Diabetes in Europe: The Challenges Ahead

EU Diabetes Working Group, supported by the European Coalition for Diabetes
11 October 2018, European Parliament, Brussels, Belgium

On 11 October 2018 the EU Diabetes Working Group of MEPs (EUDWG) met in the European Parliament, Brussels, to discuss how the EU Institutions can work with diabetes stakeholders to address Diabetes in Europe: The Challenges Ahead. The meeting was organised with help from the European Coalition for Diabetes (ECD).

Welcome and Overview of the EU Diabetes Working Group - Christel Schaldemose, MEP, Co-Chair EUDWG opened the event, outlining the workings of the EUDWG. Ms Schaldemose emphasised the need for diabetes to be high on the agenda at the forthcoming European elections in 2019. It is vital that politicians give diabetes priority and more MEPs are needed to support the important work of the EUDWG.

Francis Zammit Dimech MEP, Co-Chair EUDWG noted that there are now 60 million people across Europe with diabetes. It is essential that policies are improved at EU level that will influence national ministries of health. The patient voice is vital to raise awareness of specific individual needs such as continuous glucose monitoring, to improve quality of life. Dr Zammit Dimech went on to outline the work of the EUDWG, a group of cross-party, cross-national MEPs. The EUDWG aims to prevent diabetes and to improve the quality of life of people with diabetes, act as a hub for exchange of experience and drive implementation of a targeted strategy at EU level. The EUDWG also addresses specific policy areas. Diabetes is an issue of high priority that requires further research and therefore increased EU funding from the multi-annual financial framework. The EUDWG also supports initiatives related to addressing the subject at the employment and social affairs level. It is also essential that policies address patient rights - and those of their relatives - in terms of best practice and best care.

European Commission Considerations on Diabetes - Vytenis Andriukaitis, European Commissioner for Health and Food Safety noted that although healthcare is currently a national responsibility, a shift towards a more pan-European approach could be beneficial. He expressed concern at the rising incidence of diabetes, both worldwide and in the EU, and stated that there is still progress to be made in the EU to halt it. Health is explicitly enshrined in the Lisbon treaty as being of the highest priority, understood as citizens’ social, mental and physical well-being. He stressed the importance of healthy diets, in particular for type 2 diabetes, and stated that the EU is determined to play its part by introducing effective regulation for the food industry. Evidence-based public health instruments are also essential to ensure healthy ageing, healthy environments, safe food and healthy cities. The Commissioner underlined that a strong focus on disease prevention is needed, with innovative approaches and
increased investments being necessary to bring about change. Long-term and multi-pronged diabetes action plans are also vital across the EU. Finally, the Commissioner expressed concern for the thousands of transnational workers in the EU who fall outside of national health care systems and have limited access to adequate care. He noted the forthcoming EU Parliamentary Elections in 2019 as a focal point for addressing the diabetes crisis, with a stronger focus on prevention and an EU-wide approach.

Challenges of Living with Type 1 Diabetes: The Patient Experience - Jack Delicata diabetes patient from Malta spoke about his experience of living with the condition since his diagnosis at the age of one. Mr Delicata calculated that he had been given, and later, self-administered 30,000 insulin injections over the past 20 years.

The first message about personal responsibility and self-education was clear: “take control of your diabetes, and don’t let diabetes take control of your life”. This was made possible, he explained, through having had the complete support of his parents, close friends, teaching staff, a multi-disciplinary diabetes team, and most significantly, his diabetes nurse: “The diabetes nurse is probably the healthcare professional you can look up to almost on a 24/7 basis. The diabetes nurse, for me, was, is and will always be my diabetes buddy”.

Mr Delicata traced the challenges that diabetes posed during his early years, childhood and teenage years, and how the condition shapes significant relationships. In conclusion, Mr Delicata summarised by celebrating the ‘revolution’ brought about by continuous glucose monitoring devices. Such devices, he felt, undoubtedly improve people’s diabetes and will result in fewer complications and hospitalisation costs. Therefore “national governments should always prioritise diabetes in their national health budgets and take these factors into account”.

Overview of the European Coalition for Diabetes - Chris Delicata, Chair, European Coalition for Diabetes emphasised that diabetes remains the leading cause of death globally, followed by HIV AIDS, tuberculosis and malaria. In 2017, 66 million people had diabetes in Europe. If we do not act now, this figure will rise to 81 million by 2045. Mr Delicata went on to give an overview of the structure, objectives and work of the ECD. Despite the progress made, the commitments made by individual governments and national health providers need urgent and adequate implementation if Europe is to challenge and confront the growing burden of diabetes: “Europe is making progress but it is too slow and too limited to stem the tide of diabetes. We need urgent action and implementation”. To conclude, Mr Delicata outlined several ways in which the EU Commission could support the aims of the ECD, including a Joint Working Group between the EU Commission and the European Coalition for Diabetes.

Diabetes in the 21st Century: Clinical and Research Perspectives - Prof Andrew Boulton, Chair, EURADIA; Co-Chair ECD opened his presentation by comparing the startling death rates during the first world war (4.2 million) with those of the escalating diabetes crisis in recent years (5.1 million globally). Prof Boulton noted that in both cases, warning signs existed of a crisis spiralling out of control. Diabetes policy makers should learn from the successes of those working in cancer research - increase in public awareness has been a success: fear arousal has been effective in stimulating public engagement, leading to increased funding, research successes, early screening and improved outcomes. Prof Boulton drew a stark contrast between more positive outcomes for many people with a cancer diagnosis as compared to those with diabetes: there are cures for many cancers but none for diabetes.
Professor John Nolan, Executive Director, European Diabetes Forum went on to present the work of this new Forum, announced in October 2018 by the European Association for the Study of Diabetes (EASD). It brings together multiple stakeholders from across the diabetes landscape in Europe. Patient outcomes are not improving; healthcare systems are not managing diabetes effectively and diabetes is falling behind other medical conditions for political and public attention: “Patients’ lives are ruined by complications that could have been prevented and this is simply not good enough.” The Forum has asked all stakeholders to unite behind their Call to Action. Solutions will involve well-aligned comparable data across Europe; more comparability and benchmarking and translation at national level, perhaps a European diabetes register. “Put up targets, something to aim for, and measure against these targets!” Prof Nolan also drew attention to the “visionary” EURADIA DIAMAP 2020 road mapping project, highly relevant to the EUDF. DIAMAP 2020 identifies gaps and highlights strengths to guide a Road Map strategy for future diabetes research in Europe.

Diabetes and Primary Care: Present and Future Challenges - Dr Francesc Xavier Cos, Chair PCDE; Co-Chair ECD outlined findings from primary care, set within the context of deleterious austerity measures across many European countries. Budget restrictions in health have clearly had an effect in countries such as the UK. Primary health care is organised and delivered differently across Europe, but increased workloads and limited resources are common factors for those working in chronic disease. New, more efficient models of working are becoming necessary, such as shared care, with many professionals working as a team. Benchmarks and registries would be welcome across Europe, along with better information technologies; improved registries; increased community expert involvement and policies to achieve effective implementation.

Integrating Diabetes Evidence into Practice: Current Challenges - Cristina Petrut, Board Member IDF Europe presented the findings from this report by the International Diabetes Federation European Region, aimed at identifying gaps in diabetes management and suggesting recommendations to improve the lives of people affected by the condition. The findings of this report have identified a number of key barriers to implementing diabetes evidence into practice, including problems with (or lack of) national diabetes programmes and registries, and inappropriate formulation of diabetes guidelines. For people with diabetes, common barriers related to adherence, education and lack of empowerment. Overall, IDF Europe identified that involvement and communication between policy makers, healthcare professionals and people with diabetes needs to be better.

The Policy Puzzle and its Objectives – Mrs Anne-Marie Felton, President FEND; Co-Chair ECD the core message of this ECD publication is that we have failed people with diabetes: although there is political awareness, the disease does not have priority at both national and European levels. The European elections of May 2019 are a key opportunity to raise awareness of the crisis. An action plan is now crucial, and no further resolutions are necessary: “No more words. We must have a plan of action. Since the St Vincent Declaration there has been an epidemic of resolutions that have not produced anything”.

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Final Discussion

Commissioner Andriukaitis agreed for the need to urgently translate resolutions into action and suggested **DG Santé and the ECD organise jointly a meeting with the European Committee of the Regions and the European Economic and Social Committees.** Mr Chris Delicata and ECD-Chairs welcomed this suggestion and it was agreed that this initiative would be taken forward. Dr Cos, and ECD Chairs noted in discussion that he was disappointed by the early absences of the two EUDWG MEPs from this event. The Co-Chairs also welcomed comments by Mr Miguel-Lizaso-Olmos, Scientific Officer at DG Research, who welcomed continued collaboration with the ECD and European Diabetes Forum. Mr Delicata closed the meeting by thanking the speakers and participants for their contributions.