ ᒫᒃ ᒑ ᒌ ᐧᐄᒋᐦᐋᒡ ᑯᑎᒃᐦ ᐊᐧᐋᔨᐤᐦ ᒑ ᒌ ᒥᔪᐱᒫᑎᓯᔨᒡᐦ᙮ ᐊᓄᐦᒡ ᒫᒃ, ᒥᐦᒑᑐ ᐄᔨᔨᐅᒡ ᓂᑐᐧᐋᔨᐦᑎᒧᒡ ᒑ ᒌ ᐊᔥᒋᐱᔨᔨᔨᒡ ᐊᓂᔮ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑖᐦ ᐋ ᐅᐦᒋ ᐧᐄᒋᐦᐋᑭᓂᐧᐃᒡ ᓂᑐᐦᑯᔨᓂᑭᒥᑯᐦᒡ ᑭᔮᐦ ᐊᓂᔮ ᒌᑰ ᒑ ᒌ ᐋᐱᒋᐦᑖᒡ ᒫᐧᑳᒡ ᐋ ᐋᐱᒋᐦᑖᒡ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮ ᐋᐅᒄ ᒫᒃ ᐆ ᓃᔥᑎᒻ ᒑ ᐅᐦᒋ ᒋᐦᒋᐱᔨᒡ ᐆ ᒑ ᒌ ᐱᒥᐱᔨᒡ᙮

ᐆ ᒫᒃ ᐊ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ, ᒫᒨ ᐋᐱᑎᔒᔥᑎᒧᒡ ᒋᔖᐄᔨᔨᐅᒡ, ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔨᐤᐦ ᑭᔮᐦ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᐊᓂᒌ ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔨᐤᐦ, ᐋᐅᑯᓂᒡ ᐧᐄᐧᐋᐤ ᐊ ᒋᔅᒑᔨᐦᑎᐦᒡ ᐧᐋᔥᑭᒡ ᑳ ᐄᔑ ᐋᐱᑎᓂᔨᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ, ᐋᔪᐧᐃᒄ ᐊᓂᔮ ᐋᓂᔅᒑ ᑳ ᐄᔑ ᒋᔅᒑᔨᐦᑎᐦᒡ ᐧᐋᔥᑭᒡ ᐄᔨᔨᐅᒡ᙮ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᐧᐄᐧᐋᐤ ᒋᔅᒑᔨᐦᑎᒧᒡ ᑖᓂᑖᐦ ᐃᔅᐱᔨᑦ ᐊᐧᐋᓐ ᐲᐦᒋᔨᐤ ᐅᐦᒋ ᐊᓂᔮ ᐊ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ, ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ, ᒑᐧᑳᓐ ᐊ ᐊᑎ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ, ᐊ ᒥᔪᒦᒋᓱᓈᓂᐧᐃᔨᒡ ᑭᔮᐦ ᑖᓂᑖᐦ ᐃᔅᐱᔨᑦ ᐊᐧᐋᓐ ᐲᐦᒋᔨᐤ ᐊ ᒌ ᒥᔪᐱᒫᑎᓯᑦ᙮ ᐋᑯᑎᐦ ᐧᐋᐦᒋ ᒋᔅᒑᔨᐦᑎᐦᒡ ᐅᐦᒋ ᐊᓂᔮ ᐊ ᒌ ᒋᔅᑯᑎᒫᓱᒡ ᒥᓯᓂᐦᐄᑭᓐᐦ ᐊ ᒌ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᒑᐧᑳᓐ ᐊᓂᑖᐦ ᐄᔑ ᐅᑖᐦᒡ, ᑭᔮᐦ ᐋᔪᐧᐃᒄ ᐧᒫᐦᒡ ᐋᓂᔅᒑ ᐊ ᐄᔑ ᐱᒥᐱᔨᔨᒡ ᐊᓂᔮ ᐅᒋᔅᒑᔨᐦᑎᒧᐧᐃᓂᐧᐋᐤ᙮

ᐆ ᒫᒃ ᐧᐋᐦᒋ ᐋᐱᑎᔒᔥᑖᑭᓂᐧᐃᒡ, ᐋᔪᐧᐃᒄ ᑳ ᒌ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐅᒡ ᑭᔮᐦ ᑯᑎᑭᒡ ᐊᐧᐋᓂᒌ ᐊᓂᔮᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋᒄ ᒫᒃ ᑳ ᒌ ᐧᐄᒋᐦᐄᑯᒡ ᐊ ᔒᐧᐋᑭᒥᐦᐧᑳᒡ᙮ ᒫᐅᔮ ᐊ ᐄᔑ ᐋᐱᑎᔒᔥᑎᐦᒡ ᐊᓂᒌ ᑳ ᒫᒨ ᐧᐄᒋᐦᐄᑐᒡ:

- ᒑ ᒌ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡᐦ ᐄᔨᔨᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐ ᓂᑐᐦᑯᔨᓐᐦ ᒑ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐊ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ
- ᒑ ᒌ ᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓂᑖᐦ ᐊ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓐ ᐊ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ
- ᒑ ᒌ ᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓂᑖᐦ ᐊ ᐧᐄᐦ ᐄᔑ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐅᒡ ᐅᔮ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ (ᐱᑯᓂᒑ ᐊ ᑏᐧᔮᐳᐦᒑᓂᐧᐃᒡ ᑭᔮᐦ ᒫᒃ ᐃᔨᐦᒡ ᐊ ᐄᔑ ᓂᑐᐦᑯᔨᓂᐦᒑᓂᐧᐃᒡ)
- ᒑ ᒌ ᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓂᑖᐦ ᐋᓂᔅᒑ ᒑ ᒌ ᑭᓂᐧᐋᔨᐦᑖᑭᓂᐧᐃᒡ ᐊᓐ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓐ ᐊ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮

Why have a project on anti-diabetic plants?

The Iiyiyiuch know that plants come from the Creator and are to be used to help all Iiyiyiuch. Some people have been given this knowledge so they can help others to stay healthy. These days, many Iiyiyiuch want their health centre to offer traditional medicines along with the western ones. This project is a first step in that process.

The project is a joint effort between elders and healers and scientists. The healers are bringing the knowledge of traditional medicines that was passed down to them from their ancestors and that they have built up from a lifetime of observation. The scientists are bringing western teachings about diabetes, drugs, plant chemistry, nutrition, and how the body works. They built up this knowledge by reading reports that have been checked by other scientists, and they will pass it on in the same way.

The purpose is to make healing plants available to Iiyiyiuch and other people who need them to help fight diabetes. The partners want to:

- Find out which Iiyiyiu healing plants could help fight diabetes
- Learn how the plants fight diabetes
- Find out how Iiyiyiuch prefer to take these plant medicines (e.g. as teas, drops, etc.)
- Find ways to pass the knowledge of healing plants on to the next generation.

ᑫᐧᑳᓐ ᑫ ᐃᐦᑎᓈᓄᐧᐃᐦᒡ ᐆ ᐁ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ

ᒥᓯᐧᐁ ᒋᑲ ᐧᐄᒑᐸᑎᓰᒥᑑᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᒋᔐᐄᓅᒡ ᑲᔦ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᐊᓂᒌ ᑳ ᒥᔦᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓂᔫ᙮ ᐁᔫᒄ ᒫᒨ ᑫ ᐋᐸᑎᓰᐦᑲᐦᑕᐦᐧᑳᐤ ᑫ ᒋᔅᑫᔨᐦᑖᑯᐦᑖᐧᑖᐤ ᑫᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐁ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᔨᒡᐦ᙮

ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᓂᓈᐦᑰ ᒋᑲ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑕᒧᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ:·

- ᐁᑯᑌ ᐊᓂᑌ ᐯᐦᑳᒡ ᐁ ᐅᐦᒋ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑫ ᐧᐄᐦ ᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᑫᐧᑳᔫ ᐊᓂᑦ ᐁ ᐃᐦᑎᑯᓂᔨᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ ᐁ ᓂᑐᐦᑯᔨᓅᔨᒡ
- ᒋᑲ ᓂᑑᒋᔅᑫᔨᐦᑕᒧᒡ ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᓂᔨᐦᐧᑳᐤᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓅᔨᒡ᙮ ᐁᔫᒄ ᐅᔫ ᑫ ᑲᓇᐧᐋᐸᐦᑕᐦᐧᑳᐤ
  - ᑖᐧᐯ ᐁ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑫ ᒌ ᑲᓇᐧᐁᔨᐦᑖᑯᐦᒡ ᔔᑳᐤ ᐲᐦᒋᔫ
  - ᑖᐧᐯ ᐁ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁᑳ ᑫ ᒌ ᐅᔥᑖᐸᔨᑦ ᐊᐧᐁᓐ ᐅᒥᔦᐱᒫᑎᓰᐧᐃᓂᐦᒡ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ (ᐧᒣᐦᒡ ᐅᑌᐦᐄ ᐃᑖᔅᐱᓀᐧᐃᓐ ᓀᔥᑦ ᒫᒃ ᐁ ᐅᔥᑖᐸᔨᐦᑦ ᐊᐧᐁᓐ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᑦ)
  - ᑖᐧᐯ ᐁᑳ ᑫ ᐸᐦᒋᐳᑦ ᐊᐧᐁᓐ ᐁ ᐋᐸᒋᐦᑖᑦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᑲᔦ ᒫᒃ ᑖᐧᐯ ᒌᑯ ᑫ ᒌ ᐋᐸᒋᐦᑖᑦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᔫ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᔒᐧᐋᑲᒥᐦᐧᑫᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮
- ᒋᑲ ᓂᑑᒋᔅᑫᔨᐦᑕᒧᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᓰᔅᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᔨᒡᐦ᙮
- ᒫᔥᑯᒡ ᒋᑲ ᓂᑑᒋᔅᑫᔨᐦᑕᒧᒡ ᑖᓐ ᑫ ᐃᔅᐸᔨᓂᔨᒡ ᐁ ᐋᐸᒋᐦᑌᔨᒡᐦ ᐊᐧᐁᔫᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᔨᒡᐦ᙮

ᒑᐧᑳᓐ ᒑ ᐃᐦᑎᓈᓂᐧᐃᒡ ᐆ ᐋ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ

ᒥᓯᐧᐋ ᒋᑭ ᐧᐄᒑᐱᑎᓰᒥᑑᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᒋᔖᐄᔨᔨᐅᒡ ᑭᔮᐦ ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔨᐤᐦ ᐊᓂᒌ ᑳ ᒥᔦᒋᔅᒑᔨᐦᑎᐦᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓂᔨᐤ᙮ ᐋᔦᐧᐃᒄ ᒫᒨ ᒑ ᐋᐱᑎᔒᔥᑎᐦᒡ ᒑ ᒋᔅᒑᔨᐦᑖᑯᐦᑖᒡ ᒑᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᑖᒡ ᐋ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔨᐤᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᔨᒡᐦ᙮

ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᓂᓈᐦᑰ ᒋᑭ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑎᒧᒡ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ:

- ᐋᑯᑖᐦ ᐊᓂᑖᐦ ᒥᒋᓐ ᐋ ᐅᐦᒋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᒑ ᐧᐄᐦ ᒋᔅᒑᔨᐦᑎᐦᒡ ᒑᐧᑳᔨᐤ ᐊᓂᑎᐦ ᐋ ᐃᐦᑎᑯᓂᔨᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ ᐋ ᓂᑐᐦᑯᔨᓂᐧᐃᔨᒡ
- ᒋᑭ ᓂᑑᒋᔅᒑᔨᐦᑎᒧᒡ ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ ᐊᓂᔮᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᔨᒡ᙮ ᐋᔦᐧᐃᒄ ᐅᔮ ᒑ ᑭᓂᐧᐋᐱᐦᑎᐦᒡ
  - ᑖᐧᐹᐦ ᐋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒑ ᒌ ᑭᓂᐧᐋᔨᐦᑖᑯᐦᒡ ᔔᑳᐤ ᐲᐦᒋᔨᐤ
  - ᑖᐧᐹᐦ ᐋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋᑳ ᒑ ᒌ ᐅᔥᑖᐱᔨᑦ ᐊᐧᐋᓐ ᐅᒥᔦᐱᒫᑎᓰᐧᐃᓂᐦᒡ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ (ᐱᑯᓂᒑ ᐅᑖᐃᐦ ᐃᑖᔅᐱᓈᐧᐃᓐ ᑭᔮᐦ ᒫᒃ ᐋ ᐅᔥᑖᐱᔨᑦ ᐊᐧᐋᓐ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᑦ)
  - ᑖᐧᐹᐦ ᐋᑳ ᒑ ᐱᐦᒋᐳᑦ ᐊᐧᐋᓐ ᐋ ᐋᐱᒋᐦᑖᑦ ᐊᓂᔮᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᑭᔮᐦ ᒫᒃ ᑖᐧᐹᐦ ᒌᑯ ᒑ ᒌ ᐋᐱᒋᐦᑖᑦ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᔨᐤ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᔒᐧᐋᑭᒥᐦᐧᑳᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮
- ᒋᑭ ᓂᑑᒋᔅᒑᔨᐦᑎᒧᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᐋᒡ ᐊᐅᐦᑳᓐᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᔨᒡᐦ᙮
- ᐧᑳᔖᓐ ᒋᑭ ᓂᑑᒋᔅᒑᔨᐦᑎᒧᒡ ᑖᓐ ᒑ ᐃᔅᐱᔨᔨᒡ ᐋ ᐋᐱᒋᐦᑖᔨᒡᐦ ᐊᐧᐋᔨᐤᐦ ᐊᓂᔮᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᔨᒡᐦ᙮

What the project will do

The scientists will work together with the elders and the healers who are experts in traditional medicine. Together, they will identify plants that the healers use to treat the problems that people get when they have diabetes.

The scientists will then carry out many different kinds of tests on these plants:

- They will look at the plants in the lab to try to identify their active ingredients.
- They will do lab tests to see what effects the plants might have on diabetes. This means looking at things like:
  - Whether the plants help our bodies to store sugar better
  - Whether the plants help protect against health problems that diabetes causes (like heart disease or damage to the nerves)
  - Whether the plants are safe to take, and whether they can be taken along with other diabetes medicines.
- They will test the plants on animals that have diabetes-like conditions.
- They may do studies to look at what happens when people take the plants for their diabetes.

- ᐊᓂᑌ ᓈᐅᔥ ᐄᔑ ᓃᔥᑖᒥᐦᒡ, ᒫᔥᑯᒡ ᒋᑲ ᓂᑑᒋᔅᑫᔨᐦᑕᒧᒡ ᑖᐧᐯ ᐁ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ᙮ ᓈᔥᑖᐧᐯ ᐃᔮᐧᑳᐦ ᒋᑲ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑕᒧᒡ, ᐁᔫᒄ ᒉ ᑎᐱᐦᑎᑖᑲᓄᐧᐃᐦᒡ ᐊᓂᒌ ᐊᐧᐁᓂᒌ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑲᔦ ᐊᓂᒌ ᐊᐧᐁᓂᒌ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮

ᑖᓂᑌ ᒉ ᐄᔑ ᓈᑲᑐᐧᐁᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᒋᔅᑫᔨᐦᑕᒧᐧᐃᓐ

ᐸᔅᒡ ᐊᓂᔫ ᐁ ᐄᔑ ᐧᐄᐦᑕᐦᐧᑳᐤ ᒋᔐᐄᓅᒡ ᑲᔦ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ, ᐁᐅᒄ ᒫᔥᑯᒡ ᐁ ᐃᔑᓈᑯᐦᒡ ᒉ ᐧᐄᐦ ᓈᑲᑐᐧᐁᔨᐦᑖᑲᓄᐧᐃᐦᒡ (ᐧᒣᐦᒡ ᐊᓐ ᐁ ᐄᔑ ᒋᔅᑌᔨᐦᑖᑯᐦᒡ ᐄᓅ ᓂᑐᐦᑯᔨᓐ)᙮ ᒫᔥᑯᒡ ᑲᔦ ᒋᑲ ᒌ ᒥᔅᑲᐧᐋᐦᑌᐅᒡ ᒉᐧᑳᔫ ᐁ ᐅᔥᑳᔨᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᐄᔑ ᐧᐄᐦᑕᒫᑯᐧᑖᐤ ᒋᔐᐄᓅᐦ, ᐁᐅᒄ ᒫᒃ ᐆ ᒋᐸᐦ ᐧᐄᐦ ᓈᑲᑐᐧᐁᔨᐦᑖᑲᓅ᙮ ᐊᓐ ᒫᒃ ᒉ ᒌ ᓈᑲᑐᐧᐁᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᒋᔅᑫᔨᐦᑕᒧᐧᐃᓐ ᑲᔦ ᒉᐧᑳᓐ ᐁ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᑲᓄᐧᐃᐦᒡ, ᒋᑲ ᒪᓯᓇᐦᐆᓲᒡ ᓂᔅᑯᒧᐧᐃᓂᔫ ᐊᓂᒌ ᐊᐧᐁᓂᒌ ᐅᔫ ᐁ ᐄᔑ ᐋᐸᑎᓰᐦᑲᐦᑕᐦᐧᑳᐤ᙮ ᐆ ᒫᒃ ᓂᔅᑯᒧᐧᐃᓐ, ᐁᐅᑯᓂᒡ ᑳ ᒪᓯᓇᐦᐆᓱᐧᑖᐤ ᒥᔅᑎᓯᓃ ᐅᒋᒫᐦᑳᓐ ᐋᐸᑎᓰᐧᐃᓐ, ᐧᐋᐸᒣᑯᔥᑐᐃ ᐅᒋᒫᐦᑳᓐ ᐋᐸᑎᓰᐧᐃᓐ, ᓂᑐᐦᑯᔨᓐ ᐋᐸᑎᓰᐧᐃᓐ, ᒋᔐᐅᒋᒫᐦᑳᓐ ᐋᐸᑎᓰᐧᐃᓐ ᑲᔦ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᔖᔥ ᒌ ᒪᓯᓇᐦᐆᓲᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᒫᔥᑯᒡ ᒫᒃ ᐊᓂᑌ ᐄᔑ ᓃᔥᑖᒥᐦᒡ ᒋᑲ ᐧᐄᐦ ᐧᐄᒋᐦᐄᐧᐁᐅᒡ ᑯᑕᒃᐦ ᐄᓅ ᐅᑌᓈᐤᐦ ᐅᔫ ᐁ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓅᔨᒡ᙮ ᐆ ᒫᒃ ᐃᔑᓈᑯᐦᒉ, ᐁᔫᒄ ᑲᔦ ᐧᐄᐧᐋᐤ ᒉ ᒪᓯᓇᐦᐆᓱᐧᑖᐤ ᐊᓂᔫ ᓂᔅᑯᒧᐧᐃᓂᔫ᙮

- ᐊᓂᑖᐦ ᓈᐅᔥ ᐄᔑ ᓃᔥᑖᒥᐦᒡ, ᐧᑳᐧᔖᓐ ᒋᑭ ᓂᑑᒋᔅᒑᔨᐦᑎᒧᒡ ᑖᐧᐹᐦ ᐋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ᙮ ᓈᔥᑖᐧᐹᐦ ᐃᔮᐧᑳᐦ ᒋᑭ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑎᒧᒡ, ᐋᔪᐧᐃᒄ ᒑ ᑎᐱᐦᑎᑖᑭᓂᐧᐃᒡ ᐊᓂᒌ ᐊᐧᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᑭᔮᐦ ᐊᓂᒌ ᐊᐧᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒡ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮

ᑖᓂᑖᐦ ᒑ ᐄᔑ ᓈᑭᑐᐧᐋᔨᐦᑖᑭᓂᐧᐃᒡ ᐄᔨᔨᐤ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓐ

ᐱᔥᒡ ᐊᓂᔮ ᐋ ᐄᔑ ᐧᐄᐦᑎᐦᒡ ᒋᔖᐄᔨᔨᐅᒡ ᑭᔮᐦ ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔨᐤᐦ, ᐋᐅᒄ ᐧᑳᐧᔖᓐ ᐋ ᐃᔑᓈᑯᐦᒡ ᒑ ᐧᐄᐦ ᓈᑭᑐᐧᐋᔨᐦᑖᑭᓂᐧᐃᒡ (ᐧᒫᐦᒡ ᐊᓐ ᐋ ᐄᔑ ᒋᔅᑖᔨᐦᑖᑯᐦᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐ)᙮ ᐧᑳᐧᔖᓐ ᑭᔮᐦ ᒋᑭ ᒌ ᒥᔅᑭᐧᐋᐦᑖᐅᒡ ᒑᐧᑳᔨᐤ ᐋ ᐅᔥᑳᔨᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᐄᔑ ᐧᐄᐦᑎᒫᑯᒡ ᒋᔖᐄᔨᔨᐤᐦ, ᐋᐅᒄ ᒫᒃ ᐆ ᒋᐱᐦ ᐧᐄᐦ ᓈᑭᑐᐧᐋᔨᐦᑖᑭᓂᐤ᙮ ᐊᓐ ᒫᒃ ᒑ ᒌ ᓈᑭᑐᐧᐋᔨᐦᑖᑭᓂᐧᐃᒡ ᐄᔨᔨᐤ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓐ ᑭᔮᐦ ᒑᐧᑳᓐ ᐋ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᑭᓂᐧᐃᒡ, ᒋᑭ ᒥᓯᓂᐦᐆᓲᒡ ᓂᔅᑯᒧᐧᐃᓂᔮᐤ ᐊᓂᒌ ᐊᐧᐋᓂᒌ ᐅᔮ ᐋ ᐄᔑ ᐋᐱᑎᓰᔥᑎᐦᒡ᙮ ᐆ ᒫᒃ ᓂᔅᑯᒧᐧᐃᓐ, ᐋᐅᑯᓂᒡ ᑳ ᒥᓯᓂᐦᐆᓱᒡ ᒥᔅᑎᓯᓃ ᐅᒋᒫᐦᑳᓐ ᐋᐱᑎᓰᐧᐃᓐ, ᐧᐋᐱᒫᑯᔥᑐᐃ ᐅᒋᒫᐦᑳᓐ ᐋᐱᑎᓰᐧᐃᓐ, ᓂᑐᐦᑯᔨᓐ ᐋᐱᑎᓰᐧᐃᓐ, ᒋᔖᐅᒋᒫᐦᑳᓐ ᐋᐱᑎᓰᐧᐃᓐ ᑭᔮᐦ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᔖᔥ ᒌ ᒥᓯᓂᐦᐆᓲᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᐧᑳᐧᔖᓐ ᒫᒃ ᐊᓂᑖᐦ ᐄᔑ ᓃᔥᑖᒥᐦᒡ ᒋᑭ ᐧᐄᐦ ᐧᐄᒋᐦᐄᐧᐋᐅᒡ ᑯᑎᒃᐦ ᐄᔨᔨᐤ ᐃᐦᑖᐧᐃᓐᐦ ᐅᔮ ᐋ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᔨᒡ᙮ ᐆ ᒫᒃ ᐃᔑᓈᑯᐦᒑ, ᐋᔪᐧᐃᒄ ᑭᔮᐦ ᐧᐄᐧᐋᐤ ᒑ ᒥᓯᓂᐦᐆᓱᒡ ᐊᓂᔮ ᓂᔅᑯᒧᐧᐃᓂᔮᐤ᙮

- In the long term, they may carry out clinical studies to be sure the plants really help with diabetes. This means they will carefully compare results between people who use the plants and people who take other medications.

How traditional knowledge will be protected

Some of the information that the elders and healers provide might be confidential (for instance with respect to the traditional medicines). Also, researchers might produce new information, based on what the elders said, that should be kept confidential. To make sure the traditional and scientific knowledge is protected, the people involved are signing a detailed Agreement. This Agreement will be between the Mistissini First Nation, the Whapmagoostui First Nation, the Cree Health Board, the Grand Council, and the university researchers. The university researchers have already signed the Agreement. Other Iiyiyiu communities might decide to join the project later. If this happens, they will be added to the Agreement.

ᐆ ᒫᒃ ᓂᔅᑯᒧᐧᐃᓐ, ᐁᐅᒄ ᐧᐁᐦᒋ ᐃᐦᑎᑯᐦᒡ:

- ᒉ ᒌ ᒪᓯᓈᑌᒡ ᑖᓐ ᐁ ᐄᔑ ᐱᒥᐸᔨᐦᒡ ᐁ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓂᔫ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ ᑲᔦ ᐊᓐ ᒉᐧᑳᓐ ᐁ ᐧᐄᐦ ᐱᐦᑯᐦᑖᑲᓄᐧᐃᐦᒡ ᐆ ᐁ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐧᐃᐦᒡ
- ᒉ ᒌ ᒪᓯᓈᑌᔨᒡ ᑖᓐ ᒉ ᐃᑖᐸᑎᓰᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐅᔫ ᐁ ᐄᔑ ᐋᐸᑎᓰᐦᑲᐦᑕᐦᐧᑳᐤ
- ᒉ ᒌ ᒪᓯᓈᑌᒡ ᐊᐧᐁᓐ ᒉ ᒌ ᐋᐸᒋᐦᑖᑦ ᐊᓂᔫ ᒋᔅᒉᔨᐦᑕᒧᐧᐃᓂᔫ ᐅᔫ ᐁ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᑲᓅᔨᒡ ᑲᔦ ᑖᓂᑌ ᒉ ᒌ ᐃᑖᐸᒋᐦᑖᑦ
- ᒉ ᒌ ᒪᓯᓈᑌᒡ ᑖᓂᑌ ᒉ ᐄᔑ ᓈᑲᑐᐧᐁᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᒋᔅᒉᔨᐦᑕᒧᐧᐃᓐ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᐄᔑ ᑎᐯᔨᐦᑕᐦᐧᑳᐤ᙮

ᐆ ᒫᒃ ᓂᔅᑯᒧᐧᐃᓐ, ᐁᑯᑦ ᐁ ᐧᐄᓯᓈᑌᒡ ᓃᔥᑕᒻ ᒉ ᑲᐧᑫᒋᒣᐧᑖᐤ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᒥᓯᐧᐁ ᐁ ᐧᐄᒋᐦᐄᐧᐁᔨᒡᐦ ᐅᔫ ᐁ ᐄᔑ ᐋᐸᑎᓰᐦᑲᐦᑖᑲᓅᔨᒡ ᐧᐹᒧᔥ ᐁ ᒋᔅᒉᔨᐦᑖᑯᑖᐧᑖᐤ ᐊᓂᔫ ᒉᐧᑳᔫ ᐁ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᐧᑖᐤ᙮ ᓈᔥᑖᐧᐯ ᑯᐃᔅᒄ ᐆ ᒋᑲ ᐄᔑ ᑲᓇᐧᐋᐸᐦᑖᑲᓅ᙮ ᐆ ᒫᒃ ᐁ ᑲᓇᐧᐋᐸᐦᑖᑲᓄᐧᐃᐦᒡ, ᐁᑯᑦ ᒉ ᒌ ᐲᑯᓯᓇᐦᐊᐦᐧᑳᐤᐦ ᐊᐧᐁᓂᒌ ᒉᐧᑳᔫ ᐁᑳ ᓂᑐᐧᐁᔨᐦᑕᐦᐧᑳᐤ ᒉ ᒋᔅᒉᔨᐦᑖᑯᓂᔨᒡ, ᐧᒉᐦᒡ ᐊᓂᔫ ᐄᓅ ᒋᔅᒉᔨᐦᑕᒧᐧᐃᓂᔫ᙮ ᐁᑯᑦ ᑲᔦ ᑖᐱᔥᑯᓐ ᒉ ᒌ ᓂᓯᑐᐦᑎᐦᐧᑳᐤ ᐄᓅᒡ ᑲᔦ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᑳ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᑲᓅᔨᒡ᙮ ᓇᒧᐃ ᒋᑲ ᒪᓯᓇᐦᐄᑲᑖᔫ ᐊᐧᐁᓐ ᐅᑎᓯᓂᐦᑳᓱᐧᐃᓐ ᐹᔅᑳᓐ ᐁ ᓂᔅᑯᒧᑦ ᐊᓐ ᐊᐧᐁᓐ᙮

ᐆ ᒫᒃ ᓂᔅᑯᒧᐧᐃᓐ, ᐋᐅᒄ ᐧᐋᐦᒋ ᐃᐦᑎᑯᐦᒡ:

- ᒑ ᒌ ᒥᓯᓈᑖᒡ ᑖᓐ ᐋ ᐄᔑ ᐱᒥᐱᔨᒡ ᐋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓂᔮ ᒑ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ ᑭᔮᐦ ᐊᓐ ᒑᐧᑳᓐ ᐋ ᐧᐄᐦ ᐱᐦᑯᐦᑖᑭᓂᐧᐃᒡ ᐆ ᐋ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ
- ᒑ ᒌ ᒥᓯᓈᑖᔨᒡ ᑖᓐ ᒑ ᐃᑖᐱᑎᓰᒡ ᐊᐧᐋᓂᒌ ᐅᔮ ᐋ ᐄᔑ ᐋᐱᑎᔒᔥᑎᐦᒡ
- ᒑ ᒌ ᒥᓯᓈᑖᒡ ᐊᐧᐋᓐ ᒑ ᒌ ᐋᐱᒋᐦᑖᑦ ᐊᓂᔮ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓂᔨᐤ ᐅᔮ ᐋ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᑭᓂᐧᐃᔨᒡ ᑭᔮᐦ ᑖᓂᑖᐦ ᒑ ᒌ ᐃᑖᐱᒋᐦᑖᑦ
- ᒑ ᒌ ᒥᓯᓈᑖᒡ ᑖᓂᑖᐦ ᒑ ᐄᔑ ᓈᑭᑐᐧᐋᔨᐦᑖᑭᓂᐧᐃᒡ ᐄᔨᔨᐤ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓐ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᐄᔑ ᑎᐹᔨᐦᑎᐦᒡ᙮

ᐆ ᒫᒃ ᓂᔅᑯᒧᐧᐃᓐ, ᐋᑯᑎᐦ ᐋ ᐧᐄᓯᓈᑖᒡ ᓃᔥᑎᒻ ᒑ ᑯᐧᑳᒋᒫᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᒥᓯᐧᐊ ᐊ ᐧᐄᒋᐦᐄᐧᐋᔨᒡᐦ ᐅᔮ ᐋ ᐄᔑ ᐋᐱᑎᔒᔥᑖᑭᓂᐧᐃᔨᒡ ᐋᐦᐧᒫᔮ ᐋ ᒋᔅᒑᔨᐦᑖᑯᑖᒡ ᐊᓂᔮ ᒑᐧᑳᔨᐤ ᐋ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᒡ᙮ ᓈᔥᑖᐧᐹᐦ ᑯᔨᔅᒄ ᐆ ᒋᑭ ᐄᔑ ᑭᓂᐧᐋᐱᐦᑖᑭᓂᐤ᙮ ᐆ ᒫᒃ ᐋ ᑭᓂᐧᐋᐱᐦᑖᑭᓂᐧᐃᒡ, ᐋᑯᑎᐦ ᒑ ᒌ ᐲᑯᓯᓂᐦᐊᐦᒡ ᐊᐧᐋᓂᒌ ᒑᐧᑳᔨᐤ ᐋᑲ ᓂᑐᐧᐋᔨᐦᑎᐦᒡ ᒑ ᒋᔅᒑᔨᐦᑖᑯᓂᔨᒡ, ᐱᑯᓂᒑ ᐊᓂᔮ ᐄᔨᔨᐤ ᒋᔅᒑᔨᐦᑎᒧᐧᐃᓂᔨᐤ᙮ ᐋᑯᑎᐦ ᑭᔮᐦ ᑖᐱᔥᑯᓐ ᒑ ᒌ ᓂᔥᑐᐦᑎᐦᒡ ᐄᔨᔨᐅᒡ ᑭᔮᐦ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᑳ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᑭᓂᐧᐃᔨᒡ᙮ ᓂᒧᐃ ᒋᑭ ᒥᓯᓂᐦᐄᑭᓂᐧᐃᔨᐤ ᐊᐧᐋᓐ ᐅᑎᓯᓂᐦᑳᓱᐧᐃᓐ ᐹᑎᔥ ᐋ ᓂᔅᑯᒧᑦ ᐊᓐ ᐊᐧᐋᓐ᙮

The purpose of the Agreement is to:

- Describe the Anti-diabetic Plant project and its objectives
- Set out the roles of the different partners
- Set out who can use the information that the project produces, and how
- Describe the ways that Iiyiyiu ownership of their traditional knowledge will be protected.

The Agreement says that before the researchers can make their findings public, they first have to check with the other parties to the agreement. They will do this using a detailed Review Process. This review process will give the community a chance to withdraw its traditional knowledge if it doesn't think it should be made public. It will also allow Iiyiyiuch and the researchers to interpret the findings together. No names will be made public without the consent of the person concerned.

ᓂᓈᐦᑰ ᐁ ᐃᔑᓈᑯᐦᒡ ᐁ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᓂᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ
ᓂᓈᐦᑰ ᐋ ᐃᔑᓈᑯᐦᒡ ᐋ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒃᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒃ
Parts of the Anti-diabetic Plant Project

ᐁ ᐧᐋᐧᐋᐸᐦᑖᑲᓄᐧᐃᐦᒡ ᒉ ᒌ ᒌᑰᐸᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

(ᓂᑑᐦᑯᔨᓐ ᐋᐸᑎᓰᐧᐃᓐ, ᑰᓂᔑᔥ, ᐧᑖᓖ, ᓚᓐᑕᓐ)

ᐋ ᐧᐋᐧᐋᐱᐦᑖᑭᓂᐧᐃᒃ ᒫ ᒌ ᒌᑰᐱᔨᐦᑖᑭᓂᐧᐃᒃ ᐄᔨᔨᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒃ

(ᓂᑑᐦᑯᔨᓐ ᐋᐱᑎᓰᐧᐃᓐ, ᑰᓂᔑᔥ, ᐧᑖᓖ, ᓚᓐᑎᓐ)

Looking at ways to combine traditional and "western" diabetes care (Education/ Integration)

(CBHSSJB, Coonishish, Torrie, Linton)

ᐁ ᐧᐄᓛᐸᑎᓰᒫᑲᓅᐧᑖᐤ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᒉ ᒌ ᐅᔦᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᒉᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ

(ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᑲᔦ ᑰᓇᔦᕐ ᓛᑉ ᐊᓂᑌ ᒨᓀᔫᐤ ᐳᑖᓂᑲᓪ ᑳᕐᑎᓐᐢ)

ᐋ ᐧᐄᓛᐱᑎᓰᒫᑭᓂᐧᐃᒃ ᑳ ᐧᐄᒋᐦᐋᒃ ᐊᐧᐋᔨᐤᐦ ᒫ ᒌ ᐅᔮᔨᐦᑖᑭᓂᐧᐃᒃ ᒫᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃᐦ

(ᑳ ᐧᐄᒋᐦᐋᒃ ᐊᐧᐋᔨᐤᐦ ᑭᔮᐦ ᑰᓇᔦᕐ ᓛᑉ ᐊᓂᑖᐦ ᐧᒫᓀᔫᐤ ᐳᑖᓂᑭᓪ ᑳᕐᑎᓐᐢ)

Working with healers to decide which plants to look at (Ethnobotany)

(Healers and Cuerrier lab at Mtl Botanical Gardens)

ᐁ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐁ ᐃᐢᐱᐢ ᐃᐦᑎᑯᐦᒡ ᓃᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐁᓐ ᑲᔦ ᐁ ᐊᔨᒥᐦᐋᑲᓅᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅ ᓂᑑᐦᑯᔨᓐᐦ ᐊᓂᑌ ᒥᐢᑎᓯᓃᐦᒡ

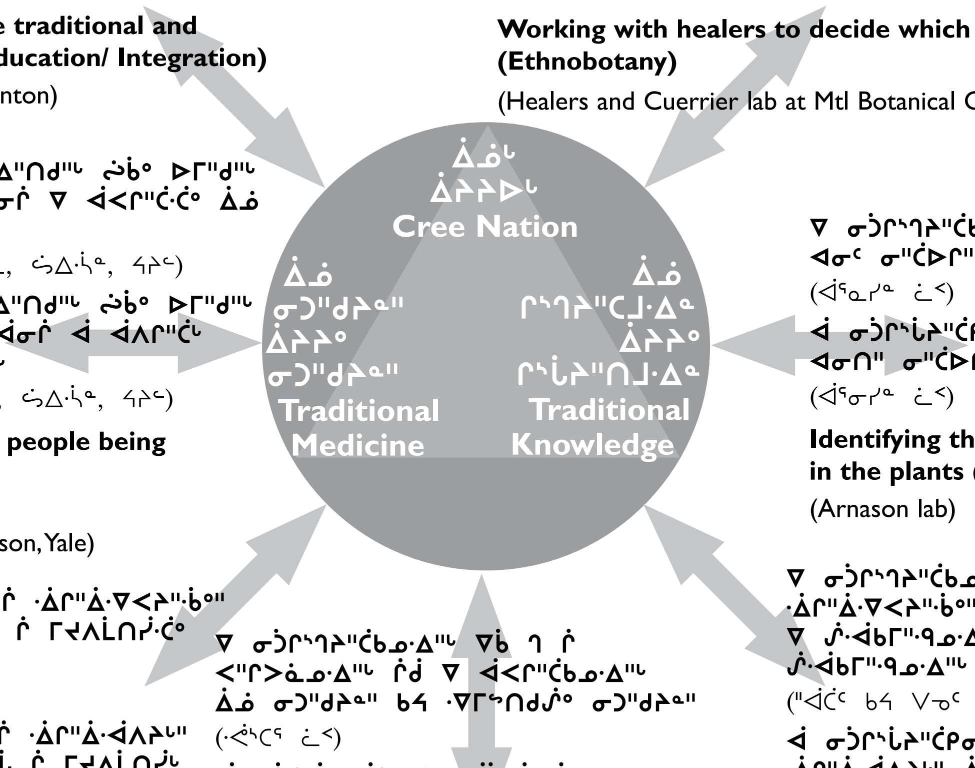
(ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ, ᑖᓄᓐᐧᐹᒻ, ᐧᑖᓖ, ᔖᐃᐧᓵᓐ, ᔦᔨᓪ)

ᐋ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃ ᐋ ᐃᐢᐱᔑ ᐃᐦᑎᑯᐦᒡ ᓃᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐋᓐ ᑭᔮᐦ ᐋ ᐊᔨᒥᐦᐋᑭᓂᐧᐃᒃ ᐊᐧᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒃ ᐄᔨᔨᐤ ᓂᑑᐦᑯᔨᓐᐦ ᐊᓂᑖᐦ ᒥᐢᑎᓯᓃᐦᒡ

(ᑳ ᐧᐄᒋᐦᐋᒃ ᐊᐧᐋᔨᐤᐦ, ᑖᓄᓐᐧᐹᒻ, ᐧᑖᓖ, ᔖᐃᐧᓵᓐ, ᔦᔨᓪ)

Sugar tests and interviews with people being treated by healers in Mistissini (Observational study)

(Healers, Dannenbaum, Torrie, Chiasson, Yale)



ᐁ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᒉᐧᑳᓐ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ

(ᐋᕐᓇᓯᓐ ᓛᑉ)

ᐋ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃ ᒫᐧᑳᓐ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ

(ᐋᕐᓂᓯᓐ ᓛᑉ)

Identifying the different ingredients in the plants (Phytochemistry)

(Arnason lab)

ᐁ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑖᓂᑌ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐄᓅ ᓂᑑᐦᑯᔨᓐᐦ ᑲᔦ ᐄᓅ ᒦᒋᒻ ᒉ ᒌ ᒥᔪᐱᒫᑎᓰᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ

(ᐧᒫᓐᐢ ᓛᑉ)

ᐋ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃ ᑖᓂᑖᐦ ᒫ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒃᐦ ᐄᔨᔨᐤ ᓂᑑᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐄᔨᒦᒋᒻ ᒫ ᒌ ᒥᔪᐱᒫᑎᓰᒃ ᐊᐧᐋᓂᒌ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᒃ

(ᐧᒫᓐᐢ ᓛᑉ)

Looking at how the traditional plants and foods could help people with diabetes to stay healthy (Nutrition)

(Johns lab)

ᐁ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐁᑳ ᒉ ᒌ ᐸᐦᒋᐳᓈᓄᐧᐃᐦᒡ ᒌᑰ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᓂᑑᐦᑯᔨᓐᐦ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑑᐦᑯᔨᓐᐦ

(ᐧᐹᐢᑕᕐ ᓛᑉ)

ᐋ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃ ᐋᑳ ᒫ ᒌ ᐱᐦᒋᐳᓈᓂᐧᐃᒃ ᒌᑰ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒃᐦ ᐄᔨᔨᐤ ᓂᑑᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑑᐦᑯᔨᓐᐦ

(ᐧᐹᐢᑎᕐ ᓛᑉ)

Making sure the healing plants are safe to take along with other medicines (Toxicology)

(Foster lab)

ᐁ ᓂᑑᒋᐢᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐄᓅ ᓂᑑᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ ᑲᔦ ᐁ ᐅᐢᑖᐸᔨᐦᐄᐧᐁᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

(ᐦᐋᑖᑦ ᑲᔦ ᐯᓀᑦ ᓛᑉᐢ)

ᐋ ᓂᑑᒋᐢᒫᔨᐦᑖᑭᓂᐧᐃᒃ ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒃᐦ ᐄᔨᔨᐤ ᓂᑑᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒃ ᑭᔮᐦ ᐋ ᐅᐢᑖᐱᔨᐦᐄᐧᐋᒃ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒃ

(ᐦᐋᑖᑦ ᑭᔮᐦ ᐯᓀᑦ ᓛᑉᐢ)

Looking at how the plants act on diabetes and the health problems that go with it (Pharmacology)

(Haddad and Bennett labs)

ᐸᔅᒡ ᐧᐋᐸᐦᐲᐧᐁᐧᐃᓐᐦ ᐅᐦᒋ ᐋᓐ ᐁ ᐄᔑ ᐋᐸᑎᓰᐦᑲᐦᒑᑲᓅᐧᐃᐦᒡ ᐁ ᓂᑑᒋᔅᑫᔮᐦᒑᑲᓅᐦᐧᑳᐤᐦ ᓂᐦᒑᐅᒋᐦᒋᑲᓐᐦ ᑫ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔮᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

ᐱᔥᒡ ᐧᐋᐱᐦᐲᐧᐋᐧᐃᓐᐦ ᐅᐦᒋ ᐋᓐ ᐋ ᐄᔑ ᐋᐱᑎᔒᔥᒑᑭᓂᐧᐃᒡ ᐋ ᓂᑑᒋᔅᓖᔮᐦᒑᑭᓂᐧᐃᒡᐦ ᓂᐦᒑᐅᒋᐦᒋᑭᓐᐦ ᓖ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔮᒡᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ

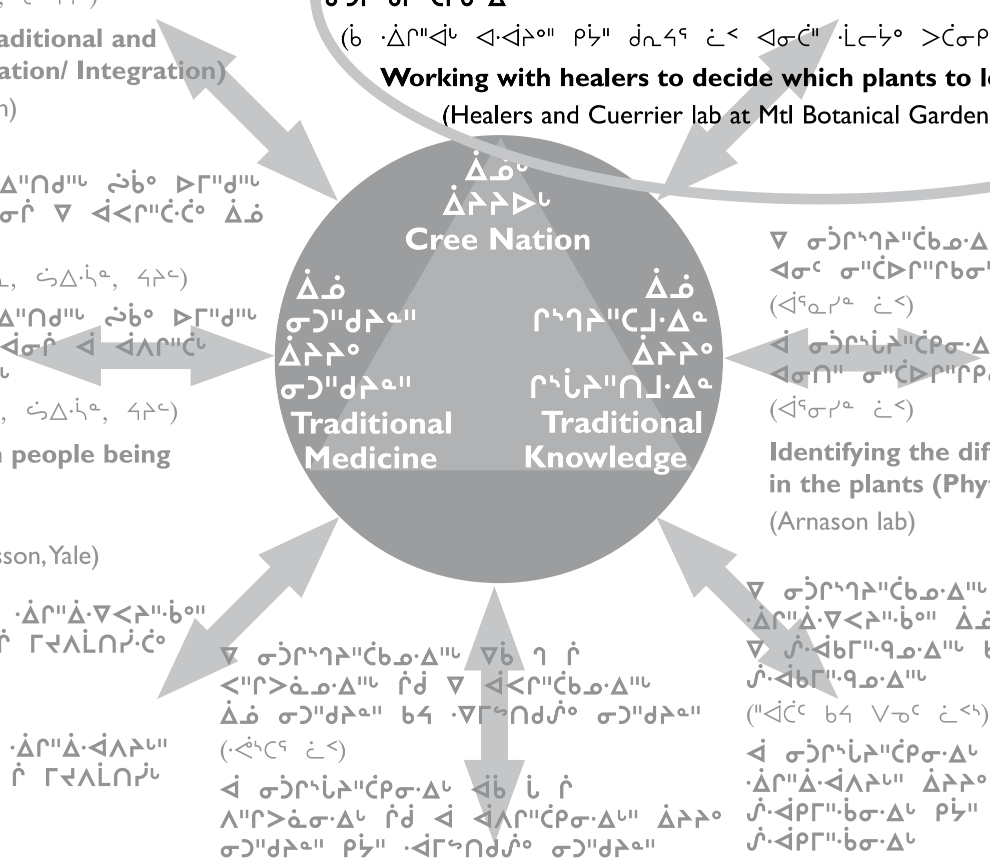
Some examples of the work being done as part of the anti-diabetic plant project

·ᐋᐸᐦᑏ·ᐁ·ᐃᓐ 1: ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔦᐦ ᑲᔦ ᑳ ᓂᑑᒋᐢᒉᔨᐦᑖᐦ·ᑳᐤ ᓂᐦᑖᐅᒥᐦᒋᑲᓐᐦ ᐁ ·ᐄᒑᐸᑎᓰᒥᑐ·ᑖᐤ ᒉ ᐅᔦᔨᐦᑖᐦ·ᑳᐤ ᒉᒄ ᓂᐦᑖᐅᒥᐦᒋᑲᓐᐦ ᒉ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓅᐦ·ᑳᐤ

·ᐋᐱᐦᑏ·ᐋ·ᐃᓐ 1: ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ ᑭᔮᐦ ᑳ ᓂᑑᒋᐢᒑᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒥᐦᒋᑭᓐᐦ ᐋ ·ᐄᒑᐱᑎᓰᒥᑐᒡ ᒑ ᐅᔮᔨᐦᑎᐦᒡ ᒑᒄ ᓂᐦᑖᐅᒥᐦᒋᑭᓐᐦ ᒑ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡᐦ

EXAMPLE 1: HEALERS AND SCIENTISTS WORKING TOGETHER TO DECIDE WHICH PLANTS TO LOOK AT

ᓂᓈᐦᑰ ᐁ ᐃᔑᓈᑯᐦᒡ ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓅᐦ·ᑳᐤ ᓂᑖᐅᒥᐦᒋᑲᓐᐦ ᒉ ᒌ ·ᐄᒋᐦᐄ·ᐁᐸᔨᐦ·ᑳᐤ ᐁ ᔔ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ
ᓂᓈᐦᑰ ᐋ ᐃᔑᓈᑯᐦᒡ ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡᐦ ᓂᐦᑖᐅᒥᐦᒋᑭᓐᐦ ᒑ ᒌ ·ᐄᒋᐦᐄ·ᐋᐱᔨᒡᐦ ᐋ ᔔ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ
Parts of the Anti-diabetic Plant Project



ᐁ ·ᐄᒑᐸᑎᓰᒫᑲᓅ·ᑖᐤ ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔦᐦ ᒉ ᒌ ᐅᔦᔨᐦᑖᑲᓅᐦ·ᑳᐤ ᒉᒄ ᓂᐦᑖᐅᒥᐦᒋᑲᓐᐦ ᒉ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓅᐦ·ᑳᐤ

(ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔦᐦ ᑲᔦ ᑰᓇᔦᕐ ᓛᑉ ᐊᓂᑌ ᒨᓕᔮᐤ ᐳᑖᓂᑲᓪ ᑳᕐᑎᓐᐢ)

ᐋ ·ᐄᒑᐱᑎᓰᒫᑭᓂ·ᐃᒡ ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ ᒑ ᒌ ᐅᔮᔨᐦᑖᑭᓂ·ᐃᒡ ᒑᒄ ᓂᐦᑖᐅᒥᐦᒋᑭᓐᐦ ᒑ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡᐦ

(ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ ᑭᔮᐦ ᑰᓇᔦᕐ ᓛᑉ ᐊᓂᑖᐦ ·ᒫᓕᔨᐤ ᐳᑖᓂᑭᑦ ᑳᕐᑎᓐᐢ)

Working with healers to decide which plants to look at (Ethnobotany)

(Healers and Cuerrier lab at Mtl Botanical Gardens)

ᐁ ·ᐋ·ᐋᐸᐦᑖᑲᓄ·ᐃᐦᒡ ᒉ ᒌ ᒌᑯᐸᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᐄᓅ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᑲᔦ ·ᐁᒥᐢᑎᑯᔒᐤ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᐁ ᔔ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ

(ᓂᑐᐦᑯᔨᓐ ᐋᐸᑎᓰ·ᐃᓐ, ᑰᓂᔑᔥ, ·ᑖᕆ, ᓕᓐᑕᓐ)

ᐋ ·ᐋ·ᐋᐱᐦᑖᑭᓂ·ᐃᒡ ᒑ ᒌ ᒌᑯᐱᔨᐦᑖᑭᓂ·ᐃᒡ ᐄᔨᔨᐤ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᑭᔮᐦ ·ᐋᒥᐢᑎᑯᔒᐤ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᐋ ᔔ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ

(ᓂᑐᐦᑯᔨᓐ ᐋᐱᑎᓰ·ᐃᓐ, ᑰᓂᔑᔥ, ·ᑖᕆ, ᓕᓐᑎᓐ)

Looking at ways to combine traditional and "western" diabetes care (Education/ Integration)

(CBHSSJB, Coonishish, Torrie, Linton)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᐁ ᐃᐢᐱᐢ ᐃᐦᑎᑯᐦᒡ ᓲᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊ·ᐁᓐ ᑲᔦ ᐁ ᐊᔨᒥᐦᐋᑲᓅ·ᑖᐤ ᐊ·ᐁᓂᒌ ᐁ ᐋᐸᒋᐦᑖ·ᑖᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑌ ᒥᐢᑎᓯᓃᐦᒡ

(ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔦᐦ, ᑖᓀᓐ·ᐹᒻ, ·ᑖᕆ, ᓵᐃ·ᓵᓐ, ᔦᔨᓪ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᐋ ᐃᐢᐱᔑ ᐃᐦᑎᑯᐦᒡ ᓲᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊ·ᐋᓐ ᑭᔮᐦ ᐋ ᐊᔨᒥᐦᐋᑭᓂ·ᐃᒡ ᐊ·ᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑖᐦ ᒥᐢᑎᓯᓃᐦᒡ

(ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ, ᑖᓀᓐ·ᐹᒻ, ·ᑖᕆ, ᓵᐃ·ᓵᓐ, ᔦᔨᓪ)

Sugar tests and interviews with people being treated by healers in Mistissini (Observational study)

(Healers, Dannenbaum, Torrie, Chiasson, Yale)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᑖᓂᑌ ᒉ ᒌ ·ᐄᒋᐦᐄ·ᐁᐸᔨᐦ·ᑳᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ᐄᓅ ᒦᒋᒻ ᒉ ᒌ ᒥᔦᐱᒫᑎᓯ·ᑖᐤ ᐊ·ᐁᓂᒌ ᐁ ᔔ·ᐋᑲᒥᐦ·ᑫ·ᑖᐤ

(·ᒎᓐᐢ ᓛᑉ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᑖᓂᑖᐦ ᒑ ᒌ ·ᐄᒋᐦᐄ·ᐋᐱᔨᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐄᔨᒦᒋᒻ ᒑ ᒌ ᒥᔦᐱᒫᑎᓯᒡ ᐊ·ᐋᓂᒌ ᐋ ᔔ·ᐋᑭᒥᐦ·ᑳᒡ

(·ᒎᓐᐢ ᓛᑉ)

Looking at how the traditional plants and foods could help people with diabetes to stay healthy (Nutrition)

(Johns lab)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᐁᑳ ᒉ ᒌ ᐸᐦᒋᐳᓈᓄ·ᐃᐦᒡ ᒌᑯ ᐁ ᐋᐸᒋᐦᑖᑲᓄ·ᐃᐦᒡ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ·ᐁᒥᐢᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ

(·ᐹᐢᑕᕐ ᓛᑉ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᐋᑳ ᒑ ᒌ ᐱᐦᒋᐳᓈᓂ·ᐃᒡ ᒌᑯ ᐋ ᐋᐱᒋᐦᑖᑭᓂ·ᐃᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ·ᐋᒥᐢᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ

(·ᐹᐢᑎᕐ ᓛᑉ)

Making sure the healing plants are safe to take along with other medicines (Toxicology)

(Foster lab)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᒉ·ᑳᓐ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᓂᐦᑖᐅᒥᐦᒋᑲᓂᐦᒡ

(ᐋᕐᓇᓯᓐ ᓛᑉ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᒑ·ᑳᓐ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒥᐦᒋᑭᓂᐦᒡ

(ᐋᕐᓂᓯᓐ ᓛᑉ)

Identifying the different ingredients in the plants (Phytochemistry)

(Arnason lab)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᑖᓐ ᐁ ᐄᔑ ·ᐄᒋᐦᐄ·ᐁᐸᔨᐦ·ᑳᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔔ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ ᑲᔦ ᐁ ᐅᐢᑖᐸᔨᐦᐄ·ᐁᒡ ᐁ ᔔ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ

(ᐦᐋᑖᑦ ᑲᔦ ᐯᓀᑦ ᓛᑉᐢ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᑖᓐ ᐋ ᐄᔑ ·ᐄᒋᐦᐄ·ᐋᐱᔨᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔔ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ ᑭᔮᐦ ᐋ ᐅᐢᑖᐱᔨᐦᐄ·ᐋᒡ ᐋ ᔔ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ

(ᐦᐋᑖᑦ ᑭᔮᐦ ᐯᓀᑦ ᓛᑉᐢ)

Looking at how the plants act on diabetes and the health problems that go with it (Pharmacology)

(Haddad and Bennett labs)

ᐁ ᐅᔥᑳᒡ ᐁ ᐄᔑ ᑲᓄᐙᐸᐦᑖᑲᓄᐎᐦᒁᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᑖᑣᐤ ᐄᓅᐦᒡ ᐊᓂᔫ ᐁ ᔒᐙᑲᒥᐦᑵᑣᐤ

ᐊᓂᑌ ᒥᑖᐦᑐ ᐱᐳᓐᐦ ᐄᔑ ᐅᑖᐦᒡ, ᓃᔣᐤ ᒌ ᐃᔥᐱᔥ ᐄᔅᑯᐸᔫ ᐊᓂᔫ ᐁ ᔒᐙᑲᒥᐦᑵᑣᐤ ᐊᐌᓂᒌ ᐊᓂᑌ ᐄᓅ ᐊᔅᒌᐦᒡ᙮ ᐊᓂᑌ ᒫᒃ ᓂᑐᐦᑯᔨᓂᔅᑵᐅᑲᒥᑯᐦᒡ, ᐁᔫᒄ ᔮᐸᒡ ᐁ ᐐᐦ ᐄᔑ ᐱᒥᐸᔨᐦᑖᑣᐤ ᑫᒁᔫ ᑫ ᒌ ᐅᐦᒋ ᓇᑳᐦᐋᐦᒁᐤ ᐊᓂᔫ ᐁ ᔒᐙᑲᒥᐦᑵᓅᔨᒡ, ᒥᒄ ᒫᒃ ᓇᒧᐃ ᐐᒋᐦᐄᐌᐸᔨᓅᔫ᙮ ᐸᔅᒡ ᒫᒃ ᐊᐌᓂᒌ ᐃᑌᔨᐦᑕᒧᒡ ᐁᑎᑑ ᑫ ᒌ ᐐᒋᐦᐄᑯᑣᐤ ᐄᓅᐦᒡ ᐊᓂᔫ ᐁ ᐋᐸᒋᐦᑖᑣᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ᙮ ᐊᓐ ᐅᔥᑲᒡ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓅᐦᒁᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑫ ᒌ ᐐᒋᐦᐄᐌᐸᔨᐦᒁᐤᐦ ᐁ ᔒᐙᑲᒥᐦᑵᓄᐎᐦᒡ, ᐁᑯᑦ ᐁ ᐐᐦᑖᑯᐦᒡ ᑖᓐ ᑳ ᐄᔑ ᐐᒑᐸᑎᓰᒥᑐᑣᐤ ᑳ ᐐᒋᐦᐋᑣᐤ ᐊᐌᔫᐦ ᑲᔦ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᒁᐤ ᑫᒁᔫ ᐅᐦᒋ ᐊᓂᔫ ᑫ ᒌ ᒪᓯᓇᐦᐋᐦᒁᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᐁ ᐃᑌᔨᐦᑎᐦᒁᐤ ᑫ ᒌ ᐐᒋᐦᐄᐌᐸᔨᐦᒡ ᐁ ᔒᐙᑲᒥᐦᑵᓄᐎᐦᒡ᙮ ᐁᐅᒄ ᑲᔦ ᑳ ᐐᐦ ᒥᔅᑲᐙᐦᑖᑣᐤ ᑖᓂᔫ ᒫᐅᒡ ᐁ ᐐᒋᐦᐄᐌᐸᔨᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᑫᒃ ᒫᒃ ᒌ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓅ ᐊᓂᑌ ᒋᐦᒋᐌ ᐁ ᐅᐦᒋ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐎᐦᒡ ᑫᒁᓐ, ᐁᒄ ᑫ ᒌ ᐅᐦᒋ ᒋᔅᑫᔨᐦᑖᑲᓄᐎᐦᒁᐤᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑖᓐ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ ᐊᓂᑦ ᐲᐦᒡ ᐊᐌᓐ ᐎᔮᐦᒡ᙮

ᓃᔥᑕᒻ, ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᒁᐤ ᑫᒁᔫ, ᒌ ᒪᓯᓇᐦᐊᒧᒡ ᐊᓂᔫ 15 ᐁ ᐃᐦᑎᓅᐦᒁᐤᐦ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᐦᐄᑯᑣᐤ ᑫᒁᔫ ᐊᓂᒌ ᐁ ᔒᐙᑲᒥᐦᑵᑣᐤ— ᒬᐦᒡ ᐊᓂᔫ ᒨᔥ ᐁ ᐹᐦᑯᑖᐦᑕᐦᒁᐤ, ᓀᔅᑦ ᒫᒃ ᒨᔥ ᐁ ᐋᐦᑯᔥᑎᒁᓀᑣᐤ᙮ ᐁᑯᓐ ᐅᔫ ᑳ ᑲᑵᒋᒫᑣᐤ ᑳ ᒥᔦᒋᔅᑫᔨᐦᑕᒥᔨᐦᒡ ᑫᒁᔫ ᑖᓂᔫ ᐅᔫ ᐊᓂᑦ ᐁ ᐅᐦᒋᐸᔨᓃᒡ ᐁ ᔒᐙᑲᒥᐦᑵᓄᐎᔨᐦᒡ, ᑲᔦ ᑖᓂᔫ ᒥᒄ ᐋᔅᑰ ᐊᓂᑦ ᐁ ᐅᐦᒋᐸᔨᓃᒡ ᐁ ᔒᐙᑲᒥᐦᑵᓄᐎᔨᐦᒡ᙮

ᑫᒃ ᒫᒃ ᒌ ᐊᔨᒥᐦᐋᑲᓄᐎᑣᐤ 34 ᒋᔐᐄᓅᐦᒡ ᐊᓂᑌ ᒥᔅᑎᓯᓃᐦᒡ᙮ ᐁᔫᒄ ᑳ ᑲᑵᒋᒫᑲᓄᐎᑣᐤ ᑫᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᑖᑣᐤ ᐅᔫ ᑫ ᒌ ᐅᐦᒋ ᐐᒋᐦᐄᓱᑣᐤ 15 ᑳ ᐃᐦᑎᓅᐦᒁᐤᐦ ᐁ ᐅᔥᑖᐸᔨᐦᐄᑯᑣᐤ ᐁ ᔒᐙᑲᒥᐦᑵᓄᐎᔨᐦᒡ᙮ ᐊᓂᒌ ᒫᒃ ᒋᔐᐄᓅᐦᒡ, 18 ᒌ ᐃᐦᑎᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᒌ ᐐᐦᑎᐦᒁᐤ ᐁ ᐃᑌᔨᐦᑎᐦᒁᐤ ᑫ ᒌ ᐐᒋᐦᐄᐌᐸᔨᐦᒡ ᐅᔫ ᐁ ᐄᔑ ᐅᔥᑕᐸᔨᐦᐄᑯᑦ ᐊᐌᓐ ᑫᒁᔫ ᐁ ᔒᐙᑲᒥᐦᑵᑦ᙮

ᐋ ᐅᔥᑳᒡ ᐋ ᐄᔑ ᑭᓂᐙᐱᐦᑖᑭᓂᐎᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐅᒡ ᐊᓂᔮ ᐋ ᔒᐙᑭᒥᐦᒁᒡ

ᐊᓂᑖᐦ ᒥᑖᐦᑐ ᐱᐳᓐᐦ ᐄᔑ ᐅᑖᐦᒡ, ᓃᔣᐤ ᒌ ᐃᔥᐱᔑ ᐄᔅᑯᐱᔨᐤ ᐊᓂᔮ ᐋ ᔒᐙᑭᒥᐦᒁᒡ ᐊᐙᓂᒌ ᐊᓂᑖᐦ ᐄᔨᔨᐤ ᐊᔅᒌᐦᒡ᙮ ᐊᓂᑖᐦ ᒫᒃ ᓂᑐᐦᑯᔨᓂᔅᒁᐅᑭᒥᑯᐦᒡ, ᐋᔦᐎᒄ ᐋᔮᐱᒡ ᐋ ᐐᐦ ᐄᔑ ᐱᒥᐱᔨᐦᑖᒡ ᒑᒁᔨᐤ ᒑ ᒌ ᐅᐦᒋ ᓂᑲᐦᐋᐦᒡ ᐊᓂᔮ ᐋ ᔒᐙᑭᒥᐦᒁᓂᐎᔨᒡ, ᒥᒄ ᒫᒃ ᓂᒧᐃ ᐐᒋᐦᐄᐙᐱᔨᔨᐤ᙮ ᐱᔥᒡ ᒫᒃ ᐊᐙᓂᒌ ᐃᑖᔨᐦᑎᒧᒡ ᐊᑎᑑ ᒑ ᒌ ᐐᒋᐦᐄᑯᒡ ᐄᔨᔨᐅᒡ ᐊᓂᔮ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮ ᐊᓐ ᐅᔥᑭᒡ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐎᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒑ ᒌ ᐐᒋᐦᐄᐙᐱᔨᒡᐦ ᔅ ᔒᐙᑭᒥᐦᒁᓂᐎᒡ, , ᐋᑯᑎᐦ ᐋ ᐐᐦᑖᑯᐦᒡ ᑖᓐ ᑳ ᐄᔑ ᐐᒑᐱᑎᓰᒥᑐᒡ ᒋᔖᐄᔨᔨᐅᒡ ᑭᔮᐦ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᒑᒁᔨᐤ ᐅᐦᒋ ᐊᓂᔮ ᒑ ᒌ ᒥᓯᓂᐦᐊᒧᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᒑ ᒌ ᐐᒋᐦᐄᐙᐱᔨᒡ ᐋ ᔒᐙᑭᒥᐦᒁᓂᐎᒡ᙮ ᐋᐅᒄ ᑭᔮᐦ ᑳ ᐐᐦ ᒥᔅᑭᐙᐦᑖᒡ ᑖᓂᐦᐄ ᒫᐅᒡ ᐋ ᐐᒋᐦᐄᐙᐱᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᒑᒃ ᒫᒃ ᒌ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐤ ᐊᓂᑖᐦ ᒋᐦᒋᐙ ᐋ ᐅᐦᒋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐎᒡ ᒑᒁᓐ, ᐋᒄ ᒑ ᒌ ᐅᐦᒋ ᒋᔅᒑᔨᐦᑖᑭᓂᐎᒡᐦ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᑖᓐ ᐋ ᐄᔑ ᐋᐱᑎᓰᒥᑭᐦᒡ ᐊᓂᑎᐦ ᐲᐦᒡ ᐊᐙᓐ ᐎᔮᐦᒡ᙮

ᓃᔥᑎᒻ, ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᒑᒁᔨᐤ, ᒌ ᒥᓯᓂᐦᐊᒧᒡ ᐊᓂᔮ 15 ᐋ ᐃᐦᑎᓂᔨᒡᐦ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᐦᐄᑯᒡ ᒑᒁᔨᐤ ᐊᓂᒌ ᐋ ᔒᐙᑭᒥᐦᒁᒡ— ᐱᑯᓂᒐ ᐊᓂᔮ ᒨᔥ ᐋ ᐹᐦᑯᑖᐦᑎᐦᒡ, ᑭᔮᐦ ᒫᒃ ᒨᔥ ᐋ ᐋᐦᑯᔥᑎᒁᓈᒡ᙮ ᐋᐅᒄ ᐊᓐ ᐅᔮ ᑳ ᑯᒁᒋᒫᒡ ᑳ ᒥᔦᒋᔅᒑᔨᐦᑎᒥᔨᐦᒡ ᒑᒁᔨᐤ ᑖᓂᔮ ᐅᔮᐦ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋᐱᔨᔨᒡᐦ ᐋ ᔒᐙᑭᒥᐦᒁᓂᐎᔨᒡ, ᑭᔮᐦ ᑖᓂᔮ ᒥᒄ ᐋᔅᑯ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋᐱᔨᔨᒡᐦ ᐋ ᔒᐙᑭᒥᐦᒁᓂᐎᔨᒡ᙮

ᒑᒃ ᒫᒃ ᒌ ᐊᔨᒥᐦᐋᑭᓂᐎᒡ 34 ᒋᔖᐄᔨᔨᐅᒡ ᐊᓂᑖᐦ ᒥᔅᑎᓯᓃᐦᒡ᙮ ᐋᔦᐎᒄ ᑳ ᑯᒁᒋᒫᑭᓂᐎᒡ ᒑᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᑖᒡ ᐅᔮ ᒑ ᒌ ᐅᐦᒋ ᐐᒋᐦᐄᓱᒡ 15 ᑳ ᐃᐦᑎᓂᔨᒡᐦ ᐋ ᐅᔥᑖᐱᔨᐦᐄᑯᒡ ᐋ ᔒᐙᑭᒥᐦᒁᓂᐎᔨᒡ᙮ ᐊᓂᒌ ᒫᒃ ᒋᔖᐄᔨᔨᐅᒡ, 18 ᒌ ᐃᐦᑎᓂᔨᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᒌ ᐐᐦᑎᐦᒡ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᒑ ᒌ ᐐᒋᐦᐄᐙᐱᔨᒡᐦ ᐅᔮ ᐋ ᐄᔑ ᐅᔥᑎᐱᔨᐦᐄᑯᑦ ᐊᐙᓐ ᒑᒁᔨᐤ ᐋ ᔒᐙᑭᒥᐦᒁᑦ᙮

A new way to look at the plants that Iiyiyiuch traditionally used for diabetes*

In the past ten years, diabetes rates have more than doubled among adults in Iiyiyiu Aschii. The clinics have tried the usual treatment programs, but without much success. Some people think that Iiyiyiuch might do better using traditional remedies. At the beginning of the Anti-diabetic Plant Project, a team of healers and plant scientists worked together to develop a list of plants that might help diabetes. They also tried to find out which ones are likely to be the most useful. Later studies looked at these plants in the lab, to find out more about how they work inside the body.

First, the scientists developed a list of 15 problems that often go along with diabetes— like being thirsty all the time, or having lots of headaches. They asked a group of experts to say which of these problems were strongly related to diabetes, and which were only sometimes related to it.

Then they talked with 34 Elders in Mistissini about what kinds of plants they would use to treat these 15 problems. Among them, the Elders identified 18 different plants that they might use for these kinds of problems.

ᒉᒃ ᒫᒃ ᒦᓐ, ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑎᐦᐧᑳᐤ, ᒌ ᒪᓯᓇᐦᐊᒧᒡ ᐊᓂᔩ ᑖᓂᔩ ᒫᐅᒡ ᐁ ᐃᑌᔨᐦᑎᐦᐧᑳᐤ ᒉ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᓃᐦᐧᑳᐤᐦ ᑲᔦ ᑖᓂᔩ ᓃᔥᑕᒻ ᒉ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐧᐃᔨᐦᐧᑳᐤ ᐊᓂᑌ ᐁ ᐅᐦᒋ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᒉᐧᑳᓐ᙮ ᐧᒫᐅᔩ ᒫᒃ ᑳ ᐄᔑ ᒪᓯᓇᐦᐊᐦᐧᑳᐤ ᐊᓂᔩ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓂᔩ ᓃᔥᑕᒻ ᒉ ᒪᓯᓈᑌᔨᐦᒡ

- ᑖᓂᑕᐦᐧᑖᐤ ᑳ ᐧᐄᐦᑎᐦᐧᑳᐤ ᒋᔐᐄᓅᐦᒡ ᐊᓂᔩ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᔩ
- ᑖᓂᑕᐦᐧᑖᐤ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᐊᓐ ᓂᐦᑖᐅᒋᐦᒋᑲᓐ
- ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᐊᓐ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔩ ᑖᐧᐯ ᐁ ᐅᔥᑖᐸᔨᐦᑦ ᐊᐧᐁᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ

ᐊᓐ ᒫᒃ ᒪᓯᓇᐦᐄᑲᓐ ᑳ ᐅᔑᐦᑖᑲᓄᐧᐃᐦᒡ, ᐁᐅᒄ ᐧᒣᐦᒡ ᐁ ᐃᔑᓈᑯᐦᒡ ᒧᔮᒻ ᐊᓂᔩ ᑳ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑎᐦᐧᑳᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑌ ᐊᒋᔥᑑ ᑳᓈᑖ ᐊᓂᑌ ᐃᔮᐱᒡ ᑲᓈᔅ ᐁ ᐃᑕᔅᑳᓈᓯᐧᑖᐤ ᐄᓅᐦᒡ ᐁ ᐃᐦᑖᐧᑖᐤ᙮ ᐁᐅᒄ ᒫᒃ ᐁ ᐄᔑ ᒋᔅᒉᔨᐦᑖᑯᐦᒡ ᐊᓂᒌ ᐄᓅᐦᒡ ᐅᑌ ᒥᓯᐧᐁ ᑳᓈᑖ ᐊᔅᒌᐦᒡ, ᐁᔩᒄ ᐃᔮᐸᒡ ᐁ ᐄᔑ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓂᔩ ᐊᓂᔩ ᐁ ᐯᔭᑯᓃᒡ ᒉᐧᑳᔩ ᐁ ᐧᐄᐦ ᐄᔑ ᐧᐄᒋᐦᑖᐧᑖᐤ᙮

ᐁᐅᒄ ᒫᒃ ᐁ ᐃᔑᓈᑯᐦᒡ ᒫᓐᐦ ᐁ ᐯᔭᑯᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᒡ ᐊᓂᔩ ᐁ ᐧᐄᒋᐦᑖᑲᓄᐧᐃᐦᒡ ᓇᓈᐦᑰ ᒉᐧᑳᔩᐦ ᐁ ᐄᔑ ᐅᔥᑕᐸᔨᑦ ᐊᐧᐁᓐ᙮ ᓀᔅᑦ ᒫᒃ ᐁ ᐯᔭᑯᐦᒡ ᐊᓂᔩ ᐁ ᐄᔑ ᐅᔥᑕᐸᔨᓈᓄᐧᐃᐦᒡ ᑲᔦ ᓇᓈᐦᑰ ᐁ ᐃᔑᓈᑯᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᐊᓐ ᒉ ᒌ ᐄᔑ ᐧᐄᒋᐦᑖᑲᓄᐧᐃᐦᒡ᙮ ᒥᒄ ᒫᒃ ᑖᓂᔩ ᒫᐅᒡ ᐁ ᐃᑌᔨᐦᑎᐦᐧᑳᐤ ᒋᔐᐄᓅᐦᒡ ᐁ ᒥᐧᔮᔒᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᔩ ᒉ ᒌ ᐋᐸᑎᓃᒡ ᐊᓂᔩ ᐯᔭᑯᔨᒡ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᑦ ᐊᐧᐁᓐ? ᑖᓂᔩ ᐊᓂᔩ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒥᒄ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᐯᔭᑯᔨᒡ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᑦ ᐊᐧᐁᓐ? ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑎᐦᐧᑳᐤ ᒉᐧᑳᔩ, ᐁᔩᒄ ᑳ ᐊᒋᐦᑎᐦᐧᑳᐤ ᑖᓂᔩ ᑳ ᐄᔑ ᐧᐄᐦᑎᐦᐧᑳᐤ ᒋᔐᐄᓅᐦᒡ ᒉᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᔩ ᒉ ᐋᐸᑎᓃᒡ ᐊᓂᔩ ᐯᔭᑯᔨᒡ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᑦ ᐊᐧᐁᓐ᙮ ᒥᒄ ᒫᒃ ᓇᒧᐃ ᒧᔥ ᐯᔭᑯᓂᐦᒡ ᐅᐦᒋ ᐃᔑᓈᑯᓐ᙮ ᒥᒄ ᒫᒃ ᑮᐸ ᑳ ᐃᐦᑎᑯᓃᒡ ᒥᐦᒉᐧᑖᐤ ᑖᐱᔥᑯᓐ ᐁ ᒌ ᓂᔅᑯᒧᐧᑖᐤ ᒋᔐᐄᓅᐦᒡ ᐁ ᐯᔭᑯᓂᔨᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᔩ ᒉ ᐋᐸᑎᓃᒡ ᐊᓂᔩ ᐁ ᐯᔭᑯᓂᔨᒡ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᓈᓄᐧᐃᔨᐦᒡ᙮

ᒑᒃ ᒫᒃ ᒦᓐ, ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ, ᒌ ᒥᓯᓂᐦᐊᒧᒡ ᐊᓂᔫ ᑖᓂᔫᐦ ᒫᐅᒡ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᒑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ ᑭᔫᐦ ᑖᓂᔫᐦ ᓃᔥᑎᒻ ᒑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᔨᔨᒡᐦ ᐊᓂᑖᐦ ᐋ ᐅᐦᒋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᒑᐧᑳᓐ᙮ ᒫᐅᔫ ᒫᒃ ᑳ ᐄᔑ ᒥᓯᓂᐦᐊᐦᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓂᔫ ᓃᔥᑎᒻ ᒑ ᒥᓯᓈᑖᔨᐦᒡ

- ᑖᓐ ᑎᐦᐧᑖᐤ ᑳ ᐧᐄᐦᑎᐦᒡ ᒋᔖᐄᔨᔨᐅᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᔨᐤ
- ᑖᓐ ᑎᐦᐧᑖᐤ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᐊᓐ ᓂᐦᑖᐅᒋᐦᒋᑭᓐ
- ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᐊᓐ ᓂᐦᑖᐅᒋᐦᒋᑭᓐ ᐊᓂᔫ ᑖᐧᐹᐦ ᐋ ᐅᔥᑖᐱᔨᑦ ᐊᐧᐋᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ

ᐊᓐ ᒫᒃ ᒥᓯᓂᐦᐄᑭᓐ ᑳ ᐅᔑᐦᑖᑭᓂᐧᐃᒡ, ᐋᐅᒄ ᐧᒫᐦᒡ ᐋ ᐃᔑᓈᑯᐦᒡ ᒧᔮᒻ ᐊᓂᔫ ᑳ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑖᐦ ᐊᒋᔥᑑ ᑳᓈᑖᐦ ᐊᓂᑖᐦ ᐊᔮᐱᒡ ᑭᓈᔅ ᐋ ᐃᑎᔅᑳᓈᓯᒡ ᐄᔨᔨᐅᒡ ᐋ ᐃᐦᑖᒡ᙮ ᐋᐅᒄ ᒫᒃ ᐋ ᐄᔑ ᒋᔅᒑᔨᐦᑖᑯᐦᒡ ᐊᓂᒌ ᐄᔨᔨᐅᒡ ᐅᑖᐦ ᒥᓯᐧᐋ ᑳᓈᑖ ᐊᔅᒌᐦᒡ, ᐋᔩᐧᐃᒄ ᐊᔮᐱᒡ ᐋ ᐄᔑ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓂᔨᐤ ᐊᓂᔫ ᐋ ᐹᔨᑯᓂᔨᒡ ᒑᐧᑲᔨᐤ ᐋ ᐧᐄᐦ ᐄᔑ ᐧᐄᒋᐦᑖᒡ᙮

ᐋᐅᒄ ᒫᒃ ᐋ ᐃᔑᓈᑯᐦᒡ ᒫᓐᐦ ᐋ ᐹᔨᑯᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡ ᐊᓐ ᐋ ᐧᐄᒋᐦᑖᑭᓂᐧᐃᒡ ᓂᓈᐦᑰ ᒑᐧᑲᓂᐦᐄ ᐋ ᐄᔑ ᐅᔥᑎᐱᔨᑦ ᐊᐧᐋᓐ᙮ ᑭᔫᐦ ᒫᒃ ᐋ ᐹᔨᑯᐦᒡ ᐊᓐ ᐋ ᐄᔑ ᐅᔥᑎᐱᔨᓈᓂᐧᐃᒡ ᑭᔫᐦ ᓂᓈᐦᑰ ᐋ ᐃᔑᓈᑯᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡᐦ ᐊᓐ ᒑ ᒌ ᐄᔑ ᐧᐄᒋᐦᑖᑭᓂᐧᐃᒡ᙮ ᒥᒄ ᒫᒃ ᑖᓂᔫ ᒫᐅᒡ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᒋᔖᐄᔨᔨᐅᒡ ᐋ ᒥᐧᔮᔑᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᔨᐤ ᒑ ᒌ ᐋᐱᑎᓂᔨᒡ ᐊᓂᔫ ᐹᔨᑯᔨᒡ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᑦ ᐊᐧᐋᓐ? ᑖᓂᔫᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒥᒄ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡᐦ ᐹᔨᑯᔨᒡ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᑦ ᐊᐧᐋᓐ? ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᒑᐧᑲᔨᐤ, ᐋᔩᐧᐃᒄ ᑳ ᐊᒋᐦᑎᐦᒡ ᑖᓂᔩ ᑳ ᐄᔑ ᐧᐄᐦᑎᐦᒡ ᒋᔖᐄᔨᔨᐅᒡ ᒑᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᔨᐤ ᒑ ᐋᐱᑎᓂᔨᒡ ᐊᓂᔫ ᐹᔨᑯᔨᒡ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᑦ ᐊᐧᐋᓐ᙮ ᒥᒄ ᒫᒃ ᓂᒧᐃ ᒨᔥ ᐹᔨᑯᓂᐦᒡ ᐅᐦᒋ ᐃᔑᓈᑯᓐ᙮ ᒥᒄ ᒫᒃ ᑮᐧᐹ ᑳ ᐃᐦᑎᑯᓂᔨᒡ ᒥᐦᒑᐧᑖᐤ ᑖᐱᔥᑯᓐ ᐋ ᒌ ᓂᔅᑯᒧᒡ ᒋᔖᐄᔨᔨᐅᒡ ᐋ ᐹᔨᑯᓂᔨᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᔨᐤ ᒑ ᐋᐱᑎᓂᔨᒡ ᐊᓂᔫ ᐋ ᐹᔨᑯᓂᔨᒡ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᓈᓂᐧᐃᔨᒡ᙮

Next, the team wanted to narrow the list down, so they would know which plants to look at first in the lab. They ranked the plants based on a combination of

- How many different Elders mentioned the plant
- How many different problems the plant was used to treat
- Whether the plant was used to treat the kinds of problems that were most strongly related to diabetes

The final list looked a lot like one that researchers working with Cree communities in western Canada came up with. This suggests that Cree people across Canada used many of the same remedies for the same problems.

One plant might be used to treat many different problems. Or, a single problem might be treated with many different plants. But are there problems for which most Elders recommend one particular plant and no others? Are there plants that are only used to deal with one type of health problem? The scientists used statistics (math) to see if the Elders tend to recommend just one plant for a particular problem. This wasn't always the case. However, there were three cases where there was a lot of agreement that a specific plant was good for a specific problem.

ᐧᒣᐦᒡ ᒫᒃ ᐊᓂᒌ ᐁ ᐃᓯᓈᑯᓯᐧᑖᐤ ᐄᓅᐦᒡ, ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒨᔮᒻ ᐁ ᐅᐦᒋ ᐧᐋᐦᑯᒥᑐᐧᑖᐤ ᐁ ᐃᔑᓈᑯᐦᐧᑳᐤ, ᐁᐅᒄ ᑲᔦ ᒨᔮᒻ ᑖᐱᔥᑯᓐ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑎᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᐁᔫᒄ ᑳ ᐃᑌᔨᐦᑎᐦᐧᑳᐤ ᐊᓂᔫ ᐁ ᐄᔑ ᐋᐸᒋᐦᑖᐧᑖᐤ ᒋᔐᐄᓅᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐯᔭᑯᓃᒡ ᑫᐧᑳᔫ ᐁ ᐄᔑ ᐧᐄᒋᐦᑖᐧᑖᐤ, ᒫᔥᑯᒡ ᐊᓂᔫ ᐁ ᐧᐋᐦᑯᒥᑐᐧᑖᐤ ᐁ ᐃᔑᓈᑯᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᒥᒄ ᒫᒃ ᐁᔫᒄ ᑳ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᐧᑖᐤ ᐁᑳ ᐅᔫ ᐅᐦᒋ ᐃᔑᓈᑯᓂᔨᒡ᙮ ᐁᐅᒄ ᐁ ᐃᔑᓈᑯᐦᒡ ᓇᓈᐦᑰ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᒋᔐᐄᓅᐦᒡ ᐁ ᐧᐄᒋᐦᑖᐧᑖᐤ ᐁ ᐯᔭᑯᓂᔨᒡ ᑫᐧᑳᔫ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᐦᐄᐧᐁᔨᒡ᙮

ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᑫᐧᑳᔫ, ᑮᐸ ᐁ ᐃᑌᔨᐦᑎᐦᐧᑳᐤ ᑖᐱᔥᑯᓐ ᐁ ᒌ ᒥᔪᐸᔨᓃᒡ ᐊᓂᔫ ᐁ ᒌ ᐊᔨᒥᐦᐋᑲᓄᐧᐃᐧᑖᐤᐦ ᒋᔐᐄᓅᐦ ᑲᔦ ᐊᓂᔫ ᐁ ᒌ ᐊᒋᐦᑕᐦᐧᑳᐤ ᑖᓂᑕᐦᐧᑖᐤ ᐁ ᒌ ᐧᐄᐦᑕᒥᔨᒡᐦ ᒋᔐᐄᓅᐦ ᐊᓂᔫ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᓃᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᐁᑯᑦ ᒫᒃ ᑳ ᐅᔑᐦᑖᐧᑖᐤ ᒪᓯᓇᐦᐄᑲᓂᔫ ᐊᓂᔫ ᐁ ᒪᓯᓈᑌᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐅᐦᒋ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᓃᐦᐧᑳᐤᐦ ᐊᓐ ᐁ ᐅᔥᑖᐸᔨᐦᐄᐧᐁᒡ ᐁ ᔒᐧᐊᑲᒥᐦᐧᑫᓄᐧᐃᔨᐦᒡ, ᑲᔦ ᑖᓂᔫ ᓃᔥᑕᒻ ᑫ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐊᓂᑌ ᒋᐦᒋᐧᐁ ᐁ ᐅᐦᒋ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ᙮ ᐊᓂᑌ ᒫᒃ ᐄᔑ ᓃᔥᑖᒥᐦᒡ, ᐁᔫᒄ ᐁ ᐱᑯᓭᔨᐦᑎᐦᐧᑳᐤ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᑫᐧᑳᔫ ᑖᐧᐯ ᐅᔫ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑫ ᒌ ᐋᐸᑎᓃᐦᐧᑳᐤ ᐊᓂᑌ ᐄᓅ ᐊᔅᒌᐦᒡ᙮ ᐁᔫᒄ ᐁ ᐄᔑ ᓂᑐᐧᐁᔨᐦᑎᐦᐧᑳᐤ ᑫ ᒌ ᐃᐦᑎᑯᓂᔨᒡ ᐄᓅᐦᒡ ᑫ ᒌ ᐅᔦᔨᐦᑎᐦᐧᑳᐤ ᑖᓂᔫ ᓂᑐᐦᑯᔨᓂᔫ ᐁ ᐧᐄᐦ ᐋᐸᒋᐦᑖᐧᑖᐤ, ᒫᔥᑯᒡ ᐄᓅ ᓂᑐᐦᑯᔨᓂᔫ ᓀᔅᑦ ᒫᒃ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓂᔫ᙮

*ᐁᐅᒄ ᐆ ᐁ ᓂᓯᑐᐦᑖᑯᐦᒡ ᐊᐱᔒᔥ ᐁ ᑕᐹᑐᑖᒡ ᐊᓂᒌ ᑳ ᒪᓯᓇᐦᐊᐦᐧᑳᐤ ᔖᕐᓪ ᓓᑐᒃ, ᒉᐃᓯᓐ ᑰᓂᔒᔥ, ᐱᔦᕐ ᐦᐋᑖᑦ, ᑲᔦ ᐋᓓᐃᓐ ᑯᕆᔦᕐ “ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅᐦᒡ ᐊᓂᑌ ᐄᓅ ᐊᔅᒌᐦᒡ (ᑯᐯᒃ ᑳᓈᑖ) ᐊᓂᔫ ᐁ ᐧᐄᒋᐦᐄᓱᐧᑖᐤ ᐁ ᔒᐧᐊᑲᒥᐦᐧᑫᐧᑖᐤ: ᐁ ᐅᔥᑳᒡ ᐁ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᑌ ᐄᓅ ᐊᔅᒌᐦᒡ᙮” ᐁᑯᑦ ᑳ ᒪᓯᓇᐦᐄᑲᓄᐧᐃᐦᒡ ᐊᓂᑦ ᑕᐹᒋᒨᓯᓇᐦᐄᑲᓂᐦᒡ ᑕᐹᒋᒨᓯᓇᐦᐄᑲᓐ ᓇᓈᐦᑰ ᐁ ᐃᑎᔅᑳᓀᓯᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐅᓂᑐᐦᑯᔨᓂᒧᐧᐋᐤᐦ ᐊᓂᑦ ᐊᓂᔫ 2006 ᑳ ᐃᔅᐸᔨᐦᒡ ᑳ ᒪᓯᓇᐦᐄᑲᓄᐧᐃᐦᒡ᙮

ᐧᒫᐦᒡ ᒫᒃ ᐊᓂᒌ ᐋ ᐃᓯᓈᑯᓯᒡ ᐄᔨᔨᐅᒡ, ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒨᔮᒻ ᐋ ᐅᐦᒋ ᐧᐋᐦᑯᒥᑐᒡ ᐋ ᐃᔑᓈᑯᐦᒡ, ᐋᐅᒄ ᑭᔮᐦ ᒨᔮᒻ ᑖᐱᔥᑯᓐ ᐋ ᐄᔑ ᐋᐱᑎᓰᒥᑭᐦᒡ᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᐋᔫᐧᐃᒄ ᑳ ᐃᑖᔨᐦᑎᐦᒡ ᐊᓂᔮ ᐋ ᐄᔑ ᐋᐱᒋᐦᑖᒡ ᒋᔖᐄᔨᔨᐅᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐹᔨᑯᓂᔨᒡ ᒫᐧᑳᔨᐤ ᐋ ᐄᔑ ᐧᐄᒋᐦᑖᒡ, ᐧᑳᐧᔖᓐ ᐊᓂᔮ ᐋ ᐧᐋᐦᑯᒥᑐᒡ ᐋ ᐃᔑᓈᑯᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᒥᒄ ᒫᒃ ᐋᔫᐧᐃᒄ ᑳ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᒡ ᐋᑳ ᐅᔮ ᐅᐦᒋ ᐃᔑᓈᑯᓂᔨᒡ᙮ ᐋᐅᒄ ᐋ ᐃᔑᓈᑯᐦᒡ ᓂᓈᐦᑰ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᑖᒡ ᒋᔖᐄᔨᔨᐅᒡ ᐋ ᐧᐄᒋᐦᑖᒡ ᐋ ᐹᔨᑯᓂᔨᒡ ᒫᐧᑳᔨᐤ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᐦᐄᐧᐋᔨᒡ᙮

ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒫᐧᑳᔨᐤ, ᑮᐧᐸ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᑖᐱᔥᑯᓐ ᐋ ᒌ ᒥᔪᐱᔨᔨᒡ ᐊᓂᔮ ᐋ ᒌ ᐊᔨᒥᐦᐋᑭᓂᐧᐃᒡ ᒋᔖᐄᔨᔨᐅᒡ ᑭᔮᐦ ᐊᓂᔮ ᐋ ᒌ ᐊᒋᐦᑎᐦᒡ ᑖᓐ ᑎᐦᐧᑖᐤ ᐋ ᒌ ᐧᐄᐦᑎᒥᔨᒡᐦ ᒋᔖᐄᔨᔨᐤᐦ ᐊᓂᔮ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᐋᑯᑎᐦ ᒫᒃ ᑳ ᐅᔑᐦᑖᒡ ᒥᓯᓂᐦᐄᑭᓂᔨᐤ ᐊᓂᔮ ᐋ ᒥᓯᓈᑖᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐅᐦᒋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᐦᐄᐧᐋᒡ ᐋ ᔒᐧᐊᑭᒥᐦᐧᑳᓂᐧᐃᔨᒡ, ᑭᔮᐦ ᑖᓂᔮ ᓃᔥᑎᒻ ᒐ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᐊᓂᑖᐦ ᒋᐦᒋᐧᐊ ᐋ ᐅᐦᒋ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ᙮ ᐊᓂᑖᐦ ᒫᒃ ᐄᔑ ᓃᔥᑖᒥᐦᒡ, ᐋᔫᐧᐃᒄ ᐋ ᐱᑯᓭᔨᐦᑎᐦᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒫᐧᑳᔨᐤ ᑖᐧᐸᐦ ᐅᔮ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᒐ ᒌ ᐋᐱᑎᓂᔨᒡᐦ ᐊᓂᑖᐦ ᐄᔨᔨᐤ ᐊᔅᒌᐦᒡ᙮ ᐋᔫᐧᐃᒄ ᐋ ᐄᔑ ᓂᑐᐧᐋᔨᐦᑎᐦᒡ ᒐ ᒌ ᐃᐦᑎᑯᓂᔨᒡ ᐄᔨᔨᐅᒡ ᒐ ᒌ ᐅᔮᔨᐦᑎᐦᒡ ᑖᓂᔮ ᓂᑐᐦᑯᔨᓂᔨᐤ ᐋ ᐧᐄᐦ ᐋᐱᒋᐦᑖᒡ, ᐧᑳᐧᔖᓐ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓂᔨᐤ ᑭᔮᐦ ᒫᒃ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓂᔨᐤ᙮

*ᐋᐅᒄ ᐆ ᐋ ᓂᔥᑐᐦᑖᑯᐦᒡ ᐊᐱᔒᔥ ᐁ ᑎᐹᑎᑖᒡ ᐊᓂᒌ ᑳ ᒥᓯᓇᐦᐊᐦᒡ ᔖᕐᓪ ᓓᑐᒃ, ᒉᐃᓯᓐ ᑰᓂᔒᔥ, ᐱᔦᕐ ᐦᐋᑖᑦ, ᑭᔮᐦ ᐋᓓᐃᓐ ᑯᕆᔦᕐ “ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐅᒡ ᐊᓂᑖᐦ ᐄᔨᔨᐤ ᐊᔅᒌᐦᒡ (ᑯᐯᒃ ᑳᓈᑖᐦ) ᐊᓂᔮ ᐋ ᐧᐄᒋᐦᐄᓱᒡ ᐋ ᔒᐧᐊᑭᒥᐦᐧᑳᒡ: ᐋ ᐅᔥᑳᒡ ᐋ ᐄᔑ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐧᐃᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᑖᐦ ᐄᔨᔨᐤ ᐊᔅᒌᐦᒡ᙮” ᐋᑯᑎᐦ ᑳ ᒥᓯᓂᐦᐄᑭᓂᐧᐃᒡ ᐊᓂᑎᐦ ᑎᐹᒋᒨᓯᓂᐦᐄᑭᓂᐦᒡ ᑎᐹᒋᒨᓯᓂᐦᐄᑭᓐ ᓂᓈᐦᑰ ᐋ ᐃᑎᔅᑳᓈᓯᒡ ᐊᐧᐋᓂᒌ ᐅᓂᑐᐦᑯᔨᓂᒧᐧᐋᐤᐦ ᐊᓂᑎᐦ ᐊᓂᔮ 2006 ᑳ ᐃᔅᐱᔨᒡ ᑳ ᒥᓯᓂᐦᐄᑭᓂᐧᐃᒡ᙮

Like humans, plants that are part of the same family tend to be a bit alike. Because of this, the scientists wondered if the different plants that Elders use to treat a particular problem might all be from the same family. But when they used statistics to check, this was not true. It turns out that Elders use plants from several different families to treat the same problem.

The team members felt that this combination of interviews and statistical methods worked well. It allowed them to come up with a list of plants that were traditionally used to treat diabetes, and to identify which plants should be looked at first. In the longer term, they hope that some of these traditional remedies can be routinely offered to people in Iiyiyiu Aschii. They would like Iiyiyiuch to have a choice between traditional and western medicine.

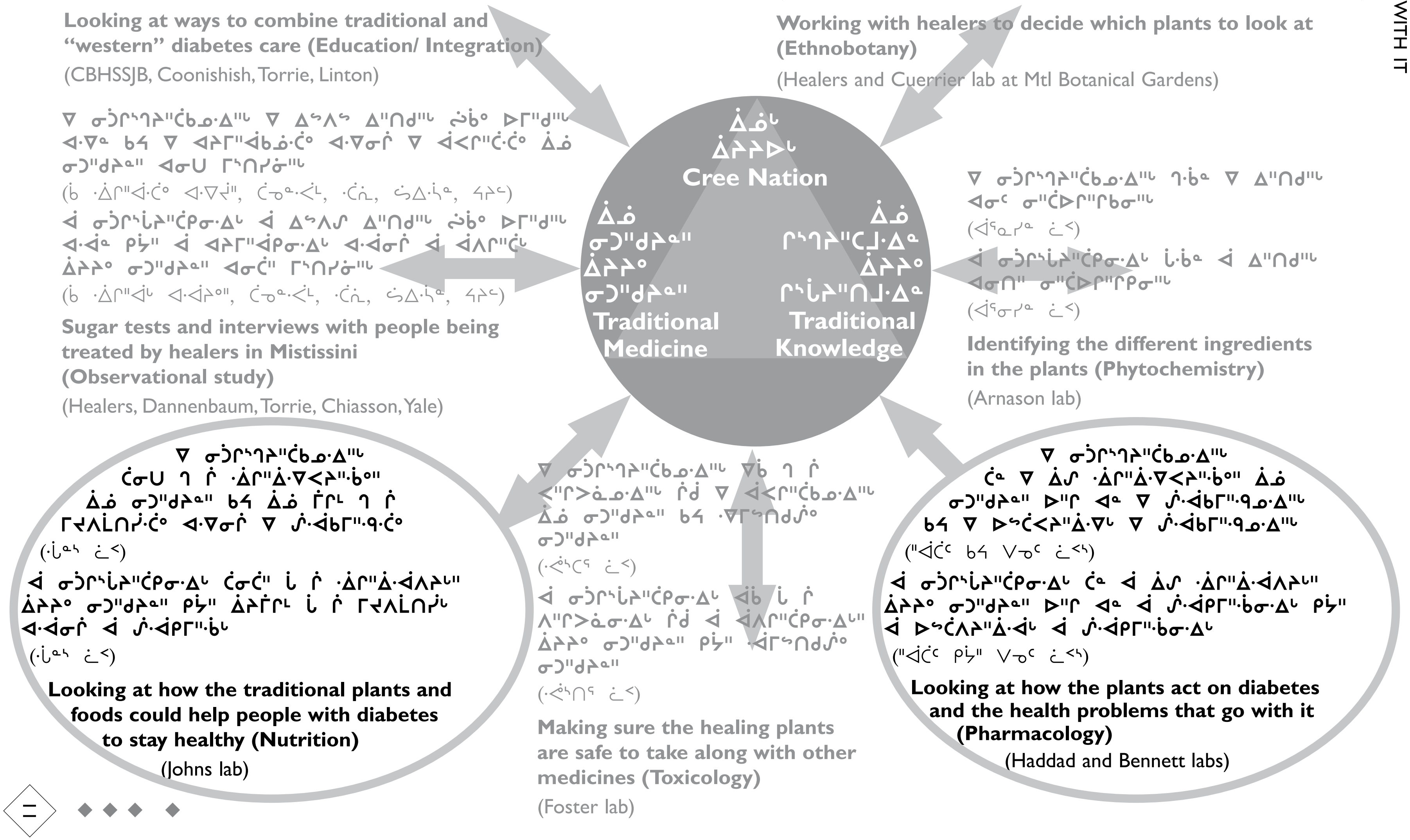
*This is a plain-language summary of a technical article by C. Leduc, J. Coonishish, P. Haddad and A. Cuerrier called “Plants used by the Cree Nation of Eeyou Istchee (Quebec, Canada) for the treatment of diabetes: a novel approach in quantitative ethnobotany.” It was published in the *Journal of Ethnopharmacology* in 2006.

ᐧᐋᐸᐦᑏᐧᐁᐧᐃᓐ 2: ᐅᔥᑲᒡ ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ ᑲᔦ ᐊᓂᔫ ᐁ ᐄᔑ ᐅᔥᑖᐸᔨᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ

ᐧᐋᐱᐦᑏᐧᐋᐧᐃᓐ 2: ᐅᔥᑭᒡ ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ ᑭᔮᐦ ᐊᓂᔮ ᐋ ᐄᔑ ᐅᔥᑖᐱᔨᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ

EXAMPLE 2: A FIRST LOOK AT HOW SOME OF THE PLANTS AFFECT DIABETES AND THE HEALTH PROBLEMS THAT GO WITH IT

ᓂᓈᐦᑰ ᐁ ᐃᔑᓈᑯᐦᒡ ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᓂᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ
ᓂᓈᐦᑰ ᐋ ᐃᔑᓈᑯᐦᒡ ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒑ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ
Parts of the Anti-diabetic Plant Project



ᐁ ᐧᐋᐧᐋᐸᐦᑖᑲᓄᐧᐃᐦᒡ ᒉ ᒌ ᒌᑰᐸᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

(ᓂᑐᐦᑯᔨᓐ ᐋᐸᑎᓰᐧᐃᓐ, ᑰᓂᔑᔥ, ᐧᑖᓖ, ᓓᓐᑕᓐ)

ᐋ ᐧᐋᐧᐋᐱᐦᑖᑭᓂᐧᐃᒡ ᒑ ᒌ ᒌᑰᐱᔨᐦᑖᑭᓂᐧᐃᒡ ᐄᔨᔨᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ

(ᓂᑐᐦᑯᔨᓐ ᐋᐱᑎᓰᐧᐃᓐ, ᑰᓂᔑᔥ, ᐧᑖᓖ, ᓓᓐᑎᓐ)

Looking at ways to combine traditional and "western" diabetes care (Education/ Integration)

(CBHSSJB, Coonishish, Torrie, Linton)

ᐁ ᐧᐄᒑᐸᑎᓯᒫᑲᓅᐧᑖᐤ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᒉ ᒌ ᐅᔦᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᒉᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓅᐦᐧᑳᐤᐦ

(ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᑲᔦ ᑰᓕᔦᕐ ᓛᑉ ᐊᓂᑌ ᒨᓓᔫᐤ ᐳᑖᓂᑲᓪ ᑳᕐᑎᓐᔥ)

ᐋ ᐧᐄᒑᐱᑎᓯᒫᑭᓂᐧᐃᒡ ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔫᐤᐦ ᒑ ᒌ ᐅᔮᔨᐦᑖᑭᓂᐧᐃᒡ ᒐᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒑ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡᐦ

(ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔫᐤᐦ ᑭᔮᐦ ᑰᓕᔦᕐ ᓛᑉ ᐊᓂᑖᐦ ᐧᒫᓓᔫᐤ ᐳᑖᓂᑭᓪ ᑳᕐᑎᓐᔥ)

Working with healers to decide which plants to look at (Ethnobotany)

(Healers and Cuerrier lab at Mtl Botanical Gardens)

ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐁ ᐃᔥᐱᔥ ᐃᐦᑎᑯᐦᒡ ᓃᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐁᓐ ᑲᔦ ᐁ ᐊᔨᒥᐦᐋᑲᓅᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑌ ᒥᔥᑎᓯᓃᐦᒡ

(ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ, ᑖᓀᓐᐧᐹᒻ, ᐧᑖᓖ, ᓵᐃᐧᓵᓐ, ᔦᔨᓪ)

ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᐋ ᐃᔥᐱᔑ ᐃᐦᑎᑯᐦᒡ ᓃᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐋᓐ ᑭᔮᐦ ᐋ ᐊᔨᒥᐦᐋᑭᓂᐧᐃᒡ ᐊᐧᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑖᐦ ᒥᔥᑎᓯᓃᐦᒡ

(ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔫᐤᐦ, ᑖᓀᓐᐧᐹᒻ, ᐧᑖᓖ, ᓵᐃᐧᓵᓐ, ᔦᔨᓪ)

Sugar tests and interviews with people being treated by healers in Mistissini (Observational study)

(Healers, Dannenbaum, Torrie, Chiasson, Yale)

ᐄᓅᒡ
ᐄᔨᔨᐅᒡ
Cree Nation

ᐄᓅ
ᓂᑐᐦᑯᔨᓐᐦ
ᐄᔨᔨᐤ
ᓂᑐᐦᑯᔨᓐᐦ
Traditional Medicine

ᐄᓅ
ᒋᔥᑫᔨᐦᑕᒧᐧᐃᓐ
ᐄᔨᔨᐤ
ᒋᔥᒑᔨᐦᑎᒧᐧᐃᓐ
Traditional Knowledge

ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᒉᐧᑳᓐ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ

(ᐋᕐᓇᓯᓐ ᓛᑉ)

ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᒑᐧᑳᓐ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ

(ᐋᕐᓂᓯᓐ ᓛᑉ)

Identifying the different ingredients in the plants (Phytochemistry)

(Arnason lab)

ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ
ᑖᓂᑌ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ
ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ᐄᓅ ᒦᒋᒼ ᒉ ᒌ
ᒥᔪᐱᒫᑎᓰᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ

(ᐧᒑᓐᔥ ᓛᑉ)

ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓂᑖᐦ ᒑ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ
ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐄᔨᒦᒋᒼ ᒑ ᒌ ᒥᔪᐱᒫᑎᓯᒡ
ᐊᐧᐋᓂᒌ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᒡ

(ᐧᒑᓐᔥ ᓛᑉ)

Looking at how the traditional plants and foods could help people with diabetes to stay healthy (Nutrition)

(Johns lab)

ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ ᐁᑳ ᒉ ᒌ ᐸᐦᒋᐳᓈᓄᐧᐃᐦᒡ ᒌᑰ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᒡ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ

(ᐧᐹᔥᑕᕐ ᓛᑉ)

ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᐋᑳ ᒑ ᒌ ᐱᐦᒋᐳᓈᓂᐧᐃᒡ ᒌᑰ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ

(ᐧᐹᔥᑎᕐ ᓛᑉ)

Making sure the healing plants are safe to take along with other medicines (Toxicology)

(Foster lab)

ᐁ ᓂᑑᒋᔥᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ
ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐄᓅ
ᓂᑐᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ
ᑲᔦ ᐁ ᐅᔥᑖᐸᔨᐦᐄᐧᐁᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

(ᐦᐋᑖᑦ ᑲᔦ ᐯᓀᑦ ᓛᑉᔥ)

ᐋ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ
ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ ᑭᔮᐦ
ᐋ ᐅᔥᑖᐱᔨᐦᐄᐧᐋᒡ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ

(ᐦᐋᑖᑦ ᑭᔮᐦ ᐯᓀᑦ ᓛᑉᔥ)

Looking at how the plants act on diabetes and the health problems that go with it (Pharmacology)

(Haddad and Bennett labs)

◆ ◆ ◆ ◆

ᐅᔥᑲᒡ ᐁ ᑲᓄᐧᐋᐸᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᓂᔮᓈᓀᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐅᐦᒋ ᒫᓯᐦᒉᐸᔨᐦᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

ᑖᓐᑌ ᑳ ᐅᐦᒋ ᒋᐦᒋᐸᔨᐦᒡ ᐆ ᐁ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐧᐃᐦᒡ?

ᐊᓐ 2003 ᑳ ᐃᔅᐸᔨᐦᒡ ᐊᔅᒌᐤ ᐊᒋᐦᑖᓱᐧᐃᓐ, ᒋᔐᐄᓅᐦᒡ ᐊᓂᑌ ᐄᓅ ᐊᔅᒌᐦᒡ ᑲᔦ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒫᒨ ᒌ ᐋᐸᑎᓰᑲᐦᑕᒧᒡ ᐊᓂᔫ ᒉ ᒌ ᒋᔅᑯᑕᒫᓱᐧᑖᐤ ᑖᓐ ᐁ ᐄᔑ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᓂᑐᐦᑯᐦᐄᓱᐧᑖᐤ᙮ ᐊᓂᒌ ᒋᔐᐄᓅᐦᒡ ᒌ ᐧᐄᐦᑕᒧᐧᐁᐅᒡ ᐊᓂᔫ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᒥᔨᐦᒡ ᒉᑯ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐋᐸᑎᓃᐦᐧᑳᐤᐦ ᐊᓂᔫ ᒉ ᒌ ᐅᐦᒋ ᐧᐄᒋᐦᑖᑲᓄᐧᐃᔨᐦᒡ ᐁ ᐄᔑ ᒪᒋᐸᔨᑦ ᐊᐧᐁᓐ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ᙮ ᓂᔮᓈᓀᐤ ᒫᒃ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒌ ᐧᐄᐦᑕᒧᒡ ᐊᓂᒌ ᒋᔐᐄᓅᒡ ᐁ ᒌ ᐧᐄᐦᐄᐧᐁᐸᔨᓃᐦᐧᑳᐤᐦ ᓇᓈᐦᑰ ᐁ ᐄᔑ ᒪᒋᐸᔨᑦ ᐊᐧᐁᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᒉᐧᑳᔫ, ᐁᔫᒄ ᐅᔫᐦ ᓂᔮᓈᓀᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑳ ᑲᓄᐧᐋᐸᐦᑎᐧᑳᐤ:

- ᐄᓈᔥᑦ
- ᐅᑑᔅᐲ
- ᐧᐋᒋᓈᑲᓐ
- ᐄᓈᐦᑎᒄ
- ᐅᔅᒋᔅᒃ
- ᑳᒋᒉᐸᒄ
- ᐊᔨᑲᑖᔥ
- ᒪᔅᑯᒥᔒ

ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒌ ᐧᐄᐦ ᑲᐧᑫᒋᐦᑌᐅᒡ ᐊᓂᔫᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁᒄ ᒫᒃ ᒉ ᒌ ᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᑖᓐᑌ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᑌ ᐲᐦᒡ ᐊᐧᐁᓐ ᐧᐃᔫᐦᒡ ᑲᔦ ᑖᓐᑌ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ᙮ ᐁᔫᒄ ᑳ ᐧᐄᐦ ᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ, ᑖᐧᐯᐦᐋ ᐄᔑ ᐋᐸᑎᓰᒥᑲᓐᐦ ᐅᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐧᒣᐦᒡ ᐊᓂᔫ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐ? ᐊᓂᔫ ᒫᒃ ᑖᐧᐯ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ, ᑖᐧᐯ ᐃᔑᓈᑯᓐ ᒉ ᐧᐄᐦ ᐃᔮᐧᑳᒦᔥᑕᑲᓄᐧᐃᐦᒡ ᐊᓂᔫ ᒌᑯ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ᐊᓂᔫ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ᙮

ᐊᓂᔫ ᒫᒃ ᒣᐧᑳᒡ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ, ᒌ ᓃᔑᓂᔫᐦ ᐅᑲᐧᑫᒋᔅᒉᒧᐧᐃᓂᐧᐋᐤᐦ᙮ ᐊᓂᔫ ᓃᔥᑕᒻ, ᐁᔫᒄ ᑳ ᐧᐄᐦ ᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᑖᐧᐯ ᐁ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᐊᓐ ᓂᐦᑖᐅᒋᐦᒋᑲᓐ ᒉ ᒌ ᓇᑳᐦᐄᒉᐸᔨᐦᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ᙮ ᐊᓐ ᒦᓐ ᑯᑕᒃ,

ᐅᔥᑭᒡ ᐋ ᑭᓂᐧᐋᐱᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᔮᓈᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐅᐦᒋ ᒫᓯᐦᒐᐱᔨᒡ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ

ᑖᓂᑖᐦ ᑳ ᐅᐦᒋ ᒋᐦᒋᐱᔨᒡ ᐆ ᐋ ᐄᔑ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐧᐃᒡ?

ᐊᓐ 2003 ᑳ ᐃᔅᐱᔨᒡ ᐊᔅᒌᐤ ᐊᒋᐦᑖᓱᐧᐃᓐ, ᒋᔖᐄᔨᔨᐅᒡ ᐊᓂᑖᐦ ᐄᔨᔨᐤ ᐊᔅᒌᐦᒡ ᑭᔮᐦ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫᒨ ᒌ ᐋᐱᑎᔒᔥᑎᒧᒡ ᐊᓂᔮ ᒑ ᒌ ᒋᔅᑯᑎᒫᓱᒡ ᑖᓐ ᐋ ᐄᔑ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐅᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᓂᑐᐦᑯᐦᐄᓱᒡ᙮ ᐊᓂᒌ ᒋᔖᐄᔨᔨᐅᒡ ᒌ ᐧᐄᐦᑎᒧᐧᐋᐅᒡ ᐊᓂᔮᐦ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᒥᔨᒡᐦ ᒑᑯ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐋᐱᑎᓂᔨᒡᐦ ᐊᓂᔮ ᒑ ᒌ ᐅᐦᒋ ᐧᐄᒋᐦᑖᑭᓂᐧᐃᔨᒡ ᐋ ᐄᔑ ᒥᒋᐱᔨᑦ ᐊᐧᐋᓐ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ᙮ ᓂᔮᓈᓈᐤ ᒫᒃ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒌ ᐧᐄᐦᑎᒧᒡ ᐊᓂᒌ ᒋᔖᐄᔨᔨᐅᒡ ᐋ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ ᓂᓈᐦᑰ ᐋ ᐄᔑ ᒥᒋᐱᔨᑦ ᐊᐧᐋᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒑᐧᑳᔨᐤ, ᐋᔦᐧᐃᒄ ᐅᔮᐦ ᓂᔮᓈᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᑳ ᑭᓂᐧᐋᐱᐦᑎᒡ:

- ᐄᔮᔥᑦ
- ᐅᑑᔅᐲ
- ᐧᐋᒋᓈᑭᓐ
- ᐄᔮᐦᑎᒄ
- ᐅᔅᒋᔅᒃ
- ᑳᒋᒑᐱᒄ
- ᐊᔨᑭᑖᔥ
- ᒥᔥᑯᒥᔒ

ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒌ ᐧᐄᐦ ᑯᐧᑳᒋᐦᑖᐅᒡ ᐊᓂᔮᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋᒄ ᒫᒃ ᒑ ᒌ ᒋᔅᒐᔨᐦᑎᐦᒡ ᑖᓂᑖᐦ ᐋ ᐄᔑ ᐋᐱᑎᔒᒥᑭᐦᒡ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᑖᐦ ᐲᐦᒡ ᐊᐧᐋᓐ ᐧᐃᔮᐦᒡ ᑭᔮᐦ ᑖᓂᑖᐦ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ᙮ ᐋᔦᐧᐃᒄ ᑳ ᐧᐄᐦ ᒋᔅᒐᔨᐦᑎᐦᒡ, ᑖᐧᐸᐦᐋ ᐄᔑ ᐋᐱᑎᔒᒥᑭᓐᐦ ᐅᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐧᒫᐦᒡ ᐊᓐ ᐋ ᐄᔑ ᐋᐱᑎᔒᒥᑭᐦᒡ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐ? ᐊᓂᔮ ᒫᒃ ᑖᐧᐸᐦ ᐋ ᐄᔑ ᐋᐱᑎᔒᒥᑭᐦᒡ, ᑖᐧᐸᐦ ᐃᔑᓈᑯᓐ ᒑ ᐧᐄᐦ ᐃᔮᐧᑳᒦᔥᑎᑭᓂᐧᐃᒡ ᐊᓂᔮ ᒌᑯ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐊᓂᐦᐄ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ᙮

ᐊᓂᔮ ᒫᒃ ᒫᐧᑳᒡ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ, ᒌ ᓃᔑᓂᔫᐦ ᐅᑯᐧᑳᒋᔅᒑᒧᐧᐃᓂᐧᐋᐤᐦ᙮ ᐊᓂᔮ ᓃᔥᑎᒻ, ᐋᔦᐧᐃᒄ ᑳ ᐧᐄᐦ ᒋᔅᒐᔨᐦᑎᐦᒡ ᑖᐧᐸᐦ ᐋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒑ ᒌ ᓂᑳᐦᐄᒑᐱᔨᒡ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ᙮

A first look at how eight Iiyiyiu medicinal plants affect diabetes*

How did the study begin?

In 2003, Elders in Iiyiyiu Aschii and a group of plant scientists started to work together to learn more about the plants that Iiyiyiu use for healing. The Elders told the scientists which plants are used to treat the kinds of problems that people get when they have diabetes. Eight of the plants were mentioned by many different Elders, or were used to treat many different symptoms. So the team began by looking at these eight plants:

- Balsam fir
- Speckled alder
- Tamarack
- Black spruce
- Jack pine
- Labrador tea
- Pitcher plant
- Showy mountain ash

The plant scientists wanted to test these plants in the lab to find out more about how they work inside a person's body to make their diabetes better. For instance, do the plants work the same way as some of the "western" medicines used to treat diabetes? If they do, then maybe we should be careful about combining the western medicines and the Iiyiyiu ones.

ᐁᔫᒄ ᑳ ᐑᐦ ᒋᔅᒉᔨᐦᑕᐦᒁᐤ ᑖᐺ ᒉ ᒌ ᐑᒋᐦᐄᐌᐸᔨᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᐁ ᐄᔑ ᒪᒋᐸᔨᑦ ᐊᐌᓐ ᐁ ᔒᐚᑲᒥᐦᑵᑦ (ᒬᐦᒡ ᐊᓂᔫ ᐁᑳ ᓂᓯᑐᓯᑦ ᐊᐌᓐ ᐅᓯᑎᐦᒡ ᑲᔦ ᐁ ᐅᔥᑖᐸᔨᑦ ᐊᐌᓐ ᐅᔥᒌᔑᑯᐦᒡ)᙮ ᐅᔫ ᒫᒃ ᒣᒁᒡ ᐁ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᒁᐤ, ᓇᒧᐃ ᐁᔥᑯ ᒋᐦᒋᐌ ᓂᑐᐌᔨᐦᑕᒧᒡ ᐊᓂᔫ ᓇᔥᑵᐅᔑᐦᐄᐌᐏᓂᔫ᙮ ᒥᒄ ᓃᔥᑕᒻ ᐑᐦ ᒋᔅᒉᔨᐦᑕᒧᒡ ᒉᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒫᔥᑯᒡ ᑖᐺ ᒉ ᒌ ᐑᒋᐦᐄᐌᐸᔨᐦᒡ ᑲᔦ ᑖᓂᔫ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁᑎᑑ ᒦᓐ ᒉ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐏᐦᒁᐤᐦ᙮

ᑖᐺᐦᐋ ᑖᐦᑲᐦᐄᒉᐸᔫᐦ ᐅᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᐁ ᔒᐚᑲᒥᐦᑵᑦ ᐊᐌᓐ?

ᐌᓯᓐ ᐁ ᒦᒋᓱᔨᐦᒄ, ᐄᔅᑯᐸᔫ ᑖᓐ ᐁ ᐃᔥᐱᔥ ᐃᐦᑎᑯᐦᒡ ᓲᑳᐤ ᐊᓂᑦ ᒋᒥᐦᑯᓈᐦᒡ᙮ ᐁᒄ ᒫᒃ ᐁ ᑲᓄᐌᔨᐦᑖᑯᐦᒡ ᐊᓐ ᓲᑳᐤ ᐊᓂᑦ ᐲᐦᒋᔫ, ᐁᒄ ᒫᒃ ᒉ ᒌ ᐅᐦᒋ ᐋᐸᒋᐦᑌᔨᐦᒄ ᐹᑎᒫᐦ ᐊᓂᔫ ᐁ ᐋᐸᑎᓯᔨᐦᒄ᙮ ᐆ ᒫᒃ ᒉ ᒌ ᐃᔅᐸᔨᐦᒡ, ᐁᑯᑦ ᐁ ᐅᐦᒋ ᐅᔑᐦᐆᒥᑲᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ ᐊᓂᑦ ᐲᐦᒋᔫ, ᐁᐅᒄ ᐁ ᐑᒋᐦᐄᐌᐸᔨᐦᒡ ᒉ ᒌ ᑲᓄᐌᔨᐦᑖᑯᐦᒡ ᓲᑳᐤ ᐲᐦᒋᔫ᙮ ᐊᓐ ᒫᒃ ᐁ ᔒᐚᑲᒥᐦᑵᔨᐦᒄ, ᓇᒧᐃ ᒌ ᐃᔥᐱᔑ ᐅᔑᐦᐆᒥᑲᓐ ᐊᓐ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ ᒍᔅᑦ ᒫᒃ ᓇᒧᐃ ᒥᔪᐸᔫ ᒉ ᒌ ᐋᐸᑎᓰᒥᑲᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ ᐊᓂᑦ ᐲᐦᒋᔫ᙮ ᐆ ᒫᒃ ᐁ ᐃᔅᐸᔨᐦᒡ, ᐁᑯᑦ ᐁ ᐊᑕ ᐃᐦᑎᑯᐦᒡ ᐊᓐ ᓲᑳᐤ ᒋᒥᐦᑯᓈᐦᒡ ᑲᔦ ᐁ ᐊᑕ ᒪᒋᐸᔨᐦᐄᐌᒡ᙮ ᐁᒄ ᒫᒃ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᒁᐤ ᒉᒁᔫ, ᒌ ᓃᔑᓂᔫᐦ ᐅᑲᑵᒋᔅᒉᒧᐏᓂᐚᐤᐦ:

1. ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᑖᐺᐦᐋ ᐑᒋᐦᐄᐌᐸᔫᐦ ᒉ ᒌ ᐅᔑᐦᐆᒋᑲᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ ᐊᓂᑦ ᐲᐦᒡ ᐊᐌᓐ ᐏᔫᐦᒡ?
2. ᐋᑕ ᐁᑳ ᐑᒋᐦᐄᐌᐸᔨᐦᒡ ᒉ ᒌ ᐅᔑᐦᐆᒥᑲᐦᒡ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ, ᑖᐺᐦᐋ ᐑᒋᐦᐄᐌᐸᔫᐦ ᐅᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ᑲᓄᐌᔨᐦᑖᑯᐦᒡ ᓲᑳᐤ ᐊᓂᑦ ᐲᐦᒡ ᐊᐌᓐ ᐏᔫᐦᒡ ᐋᐦᒌᐤᐦ ᐁ ᐄᔑ ᐑᒋᐦᐄᐌᐸᔨᐦᒡ ᒬᐦᒡ ᐊᓂᔫ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ ᐁ ᐄᔑ ᐋᐸᑎᓯᒦᑲᐦᒡ? ᐁᐅᒄ ᐊᓂᔫ ᑖᐺᐦᐋ ᐃᔮᐸᒡ ᐄᔑ ᐋᐸᑎᓯᒥᑲᓐᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒬᐦᒡ ᐊᓐ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ ᑳ ᒥᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ?

ᐊᓐ ᒫᒃ ᐅᔥᑲᒡ ᑳ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐏᐦᒡ, ᓇᒧᐃ ᐑᒋᐦᐄᐌᐸᔫᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ᐅᔑᐦᐆᒥᑲᐦᒡ ᑳ ᒦᓄᐚᑲᒥᐦᐄᒉᐸᔨᐦᒡ᙮ ᒥᒄ ᒫᒃ ᐊᓂᔫ ᒥᓯᐌ ᓂᔮᓈᓅᐤ

ᐊᓐ ᒦᓐ ᑯᑎᒃ, ᐋᔦᐏᒄ ᑳ ᐑᐦ ᒋᔅᒑᔨᐦᑎᐦᒡ ᑖᑆᐦ ᒑ ᒌ ᐑᒋᐦᐄᐚᐱᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᐋ ᐄᔑ ᒥᒋᐱᔨᑦ ᐊᐚᓐ ᐋ ᔒᐚᑭᒥᐦᒁᑦ (ᐱᑯᓂᒑ ᐊᓂᔮ ᐋᑳ ᓂᔅᑐᓯᑦ ᐊᐚᓐ ᐅᓯᑎᐦᒡ ᑭᔮᐦ ᐋ ᐅᔥᑖᐱᔨᑦ ᐊᐚᓐ ᐅᔥᒌᔑᑯᐦᒡ)᙮ ᐅᔮ ᒫᒃ ᒫᒁᒡ ᐋ ᐄᔑ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ, ᓂᒧᐃ ᐋᔥᑯ ᒋᐦᒋᐚ ᓂᑐᐚᔨᐦᑎᒧᒡ ᐊᓂᔮ ᓂᔥᒁᐅᔑᐦᐄᐚᐏᓂᔮᐤ᙮ ᒥᒄ ᓃᔥᑎᒻ ᐑᐦ ᒋᔅᒐᔨᐦᑎᒧᒡ ᒐᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒁᐧᔖᓐ ᑖᑆᐦ ᒑ ᒌ ᐑᒋᐦᐄᐚᐱᔨᒡ ᑭᔮᐦ ᑖᓂᔮ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᑎᑑ ᒦᓐ ᒑ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐏᒡᐦ᙮

ᑖᑆᐦᐋ ᑖᐦᑭᐦᐄᒑᐱᔨᐤᐦ ᐅᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᐋ ᔒᐚᑭᒥᐦᒁᑦ ᐊᐚᓐ?

ᐚᔥ ᐊᓐ ᐋ ᒦᒋᓱᔨᐦᒄ, ᐄᔅᑯᐱᔨᐤ ᑖᓐ ᐋ ᐃᔥᐱᔑ ᐃᐦᑎᑯᐦᒡ ᓲᑳᐤ ᐊᓂᑎᐦ ᒋᒥᐦᑯᓈᐦᒡ᙮ ᐋᒄ ᒫᒃ ᐋ ᑭᓂᐚᔨᐦᑖᑯᐦᒡ ᐊᓐ ᓲᑳᐤ ᐊᓂᑎᐦ ᐲᐦᒋᔨᐤ, ᐋᒄ ᒫᒃ ᒑ ᒌ ᐅᐦᒋ ᐋᐱᒋᐦᑖᔨᐦᒄ ᐹᑎᒫᐦ ᐊᓐ ᐋ ᐋᐱᑎᓯᔨᐦᒄ᙮ ᐆ ᒫᒃ ᒑ ᒌ ᐃᔅᐱᔨᒡ, ᐋᑯᑎᐦ ᐋ ᐅᐦᒋ ᐅᔑᐦᐆᒥᑭᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑭᒥᐦᐄᒑᐱᔨᒡ ᐊᓂᑎᐦ ᐲᐦᒋᔨᐤ, ᐋᐅᒄ ᐋ ᐑᒋᐦᐄᐚᐱᔨᒡ ᒑ ᒌ ᑭᓂᐚᔨᐦᑖᑯᐦᒡ ᓲᑳᐤ ᐲᐦᒋᔨᐤ᙮ ᐊᓐ ᒫᒃ ᐋ ᔒᐚᑭᒥᐦᒁᔨᐦᒄ, ᓂᒧᐃ ᒌ ᐃᔥᐱᔑ ᐅᔑᐦᐆᒥᑭᓐ ᐊᓐ ᑳ ᒦᓄᐚᑭᒥᐦᐄᒑᐱᔨᒡ ᑭᔮᐦ ᒫᒃ ᓂᒧᐃ ᒥᔪᐱᔨᐤ ᒑ ᒌ ᐋᐱᑎᓰᒥᑭᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑭᒥᐦᐄᒑᐱᔨᒡ ᐊᓂᑎᐦ ᐲᐦᒋᔨᐤ᙮ ᐆ ᒫᒃ ᐋ ᐃᔅᐱᔨᒡ, ᐋᑯᑎᐦ ᐋ ᐊᑎ ᐃᐦᑎᑯᐦᒡ ᐊᓐ ᓲᑳᐤ ᒋᒥᐦᑯᓈᐦᒡ ᑭᔮᐦ ᐋ ᐊᑎ ᒥᒋᐱᔨᐦᐄᐚᒡ᙮ ᐋᒄ ᒫᒃ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒐᒁᔮᐤ, ᒌ ᓃᔑᓂᔮᐤᐦ ᐅᑯᒁᒋᔅᒑᒧᐏᓂᐚᐤᐦ:

1. ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᑖᑆᐦᐋ ᐑᒋᐦᐄᐚᐱᔨᐤᐦ ᒐ ᒌ ᐅᔑᐦᐆᒋᑭᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑭᒥᐦᐄᒑᐱᔨᒡ ᐊᓂᑎᐦ ᐲᐦᒡ ᐊᐚᓐ ᐏᔮᐦᒡ?
2. ᐋᑎ ᐋᑳ ᐑᒋᐦᐄᐚᐱᔨᒡ ᒐ ᒌ ᐅᔑᐦᐆᒥᑭᐦᒡ ᑳ ᒦᓄᐚᑭᒥᐦᐄᒑᐱᔨᒡ, ᑖᑆᐦᐋ ᐑᒋᐦᐄᐚᐱᔨᐤᐦ ᐅᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒐ ᒌ ᑭᓂᐚᔨᐦᑖᑯᐦᒡ ᓲᑳᐤ ᐊᓂᑎᐦ ᐲᐦᒡ ᐊᐚᓐ ᐏᔮᐦᒡ ᐃᔨᐦᒡ ᐋ ᐄᔑ ᐑᒋᐦᐄᐚᐱᔨᒡ ᒸᐦᒡ ᐊᓐ ᑳ ᒦᓄᐚᑭᒥᐦᐄᒑᐱᔨᐦᒡ ᐋ ᐄᔑ ᐋᐱᑎᓯᒦᑭᐦᒡ? ᐋᐅᒄ ᐊᓂᔮ ᑖᑆᐦᐋ ᐋᔮᐱᒡ ᐄᔑ ᐋᐱᑎᓯᒥᑭᓐᐦ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒸᐦᒡ ᐊᓐ ᐋ ᐄᔑ ᐋᐱᑎᓰᒥᑭᐦᒡ ᑳ ᒥᓄᐚᑭᒥᐦᐄᒑᐱᔨᒡ?

ᐊᓐ ᒫᒃ ᐅᔥᑭᒡ ᑳ ᐄᔑ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐏᒡ, ᓂᒧᐃ ᐑᒋᐦᐄᐚᐱᔨᐤᐦ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒐ ᒌ ᐅᔑᐦᐆᒥᑭᐦᒡ

They looked at two different kinds of questions. First, they looked at whether the plants could act to control diabetes itself. Second, they looked at whether the plants might help reduce some of the other health problems that diabetes causes (like numb feet or eye problems). At this stage, they were not looking for definite answers to these questions. Instead, they just wanted to identify which of the eight plants had the most promise and should be tested further.

DO ANY OF THE PLANTS ACT DIRECTLY ON DIABETES?

When we eat, the amount of sugar in our blood goes up. Then our bodies store this extra sugar in our cells so we can use it to produce energy later on. To do this, our bodies usually make insulin, which helps to store the sugar in the cells. When we have diabetes, either our bodies don't produce enough insulin or the cells do not accept the insulin very well. As a result, the sugar stays in our blood and does damage. So the first two questions the scientists looked at were:

1. Do any of the plants actually help people's bodies to produce more insulin?
2. Even if they don't increase insulin levels, do these plants help the body to store sugar in the cells in some other way? That is, do the plants produce the *same effects* as insulin?

ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑳ ᐧᐄᐦᑎᐦᐧᑳᐤ ᒋᔕᐄᓅᒡ, ᐁᐅᒄ ᑖᐧᐯ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᓃᐦᐧᑳᐤ ᐧᒉᐦᒡ ᐊᓂᔫ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᑳ ᒦᓄᐧᐋᑲᒥᐦᐄᒉᐸᔨᐦᒡ᙮ ᓇᓈᐦᑰ ᒫᒃ ᐃᔅᐸᔫᐦ ᐊᓂᔫ ᑳ ᐄᔑ ᒪᔅᑲᐧᐋᐦᑖᐧᑖᐤ, ᒥᒄ ᒫᒃ ᒥᓯᐧᐁ ᐧᐄᒋᐦᐄᐧᐁᐸᔫᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ᑲᓄᐧᐁᔨᐦᑖᑯᐦᒡ ᔖᑳᐤ ᐊᓂᑦ ᐲᐦᒡ ᐊᐧᐁᓐ ᐧᐃᔫᐦᒡ᙮

ᒋᑳ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔫᐦᐋ ᐅᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᐁᑳ ᓈᔥᒡ ᒉ ᒌ ᒪᒋᐸᔨᑦ ᐊᐧᐁᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ?

ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ ᐊᐧᐁᓐ, ᐁᑯᑦ ᒉ ᒌ ᓂᔖᓈᒋᐸᔨᐦᐧᑳᐤ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᑦ ᐊᐧᐁᓐ ᐅᑎᐦᒌᐦᒡ ᑲᔦ ᐅᓯᑎᐦᒡ᙮ ᐆ ᒫᒃ ᐁ ᐃᔅᐸᔨᐦᒡ, ᐁᐅᒄ ᐊᓂᔫ ᓈᔥᒡ ᒥᔥᑕᐦᐄ ᐁ ᐃᐦᑎᑯᓂᔨᒡ ᔖᑳᔫ ᐊᐧᐁᓐ ᐅᒥᐦᑯᐦᒡ᙮ ᐁᑯᑦ ᑲᔦ ᐁ ᓂᐲᒥᑲᐦᒡ ᐊᓂᔫ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ ᐁᑳ ᓈᔥᒡ ᐃᐦᑎᑯᓂᔨᒡ ᔖᑳᔫ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐁᓐ (ᐁᐅᒄ ᐊᓂᔫ ᐁ ᐃᔅᐸᔨᓃᒡ ᐁᒑ ᒥᔥᑕᐦᐄ ᐁ ᐋᐸᒋᐦᑖᑦ ᐊᐧᐁᓐ ᑳ ᒦᓄᐧᐋᑲᒥᐦᐄᒉᐸᔨᓃᒡ)᙮ ᐊᓂᔫ ᒫᒃ ᐁ ᓃᐱᒥᑲᐦᒡ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᑦ ᐊᐧᐁᓐ, ᐁᑯᑦ ᐁ ᒎᔑᐦᑌᑦ ᐁ ᒌᔅᒋᒥᓰᑦ ᓀᔅᑦ ᒫᒃ ᐁ ᓃᔭᒥᓰᑦ ᐊᓂᑦ ᐅᓯᑎᐦᒡ ᑲᔦ ᐅᑎᐦᒌᐦᒡ᙮ ᐊᓂᔫ ᒫᒃ ᐁ ᓂᔖᓈᒋᐸᔨᐦᐧᑳᐤ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ ᐊᓂᑦ ᐅᔥᒌᔑᑯᐦᒡ ᐊᐧᐁᓐ, ᐁᑯᑦ ᒉ ᒌ ᐅᔥᑖᐸᔨᑦ ᐁᑳ ᓈᔥᒡ ᐧᐋᐸᐦᑕᐦᒃ ᑲᔦ ᒫᔥᑯᒡ ᐁᑳ ᒥᒍᓐ ᒉ ᒌ ᐧᐋᐸᐦᑕᐦᒃ᙮

ᐊᓂᑌ ᒫᒃ ᐄᔑ ᓃᔥᑖᒥᐦᒡ, ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᒉᐧᑳᔫ ᐧᐄᐦ ᒋᔅᒉᔨᐦᑕᒧᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᑖᐧᐯᐦ ᐁ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐁᑳ ᒉ ᒌ ᓂᔖᓈᒋᐸᔨᐦᓃᐦᐧᑳᐤ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᑦ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ᙮ ᐊᓂᔫ ᒫᒃ ᓃᔥᑕᒻ ᑳ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ, ᐁᑯᑦ ᒉ ᐅᐦᒋ ᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤ ᑖᓐᑌ ᒦᓐ ᒉᒃ ᒉ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑕᐦᐧᑳᐤᐦ, ᐁᐅᒄ ᐊᓂᔫ ᐁ ᐧᐄᐦ ᐧᐋᐸᐦᑎᐦᐧᑳᐤ ᒉᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᑖᐦᑲᐦᐄᒉᐸᔨᓃᐦᐧᑳᐤᐦ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ᙮ ᐁᔫᒄ ᓃᔥᑕᒻ ᑳ ᐸᒋᔅᑎᓇᐦᐧᑳᐤ ᐊᓂᔫ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ ᐊᓂᑦ ᐁ ᐊᐱᓵᔑᒡ ᐧᐃᔮᑲᓂᔥ ᑲᔦ ᒥᔥᑕᐦᐄ ᐁ ᐸᒋᔅᑎᓂᐦᐧᑳᐤ ᔖᑳᔫ, ᐁᒄ ᒉᒃ ᐁ ᐊᒋᐦᑎᐦᐧᑳᐤ ᑖᓐ ᐁ ᐃᔥᐱᔥ ᓂᐲᒥᑲᐦᒡ ᐊᓂᔫ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ᙮ ᒦᓐ ᒫᒃ ᐅᔫ ᒌ ᐃᐦᑑᒡ, ᒥᒄ ᒫᒃ ᒌ ᐸᒋᔅᑎᓇᒧᒡ ᐊᓂᔫ ᑳ ᐋᐸᑎᓰᒥᑲᓃᐦᒡ ᒉᐧᑳᔫ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ ᐁ ᐅᐦᒋᐸᔨᓃᒡ, ᐁᑯᑦ ᑳ ᐧᐄᐦ ᐧᐋᐸᐦᑎᐦᐧᑳᐤ ᑖᐧᐯ ᐁᑳ ᐃᔥᐱᔥ ᓂᐲᒥᑲᓂᔨᐦᒡ ᐊᓂᔫ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ᙮ ᐆ ᒫᒃ ᑳ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓄᐧᐃᐦᒡ, ᓂᔮᔨᓐ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒌ

ᑳ ᒦᓄᐧᐋᑭᒥᐦᐄᒑᐱᔨᐦᒡ᙮ ᒥᒄ ᒫᒃ ᐊᓂᔮ ᒥᓯᐧᐋ ᓂᔮᓈᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᑳ ᐧᐄᐦᑎᐦᒡ ᒋᓵᐄᔨᔨᐅᒡ, ᐋᐅᒄ ᑖᐧᐹᐦ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ ᐧᒫᐦᒡ ᐊᓂᔮ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᑳ ᒦᓄᐧᐋᑭᒥᐦᐄᒑᐱᔨᒡ᙮ ᓂᓈᐦᑰ ᒫᒃ ᐃᔅᐱᔨᔨᐤ ᐊᓂᔮ ᑳ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᒡ, ᒥᒄ ᒫᒃ ᒥᓯᐧᐋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᐤᐦ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒑ ᒌ ᑭᓂᐧᐋᔨᐦᑖᑯᐦᒡ ᔖᑳᐤ ᐊᓂᑎᐦ ᐲᐦᒡ ᐊᐧᐋᓐ ᐧᐃᔮᐦᒡ᙮

ᒋᑭ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᐤᐦᐋ ᐅᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᐋᑳ ᓈᔥᒡ ᒑ ᒌ ᒥᒋᐱᔨᑦ ᐊᐧᐋᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ?

ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ ᐊᐧᐋᓐ, ᐋᑯᑎᐦ ᒑ ᒌ ᓂᔖᓈᒋᐱᔨᔨᒡ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᑦ ᐊᐧᐋᓐ ᐅᑎᐦᒌᐦᒡ ᑭᔮᐦ ᐅᓯᑎᐦᒡ᙮ ᐆ ᒫᒃ ᐋ ᐃᔅᐱᔨᒡ, ᐋᐅᒄ ᐊᓂᔮ ᓈᔥᒡ ᒥᔥᑏᐦ ᐋ ᐃᐦᑎᑯᓂᔨᒡ ᔖᑲᔨᐤ ᐊᐧᐋᓐ ᐅᒥᐦᑯᐦᒡ᙮ ᐋᑯᑎᐦ ᑭᔮᐦ ᐋ ᓂᐲᒥᑭᐦᒡ ᐊᓂᐦᐄ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ ᐋᑳ ᓈᔥᒡ ᐃᐦᑎᑯᓂᔨᒡ ᔖᑲᔨᐤ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐋᓐ (ᐋᐅᒄ ᐊᓂᔮ ᐋ ᐃᔅᐱᔨᔨᒡ ᐋᓵ ᒥᔥᑏᐦ ᐋ ᐋᐱᒋᐦᑖᑦ ᐊᐧᐋᓐ ᑳ ᒦᓄᐧᐋᑭᒥᐦᐄᒑᐱᔨᔨᒡ)᙮ ᐊᓂᔮ ᒫᒃ ᐋ ᓃᐱᒥᑭᐦᒡ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᑦ ᐊᐧᐋᓐ, ᐋᑯᑎᐦ ᐋ ᒎᔑᐦᑖᑦ ᐋ ᒌᔅᒋᒥᓰᑦ ᑭᔮᐦ ᒫᒃ ᐋ ᐃᔨᔨᒥᓰᑦ ᐊᓂᑎᐦ ᐅᓯᑎᐦᒡ ᑭᔮᐦ ᐅᑎᐦᒌᐦᒡ᙮ ᐊᓂᔮ ᒫᒃ ᐋ ᓂᔖᓈᒋᐱᔨᒡ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ ᐊᓂᑎᐦ ᐅᔥᒌᔑᑯᐦᒡ ᐊᐧᐋᓐ, ᐋᑯᑎᐦ ᒑ ᒌ ᐅᔥᑖᐱᔨᑦ ᐋᑳ ᓈᔥᒡ ᐧᐋᐱᐦᑎᐦᒃ ᑭᔮᐦ ᐧᑳᐧᓵᓐ ᐋᑳ ᒥᑎᑐᓐ ᒑ ᒌ ᐧᐋᐱᐦᑎᐦᒃ᙮

ᐊᓂᑖᐦ ᒫᒃ ᐄᔑ ᓃᔥᑖᒥᐦᒡ, ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ ᒑᐧᑳᔨᐤ ᐧᐄᐦ ᒋᔅᒑᔨᐦᑎᒧᒡ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᑖᐧᐹᐦ ᐋ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐋᑳ ᒑ ᒌ ᓂᔖᓈᒋᐱᔨᔨᒡᐦ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᑦ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ᙮ ᐊᓂᔮ ᒫᒃ ᓃᔥᑎᒻ ᑳ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ, ᐋᑯᑎᐦ ᒑ ᐅᐦᒋ ᒋᔅᒑᔨᐦᑎᐦᒡ ᑖᓂᑖᐦ ᒦᓐ ᒑᒃ ᒑ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑎᐦᒡ, ᐋᐅᒄ ᐊᓂᔮ ᐋ ᐧᐄᐦ ᐧᐋᐱᐦᑎᐦᒡ ᒑᒄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᑖᐦᑭᐦᐄᒑᐱᔨᔨᒡᐦ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ᙮ ᐋᔫᐧᐃᒄ ᓃᔥᑎᒻ ᑳ ᐱᒋᔅᑎᓂᐦᒡ ᐊᓂᔮ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ ᐊᓂᑎᐦ ᐋ ᐊᐱᓵᔑᒡ ᐧᐃᔮᑭᓂᔥ ᑭᔮᐦ ᒥᔥᑏᐦ ᐋ ᐱᒋᔅᑎᓂᐦᒡ ᔖᑲᔨᐤ, ᐋᒄ ᒑᒃ ᐋ ᐊᒋᐦᑎᐦᒡ ᑖᓐ ᐋ ᐃᔥᐱᔑ ᓂᐲᒥᑭᐦᒡ ᐊᓂᔮ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ᙮ ᒦᓐ ᒫᒃ ᐅᔮ ᒌ ᐃᐦᑑᒡ, ᒥᒄ ᒫᒃ ᒌ ᐱᒋᔅᑎᓂᒧᒡ ᐊᓂᔮ ᑳ ᐋᐱᑎᓰᒥᑭᓂᔨᒡ ᒑᐧᑳᔨᐤ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ ᐋ ᐅᐦᒋᐱᔨᔨᒡ, ᐋᑯᑎᐦ ᑳ ᐧᐄᐦ ᐧᐋᐱᐦᑎᐦᒡ ᑖᐧᐹᐦ ᐋᑳ ᐃᔥᐱᔑ ᓂᐲᒥᑭᓂᔨᒡ ᐊᓂᔮ ᐋ

These first tests suggested that all eight plants that the Elders identified have some of the same effects as insulin. To a greater or lesser extent, they may all help the body to store sugar.

Could any of the plants help reduce the complications of diabetes?

Diabetes can damage the nerves that are far from the centre of the body. This happens because nerve cells die when a person's blood sugar is too high. Nerve cells also die when blood sugar is too low (for instance, if a person takes too much insulin by mistake). When the nerve cells die, people get effects like tingling, numbness, pain, or weakness in their feet and hands. If the nerves in the eye get damaged, people get vision problems and may even go blind.

In the long run, the scientists want to know if any of the plants can reduce the nerve damage that diabetes causes. The tests they did were a first step in this direction, to see which plants seem to have some effects on nerves. First, they put nerve-like cells in a dish with a lot of sugar, and counted how many of them died. Then they did the same thing again, but also adding the plant extracts, to see if fewer nerve cells would die. It turned out that five of the plants helped to protect the nerve cells against being killed by high sugar levels.

Besides causing nerve damage, diabetes can affect the circulatory system—the heart and the way blood flows through the body. When this happens, people get heart disease. One of the things that

ᐧᐄᒋᐦᐄᐧᐁᐸᔫᐦ ᐊᓂᔫ ᐁᑳ ᓈᔥᒡ ᒥᔥᑕᐦᐄ ᒉ ᒌ ᓂᐲᒥᑲᐦᒡ ᐊᓂᔫ ᐁ ᐅᐦᒋ ᓂᓯᑐᓯᓈᓄᐧᐃᐦᒡ ᐋᑕ ᐊᓐ ᒥᔥᑕᐦᐄ ᐁ ᐃᐦᑎᑯᐦᒡ ᔖᑳᐤ᙮

ᐊᓐ ᒫᒃ ᒦᓐ ᐁ ᐄᔑ ᒪᒋᐸᔨᐦᐄᐧᐁᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ, ᐁᐅᒄ ᐊᓐ ᒉ ᒌ ᒪᒋᐸᔨᑦ ᐊᐧᐁᓐ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᐱᒫᔑᑰᓃᒡ ᐅᒥᐦᒄ—ᐊᓂᔫ ᐅᑌᐦᐄ ᐊᐧᐁᓐ ᑲᔦ ᑖᓐ ᐁ ᐄᔑ ᐱᒫᔑᑰᓃᒡ ᐅᒥᐦᒄ ᐊᓂᑦ ᐲᐦᒋᔫ᙮ ᐆ ᒫᒃ ᐁ ᐃᔅᐸᔨᐦᒡ, ᐁᑯᑦ ᒉ ᒌ ᐋᐦᑯᓯᑦ ᐊᐧᐁᓐ ᐅᑌᐦᐄᐦᒡ᙮ ᐊᓐ ᒫᒃ ᐯᔭᒄ ᒉᐧᑳᓐ ᐁ ᐅᐦᒋ ᒥᓯᐦᑌᐸᔨᐦᒡ ᐁ ᐋᐦᑯᓯᓈᓄᐧᐃᐦᒡ ᒥᑌᐦᐄᐦᒡ, ᐁᐅᒄ ᐊᓂᔫ ᐁᑳ ᒥᐧᔮᔑᐦᐧᑳᐤᐦ ᒉᐧᑳᔫᐦ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐁᓐ, ᐁᐅᒄ ᐊᓂᔫ “ᕙᕇ ᕌᑎᑲᓪᔅ” ᐁ ᐃᔑᓂᐦᑳᑌᐦᐧᑳᐤᐦ, ᐁᐅᒄ ᐊᓂᔫ ᐁ ᐊᑕ ᓂᔖᓈᒋᐸᔨᐦᐄᐧᐁᒡ ᐊᓂᑦ ᐲᐦᒡ ᐊᐧᐁᓐ ᐧᐃᔫᐦᒡ᙮ ᐁᐅᒄ ᒫᒃ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᔫ ᒉᐧᑳᓐ ᐊᓂᑦ ᐲᐦᒡ ᐧᐃᔫᐦᒡ ᐊᐧᐁᓐ ᒉ ᒌ ᒫᓯᐦᒉᐸᔨᐦᒡ ᐊᓂᔫ ᐁ ᐃᐦᑎᑯᐦᒡ ᒉᐧᑳᓐ ᐁᑳ ᒥᐧᔮᔑᒡ, ᐁᐅᒄ ᐊᓐ ᐧᒣᐦᒡ ᐁ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᓃᐦᒡ ᐊᐧᐁᓐ ᐅᒥᐦᒄ, ᐁᐅᒄ ᐊᓐ “ᐋᓐᑏ-ᐅᒃᓯᑕᓐᑦᔅ” ᐁ ᐃᔑᓂᐦᑳᑌᐦᐧᑳᐤᐦ᙮ ᒥᒄ ᒫᒃ ᐊᓂᔫ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ ᐊᐧᐁᓐ, ᓇᒧᐃ ᐃᔥᐱᔥ ᒌᐦᒋᒌᒥᑲᓂᔫ ᒉ ᒌ ᒫᓯᐦᒉᐸᔨᓃᒡ ᐊᓂᔫ ᐁ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᓃᐦᒡ ᐊᓂᑦ ᐅᒥᐦᒄ, ᑲᔦ ᐁᔫᒄ ᒉ ᓂᑐᐧᐁᔨᐦᑕᐦᒃ ᐁᑎᑑ ᐁ ᒥᐧᔮᔑᔨᒡ ᒦᒋᒥᔫ ᒉ ᒌ ᒦᒋᑦ, ᐁᒄ ᒫᒃ ᒉ ᒌ ᒫᓯᐦᒉᐸᔨᓃᒡ ᐊᓂᔫ ᐁᑳ ᒥᐧᔮᔑᔨᒡ ᒉᐧᑳᔫ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ᙮

ᒥᐦᒉᑐ ᒫᒃ ᐊᓂᔫ ᒪᔥᑯᔖᐦ ᐁ ᒦᒋᓈᓄᐧᐃᐦᐧᑳᐤᐦ, ᑮᐸ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᔫ ᐋᓐᑏ-ᐅᒃᓯᑕᓐᑦᔅ ᑳ ᐃᔑᓂᐦᑳᑌᐦᐧᑳᐤᐦ ᐊᓐ ᐁ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᐦᒡ (ᐁᐅᒄ ᒫᒃ ᐊᓐ ᐧᐁᐦᒋ ᒥᐧᔮᔑᒡ ᒉ ᒌ ᒦᒋᓈᓄᐧᐃᐦᒡ ᐊᓂᔫ ᒪᔥᑯᔖᐦ ᐁ ᒦᒋᓈᓄᐧᐃᐦᐧᑳᐤᐦ)᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑕᐧᑳᐤᐦ ᒉᐧᑳᔫ, ᒌ ᐧᐄᐦ ᐧᐋᐸᐦᑕᒧᒡ ᐊᓂᔫ ᓂᔮᓈᓀᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᒥᔥᑕᐦᐄ ᐁ ᐃᐦᑎᑯᓂᔨᐧᑫ ᐊᓂᔫ ᐋᓐᑏ-ᐅᒃᓯᑕᓐᑦᔅ ᑳ ᐃᔑᓂᐦᑳᑌᒡ᙮ ᐁᑯᑦ ᑳ ᐸᒋᔅᓂᑲᓄᐧᐃᐦᐧᑳᐤ ᒥᓂᐦᐧᑳᑲᓂᔑᐦᒡ, ᐁᒄ ᑳ ᐸᒋᔅᓇᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᑲᔦ ᐊᓂᔫ “ᕙᕇ ᕌᑎᑲᓪᔅ” ᐁᒄ ᒫᒃ ᑳ ᐧᐄᐦ ᐧᐋᐸᐦᑎᐦᐧᑳᐤ ᑖᓐ ᐁ ᐄᔑ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᐦᒡ᙮ ᓂᔥᑐ ᒫᒃ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒥᔥᑕᐦᐄ ᐃᐦᑕᑯᓐ ᐊᓂᔫ ᐋᓐᑏ-ᐅᒃᓯᑕᓐᑦᔅ ᐊᓐ ᐁ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᐦᒡ᙮ ᐁᐅᒄ ᑖᐧᐯ ᒉᑳᑦ ᑌᑲᔥ ᑳ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᐦᒡ ᐧᒣᐦᒡ ᐊᓐ ᕚᐃᑕᒥᓐ C ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ, ᐧᐁᓯᓐ ᐁᐅᒄ ᒫᐅᒡ ᐁ ᓰᐦᒋᐸᔨᐦᒡ ᐁ ᐋᐸᑎᓰᒥᑲᐦᒡ ᐋᓐᑏ-ᐅᒃᓯᑕᓐᑦ ᑳ ᐃᔑᓂᐦᑳᑌᒡ ᐊᓐ ᐁ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᐦᒡ᙮

ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ᙮ ᐆ ᒫᒃ ᑳ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ, ᓂᔮᔪ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᐤᐦ ᐊᓂᔮ ᐋᑳ ᓈᔥᒡ ᒥᔥᑏᐦ ᒑ ᒌ ᓂᐲᒥᑭᐦᒡ ᐊᓐ ᐋ ᐅᐦᒋ ᓂᔅᑐᓯᓈᓂᐧᐃᒡ ᐋᑎ ᐊᓐ ᒥᔥᑏᐦ ᐋ ᐃᐦᑎᑯᐦᒡ ᔖᑳᐤ᙮

ᐊᓐ ᒫᒃ ᒦᓐ ᐋ ᐄᔑ ᒥᒋᐱᔨᐦᐄᐧᐋᒡ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ, ᐋᐅᒄ ᐊᓐ ᒑ ᒌ ᒥᒋᐱᔨᑦ ᐊᐧᐋᓐ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᐱᒫᔑᑯᔨᒡ ᐅᒥᐦᒄ—ᐊᓂᔮ ᐅᑖᐦᐄ ᐊᐧᐋᓐ ᑭᔮᐦ ᑖᓐ ᐋ ᐄᔑ ᐱᒫᔑᑯᔨᒡ ᐅᒥᐦᒄ ᐊᓂᑎᐦ ᐲᐦᒋᔨᐤ᙮ ᐆ ᒫᒃ ᐋ ᐃᔅᐱᔨᒡ, ᐋᑯᑎᐦ ᒑ ᒌ ᐋᐦᑯᓯᑦ ᐊᐧᐋᓐ ᐅᑖᐦᐄᐦᒡ᙮ ᐊᓐ ᒫᒃ ᐸᔮᒄ ᒑᐧᑳᓐ ᐋ ᐅᐦᒋ ᒥᓯᐦᑖᐱᔨᐦᒡ ᐋ ᐋᐦᑯᓯᓈᓂᐧᐃᒡ ᒥᑖᐦᐄᐦᒡ, ᐋᐅᒄ ᐊᓂᔮ ᐋᑳ ᒥᐧᔮᔑᓐᐦ ᒑᐧᑳᓂᐦᐄ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐋᓐ, ᐋᐅᒄ ᐊᓂᔮ “ᕙᕇ ᕌᑎᑭᓪᔅ” ᐋ ᐃᔑᓂᐦᑳᒡᐦ, ᐋᐅᒄ ᐊᓐ ᐋ ᐊᑎ ᓂᔖᓈᒋᐱᔨᐦᐄᐧᐋᒡ ᐊᓂᑎᐦ ᐲᐦᒡ ᐊᐧᐋᓐ ᐧᐃᔮᐦᒡ᙮ ᐋᐅᒄ ᒫᒃ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓐ ᒑᐧᑳᓐ ᐊᓂᑎᐦ ᐲᐦᒡ ᐧᐃᔮᐦᒡ ᐊᐧᐋᓐ ᒑ ᒌ ᒫᓯᐦᒑᐱᔨᐦᒡ ᐊᓂᔮ ᐋ ᐃᐦᑎᑯᐦᒡ ᒑᐧᑳᓐ ᐋᑳ ᒥᐧᔮᔑᒡ, ᐋᐅᒄ ᐊᓐ ᐧᒫᐦᒡ ᐋ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᔨᒡ ᐊᐧᐋᓐ ᐅᒥᐦᒄ, ᐋᐅᒄ ᐊᓐ “ᐋᓐᑏ-ᐅᒃᓯᑎᓐᑦᔅ” ᐋ ᐃᔑᓂᐦᑳᑖᐤᐦ᙮ ᒥᒄ ᒫᒃ ᐊᓂᔮ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ ᐊᐧᐋᓐ, ᓂᒧᐃ ᐃᔥᐱᔑ ᒌᐦᒋᒌᒥᑭᓂᔨᐤ ᒑ ᒌ ᒫᓯᐦᒑᐱᔨᔨᒡ ᐊᓂᔮ ᐋ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᔨᒡ ᐊᓂᑎᐦ ᐅᒥᐦᒄ, ᑭᔮᐦ ᐋᔮᐧᐃᒄ ᒑ ᓂᑐᐧᐋᔨᐦᑎᐦᒃ ᐊᑎᑑ ᐋ ᒥᐧᔮᔑᔨᒡ ᒦᒋᒥᔨᐤ ᒑ ᒌ ᒦᒋᑦ, ᐋᒄ ᒫᒃ ᒑ ᒌ ᒫᓯᐦᒑᐱᔨᔨᒡ ᐊᓂᔮ ᐋᑳ ᒥᐧᔮᔑᔨᒡ ᒑᐧᑳᔮᐤ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ᙮

ᒥᐦᒑᑐ ᒫᒃ ᐊᓂᔮ ᒪᔥᑯᔑᐤᐦ ᐋ ᒦᒋᓈᓂᐧᐃᒡᐦ, ᑮᐧᐸ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᔮ ᐋᓐᑏ-ᐅᒃᓯᑎᓐᑦᔅ ᑳ ᐃᔑᓂᐦᑳᑖᐤᐦ ᐊᓐ ᐋ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᒡ (ᐋᐅᒄ ᒫᒃ ᐊᓐ ᐧᐋᐦᒋ ᒥᐧᔮᔑᒡ ᒑ ᒌ ᒦᒋᓈᓂᐧᐃᒡ ᐊᓂᐦᐄ ᒪᔥᑯᔑᐤᐦ ᐋ ᒦᒋᓈᓂᐧᐃᒡᐦ)᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑎᒡ ᒑᐧᑳᔮᐤ, ᒌ ᐧᐄᐦ ᐧᐋᐱᐦᑎᒧᒡ ᐊᓂᔮ ᓂᔮᓈᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔮ ᒥᔥᑏᐦ ᐋ ᐃᐦᑎᑯᓂᔨᐧᑳ ᐊᓂᔮ ᐋᓐᑏ-ᐅᒃᓯᑎᓐᑦᔅ ᑳ ᐃᔑᓂᐦᑳᑖᔨᒡ᙮ ᐋᑯᑎᐦ ᑳ ᐱᒋᔅᓂᑭᓂᐧᐃᒡ ᒥᓂᐦᐧᑳᑭᓂᔑᐦᒡ, ᐋᒄ ᑳ ᐱᒋᔅᓂᑭᓂᐧᐃᒡᐦ ᑭᔮᐦ ᐊᓂᔮ “ᕙᕇ ᕌᑎᑭᓪᔅ” ᐋᒄ ᒫᒃ ᑳ ᐧᐄᐦ ᐧᐋᐱᐦᑎᐦᒡ ᑖᓐ ᐋ ᐄᔑ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᒡ᙮ ᓂᔥᑐ ᒫᒃ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒥᔥᑏᐦ ᐃᐦᑎᑯᓐ ᐊᓐ ᐋᓐᑏ-ᐅᒃᓯᑎᓐᑦᔅ ᐊᓐ ᐋ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᒡ᙮ ᐋᐅᒄ ᑖᐧᐸᐦ ᒑᑳᑦ ᑖᑭᔥ ᑳ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᒡ ᐧᒫᐦᒡ ᐊᓐ ᕚᐃᑎᒥᓐ C ᐋ ᐄᔑ ᐋᐱᑎᓰᒥᑭᐦᒡ, ᐧᐋᔥ ᐋᐅᒄ ᐊᓐ ᒫᐅᒡ ᐋ ᓰᐦᒋᐱᔨᒡ ᐋ ᐋᐱᑎᓰᒥᑭᐦᒡ ᐋᓐᑏ-ᐅᒃᓯᑎᓐᑦ ᑳ ᐃᔑᓂᐦᑳᑖᒡ ᐊᓐ ᐋ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᒡ᙮

contributes to heart disease are tiny particles called “free radicals” that can damage the cells. We all have these particles, but our bodies continually mop them up using other particles called “anti-oxidants.” However, when a person has diabetes, their defences are not as strong, and they may need to get extra anti-oxidants from their food.

Most plants contain some anti-oxidants (this is one of the reasons vegetables are good for you). The scientists wanted to see if the eight plants in this study were especially high in anti-oxidants. They put them in a test tube with some “free radicals” to see how many they would mop up. Three of the plants turned out to be very high in anti-oxidants. They mopped up almost as many free radicals as Vitamin C, which is one of the strongest known anti-oxidants.

Our bodies can store sugar in fat cells, in muscle cells, or in the liver. Some types of anti-diabetic drugs (like Avandia) seem to work by helping people to store sugar mainly in their fat cells rather than elsewhere. When this happens, we notice that the fat cells grow quickly. So the scientists checked to see if any of the eight plants made fat cells grow faster than usual. Four of the plants did this. The scientists think this may mean that these four plants work in the same way as drugs like Avandia.

ᐊᓂᑦ ᒫᒃ ᐧᐃᔫᐦᒡ ᐊᐧᐁᓐ, ᐁᑯᑦ ᒉ ᒌ ᑲᓄᐧᐁᔨᐦᑕᐦᒃ ᔖᑳᔫ ᐊᓂᑦ ᐁ ᐅᐱᒦᒥᐦᒡ ᐊᐧᐁᓐ ᓀᔅᑦ ᒫᒃ ᐊᓂᑦ ᐧᐃᔮᓐᐦ, ᓀᔅᑦ ᒫᒃ ᐊᓂᑦ ᐅᔅᑯᓂᐦᒡ᙮ ᐸᔅᒡ ᒫᒃ ᐊᓂᔫ ᓂᑐᐦᑯᔨᓐᐦ ᐁ ᐋᐸᒋᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ (ᐧᒣᐦᒡ ᐊᓂᔫ ᐋᐸᓐᑎᔮ ᑳ ᐃᔑᓂᐦᑳᑌᒡ) ᐁᐅᒄ ᐁ ᐄᔑ ᐋᐸᑎᔩᒥᑲᐦᒡ ᒉ ᒌ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐊᓂᔫ ᐁ ᑲᓄᐧᐁᔨᐦᑕᐦᒃ ᔖᑳᔫ ᐧᐃᔫᐦᒡ ᐊᓂᑦ ᐅᐱᒦᒥᐦᒡ᙮ ᐆ ᒫᒃ ᐁ ᐃᔅᐸᔨᐦᒡ, ᐁᑯᑦ ᒌᔥᑕᑉ ᐁ ᓂᐦᑖᐅᒌᒥᑲᐦᒡ ᐊᓐ ᐅᐱᒦᒻ ᐊᐧᐁᓐ ᐁ ᐊᑕ ᑖᐦᒋᐳᑦ᙮ ᐁᒄ ᒫᒃ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑎᐦᐧᑳᐤ ᑫᐧᑳᔫ, ᐁᔫᒄ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᐅᔫ ᓂᔮᓈᓄᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᐃᔅᐸᔨᐦᐧᑳᐤᐦ ᐁᑎᑑ ᒌᔥᑕᑉ ᒉ ᒌ ᓂᐦᑖᐅᒌᒥᑲᓂᔨᐦᒡ ᐊᐧᐁᓐ ᐅᐱᒦᒻ᙮ ᓀᐤ ᒫᒃ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐅᐦᐁ ᒌ ᐃᔅᐸᔫ᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᑫᐧᑳᔫ, ᐁᔫᒄ ᐁ ᐃᑌᔨᐦᑎᐦᐧᑳᐤ ᐅᔫ ᓀᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐧᒣᐦᒡ ᐁᔫᒄ ᐁ ᐄᔑ ᐋᐸᑎᔩᒥᑲᐦᒡ ᐊᓐ ᓂᑐᐦᑯᔨᓐ ᐋᐸᓐᑎᔮ ᑳ ᐃᔑᓂᐦᑳᑌᒡ᙮

ᒫᐦᒋᔥᑕᐃ ᐁ ᒪᔨᓈᑌᒡ

ᐊᓂᔫ ᒫᒃ ᑳ ᐄᔑ ᒪᔅᑲᐧᐋᐦᑖᐧᑖᐤ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ ᑫᐧᑳᔫ, ᐁᔫᒄ ᐊᓂᔫ ᒫᔥᑯᒡ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᐊᓂᔫ ᓂᔮᓈᓄᐤ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ ᐊᐧᐁᓂᒌ ᑲᔦ ᐁᑎᑑ ᐃᔑᓈᑯᓐ ᒉ ᒌ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ᙮ ᐊᓂᔫ ᒫᒃ ᑳ ᐧᐄᐦ ᐅᔑᐦᑖᐧᑖᐤ ᐁ ᐊᐱᔖᔑᔨᐦᒡ ᒪᔨᓇᐦᐄᑲᓂᔫ ᒥᒄ ᐸᔅᒡ ᐁ ᒪᔨᓈᑌᔨᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᓅᑲᓂᐦᒡ ᐁ ᐃᑌᔨᐦᑎᐦᐧᑳᐤ ᒉ ᒌ ᐧᐄᒋᐦᐄᐸᔨᓃᐦᐧᑳᐤᐦ, ᓇᒧᐃ ᐅᐦᒋ ᒥᔫᐸᔨᓂᔫ, ᐧᐁᔨᓐ ᒥᔨᐧᐁ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐃᔑᓈᑯᓐᐦ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ᙮ ᐊᓂᔫ ᒫᒃ ᑳ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑕᐦᐧᑳᐤ, ᐊᓂᔫ ᓇᓈᐦᑰ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᓇᓈᐦᑰ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔫᐦ᙮ ᒥᐦᑫᑐ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᐧᒣᐦᒡ ᐊᓂᔫ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᑳ ᒦᓄᐧᐋᑲᒥᐦᐄᑫᐸᔨᐦᒡ ᐁᐅᒄ ᑲᔦ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᐧᑳᐤᐦ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᐁᒄ ᒫᒃ ᐁᐅᒄ ᐁ ᐃᔑᓇᑯᐦᐧᑳᐤᐦ ᒉ ᒌ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐅᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ᙮ (ᒉᒃ ᒫᒃ ᐊᐧᐁᔩᔨᒡ ᒋᑳ ᐋᐸᒋᐦᐋᑲᓅᐧᐃᒡ ᐅᔫ ᐁ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᐧᑳᐤᐦ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ)᙮ ᐸᔅᒡ ᒫᒃ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ, ᐧᐄᒋᐦᐄᐧᐁᐸᔫᐦ ᐁᑳ ᒉ ᒌ ᓂᐲᒥᑲᐦᒡ ᐊᓂᔫ ᐁ ᐅᐦᒋ ᓂᔨᑐᔨᓈᓄᐧᐃᐦᒡ ᐊᓂᔫ ᒥᔥᑕᐦᐄ ᐁ ᐃᐦᑕᑯᐦᒡ ᔖᑳᐤ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐁᓐ, ᐁᐅᒄ ᐊᓐ ᓃᔥᑕᒻ ᐧᐃᔮᑲᓂᔑᐦᒡ ᑳ ᐄᔑ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓄᐧᐃᐦᒡ᙮ ᐸᔅᒡ ᒫᒃ ᐊᓂᔫ ᑳ ᐋᐸᑎᔨᒥᑲᐦᒡ ᑫᐧᑳᔫᐦ, ᐋᓐᑏ-ᐅᒃᓯᑕᓐᑦᔅ ᑳ ᐃᔑᓂᐦᑳᑌᒡᐦ ᐁ ᐱᔦᐦᒋᐦᐄᐧᐁᑲᒥᐦᐧᑫᐸᔨᐦᒡ, ᐁᐅᒄ ᐊᓂᔫ ᐁ ᒫᔨᐦᑫᐸᔨᓂᐦᐧᑳᐤᐦ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐁᓐ ᐁᒄ ᐁ ᐅᐦᒋ ᑲᓄᐧᐁᔨᐦᑖᑯᐦᒡ ᐁᑳ

ᐊᓂᑎᐦ ᒫᒃ ᐧᐃᔮᐦᒡ ᐊᐧᐋᓐ, ᐋᑯᑎᐦ ᒐ ᒌ ᑭᓂᐧᐋᔨᐦᑎᐦᒃ ᔖᑳᔨᐤ ᐊᓂᑎᐦ ᐋ ᐅᐱᒦᒥᐦᒡ ᐊᐧᐋᓐ ᑭᔮᐦ ᒫᒃ ᐊᓂᑎᐦ ᐅᒫᔅᐲᐅᑖᓐᐦ ᑭᔮᐦ ᒫᒃ ᐊᓂᑎᐦ ᐅᔅᑯᓂᐦᒡ᙮ ᐱᔥᒡ ᒫᒃ ᐊᓂᐦᐄ ᓂᑐᐦᑯᔨᓐᐦ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ (ᐧᒫᐦᒡ ᐊᓂᔮ ᐋᐸᓐᑎᔮ ᑳ ᐃᔑᓂᐦᑳᑖᒡ) ᐋᐅᒄ ᐋ ᐄᔑ ᐋᐱᑎᔩᒥᑭᐦᒡ ᒐ ᒌ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐊᓂᔮ ᐋ ᑭᓂᐧᐋᔨᐦᑎᐦᒃ ᔖᑳᔨᐤ ᐧᐃᔮᐦᒡ ᐊᓂᑎᐦ ᐅᐱᒦᒥᐦᒡ᙮ ᐆ ᒫᒃ ᐋ ᐃᔅᐱᔨᐦᒡ, ᐋᑯᑎᐦ ᒌᔥᑎᑉ ᐋ ᓂᐦᑖᐅᒌᒥᑭᐦᒡ ᐊᓂᔮ ᐅᐱᒦᒻ ᐊᐧᐋᓐ ᐋ ᐊᑎ ᑖᐦᒋᐳᑦ᙮ ᐋᒄ ᒫᒃ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒐᐧᑳᔨᐤ, ᐋᔦᐧᐃᒄ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᐅᔮ ᓂᔮᓈᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᐃᔅᐱᔨᔨᒡᐦ ᐊᑎᑑ ᒌᔥᑎᑉ ᒐ ᒌ ᓂᐦᑖᐅᒌᒥᑭᓂᔨᒡ ᐊᐧᐋᓐ ᐅᐱᒦᒻ᙮ ᓈᐤ ᒫᒃ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐅ ᒌ ᐃᔅᐱᔨᐤ᙮ ᐊᓂᒌ ᒫᒃ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒐᐧᑳᔨᐤ, ᐋᔦᐧᐃᒄ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᐅᔮᐦ ᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐧᒫᐦᒡ ᐋᔦᐧᐃᒄ ᐋ ᐄᔑ ᐋᐱᑎᔩᒥᑭᐦᒡ ᐊᓐ ᓂᑐᐦᑯᔨᓐ ᐋᐸᓐᑎᔮ ᑳ ᐃᔑᓂᐦᑳᑖᒡ᙮

ᒫᐦᒋᒡ ᐋ ᒥᔨᓈᑖᒡ

ᐊᓂᔮ ᒫᒃ ᑳ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᒡ ᐊᓂᒌ ᑳ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ ᒐᐧᑳᔨᐤ, ᐋᔦᐧᐃᒄ ᐊᓂᔮ ᐧᑳᐧᔖᓐ ᒐ ᒌ ᐧᐄᒋᐦᐄᐧᐊᐱᔨᒡᐦ ᐊᓂᐦᐄ ᓂᔮᓈᓈᐤ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᒡ ᐊᐧᐋᓂᒌ ᑭᔮᐦ ᐊᑎᑑ ᐃᔑᓈᑯᓐ ᒐ ᒌ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐧᐃᒡᐦ᙮ ᐊᓂᔮ ᒫᒃ ᑳ ᐧᐄᐦ ᐅᔑᐦᑖᒡ ᐋ ᐊᐱᔖᔑᔨᒡ ᒥᔨᓂᐦᐄᑭᓂᔨᐤ ᒥᒄ ᐱᔥᒡ ᐋ ᒥᔨᓈᑖᔨᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᓅᑲᓂᐦᒡ ᐋ ᐃᑖᔨᐦᑎᐦᒡ ᒐ ᒌ ᐧᐄᒋᐦᐄᐱᔨᔨᒡᐦ, ᓂᒧᐃ ᐅᐦᒋ ᒥᔦᐱᔨᔨᐤ, ᐧᐋᔥ ᒥᔨᐧᐊ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐃᔑᓈᑯᓐᐦ ᒐ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᔨᒡᐦ᙮ ᐊᓂᔮ ᒫᒃ ᑳ ᐄᔑ ᓂᑑᒋᔅᒐᔨᐦᑎᐦᒡ, ᐊᓂᐦᐄ ᓂᓈᐦᑰ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᓂᓈᐦᑰ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐊᐱᔫᐦ᙮ ᒥᐦᒐᑐ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᐧᒫᐦᒡ ᐊᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᑳ ᒦᓄᐧᐋᑭᒥᐦᐄᒐᐱᔨᒡ ᐋᐅᒄ ᑭᔮᐦ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡᐦ ᐊᓂᐦᐄ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᐋᒄ ᒫᒃ ᐋᐅᒄ ᐋ ᐃᔑᓂᑯᐦᒡ ᒐ ᒌ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐅᔮᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ᙮ (ᒑᒃ ᒫᒃ ᐊᐅᑳᓂᒡ ᒋᑭ ᐋᐱᒋᐦᐋᑭᓂᐧᐃᐧᐃᒡ ᐅᔮ ᐋ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ)᙮ ᐱᔥᒡ ᒫᒃ ᐊᓂᔮ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ, ᐧᐄᒋᐦᐄᐧᐋᐱᔨᐤᐦ ᐋᑳ ᒐ ᒌ ᓂᐲᒥᑭᐦᒡ ᐊᓂᔮ ᐋ ᐅᐦᒋ ᓂᔅᑐᔨᓈᓂᐧᐃᒡ ᐊᓂᔮ ᒥᔥᑏᐦ ᐋ ᐃᐦᑎᑯᐦᒡ ᔖᑳᐤ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐋᓐ, ᐋᐅᒄ ᐊᓐ ᓃᔥᑎᒻ ᐧᐃᔮᑭᓂᔑᐦᒡ ᑳ ᐄᔑ ᓂᑑᒋᔅᒐᔨᐦᑖᑭᓂᐧᐃᒡ᙮ ᐱᔥᒡ ᒫᒃ ᐊᓂᐦᐄ ᑳ ᐋᐱᑎᔨᒥᑭᐦᒡ ᒐᐧᑳᓂᐦᐄ, ᐋᓐᑏ-ᐅᒃᓯᑎᓐᑦᔅ ᑳ ᐃᔑᓂᐦᑳᑖᒡᐦ ᐋ ᐱᔮᐦᒋᐦᐄᐧᐋᑭᒥᐦᐧᑳᐱᔨᒡ, ᐋᐅᒄ ᐊᓐ

Summary

In sum, the plant scientists found that all eight plants had the potential to help with diabetes and are worth further study. Their attempts to come up with a "short list" of particularly promising plants failed, because all the plants had promise. The study showed that the different plants help in different ways. Many of them act the same way as insulin in lab tests, which may mean they can help with diabetes. (These plants will be tested on live animals next). Some of the plants help keep nerve cells in a test tube from being killed by too much sugar. Some are anti-oxidants, meaning that they help destroy particles that could damage the heart and veins. And some seem to encourage the body to store sugar in certain places rather than others, in the same way that some anti-diabetes drugs do.

* This is a plain-language summary of a report by D. Spoor, L. Martineau, C. Leduc and other members of the Anti-diabetic Plant Team that was published in the Journal of Physiological Pharmacology in 2006. The article was called "Selected plant species from the Cree pharmacopoeia of northern Quebec possess anti-diabetic potential." .

ᒉ ᒋ ᒪᒋᐸᔨᐦᐧᑳᐤᐦ ᐊᓂᑦ ᐊᓂᔫ ᐊᐧᐁᓐ ᐅᑌᐦᐄᐦᒡ ᑲᔦ ᐅᒥᐦᐧᑳᔮᐲᐦᒡ᙮ ᑲᔦ ᒫᒃ ᐸᔅᒡ ᐊᓂᔫᐦ ᑳ ᐋᐸᑎᓰᒥᐦᐧᑳᐤᐦ ᒉᐧᑳᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ ᒉ ᒋ ᑲᓇᐧᐁᔨᐦᑖᑯᐦᒡ ᔖᑳᐤ ᐊᓂᑦ ᐧᐃᔫᐦᒡ ᐊᐧᐁᓐ, ᑲᔦ ᒥᒄ ᐊᓂᑦ ᐸᔅᒡ ᐁ ᐅᐦᒋ ᑲᓇᐧᐁᔨᐦᑖᑯᐦᒡ ᐊᓐ ᔖᑳᐤ, ᐧᒣᐦᒡ ᐊᓂᔫ ᐁ ᐄᔑ ᐋᐸᑎᓯᒥᑲᐦᒡ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ᙮

* ᐁᐅᒄ ᐆ ᐁ ᓂᓯᑐᐦᑖᑯᐦᒡ ᐊᐱᔒᔥ ᐁ ᑕᐹᑐᑖᒡ ᐊᓂᒌ ᑳ ᒪᓯᓇᐦᐊᐦᐧᑳᐤ ᑖᓂᔦᓪ ᔅᐴᕐ, ᒍᐧᐄ ᒫᕐᑏᓈ, ᔖᕐᓪ ᒉᒃ ᑲᔦ ᑯᑕᑲᒡ ᐊᐧᐁᓂᒌ ᐁ ᐋᐸᑎᓰᐦᑲᐦᑎᐦᐧᑳᐤ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓇᐧᐃᔨᐦᐧᑳᐤᐦ ᐁ ᐅᐦᒋ ᒫᓯᐦᑫᐸᔨᐦᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓇᐧᐃᐦᒡ, ᐁᑯᑦ ᑳ ᒪᓯᓈᑌᔨᐦᒡ ᐊᓂᑦ ᐊᓂᔫ ᑎᐹᒋᒨᓯᓇᐦᐄᑲᓂᐦᒡ ᑳᓈᑖ ᑎᐹᒋᒨᓯᓇᐦᐄᑲᓐ ᐁ ᐅᐦᒋ ᓂᑑᒋᔅᑫᔨᐦᑖᑲᓇᐧᐃᐦᐧᑳᐤᐦ ᑖᓐ ᐁ ᐄᔑ ᐋᐸᑎᓰᒥᑲᐦᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐁ ᓂᑐᐦᑯᔨᓇᐧᐃᐧᑳᐤᐦ ᐊᓂᔫ 2006 ᑳ ᐃᔅᐸᔨᓃᒡ᙮ ᐊᓐ ᒫᒃ ᑎᐹᒋᒧᐧᐃᓐ, “ᐸᔅᒡ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᐊᓂᔫ ᐄᓅᐦᒡ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐁ ᓂᑐᐦᑯᐦᐄᔨᐧᑖᐤ ᐊᓂᑌ ᒌᐧᐁᑎᓂᐦᒡ ᑯᐯᒃ ᐁ ᐃᑌᔨᐦᑖᑲᓇᐧᐃᐦᐧᑳᐤᐦ ᒫᔥᑯᒡ ᒉ ᒋ ᒫᓯᐦᑫᐸᔨᐦᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓇᐧᐃᐦᒡ᙮”

ᐋ ᒫᓯᐦᒑᐱᔨᒡ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ ᐊᐧᐋᓐ ᐋᒄ ᐋ ᐅᐦᒋ ᑭᓂᐧᐋᔨᐦᑖᑯᐦᒡ ᐋᑳ ᒑ ᒋ ᒥᒋᐱᔨᑦ ᐊᓂᑦ ᐊᐧᐋᓐ ᐅᑖᐦᐄᐦᒡ ᑭᔮᐦ ᐅᒥᐦᐧᑳᔮᐲᐦᒡ᙮ ᑭᔮᐦ ᒫᒃ ᐱᔥᒡ ᐊᓂᐦᐄ ᑲ ᐋᐱᑎᓰᒥᐦᒡ ᒑᐧᑳᓂᐦᐄ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ ᒑ ᒋ ᑭᓂᐧᐋᔨᐦᑖᑯᐦᒡ ᔖᑳᐤ ᐊᓂᑎᐦ ᐧᐃᔫᐦᒡ ᐊᐧᐋᓐ, ᑭᔮᐦ ᒥᒄ ᐊᓂᑎᐦ ᐱᔥᒡ ᐋ ᐅᐦᒋ ᑭᓂᐧᐋᔨᐦᑖᑯᐦᒡ ᐊᓐ ᔖᑳᐤ, ᐧᒫᐦᒡ ᐊᓂᔫ ᐋ ᐄᔑ ᐋᐱᑎᓯᒥᑭᐦᒡᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐋ ᐋᐱᒋᐦᑖᒡ ᐊᐧᐋᓂᒌ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᐧᑖᐤ᙮

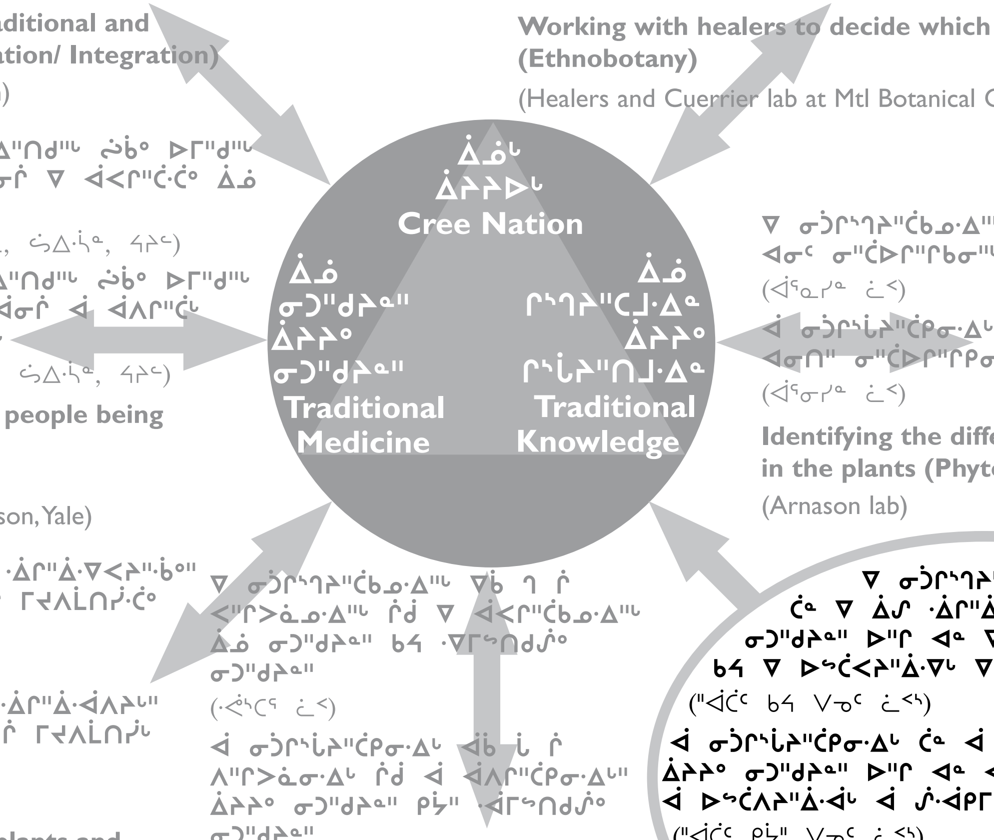
* ᐋᐅᒄ ᐆ ᐋ ᓂᔥᑐᐦᑖᑯᐦᒡ ᐊᐱᔒᔥ ᐋ ᑎᐹᑎᑖᒡ ᐊᓂᒌ ᑳ ᒥᓯᓂᐦᐊᐦᒡ ᑖᓂᔦᓪ ᔅᐴᕐ, ᒍᐧᐄ ᒫᕐᑏᓈ, ᔖᕐᓪ ᒉᒃ ᑭᔮᐦ ᑯᑎᑭᒡ ᐊᐧᐋᓂᒌ ᐋ ᐋᐱᑎᔒᔥᑎᐦᒡ ᐊᓂᔫ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᔨᐦ ᐋ ᐅᐦᒋ ᒫᓯᐦᒑᐱᔨᒡ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ, ᐋᑯᑎᐦ ᑳ ᒥᓯᓈᑖᔨᒡ ᐊᓂᑎᐦ ᐊᓂᔫ ᑎᐹᒋᒨᓯᓂᐦᐄᑭᓂᐦᒡ ᑳᓈᑖ ᑎᐹᒋᒨᓯᓂᐦᐄᑭᓐ ᐋ ᐅᐦᒋ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᔨᐦ ᑖᓐ ᐋ ᐄᔑ ᐋᐱᑎᓰᒥᑭᔨᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐋ ᓂᑐᐦᑯᔨᓂᐧᐃᔨᐦ ᐊᓂᔫ 2006 ᑳ ᐃᔅᐱᔨᔨᒡ᙮ ᐊᓐ ᒫᒃ ᑎᐹᒋᒧᐧᐃᓐ, “ᐱᔥᒡ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᐊᓂᔫ ᐄᔨᔨᐅᒡ ᐋ ᐋᐱᒋᐦᑖᒡ ᐋ ᓂᑐᐦᑯᐦᐄᔨᒡ ᐊᓂᑖᐦ ᒌᐧᐊᑎᓂᐦᒡ ᑯᐯᒃ ᐋ ᐃᑖᔨᐦᑖᑭᓂᐧᐃᔨᐦ ᐧᑳᐧᔖᓐ ᒑ ᒋ ᒫᓯᐦᒑᐱᔨᒡ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ᙮”

·ᐋᐸᐦᑏ·ᐁ·ᐃᓐ 3: ᐁ ᓂᑑᒋᐢᒉᔨᒫᑲᓅᑦ ᒥᓇᐦᐄᒄ ᒉ ᒌ ·ᐄᒋᐦᐄ·ᐁᐸᔨᑦ ᐁᑳ ᒉ ᒌ ᐅᐢᑖᐸᔨᑦ ᐊ·ᐁᓐ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᔨᑐᔨᑦ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔒ·ᐋᑲᒥᐦ·ᑫᑦ

·ᐋᐱᐦᑏ·ᐋ·ᐃᓐ 3: ᐋ ᓂᑑᒋᐢᒑᔨᒫᑭᓂ·ᐃᑦ ᒥᓂᐦᐄᒄ ᒫ ᒌ ·ᐄᒋᐦᐄᐱᔨᑦ ᐋᑳ ᒫ ᒌ ᐅᐢᑖᐱᔨᑦ ᐊ·ᐋᓐ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔅᑐᔨᑦ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᔒ·ᐋᑭᒥᐦ·ᑳᑦ

EXAMPLE 3: LOOKING AT HOW WHITE SPRUCE MIGHT PROTECT AGAINST THE NERVE DAMAGE THAT DIABETES CAUSES (DIABETIC NEUROPATHY)

ᓂᓈᐦᑯ ᐁ ᐃᔑᓈᑯᐦᒡ ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓅᐦ·ᑳᐤᐦ ᓂᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ·ᐄᒋᐦᐄ·ᐁᐸᔨᐦ·ᑳᐤᐦ ᐁ ᔒ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ
ᓂᓈᐦᑯ ᐋ ᐃᔑᓈᑯᐦᒡ ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫ ᒌ ·ᐄᒋᐦᐄ·ᐋᐱᔨᐤᐦ ᐋ ᔒ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ
Parts of the Anti-diabetic Plant Project



ᐄᓅᒡ
ᐄᔨᔨᐅᒡ
Cree Nation

ᐄᓅ
ᓂᑐᐦᑯᔨᓐᐦ
ᐄᔨᔨᐤ
ᓂᑐᐦᑯᔨᓐᐦ
Traditional Medicine

ᐄᓅ
ᒋᐢᒉᔨᐦᑕᒧ·ᐃᓐ
ᐄᔨᔨᐤ
ᒋᐢᒑᔨᐦᑎᒧ·ᐃᓐ
Traditional Knowledge

ᐁ ·ᐋ·ᐋᐸᐦᑖᑲᓄ·ᐃᐦᒡ ᒉ ᒌ ᒌᑯᐸᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᐄᓅ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᑲᔦ ·ᐁᒥᐢᑎᑯᔒᐤ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᐁ ᔒ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ

(ᓂᑐᐦᑯᔨᓐ ᐋᐸᑎᓰ·ᐃᓐ, ᑰᓂᔑᔥ, ·ᑖᓅ, ᓚᓐᑕᓐ)

ᐋ ·ᐋ·ᐋᐱᐦᑖᑭᓂ·ᐃᒡ ᒫ ᒌ ᒌᑯᐱᔨᐦᑖᑭᓂ·ᐃᒡ ᐄᔨᔨᐤ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᑭᔮᐦ ·ᐋᒥᐢᑎᑯᔒᐤ ·ᐄᒋᐦᐄᓱ·ᐃᓐ ᐋ ᔒ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ

(ᓂᑐᐦᑯᔨᓐ ᐋᐱᑎᓰ·ᐃᓐ, ᑰᓂᔑᔥ, ·ᑖᓅ, ᓚᓐᑎᓐ)

Looking at ways to combine traditional and "western" diabetes care (Education/ Integration)

(CBHSSJB, Coonishish, Torrie, Linton)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᐁ ᐃᐢᐱᐢ ᐃᐦᑎᑯᐦᒡ ᔔᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊ·ᐁᓐ ᑲᔦ ᐁ ᐊᔨᒥᐦᐋᑲᓅ·ᑖᐤ ᐊ·ᐁᓂᒌ ᐁ ᐋᐸᒋᐦᑖ·ᑖᐤ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑌ ᒥᐢᑎᓯᓅᐦᒡ

(ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔫᐦ, ᑖᓅᓐ·ᐹᒻ, ·ᑖᓅ, ᔕᐃ·ᓵᓐ, ᔦᔨᓪ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᐋ ᐃᐢᐱᔑ ᐃᐦᑎᑯᐦᒡ ᔔᑳᐤ ᐅᒥᐦᑯᐦᒡ ᐊ·ᐋᓐ ᑭᔮᐦ ᐋ ᐊᔨᒥᐦᐋᑭᓂ·ᐃᒡ ᐊ·ᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᑖᐦ ᒥᐢᑎᓯᓅᐦᒡ

(ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ, ᑖᓅᓐ·ᐹᒻ, ·ᑖᓅ, ᔕᐃ·ᓵᓐ, ᔦᔨᓪ)

Sugar tests and interviews with people being treated by healers in Mistissini (Observational study)

(Healers, Dannenbaum, Torrie, Chiasson, Yale)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᑖᓂᑌ ᒉ ᒌ ·ᐄᒋᐦᐄ·ᐁᐸᔨᐦ·ᑳᐤᐦ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ᐄᓅ ᒦᒋᒻ ᒉ ᒌ ᒥᔪᐱᒫᑎᓰ·ᑖᐤ ᐊ·ᐁᓂᒌ ᐁ ᔒ·ᐋᑲᒥᐦ·ᑫ·ᑖᐤ

(·ᒎᓐᐢ ᓛᑊ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᑖᓂᑖᐦ ᒫ ᒌ ·ᐄᒋᐦᐄ·ᐋᐱᔨᐤᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ᐄᔨᒦᒋᒻ ᒫ ᒌ ᒥᔪᐱᒫᑎᓯᒡ ᐊ·ᐋᓂᒌ ᐋ ᔒ·ᐋᑭᒥᐦ·ᑳᒡ

(·ᒎᓐᐢ ᓛᑊ)

Looking at how the traditional plants and foods could help people with diabetes to stay healthy (Nutrition)

(Johns lab)

ᐁ ·ᐄᒑᐸᑎᓰᒪᑲᓅ·ᑖᐤ ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔫᐦ ᒉ ᒌ ᐅᔦᔨᐦᑖᑲᓅᐦ·ᑳᐤᐦ ᒉᒄ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓅᐦ·ᑳᐤᐦ

(ᑳ ·ᐄᒋᐦᐋ·ᑖᐤ ᐊ·ᐁᔫᐦ ᑲᔦ ᑰᓇᔦᐠ ᓛᑊ ᐊᓂᑌ ᒨᓚᔫᐤ ᐹᑖᓂᑲᓪ ᑳᐠᑎᓐᐢ)

ᐋ ·ᐄᒑᐱᑎᓰᒪᑭᓂ·ᐃᒡ ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ ᒫ ᒌ ᐅᔮᔨᐦᑖᑭᓂ·ᐃᒡ ᒫᑯ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡᐦ

(ᑳ ·ᐄᒋᐦᐋᒡ ᐊ·ᐋᔨᐤᐦ ᑭᔮᐦ ᑰᓇᔦᐠ ᓛᑊ ᐊᓂᑖᐦ ·ᒫᓚᔫᐤ ᐹᑖᓂᑭᓪ ᑳᐠᑎᓐᐢ)

Working with healers to decide which plants to look at (Ethnobotany)

(Healers and Cuerrier lab at Mtl Botanical Gardens)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᒉ·ᑳᓐ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ

(ᐋᐠᓇᓯᓐ ᓛᑊ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᒫ·ᑳᓐ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ

(ᐋᐠᓂᓯᓐ ᓛᑊ)

Identifying the different ingredients in the plants (Phytochemistry)

(Arnason lab)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᐁᑳ ᒉ ᒌ ᐸᐦᒋᐳᓅᓄ·ᐃᐦᒡ ᒌᑰ ᐁ ᐋᐸᒋᐦᑖᑲᓄ·ᐃᐦᒡ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᑲᔦ ·ᐁᒥᐢᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ

(·ᐹᐢᑕᐠ ᓛᑊ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᐋᑳ ᒫ ᒌ ᐱᐦᒋᐳᓅᓂ·ᐃᒡ ᒌᑰ ᐋ ᐋᐱᒋᐦᑖᑭᓂ·ᐃᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᑭᔮᐦ ·ᐋᒥᐢᑎᑯᔒᐤ ᓂᑐᐦᑯᔨᓐᐦ

(·ᐹᐢᑎᐠ ᓛᑊ)

Making sure the healing plants are safe to take along with other medicines (Toxicology)

(Foster lab)

ᐁ ᓂᑑᒋᐢᒉᔨᐦᑖᑲᓄ·ᐃᐦᒡ ᑖᓐ ᐁ ᐄᔑ ·ᐄᒋᐦᐄ·ᐁᐸᔨᐦ·ᑳᐤᐦ ᐄᓅ ᓂᑐᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔒ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ ᑲᔦ ᐁ ᐅᐢᑖᐸᔨᐦᐄ·ᐁᒡ ᐁ ᔒ·ᐋᑲᒥᐦ·ᑫᓄ·ᐃᐦᒡ

(ᐦᐋᑖᑦ ᑲᔦ ᐯᓀᑦ ᓛᑊᐢ)

ᐋ ᓂᑑᒋᐢᒑᔨᐦᑖᑭᓂ·ᐃᒡ ᑖᓐ ᐋ ᐄᔑ ·ᐄᒋᐦᐄ·ᐋᐱᔨᐤᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔒ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ ᑭᔮᐦ ᐋ ᐅᐢᑖᐱᔨᐦᐄ·ᐋᒡ ᐋ ᔒ·ᐋᑭᒥᐦ·ᑳᓂ·ᐃᒡ

(ᐦᐋᑖᑦ ᑭᔮᐦ ᐯᓀᑦ ᓛᑊᐢ)

Looking at how the plants act on diabetes and the health problems that go with it (Pharmacology)

(Haddad and Bennett labs)

ᐁ ᒫᔪᐦᒉᐸᔨᐦᒡ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓂᔮ ᐁ ᓰᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᐅᓯᐦᑖᑲᓄᐧᐃᐦᒡ ᐊᔅᑖᐦᑯᓈᐹᐦᑎᑯᒡ, ᐧᐃᔨᒉᔥᒄ ᑲᔦ ᐅᔅᐧᑳᒍᓯᒡ ᐊᓂᑦ ᒥᓇᐦᐄᒄ ᐁ ᐅᐦᒋᐸᔨᐦᒡ: ᑖᓐᑌ ᐁ ᐄᓯ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᑦ ᐆ ᒥᔅᑎᒄ ᐊᓂᔮ ᐧᐁᔖ ᐄᔅᐸᒥᐦᒡ ᐁ ᐃᐦᑕᑯᐦᒡ ᓵᑳᐤ ᓀᔅᑦ ᒫᒃ ᐧᐁᔖ ᓃᐦᑖᐦᒡ ᐁ ᐃᐦᑕᑯᐦᒡ ᓵᑳᐤ

ᐆ ᑳ ᐄᓯ ᓂᑑᒋᔥᒉᔨᐦᑖᑲᓅᐦᒡ, ᐁᐅᒄ ᐊᓐ ᑳ ᐧᐋᐧᐋᐸᐦᑖᑲᓅᐦᒡ ᐁ ᐄᓯ ᓂᑐᐦᑯᔫᑦ ᒥᓇᐦᐄᒄ ᐅᐦᒋ ᐊᓐ ᐁ ᓰᐧᐋᑲᒥᐦᐧᑫᓅᐦᒡ, ᐁᐅᑯᓐᐦ ᑳ ᐧᐋᐧᐋᐸᐦᑖᑲᓅᐧᑳᐤᐦ ᐊᔅᑖᑯᓈᐹᐦᑎᑯᒡ, ᐧᐃᔨᒉᔥᒄ ᑲᔦ ᐅᔅᐧᑫᒎᔅ᙮ ᐁᐅᒄ ᑳ ᓂᑑᒋᔥᒉᔨᐦᑖᑲᓅᐦᒡ ᑖᓐ ᐁ ᐄᓯ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐊᓂᑦ ᐧᐃᔮᐦᒡ ᐅᐦᒋ ᐊᓂᔮ ᐁ ᓰᐧᐋᑲᒥᐦᐧᑫᓅᐦᒡ᙮ ᐊᓂᔮ ᐊᐧᐁᓐ ᐁ ᓰᐧᐋᑲᒥᐦᐧᑫᑦ, ᒉᒉᐦᒡ ᐃᔥᐸᔨᓂᔮ ᐊᓂᔮ ᓵᑳᔮ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ᙮ ᐆ ᒫᒃ ᐁ ᐃᔥᐸᔨᐦᒡ, ᐁᑯᑦ ᒉ ᒌ ᒪᒋᐸᔨᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐧᐃᔮᐦᒡ, ᓀᔅᑦ ᒫᒃ ᒋᐦᒋᐧᐁ ᒉ ᒌ ᐋᐦᑯᔪᑦ, ᐁᑯᑦ ᐊᓂᔮ ᐁ ᒪᒋᐸᔨᐦᐄᑯᑦ ᐁ ᐅᐦᒋ ᓂᔥᑐᔪᑦ ᐊᐧᐁᓐ ᐧᐃᔮᐦᒡ᙮

ᐁᑯᑦ ᒉ ᒌ ᒪᒋᐸᔨᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᔥᑐᔪᑦ ᐧᐃᔮᐦᒡ, ᐧᒉᐦᒡ ᐊᓂᑦ ᐅᔪᑎᐦᒡ ᑲᔦ ᐅᑎᐦᒌᐦᒡ᙮ ᐅᔮ ᒫᒃ ᐁ ᐃᑖᔥᐱᓀᑦ ᐊᐧᐁᓐ, ᐁᑯᑦ ᒨᔅ ᒉ ᒌ ᒨᔅᑖᑦ ᐁ ᐧᐄᔪᑲᒥᒋᐦᑖᑦ, ᐁ ᒌᔥᒋᒥᔫᑦ, ᐁᑳ ᔖᐱᔫᑦ ᐅᔪᑎᐦᒡ ᑲᔦ ᐅᑎᐦᒌᐦᒡ, ᔪᔥᒋᑯᒡ ᐁ ᐧᐄᔪᒉᐦᑕᒃ ᓀᔅᑦ ᒫᒃ ᒨᔮᒻ ᐁ ᓂᐲᒥᑲᓃᒡ ᐅᑖᔅᑎᒥᐦᒄ, ᐅᐧᐹᒻ ᓀᔅᑦ ᒫᒃ ᐅᑎᐦᒌ᙮

ᐊᓂᔮ ᒫᒃ ᒉᒉᐦᒡ ᐁ ᐃᔥᐸᔨᓃᒡ ᐊᐧᐁᓐ ᓵᑳᔮ ᐅᒥᐦᑯᐦᒡ, ᐁᑯᑦ ᒉ ᒌ ᒪᒋᐸᔨᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐲᐦᒋᔮ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᐋᐸᑎᔫᒥᑲᓃᒡ ᐧᐃᔮ, ᐧᒉᐦᒡ ᐊᓂᑦ ᐅᑕᒋᓰ ᓀᔅᑦ ᒫᒃ ᐅᑌᐦᐄ᙮ ᐅᔮ ᒫᒃ ᐁ ᒪᒋᐸᔨᐦᐄᑯᑦ ᐊᐧᐁᓐ, ᐁᑯᑦ ᒉ ᒌ ᐅᔅᑖᐸᔨᑦ ᐅᑕᒋᓰᐦᒡ, ᐁ ᐹᑯᒧᑦ, ᐁ ᐅᔅᑕᒪᐦᒋᐦᐅᑦ, ᐋ ᒋᐱᑲᐦᒉᑦ, ᐁ ᒌᔅᐧᑫᔮᐸᒧᑦ ᓀᔅᑦ ᒫᒃ ᐁ ᐋᑯᐧᐁᔨᐦᑕᒃ᙮ ᐁᔮᒄ ᑲᔦ ᒉ ᒌ ᐃᑕᒪᒋᐦᐅᑦ ᐊᐧᐁᓐ ᐁ ᒋᓯᑌᐅᐸᔨᑦ ᓀᔅᑦ ᒫᒃ ᐁ ᔫᐦᑲᑌᔨᐦᑕᒃ᙮

ᐊᓐ ᒫᒃ ᒦᓐ ᑯᑕᒡ ᒉᐧᑳᓐ, ᐊᓂᔮ ᐊᐧᐁᓐ ᐁ ᓰᐧᐋᑲᒥᐦᐧᑫᑦ, ᐁᑯᑦ ᒉ ᒌ ᐅᔮᓯᓃᐧᑳᐤᐦ ᐅᔅᒌᓯᒄᐦ, ᐁᑯᑦ ᒫᒃ ᐁ ᐃᓯᓈᑯᓃᒡ ᒉ ᒌ ᐧᐊᓂᐦᑖᑦ ᐁ ᐧᐋᐸᐦᑕᒃ᙮

ᐊᓂᑌ ᒫᒃ ᓇᓈᐦᑰ ᐁ ᐃᐦᑎᔅᑳᓀᔪᐧᑖᐤ ᐄᓅᒡ ᐅᑦ ᑳᓈᑖᐦ ᐊᔅᒌᐦᒡ, ᐁᔮᒄ ᐅᔮ ᐁ ᐄᓯ ᑖᑯᐦᐆᑰᐧᑖᐤ ᐊᓂᔮ ᐁᑲ ᒥᔮᐸᔨᐧᑖᐤ ᐅᐦᒋ ᐁ ᓰᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ᙮ ᐊᓂᑌ ᒫᒃ ᐄᓅ ᐊᔅᒌᐦᒡ, ᐯᔮᒄ ᐄᓅ ᐁᓯᑯᒻ ᓂᔮᔨᓐ ᐃᑌᔨᒫᑲᓅ ᐅᔮ ᐁ

ᐋ ᒫᔪᐦᒑᐱᔨᒡ ᓂᑐᐦᑯᔨᓐᐦ ᐊᓐ ᐋ ᓰᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᐅᓯᐦᑖᑭᓂᐧᐃᒡ ᓯᐦᑖᐦᑯᓈᐹᐦᑎᑯᒡ, ᐧᐄᐦᐄᒑᔥᒄ ᑭᔮᐦ ᐧᐃᔅᐧᑳᒍᓯᒡ ᐊᓂᑎᐦ ᒥᓂᐦᐄᒄ ᐋ ᐅᐦᒋᐱᔨᐦᒡ: ᑖᓂᑖᐦ ᐋ ᐄᓯ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᑦ ᐆ ᒥᔅᑎᒄ ᐊᓂᔮ ᐧᐋᓵ ᐄᔅᐱᒥᐦᒡ ᐋ ᐃᐦᑎᑯᐦᒡ ᓵᑳᐤ ᑭᔮᐦ ᒫᒃ ᐧᐋᓵ ᓃᐦᑖᐦᒡ ᐋ ᐃᐦᑎᑯᐦᒡ ᓵᑳᐤ

ᐆ ᑳ ᐄᓯ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ, ᐋᐅᒄ ᐊᓐ ᑳ ᐧᐋᐧᐋᐱᐦᑖᑭᓂᐧᐃᒡ ᐋ ᐄᓯ ᓂᑐᐦᑯᔫᑦ ᒥᓂᐦᐄᒄ ᐅᐦᒋ ᐊᓐ ᐋ ᓰᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ, ᐋᐅᑯᓐᐦ ᑳ ᐧᐋᐧᐋᐱᐦᑖᑭᓂᐧᐃᒡᐦ ᓯᐦᑖᑯᓈᐹᐦᑎᑯᒡ, ᐧᐄᐦᐄᒑᔥᒄ ᑭᔮᐦ ᐅᔅᐧᑳᒍᔅ᙮ ᐋᐅᒄ ᑳ ᓂᑑᒋᔥᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᑖᓐ ᐋ ᐄᓯ ᐧᐄᒋᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐊᓂᑎᐦ ᐧᐃᔮᐦᒡ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᓰᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ᙮ ᐊᓂᔮ ᐊᐧᐋᓐ ᐋ ᓰᐧᐋᑭᒥᐦᐧᑳᑦ, ᒫᒫᐦᒡ ᐃᔥᐱᔨᔨᐤ ᐊᓂᔮ ᓵᑳᔨᐤ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ᙮ ᐆ ᒫᒃ ᐋ ᐃᔥᐱᔨᒡ, ᐋᑯᑎᐦ ᒑ ᒌ ᒥᒋᐱᔨᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐧᐃᔮᐦᒡ, ᑭᔮᐦ ᒫᒃ ᒋᐦᒋᐧᐊ ᒑ ᒌ ᐋᐦᑯᔪᑦ, ᐋᑯᑎᐦ ᐊᓂᔮ ᐋ ᒥᒋᐱᔨᐦᐄᑯᑦ ᐋ ᐅᐦᒋ ᓂᔥᑐᔪᑦ ᐊᐧᐋᓐ ᐧᐃᔮᐦᒡ᙮

ᐋᑯᑎᐦ ᒑ ᒌ ᒥᒋᐱᔨᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔥᑐᔪᑦ ᐧᐃᔮᐦᒡ, ᐱᑯᓂᒑ ᐊᓂᑎᐦ ᐅᔪᑎᐦᒡ ᑭᔮᐦ ᐅᑎᐦᒌᐦᒡ᙮ ᐅᔮ ᒫᒃ ᐋ ᐃᑖᔥᐱᓈᑦ ᐊᐧᐋᓐ, ᐋᑯᑎᐦ ᒨᔅ ᒑ ᒌ ᒨᔅᑖᑦ ᐋ ᐧᐄᔪᑭᒥᒋᐦᑖᑦ, ᐋ ᒌᔥᒋᒥᔫᑦ, ᐋᑳ ᔖᐱᔫᑦ ᐅᔪᑎᐦᒡ ᑭᔮᐦ ᐅᑎᐦᒌᐦᒡ, ᓯᔅᒋᑯᒡ ᐋ ᐧᐄᔪᒑᔨᐦᑎᒃ ᑭᔮᐦ ᒫᒃ ᒨᔮᒻ ᐋ ᓂᐲᒥᑭᓂᔨᐤ ᐅᑖᔅᑎᒥᐦᒄ, ᐅᐧᐹᒻ ᑭᔮᐦ ᒫᒃ ᐅᑎᐦᒌ᙮

ᐊᓂᔮ ᒫᒃ ᒫᒫᐦᒡ ᐋ ᐃᔥᐱᔨᔨᔨᒡ ᐊᐧᐋᓐ ᓵᑳᔨᐤ ᐅᒥᐦᑯᐦᒡ, ᐋᑯᑎᐦ ᒑ ᒌ ᒥᒋᐱᔨᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐲᐦᒋᔨᐤ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᐋᐱᑎᔫᒥᑭᓂᔨᐤ ᐧᐃᔨᐤ, ᐱᑯᓂᒑ ᐊᓂᑎᐦ ᐅᑎᒋᓰ ᑭᔮᐦ ᒫᒃ ᐅᑖᐦᐄ᙮ ᐅᔮ ᒫᒃ ᐋ ᒥᒋᐱᔨᐦᐄᑯᑦ ᐊᐧᐋᓐ, ᐋᑯᑎᐦ ᒑ ᒌ ᐅᔅᑖᐱᔨᑦ ᐅᑎᒋᓰᐦᒡ, ᐋ ᐹᐦᐹᑯᒧᑦ, ᐋ ᐅᔅᑖᒥᐦᒋᐦᐅᑦ, ᐋ ᒋᐱᑭᐦᒑᑦ, ᐋ ᒌᔅᐧᑳᔮᐱᒧᑦ ᑭᔮᐦ ᒫᒃ ᐋ ᐋᑭᐧᐋᔨᐦᑎᒃ᙮ ᐋᔮᐧᐃᒄ ᑭᔮᐦ ᒑ ᒌ ᐃᑎᒥᒋᐦᐅᑦ ᐊᐧᐋᓐ ᐋ ᒋᓯᑖᐅᐱᔨᑦ ᑭᔮᐦ ᒫᒃ ᐋ ᔫᐦᑭᑖᔨᐦᑎᒃ᙮

ᐊᓐ ᒫᒃ ᒦᓐ ᑯᑎᒡ ᒑᐧᑳᓐ, ᐊᓂᔮ ᐊᐧᐋᓐ ᐋ ᓰᐧᐋᑭᒥᐦᐧᑳᑦ, ᐋᑯᑦ ᒑ ᒌ ᐅᔮᓯᓂᔨᐤᐦ ᐅᔅᒌᓯᒄᐦ, ᐋᑯᑎᐦ ᒫᒃ ᐋ ᐃᓯᓈᑯᓂᔨᐤ ᒑ ᒌ ᐧᐃᓂᐦᑖᑦ ᐋ ᐧᐋᐱᐦᑎᒃ᙮

ᐊᓂᑖᐦ ᒫᒃ ᓂᓈᐦᑰ ᐋ ᐃᐦᑎᔅᑳᓈᔪᐤ ᐄᔨᔨᐅᐤ ᐅᑎᐦ ᑳᓈᑖᐦ ᐊᔅᒌᐦᒡ, ᐋᔮᐧᐃᒄ ᐅᔮ ᐋ ᐄᓯ ᑖᐦᑯᐦᐅᑯᒡ ᐊᓂᔮ ᐊᑳ ᒥᔮᐱᔨᒡ ᐅᐦᒋ ᐋ ᓰᐧᐋᑭᒥᐦᐧᑳᒡ᙮ ᐊᓂᑖᐦ ᒫᒃ

Anti-diabetic activity of medicines made from needle, bark and cone of minhikw: how different parts of the tree protect from too much or too little sugar*

This study compared the needles, bark and cone of White Spruce (minhikw) as anti-diabetic medicines. They were compared to see how well they could protect specific parts of the body against damage from diabetes. When people have diabetes, their blood sugar levels go up and down. This can damage, or even kill, nerves in different parts of the body.

The nerves that are away from the centre of the body, like in the feet and hands can be damaged. When this is happening, a person can suffer chronic pain, tingling sensations, weakness in feet and hands, sharp and sudden pain or paralysis in the face, thigh, or hand.

Too much or too little sugar in the blood can also damage the nerves that keep the internal organs working, such as in the gut or heart. When these are damaged the person can have digestive problems,

ᑖᑯᐦᐆᑯᑦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ ᓀᔥᑦ ᒫᒃ ᒉᑳᑦ ᐁ ᐅᑕᐦᒋᐸᔨᓃᒡ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ᙮

ᐁᐅᒄ ᐊᓐ ᐯᔭᒄ ᑳ ᒥᔅᑲᐧᐋᐦᐋᑲᓅᑦ ᒥᓇᐦᐄᒄ ᑳ ᐧᐄᐦᑕᐦᐧᑳᐤ ᐊᓂᒌ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᒉᔥᑎᓇᔥ ᒉ ᒌ ᓂᑐᐦᑯᔩᑦ ᐅᐦᒋ ᐊᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓅᐦᒡ᙮

ᐊᓂᑌ ᒫᒃ ᐁ ᐱᔅᒋᔔᒡ ᓈᔥᒡ ᐯᐦᑳᒡ ᑳ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓅᐦᒡ ᒉᐧᑳᓐ, ᐁᐅᒄ ᑳ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᔮᐦᒡ ᐊᓐ ᒥᓇᐦᐄᒄ ᐊᓂᑦ ᐊᔥᑖᑯᓈᐹᐦᑎᒄᐦ, ᐁᑯᑦ ᓈᔥᒡ ᐁ ᓂᑐᐦᑯᔩᑦ, ᐁᒄ ᒫᒃ ᓇᒧᐃ ᐧᐄ ᓈᔥᒡ ᐊᓂᑦ ᐅᔥᐧᑫᒎᔥ ᑲᔦ ᐧᐃᔨᒉᔅᒄ᙮ ᐁᒄ ᑳ ᐄᔑ ᒥᔅᑲᐧᐋᐦᑖᔮᐦᒡ ᐁ ᐧᐄᒋᐦᐄᐧᐋᐸᔨᒡ ᐊᓂᔫ ᒣᒣᐦᒡ ᐁ ᐃᔅᐸᔨᓃᒡ ᐊᐧᐁᓐ ᔔᑳᔫ ᐊᓂᑦ ᐅᒥᐦᑯᐦᒡ᙮

ᐆ ᒫᒃ ᑳ ᐄᔑ ᓂᑑᒋᔅᒉᔨᐦᑖᑲᓅᐦᒡ, ᐁᐅᒄ ᑖᐧᐯᐦ ᐁ ᒪᔅᑳᑌᔨᐦᑖᑯᐦᒡ ᐁ ᐃᔥᐱᔑ ᔫᐦᒋᐸᔨᓃᒡ ᐄᓅ ᓂᑐᐦᑯᔨᓐ ᐅᐦᒋ ᐊᓂᔫ ᐊᐧᐁᓐ ᒉ ᒌ ᐧᐄᒋᐦᐄᑯᑦ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ ᑲᔦ ᒉ ᒌ ᐅᐦᒋ ᓇᑳᐦᐄᑲᓅᐦᒡ ᐊᓂᔫ ᐁ ᒪᒋᐸᔨᐦᐄᑯᑦ ᐊᐧᐁᓐ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᑦ ᐊᓂᑦ ᐁ ᐅᐦᒋ ᓂᔅᑐᔨᑦ ᐧᐃᔮᐦᒡ᙮

ᐁᐅᒄ ᐆ ᐊᐱᔒᔥ ᐁ ᒪᓯᓈᑌᐦᒡ ᒪᓯᓇᐦᐄᑲᓐ ᑳ ᒪᓯᓇᐦᐋᐦᐧᑳᐤ ᐦᐋᕆᒃ, ᓛᒻᐯᕐ, ᐯᓀᑦ ᑲᔦ ᐅᐧᐄᒑᐸᑎᓰᒪᑲᓂᐧᐋᐤᐦ, ᑲᔦ ᐁᑯᑌ ᑳ ᒪᓯᓈᑌᐦᒡ ᐆ ᒪᓯᓇᐦᐄᑲᓐᐦ ᐊᓂᑌ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᓂᑐᐦᑯᔨᓐᐦ ᑎᐹᒋᒨᓯᓇᐦᐄᑲᓐ ᐊᓐ 2008 ᑳ ᐃᔅᐸᔨᐦᒡ (vol 46: 124-134)᙮ ᐆ ᒫᒃ ᑳ ᒪᓯᓇᐦᐄᑲᓄᐧᐃᐦᒡ, ᐁᐅᒄ ᑳ ᐃᔑᓂᐦᑳᑌᐦᒡ, “ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔨᐦᒡ ᒥᓇᐦᐄᒄ ᐊᔥᑖᐦᑯᓈᐹᐦᑎᑯᒡ, ᐅᐦᐄᑫᔅᒄ ᑲᔦ ᐅᔥᐧᑫᒎᔥ: ᐁ ᐄᔑ ᓈᑲᑐᐧᐁᔨᐦᑖᑯᐦᒡ ᐲᐦᒋᔦ̇ ᐅᐦᒋ ᐊᓐ ᐧᐁᔦ̇ ᒥᔥᑕᐦᐄ ᐁ ᔒᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ ᑲᔦ ᐧᐁᔦ̇ ᐁᑳ ᐃᐦᑎᑯᐦᒡ ᔔᑳᐤ ᐲᐦᒋᔦ̇᙮”

ᐄᔨᔨᐤ ᐊᔅᒌᐦᒡ, ᐹᔨᒄ ᐄᔨᔨᐤ ᐋᔑᑯᒻ ᓂᔮᔪ ᐃᑖᔨᒫᑭᓂᐤ ᐅᔮ ᐋ ᑖᑯᐦᐆᑯᑦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ ᑭᔮᐦ ᒫᒃ ᒑᑳᑦ ᐋ ᐅᑎᐦᒋᐱᔨᐦᐄᑯᑦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ᙮

ᐋᐅᒄ ᐊᓐ ᐹᔨᒄ ᑳ ᒥᔅᑭᐧᐋᐦᐋᑭᓂᐧᐃᑦ ᒥᓂᐦᐄᒄ ᑳ ᐧᐄᐦᑎᐦᒡ ᐊᓂᒌ ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔨᐤᐦ ᒑᔥᑎᓈᔥ ᒑ ᒌ ᓂᑐᐦᑯᔩᑦ ᐅᐦᒋ ᐊᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ᙮

ᐊᓂᑖᐦ ᒫᒃ ᐋ ᐱᔑᔥᒑᒡ ᓈᔥᒡ ᒥᒋᓐ ᑳ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ ᒑᐧᑳᓐ, ᐋᐅᒄ ᑳ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᔮᐦᒡ ᐊᓐ ᒥᓂᐦᐄᒄ ᐊᓂᑎᐦ ᔑᐦᑖᑯᓈᐹᐦᑎᒄᐦ, ᐋᑯᑎᐦ ᓈᔥᒡ ᐋ ᓂᑐᐦᑯᔩᑦ, ᐋᒄ ᒫᒃ ᓂᒧᔨ ᐧᐄ ᓈᔥᒡ ᐊᓂᑎᐦ ᐅᔥᐧᑳᒍᔥ ᑭᔮᐦ ᐧᐄᐦᐄᒑᔅᒄ᙮ ᐋᐅᒄ ᑳ ᐄᔑ ᒥᔅᑭᐧᐋᐦᑖᔮᐦᒡ ᐋ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᐊᓂᔮ ᒫᒫᐦᒡ ᐋ ᐃᔅᐱᔨᔨᒡ ᐊᐧᐋᓐ ᔔᑳᔨᐤ ᐊᓂᑎᐦ ᐅᒥᐦᑯᐦᒡ᙮

ᐆ ᒫᒃ ᑳ ᐄᔑ ᓂᑑᒋᔅᒑᔨᐦᑖᑭᓂᐧᐃᒡ, ᐋᐅᒄ ᑖᐧᐹᐦ ᐋ ᒫᒥᔅᑳᑖᔨᐦᑖᑯᐦᒡ ᐋ ᐃᔥᐱᔑ ᔫᐦᒋᐱᔨᔨᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔨᓐ ᐅᐦᒋ ᐊᓂᔮ ᐊᐧᐋᓐ ᒑ ᒌ ᐧᐄᒋᐦᐄᑯᑦ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ ᑭᔮᐦ ᒑ ᒌ ᐅᐦᒋ ᓂᑳᐦᐄᑭᓂᐧᐃᒡ ᐊᓂᔮ ᐋ ᒥᒋᐱᔨᐦᐄᑯᑦ ᐊᐧᐋᓐ ᐋ ᔒᐧᐋᑭᒥᐦᐧᑳᑦ ᐊᓂᑎᐦ ᐋ ᐅᐦᒋ ᓂᔅᑐᔨᑦ ᐧᐃᔮᐦᒡ᙮

ᐋᐅᒄ ᐆ ᐊᐱᔒᔥ ᐊ ᒥᓯᓈᑖᐦᒡ ᒥᓯᓂᐦᐄᑭᓐ ᑳ ᒥᓯᓂᐦᐋᐦᒡ ᐦᐋᕆᒃ, ᓛᒻᐯᕐ, ᐯᓀᑦ ᑭᔮᐦ ᐅᐧᐄᒑᐱᑎᓰᒥᑭᓂᐧᐋᐤᐦ, ᑭᔮᐦ ᐋᑯᑖᐦ ᑳ ᒥᓯᓈᑖᐦᒡ ᐆ ᒥᓯᓂᐦᐄᑭᓐᐦ ᐊᓂᑖᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᓂᑐᐦᑯᔨᓐᐦ ᑎᐹᒋᒨᓯᓂᐦᐄᑭᓐ ᐊᓐ 2008 ᑳ ᐃᔅᐱᔨᒡ (vol 46: 124-134)᙮ ᐆ ᒫᒃ ᑳ ᒥᓯᓂᐦᐄᑭᓂᐧᐃᒡ, ᐋᐅᒄ ᑳ ᐃᔑᓂᐦᑳᑖᐦᒡ, “ᑖᓐ ᐊ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔨᒡ ᒥᓂᐦᐄᒄ ᔑᐦᑖᐦᑯᓈᐹᐦᑎᑯᒡ, ᐧᐄᐦᐄᒑᔅᒄ ᑭᔮᐦ ᐅᔥᐧᑳᒍᔥ: ᐊ ᐄᔑ ᓈᑭᑐᐧᐋᔨᐦᑖᑯᐦᒡ ᐲᐦᒋᔮᐤ ᐅᐦᒋ ᐊᓐ ᐧᐋᔔ ᒥᔥᑏᐦ ᐊ ᔒᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ ᑭᔮᐦ ᐧᐋᔔ ᐋᑳ ᐃᐦᑎᑯᐦᒡ ᔔᑳᐤ ᐲᐦᒋᔮᐤ᙮”

vomiting, nausea, constipation, dizziness, or fainting. People may also feel hot or cold.

To make matters worse, the diabetes can damage nerves in certain parts of the eye and this can lead to blindness.

Canada's Aboriginal populations are particularly devastated by these kinds of complications from diabetes. In Iiyiyiu Aschii, about one adult in five is suffering from diabetes and more have pre-diabetes.

White Spruce was one of the plants that the healers identified as having potential to protect against diabetes.

In the laboratory, we showed that most of the protection from White Spruce is in the needles and not in the cone or bark. We showed that this protects against both too much and too little sugar in the blood.

This study provided new insight into the power of Iiyiyiu medicine plants to protect against the damages caused to nerves by diabetes.

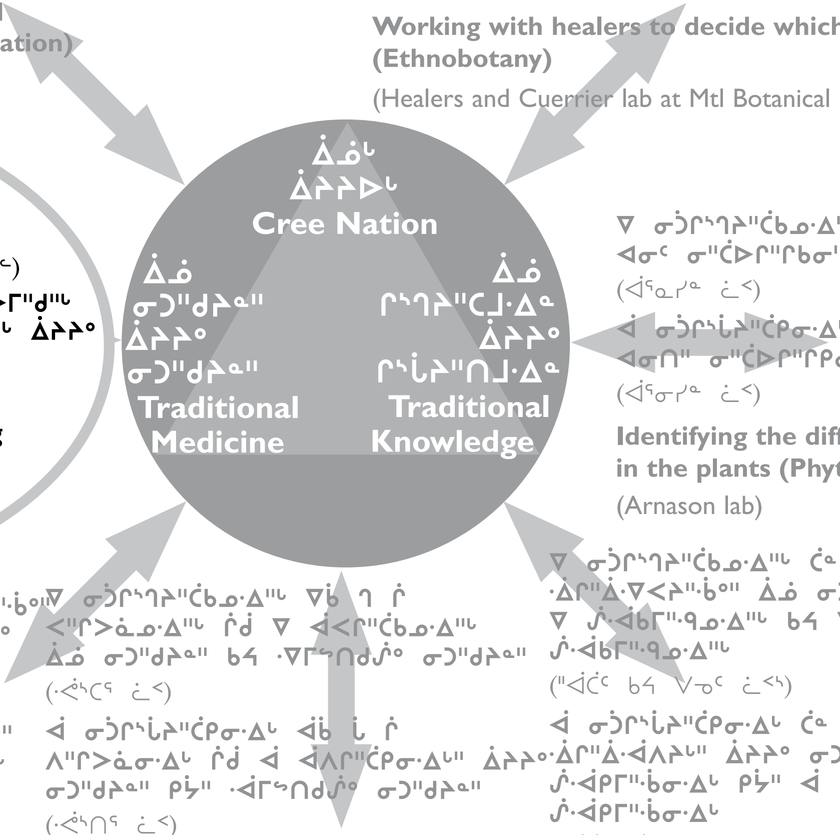
* This is a plain language summary of an article by Harris, Lambert, Bennett, et al that was published in the journal Pharmaceutical Biology in 2008 (vol 46: 124-134). The article was called "Anti-diabetic activity of extracts from needle, bark, and cone of Picea glauca: Organ-specific protection from glucose toxicity and glucose deprivation."

ᐧᐋᐸᐦᑏᐧᐁᐧᐃᓐ 4: ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐧᐃᐦᒡ ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᑯᐧᑖᐤ ᐄᓅᒡ ᐁ ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅ ᓂᑐᐦᑯᔮᓐᐦ ᐅᐦᒋ ᐊᓂᔫ ᐁ ᔫᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ

ᐧᐋᐱᐦᑏᐧᐋᐧᐃᓐ 4: ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡ ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᑯᒡ ᐄᔨᔨᐅᒡ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔮᓐᐦ ᐅᐦᒋ ᐊᓂᔮ ᐋ ᔫᐧᐋᑭᒥᐦᐧᑳᒡ

EXAMPLE 4: OBSERVATIONAL STUDY OF HOW IIYIYIU TRADITIONAL MEDICINES HELP IIYIYIUCH MANAGE THEIR DIABETES

ᓂᓈᐦᑯ ᐁ ᐃᔑᓈᑯᐦᐃᒡ ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᓂᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔮᐦᐧᑳᐤᐦ ᐁ ᔫᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ
ᓂᓈᐦᑯ ᐋ ᐃᔑᓈᑯᐦᐃᒡ ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔮᒡᐦ ᐋ ᔫᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ
Parts of the Anti-diabetic Plant Project



ᐄᓅᒡ
ᐄᔨᔨᐅᒡ
Cree Nation

ᐄᓅ
ᓂᑐᐦᑯᔮᓐᐦ
ᐄᔨᔨᐤ
ᓂᑐᐦᑯᔮᓐᐦ
Traditional Medicine

ᐄᓅ
ᒋᔅᑫᔨᐦᑕᒨᐧᐃᓐ
ᐄᔨᔨᐤ
ᒋᔅᒌᔨᐦᑎᒨᐧᐃᓐ
Traditional Knowledge

ᐁ ᐧᐋᐧᐋᐸᐦᑖᑲᓅᐧᐃᐦᒡ ᒉ ᒌ ᒌᑯᐸᔮᐦᑖᑲᓅᐧᐃᐦᒡ ᐄᓅ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᐁ ᔫᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

(ᓂᑐᐦᑯᔮᓐ ᐋᐸᑎᓰᐧᐃᓐ, ᑰᓂᔑᔥ, ᐧᑖᓇ, ᓕᓐᑕᓐ)

ᐋ ᐧᐋᐧᐋᐱᐦᑖᑭᓂᐧᐃᒡ ᒫ ᒌ ᒌᑯᐱᔮᐦᑖᑭᓂᐧᐃᒡ ᐄᔨᔨᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᐧᐄᒋᐦᐄᓱᐧᐃᓐ ᐋ ᔫᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ

(ᓂᑐᐦᑯᔮᓐ ᐋᐱᑎᓰᐧᐃᓐ, ᑰᓂᔑᔥ, ᐧᑖᓇ, ᓕᓐᑎᓐ)

Looking at ways to combine traditional and "western" diabetes care (Education/ Integration)

(CBHSSJB, Coonishish, Torrie, Linton)

ᐁ ᐧᐄᓖᐸᑎᓰᒫᑲᓅᐧᑖᐤ ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᒉ ᒌ ᐅᓴᐦᑖᑲᓅᐦᐧᑳᐤᐦ ᒉᑯ ᓂᐦᑖᐅᒋᐦᒋᑲᓐᐦ ᒉ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐦᐧᑳᐤᐦ

(ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ ᑲᔦ ᑯᓇᔦᕐ ᓛᐸ ᐊᓂᑌ ᒎᓕᔾᐤ ᐳᑖᓂᑲᓪ ᑳᕐᑎᓐᐢ)

ᐋ ᐧᐄᓖᐱᑎᓰᒫᑭᓂᐧᐃᒡ ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔮᐤᐦ ᒫ ᒌ ᐅᔮᔮᐦᑖᑭᓂᐧᐃᒡ ᒫᑯ ᓂᐦᑖᐅᒋᐦᒋᑭᓐᐦ ᒫ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡᐦ

(ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔮᐤᐦ ᑭᔮᐦ ᑯᓇᔦᕐ ᓛᐸ ᐊᓂᑖᐦ ᐧᒫᓕᔾᐤ ᐳᑖᓂᑭᓪ ᑳᕐᑎᓐᐢ)

Working with healers to decide which plants to look at (Ethnobotany)

(Healers and Cuerrier lab at Mtl Botanical Gardens)

ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐧᐃᐦᒡ
ᐁ ᐃᔅᐱᔅ ᐃᐦᑎᑯᐦᒡ ᓅᑳᐤ ᐅᒥᐦᑯᐦᒡ
ᐊᐧᐁᓐ ᑲᔦ ᐁ ᐊᔨᒥᐦᐋᑲᓅᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ
ᐋᐸᒋᐦᑖᐧᑖᐤ ᐄᓅ ᓂᑐᐦᑯᔮᓐᐦ ᐊᓂᑌ ᒥᔅᑎᓯᓃᐦᒡ
(ᑳ ᐧᐄᒋᐦᐋᐧᑖᐤ ᐊᐧᐁᔫᐦ, ᑖᓀᓐᐧᐹᒻ, ᐧᑖᓇ, ᔒᐃᐧᓵᓐ, ᔦᔨᓪ)
ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡ ᐋ ᐃᔅᐱᔑ ᐃᐦᑎᑯᐦᒡ ᓅᑳᐤ ᐅᒥᐦᑯᐦᒡ
ᐊᐧᐋᓐ ᑭᔮᐦ ᐋ ᐊᔨᒥᐦᐋᑭᓂᐧᐃᒡ ᐊᐧᐋᓂᒌ ᐋ ᐋᐱᒋᐦᑖᒡ ᐄᔨᔨᐤ
ᓂᑐᐦᑯᔮᓐᐦ ᐊᓂᑖᐦ ᒥᔅᑎᓯᓃᐦᒡ
(ᑳ ᐧᐄᒋᐦᐋᒡ ᐊᐧᐋᔮᐤᐦ, ᑖᓀᓐᐧᐹᒻ, ᐧᑖᓇ, ᔒᐃᐧᓵᓐ, ᔦᔨᓪ)

Sugar tests and interviews with people being treated by healers in Mistissini (Observational study)

(Healers, Dannenbaum, Torrie, Chiasson, Yale)

ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐧᐃᐦᒡ ᒉᐧᑳᓐ ᐁ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑦ ᓂᐦᑖᐅᒋᐦᒋᑲᓂᐦᒡ

(ᐋᕐᓇᓯᓐ ᓛᐸ)

ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡ ᒫᐧᑳᓐ ᐋ ᐃᐦᑎᑯᐦᒡ ᐊᓂᑎᐦ ᓂᐦᑖᐅᒋᐦᒋᑭᓂᐦᒡ

(ᐋᕐᓂᓯᓐ ᓛᐸ)

Identifying the different ingredients in the plants (Phytochemistry)

(Arnason lab)

ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐧᐃᐦᒡ ᑖᓂᑌ ᒉ ᒌ ᐧᐄᒋᐦᐄᐧᐁᐸᔮᐦᐧᑳᐤᐦ ᐄᓅ ᓂᑐᐦᑯᔮᓐᐦ ᑲᔦ ᐄᓅ ᒦᒋᒻ ᒉ ᒌ ᒥᔪᐱᒫᑎᓰᐧᑖᐤ ᐊᐧᐁᓂᒌ ᐁ ᔫᐧᐋᑲᒥᐦᐧᑫᐧᑖᐤ

(ᐧᒑᓐᐢ ᓛᐸ)

ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡ ᑖᓂᑖᐦ ᒫ ᒌ ᐧᐄᒋᐦᐄᐧᐋᐱᔮᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔮᓐᐦ ᑭᔮᐦ ᐄᔨᒦᒋᒻ ᒫ ᒌ ᒥᔪᐱᒫᑎᓰᒡ ᐊᐧᐋᓂᒌ ᐋ ᔫᐧᐋᑭᒥᐦᐧᑳᒡ

(ᐧᒑᓐᐢ ᓛᐸ)

Looking at how the traditional plants and foods could help people with diabetes to stay healthy (Nutrition)

(Johns lab)

ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐧᐃᐦᒡ ᐁᑳ ᒉ ᒌ ᐸᐦᒋᐳᓈᓄᐧᐃᐦᒡ ᒌᑯ ᐁ ᐋᐸᒋᐦᑖᑲᓅᐧᐃᐦᒡ ᐄᓅ ᓂᑐᐦᑯᔮᓐᐦ ᑲᔦ ᐧᐁᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔮᓐᐦ

(ᐧᐹᔅᑕᕐ ᓛᐸ)

ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡ ᐋᑳ ᒫ ᒌ ᐱᐦᒋᐳᓈᓂᐧᐃᒡ ᒌᑯ ᐋ ᐋᐱᒋᐦᑖᑭᓂᐧᐃᒡ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔮᓐᐦ ᑭᔮᐦ ᐧᐋᒥᔥᑎᑯᔒᐤ ᓂᑐᐦᑯᔮᓐᐦ

(ᐧᐹᔅᑎᕐ ᓛᐸ)

Making sure the healing plants are safe to take along with other medicines (Toxicology)

(Foster lab)

ᐁ ᓂᑑᒋᐢᑫᔮᐦᑖᑲᓅᐧᐃᐦᒡ ᑖᓐ ᐁ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐁᐸᔮᐦᐧᑳᐤᐦ ᐄᓅ ᓂᑐᐦᑯᔮᓐᐦ ᐅᐦᒋ ᐊᓐ ᐁ ᔫᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ ᑲᔦ ᐁ ᐅᔅᑖᐸᔮᐦᐄᐧᐁᒡ ᐁ ᔫᐧᐋᑲᒥᐦᐧᑫᓄᐧᐃᐦᒡ

(ᐦᐋᑖᑦ ᑲᔦ ᐯᓀᑦ ᓛᐸᔅ)

ᐋ ᓂᑑᒋᐢᓈᔮᐦᑖᑭᓂᐧᐃᒡ ᑖᓐ ᐋ ᐄᔑ ᐧᐄᒋᐦᐄᐧᐋᐱᔮᒡᐦ ᐄᔨᔨᐤ ᓂᑐᐦᑯᔮᓐᐦ ᐅᐦᒋ ᐊᓐ ᐋ ᔫᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ ᑭᔮᐦ ᐋ ᐅᔅᑖᐱᔮᐦᐄᐧᐋᒡ ᐋ ᔫᐧᐋᑭᒥᐦᐧᑳᓂᐧᐃᒡ

(ᐦᐋᑖᑦ ᑭᔮᐦ ᐯᓀᑦ ᓛᐸᔅ)

Looking at how the plants act on diabetes and the health problems that go with it (Pharmacology)

(Haddad and Bennett labs)

Anti-Diabetic Plant Project

Update: Mistissini Observational Study

July 2007

The Anti-diabetic plant project studies the anti-diabetic potential of traditional medicines. As part of this larger project, the observational study will help us understand more about how people are using traditional medicines for diabetes care.

Interviews with Healers

Ménaïque Légaré-Dionne, research assistant for the Cree Board of Health, has conducted 8 interviews with Elders (individuals or couples) who have knowledge about traditional medicines.

Some of these Elders are involved with treating diabetes, others treat different kinds of health problems, while still others used to be involved in healing work but are no longer active as Healers.

In these interviews, the Elders discussed their life stories, their involvement in traditional activities, their knowledge of traditional medicines, the transmission and sharing of knowledge, their involvement with healing and with traditional medicines in general, and in the specific case of diabetes for those who do treat it.

These interviews were done in Cree, with the help of an interpreter. Different interpreters have been used for the first few interviews, until Sam Etapp began working as an interpreter for the interviews on a regular basis.

All of the interviews were recorded except one, in which the Elders preferred not to be recorded. These interviews were to be translated by the CNM translators at the Band office, but, since they did not have time to work on this, Brian Webb, translator for the Cree Board of Health, is currently working on translating the interviews.

A few more interviews are to be conducted during the month of August, depending on availability of the Elders.

Patient involvement

3 sets of Healers (couples or individuals) that were interviewed are currently involved in treating diabetes and have regular patients.

These Healers will start telling their patients about this study and send those who are interested to see Harriet Linton, the Diabetes CHR at the clinic, to sign a consent form and fill out a questionnaire about their experience managing their diabetes. The patients will then go to the clinic to have their blood and urine tests done.

Any person living with diabetes who approaches an Elder or a member of the Mistissini Local Coordinating Committee about traditional medicines will be directed to a Healer. Those new patients who want to participate in the study will also be sent to see the Diabetes CHR to sign the consent form, fill out the questionnaire, and have their blood and urine tests done at the clinic.

The patients who agree will also be interviewed by the CHB research assistant about their life story and experience with traditional medicines and with diabetes.

The patients' treatment with traditional medicines will likely begin in August, when all the medicinal plants are ready. The time frame for treatment will be entirely in the hands of the Healers.

The patients will then be followed through 6 months of treatment, during which they will note any particular events in their life or feelings which may affect their sugars, or any side effects from the medicines. They will go back to the clinic for blood and urine tests after 3 and 6 months of treatment. They will also be interviewed again by the CHB research assistant about their experience using traditional medicines for their diabetes care.

CIHR Team in Aboriginal Anti-Diabetic Medicines
Équipe IRSC sur les médecines autochtones antidiabétiques

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