

Producing data on the real situation of diabetes management in Europe

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High-level technical summit



Accelerating action on commitments to improve diabetes detection and quality of care

28 - 29 November 2023 | Belgrade, Serbia

Declaration on accelerating action on commitments to improve diabetes detection and quality of care

14. As the WHO Regional Office for Europe and IDF Europe, we agree to support Member States to accelerate progress toward meeting or exceeding, where appropriate, the global diabetes targets for 2030:
 - 80% of people living with diabetes are diagnosed;
 - 80% have good control of glycaemia;
 - 80% of people with diagnosed diabetes have good control of blood pressure;
 - 60% of people with diabetes of 40 years or older receive statins; and
 - 100% of people with type 1 diabetes have access to affordable insulin and blood glucose self-monitoring.



WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE

WELTGESUNDHEITSORGANISATION
REGIONALBÜRO FÜR EUROPA



ORGANISATION MONDIALE DE LA SANTÉ
BUREAU RÉGIONAL DE L'EUROPE

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

**Assessing progress towards the global
diabetes targets in WHO European
region**

Online via zoom

Thursday 11th April, 09:30–12:30

Issue date: Friday 15th March

Original: English

Scope and purpose

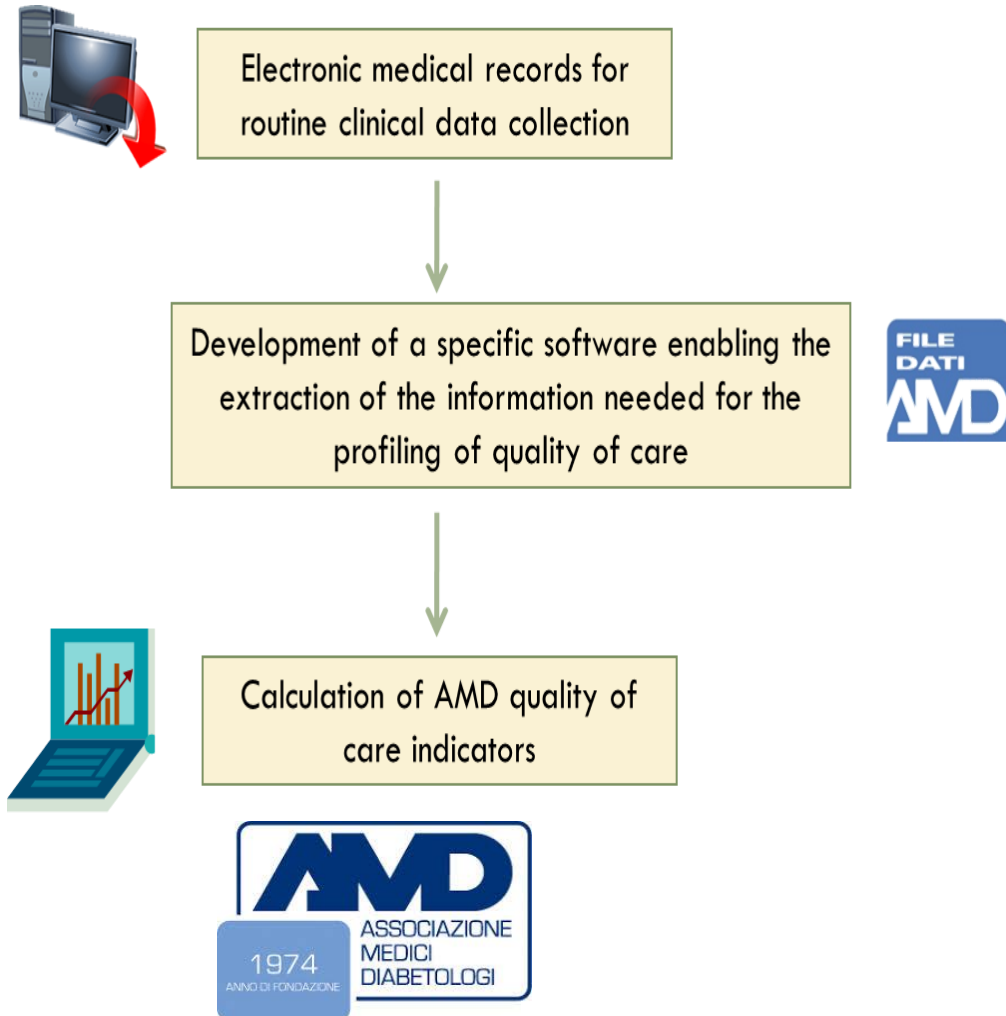
The epidemic of diabetes continues to increase in the WHO European region; according to International Diabetes Federation estimates, one third remains undiagnosed and up to half may not meet their treatment targets. Five global diabetes coverage targets were adopted at the seventy-fifth World Health Assembly (WHA), which were developed following the seventy-fourth WHA resolution 74.4 on reducing the burden of noncommunicable diseases through strengthening prevention and control of diabetes. The five new targets set the standard that, by 2030: 80% of people with diabetes are diagnosed; 80% of people with diagnosed diabetes have good control of glycaemia; 80% of people with diagnosed diabetes have good control of blood pressure; 60% of people with diabetes of 40 years or older receive statins; and, 100% of people with type 1 diabetes have access to affordable insulin and blood glucose self-monitoring.

The targets complement the wider noncommunicable disease agenda, supporting achievement of the 2030 Agenda for Sustainable Development, and the global and European action plans for the prevention and control of noncommunicable diseases. Additionally, the targets specifically support the 2021 WHO Global Diabetes Compact initiative.

- **Project**

- AIM: plan an observational study at European level able to produce data on the real situation of diabetes management in Europe.
- The study, being observational, will require only a quick approval from the Local Ethics of each Centre involved in the study. the adherence of the Centers to the study will be on a voluntary basis and will include the possibility of adherence for any center in any part of Europe.
- The background example, experience and tool will come from the AMD Annals and Swedish Diabetes Registry. These are well-established experiences, going from many years in the way suggested by this proposal.
- The IDF Europe will be the coordinator of the Study and will be able to use the data.
- All the needed aspects of data property, protection and management will be, of course, guaranteed.

Materials & Methods



- In Italy, diabetes care is in charge of GPs and Specialistic diabetologist centers.


- The AMD Annals Initiative involves **~1/3 of diabetes clinics** in Italy

- Participation is **voluntary, anonymous, and free.**

- All participating centers share the **same electronic medical records system** and a **ad hoc software** for the extraction of data. Data are annually collected in a standardized format (AMD Data File) and centrally analyzed **anonymously.**


- The annual extraction of data is perceived as a **normal part of routine clinical practice**

T2D Results: Process and Outcome indicators overtime



Proportion of patients with at least 1 measurement during the year of...	2006	2022	Delta (2022-2004)
HbA1c	89.5	95.7	+6.2
Blood pressure	75.2	84.3	+9.1
Lipid profile	57.2	78.8	+21.6
Albuminuria	39.9	66.9	+27.0
Eye exam	23.5	27.1	+3.6
Foot exam	8.7	14.9	+6.2

** Areas needing a prompt intervention*



Proportion of patients with ...	2006	2022	Delta (2018-2004)
FAVORABLE OUTCOMES			
HbA1c ≤7.0% (≤53 mmol/mol)	39.0	54,6	+15,6
LDL-C <100 mg/dl	26.2	69.3	+43.1
BP ≤130/80 mmHg	31.6	(<130/80) 23,0	-8.6
UNFAVORABLE OUTCOMES			
HbA1c ≥8.0% (≥64 mmol/mol)	34.9	17.8	-17.1
LDL-C ≥130 mg/dl	39.6	10.6	-29.0
BP ≥140/90 mmHg	64.0	51.9	-6.1
BMI ≥30 Kg/m ²	38.3	37.1	-1.2
Smokers	16.8	17.6	+0.8
Micro/macroalb	39.1	24.8	-14.3

- European Diabetes Real Life Research Group

- **E-DIAL Research Group**

- First Meeting

- AIM of the Meeting

- **Updated registries and data sources** contain information that can be used on an ongoing basis to improve quality of care and outcomes of people with diabetes. The continuous use of comparative health indicators may effectively improve quality of care and outcomes by using targeted strategies including monitoring, benchmarking, audit, and feedback. Specific experiences show that such approaches work particularly well in diabetes, although there is still no consensus regarding best practices for the design of registries and information systems.
- In Europe, registries and data sources were identified in 17 countries in the year 2017 (**EU Bridge Health project**), with different data sources to produce indicators at national, regional or provider level. Systematically sharing information and research from these different data collections across the European countries would implement our knowledge on the state- of- the- art of the quality of diabetes care in Europe.
- **In this meeting**, we aim to share information on the organization of different sources of diabetes dataset in Europe, including their governance, information infrastructure and dissemination strategies for quality control, service planning, public health, policy and research in order to (1) plan common large research projects, (2) to put the basis for future comparative data set analyses, and (3) to share models for national data collection with other European countries, who would start their own collection in the next future.

Organizations to be invited + other IDF Europe members

BELGIUM Sciensano, Belgium National (2001): 100 Diabetes Clinics <https://www.sciensano.be/en/health-topics/diabetes/role>

- **CROATIA** Croatian National Institute of Public Health National (CRODIAB, 2000): 2,350 clinics/GPs <https://www.hzjz.hr/sluzba-epidemiologija-prevencija-nezaraznih-bolesti/odjel-za-koordinaciju-i-provodenje-programa-i-projekata-za-prevencijukronicnih-nezaraznih-bolest/dijabetes/3/>
- **CYPRUS** Ministry of Health of Cyprus Regional (2012) 1 hospital 3 primary care centres
- **DENMARK** Steno Diabetes Center Copenhagen, University of Copenhagen National (NDR, 2006) <https://www.rkkp.dk/kvalitetsdatabaser/databaser/dansk-voksendiabetes-databasen/>
- **FINLAND** Finnish Institute for Health and Welfare (THL) National (2003, linked data) <https://thl.fi/en/web/thlfi-en/research-and-development/research-and-projects/diabetes-in-finland-findm>
- **GERMANY** Robert Koch Institute National (DSS, 2015): DataTrav (2019) <https://diabsurv.rki.de/> HUNGARY University of Debrecen National (2016): 20 GPs <http://hmapreg.unideb.hu/>
- **ISRAEL** Ministry of Health of Israel National (2013), 4 HMOs + Academic https://www.health.gov.il/UnitsOffice/ICDC/Chronic_Diseases/Diabetes/Pages/Diabetes_registry.aspx
- **ITALY** Associazione Medici Diabetologi National (2006); 258 Outpatient Services <https://aemmedi.it/annali-amd/>
- **LATVIA** Centre for Disease Prevention and Control of Latvia National (1997): 900 GPs/Specialists
- **MALTA** University of Malta Local (1989), Mater Dei Hospital +7 peripheral diabetes clinics
- **NORWAY** Noklus National (2006); 36 hospital outpatient departments + 696 Gps <https://www.noklus.no/norsk-diabetesregister-for-voksne/>
- **POLAND** Medical University of Silesia Regional (Upper Silesia, 1989): 1 Pediatric Diabetes Clinic ROMANIA Telemedica Consulting Local (2004), 3 Hospital clinics
- **SLOVENIA** University of Ljubljana National cohort of pediatric population with Type 1 diabetes (1970); Single local adult clinic for all types of diabetes (1982).
- **SWEDEN** National Diabetes Register National (1996) www.ndr.nu UK –
- **ENGLAND** University of Surrey National (RCGP, 1987): 1858 GPs <https://orchid.phc.ox.ac.uk/index.php/rcgp-rsc/> UK –
- **SCOTLAND** University of Dundee National (SCI-DC, 2002): 40 hospital clinics, 950 GP surgeries <https://www.sci-diabetes.scot.nhs.uk/><https://mydiabetesmyway.scot.nhs.uk/>

IDF 2025 WORLD CONGRESS

Bangkok, April 7th-10th 2025

*SHAPE THE FUTURE
Of DIABETES*

