Measuring the global diabetes targets in the WHO European Region

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Background



9 global NCD targets to be attained by 2025: the 100-week challenge





A 25% relative reduction in risk of premature mortality from cardiovascular disease, cancer, diabetes or chronic respiratory diseases

At least a **10%** relative reduction in the harmful use of alcohol

A 10% relative reduction in prevalence of insufficient physical activity

A 25% relative reduction in prevalence of raised blood pressure or contain the prevalence of raised blood pressure



















A 30% relative reduction in prevalence of current tobacco

Halt the rise in diabetes and obesity

A 30% relative reduction in mean population intake of salt/sodium

An 80% availability of the affordable basic technologies and essential medicines, incl. generics, required to treat NCDs

At least 50% of eligible people receive drug therapy and counselling to prevent heart attacks and strokes

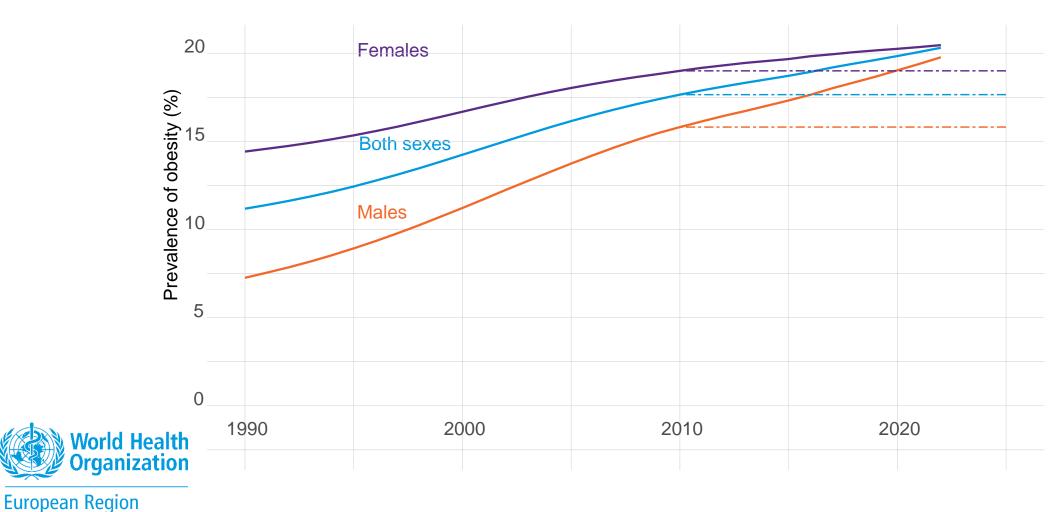
RACE to the finish: Achieving the SDGs by 2030





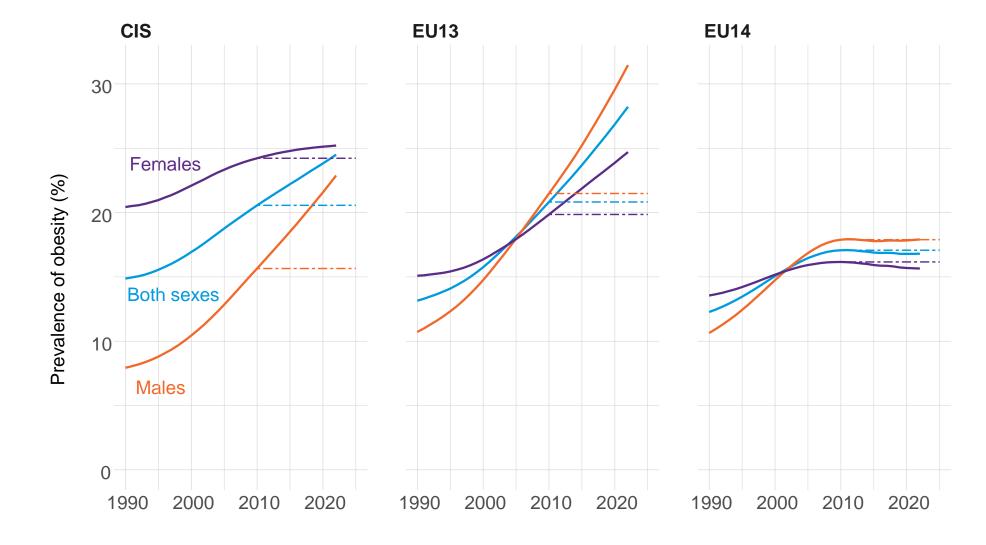
New obesity estimates are available Obesity is increasing, but a slow down after 2010 is observable

WHO European Region





Especially in the EU14 country group Two countries seem to be able to halt the rise in obesity







The Global Diabetes Compact

what you need to know



Five 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
- 100% of people with type 1 diabetes have access to affordable insulin and blood glucose selfmonitoring

SEVENTY-FOURTH WORLD HEALTH ASSEMBLY

WHA74.4

Agenda item 13.2

31 May 2021

Reducing the burden of noncommunicable diseases through strengthening prevention and control of diabetes

The Seventy-fourth World Health Assembly,

Having considered the consolidated report by the Director-General;

Recalling WHO's global action plan for the prevention and control of noncommunicable diseases 2013–2030 and the following five voluntary global diabetes-related targets for 2025: a 25% relative reduction in the overall mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases; halt the rise in diabetes and obesity; at least 50% of eligible people receive medicinal treatment (including glycaemic control) and counselling to prevent heart attacks and strokes; an 80% availability of the affordable basic technologies and essential medicines, including generics, required to treat major noncommunicable diseases (including diabetes) in both public and private facilities; and a 30% relative reduction in prevalence of current tobacco use in persons aged 15+ years;

Recalling also the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-Communicable Diseases (United Nations General Assembly resolution 66/2 (2011), which recognizes the primary role and responsibility of Governments in responding to the challenge of noncommunicable diseases by developing adequate national multisectoral responses for their prevention and control;

Also recalling resolution WHA66.10 (2013) on the endorsement of WHO's global action plan for the prevention and control of noncommunicable diseases 2013–2020 and decision WHA72(11) (2019), which extended the global action plan until 2030;

Reaffirming the right of every human being, without distinction of any kind, to the enjoyment of the highest attainable standard of physical and mental health;

Recalling the United Nations General Assembly resolution 70/1 (2015), which adopted the 2030 Agenda for Sustainable Development and defined the Sustainable Development Goals, as well as the

WHA74.4: https://apps.who.int/gb/ebwha/pdf_files/WHA74/A74_R4-en.pdf Lancet Publication: https://pubmed.ncbi.nlm.nih.gov/36931289/

Measuring progress against the global diabetes targets



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.

Summary prevalence of core metrics for diabetes mellitus (DM) by region of the world (median)

Background paper for the WHO Executive Board

Region	Prevalence	Diagnosed / Total DM	HbA1c <8% / Diagnosed DM	BP 140/90 / Diagnosed DM	Statin / Diagnosed DM
All regions	8.3	57.1	68.2	52.6	6.2
East Asia & Pacific	10.9	46.9	60.7	54.7	3.1
Europe & Central Asia	8.0	63.7	70.5	33.3	7.7
Latin America & Caribbean	9.4	63.3	68.2	65.4	11.0
Middle East & North Africa	10.2	59.3	67.3	50.8	12.9
North America	11.7	74.1	75.4	70.4	56.3
South Asia	8.1	45.0	80.2	52.7	1.7
Sub-Saharan Africa	4.2	40.3	69.3	47.1	3.4



Gregg et al (2021) https://www.who.int/publications/m/item/improving-health-outcomes-of-people-with-diabetes-mellitus

IDF estimates for Europe 2021: Proportion of people with undiagnosed diabetes 35.7%

Two follow-up actions to the Diabetes Summit to support the achievement of the global diabetes targets in Europe

- 1. Get a more robust assessment of performance against the global diabetes targets across the WHO European region.
 - The initiative contributes to achievement of wider NCD targets. It will help to identify gaps and support targeted action to improve outcomes for people living with diabetes across the region.
 - The initiative will involve:
 - Collaboration with technical experts to determine how the targets can be measured.
 - Creating a summary brief to share learning across the region on how targets can be measured using varied case-studies from Member States.
 - Finally, an assessment of progress against the targets at WHO European level.
- 2. Explore further evidence-based policy options for improving detection/diagnosis of diabetes, in a way that also improves health outcomes



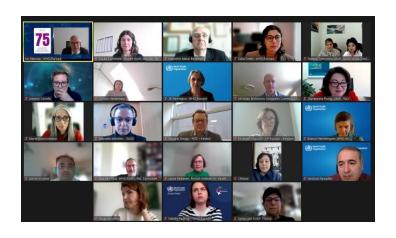
Regional initiative to better assess progress against the global diabetes targets



Measuring the targets in WHO European Region

- **April:** Collaboration with technical experts via an online meeting to determine how the targets can be measured.
- **April onwards:** Engagement with Ministries of Health (MOH) for formal nominations for the initiative.
- April to September: Held a series of meetings with MOH nominated representatives of Member States to introduce the initiative and support self-measurement.
- September-October: Meetings with EASD, EuDF and EU Joint Actions JACARDI & Prevent-NCD to discuss sources and common approaches
- November: Launch of technical products





Measuring the global diabetes targets: Germany

Target	Can we currently measure this?	Data source(s) and/or approach	Comments	
80% of people with diabetes are diagnosed	yes	Indicator "Prevalence of known and unknown diabetes" used for the national diabetes surveillance (www.diabsurv.rki.de/EN)	Data are based on national health examination surveys; no results available for the overall German population from other data sources (e.g. routine data) due to data protection National health examination surveys: last conducted in 1998 and 2010	
80% of people with diagnosed diabetes have good control of glycaemia	yes	Indicator "Graded HbA1c target" <7.0% to <8.0% depending on age and comorbidity (indicator group "Quality of type 2 diabetes care") used for the national diabetes surveillance (www.diabsur.rki.de/FN) Secondary definition: HbA1c <8.0%		
80% of people with diagnosed diabetes have good control of blood pressure	yes	Indicator "Blood pressure target" <140/<80 mmHg (Indicator group "Quality of type 2 diabetes care") used for the national diabetes surveillance (www.diabsur.rki.de/FN) Secondary definition: blood pressure <140/<90 mmHg		
60% of people with diabetes of 40 years or older receive statins	yes	Indicator "Statin use" (indicator group "Quality of type 2 diabetes care") used for the national diabetes surveillance (www.diabsurv.rki.de/EN)	cancelled in 2020 due to pandemic planned for 2026	
100% of people with type 1 diabetes have access to affordable insulin and blood glucose self-monitoring	no			

Measuring the global diabetes targets: Finland

Target	Can we currently measure this?	Preliminary estimate [if available]?	Data source(s) and/or approach	Comments
80% of people with diabetes are diagnosed	Yes	Men 96,7% Women 97,1%	Healthy Finland Survey 2022-2023 Diabetes (thl.fi)	Health survey for random sample of 65986 Finns and wider health examination for 10000 of them
80% of people with diagnosed diabetes have good control of glycaemia	Yes	HbA1c ≤ 53mmol/mol Type 1 30 % Type 2 75%	Finnish diabetes registry Diabetesrekisteri (thl.fi Patient Data Repository of Kanta services	Covers all patients (420333) 94% of type 1 and 87% of type 2 patients have HbA1c taken within 24 months available
80% of people with diagnosed diabetes have good control of blood pressure	Yes	45% of women 48% of men	Healthy Finland Survey 2022-2023 <u>Diabetes (thl.fi)</u>	Data available currently from 20% of patients in the Finnish diabetes registry but will get better while EMR software updates
60% of people with diabetes of 40 years or older receive statins	Yes	Type 1 74 % Type 2 72 %	Finnish diabetes registry <u>Diabetesrekisteri (thl.fi</u> Patient Data Repository of Kanta services	Purchase of electronic medical prescription within 12 months
100% of people with type 1 diabetes have access to affordable insulin and blood glucose self-monitoring	Assumed	100%	Patient Data Repository of Kanta services and Benefit register of the Social Insurance Institution of Finland	100% reimbursement for insulin and medical devices



Measuring the global diabetes targets: Finland

Strengths of our approach to measure the targets:

- Data is collected automatically from 420 300 patients
- Data covers public and private as well as primary and special health care data from whole Finland
- Data is very comprehensive and represents whole Finland.
- HbA1c and LDL value from last 24 months is available for 87-94% of patients with diabetes
- Data of medication usage covers 100% of patients

Limitations of our approach to measure the targets:

- Blood pressure values can't be found from patient data repository of Kanta services although structured data is recorded in health care.
 Problem is probably solved when EMR system reformation is followed through in all counties in Finland
- So far, there is no nationwide data available from medical devices used for care of diabetes (sensors and insulin pumps)

Other relevant considerations for measuring the targets in our context:

- Data collected to the Finnish diabetes registry starting from 2018
- Finnish Diabetes registry reports are new and still under development
- Reports encourage for peer-to-peer-development of diabetes care



Upcoming WHO products in November 2024

From WHO Global

- Global Diabetes Monitoring Framework
- WHO estimates for diabetes prevalence

From WHO Europe

- First set of country case studies on measuring the global diabetes targets
- A summary brief to share learning across the region on how targets can be measured – and used to drive improvement

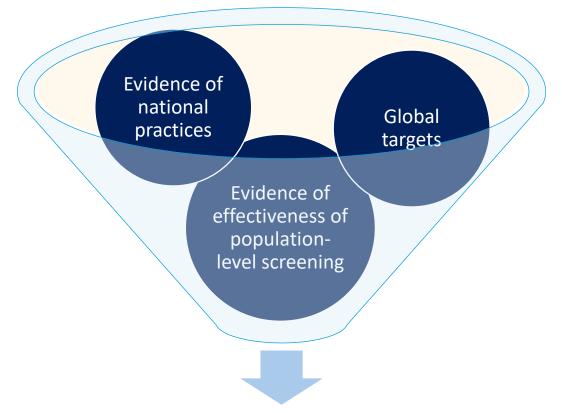




Initiative to explore further evidence-based policy options for improving detection/diagnosis of diabetes



What can enable progress towards the global diabetes targets?





- (1) meet the target of diagnosing 80% of cases and
 - (2) improve health outcomes?

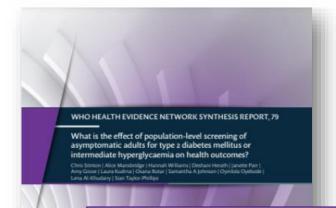


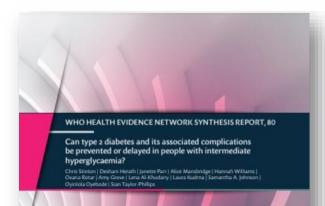
The evidence on the effects of population-level screening

What is the effect of population-level screening of asymptomatic adults for T2DM or intermediate hyperglycaemia on health outcomes?

Can T2DM and its associated complications be prevented or delayed in people with intermediate hyperglycaemia?

What is the effectiveness of systematic population-level screening programmes for reducing the burden of CVD? 2nd edition







Population-level screening likely aids in detection, but evidence shows it doesn't necessarily improve health outcomes.

How can we bridge the gap from detection to better outcomes —minimizing harm and enhancing benefits?

European Region

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Research questions

What approaches can be used to increase detection diabetes, and in such a way that also enables treatment uptake and improvements in health outcomes among diagnosed individuals?

Approaches to detection

1. Which (theoretical or actual) methods can be used to increase detection of people living with diabetes?

What is the evidence of their effects on:

2. Increasing detection?

3. Managing the disease and improving health outcomes?

Country practices

4. What approaches are countries taking to increase diabetes detection?

- 5. What are countries' capacities to manage more people needing treatment?
- 6. What can be learned from real-life examples?



Outputs

Report:

approaches to increasing detection of people living with diabetes

 the evidence regarding effectiveness in increasing detection, managing the disease and improving health outcomes.



Case studies analyzing real-life applications of various approaches to increasing detection of people with diabetes





Policy brief:

What approaches can be used to increase detection of diabetes in such a way that also enables treatment uptake and good control of glycaemia and blood pressure among diagnosed individuals?



Thank you

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