

IDF Europe COVID-19 Survey for People Living with Diabetes

Presentation of results
IDF Europe Webinar, 22 April 2021



A survey of 3,480 people living with diabetes across Europe

22 languages

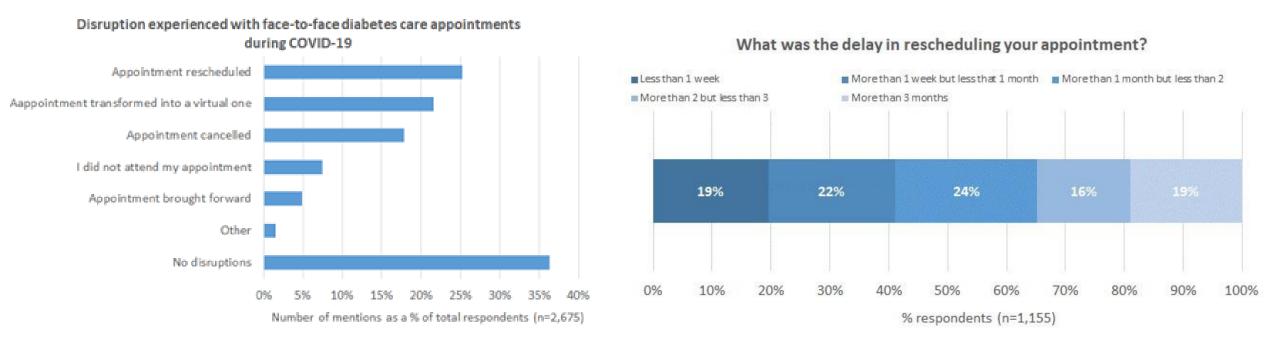
75 questions on:

- COVID-19 testing and treatment
- Diabetes management
- Access to medication, supplies, technologies and care

Conducted between August and October 2020 – first wave Disseminated through IDF Europe network of member associations, plus social media platforms + other organisations



Healthcare systems adapted quickly to the pandemic but diabetes care was disrupted across all countries

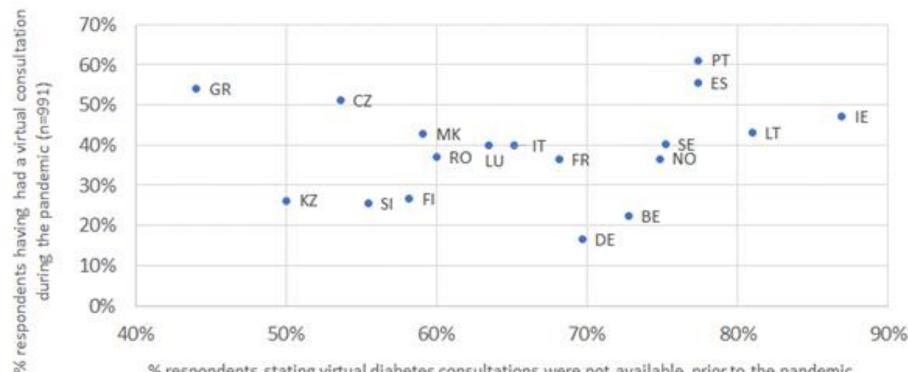


- More than one third of respondents did not experience any disruptions
- About a quarter saw their appointments being rescheduled and more than one in five had a virtual consultation
- Marked differences in the time gap between appointments



There was a rapid shift towards more digitalisation and the virtualisation of care

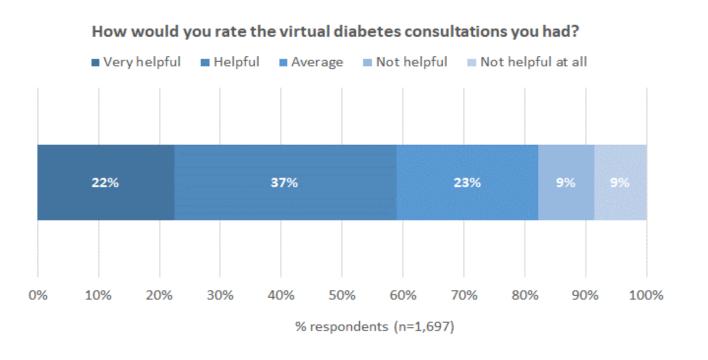
Shift to virtual - Proportion of respondents with access to virtual consultations before COVID-19 compared with having virtual consultations during COVID-19

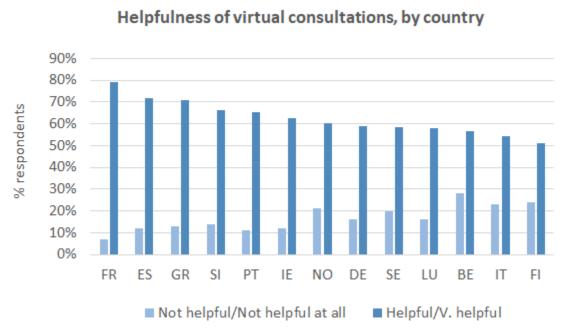


 One third of respondents across Europe had virtual diabetes-related consultations

% respondents stating virtual diabetes consultations were not available prior to the pandemic (n=1,715)

Remote care was generally well-received

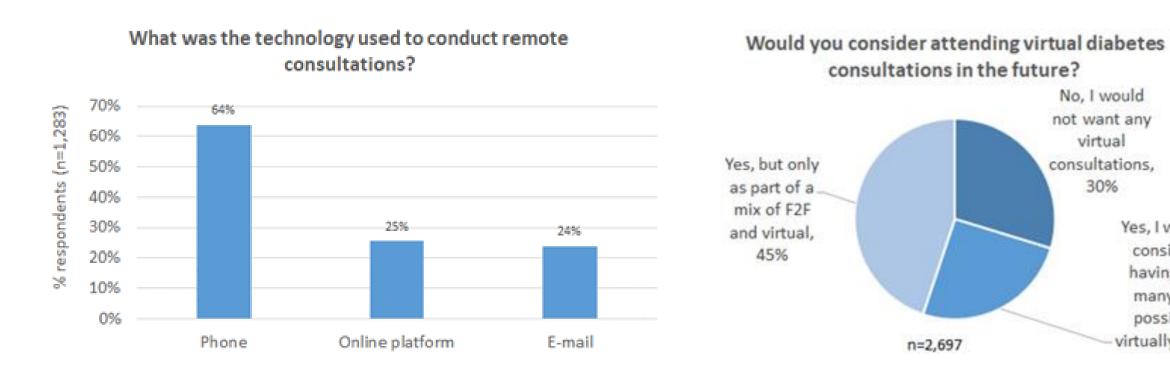




• France, Spain and Greece were amongst the most appreciative of this mode of consultation



Low-tech solutions remained prevalent during the crisis, reflecting current digitalisation/virtualisation levels



virtual

30%

Yes, I would

consider

having as

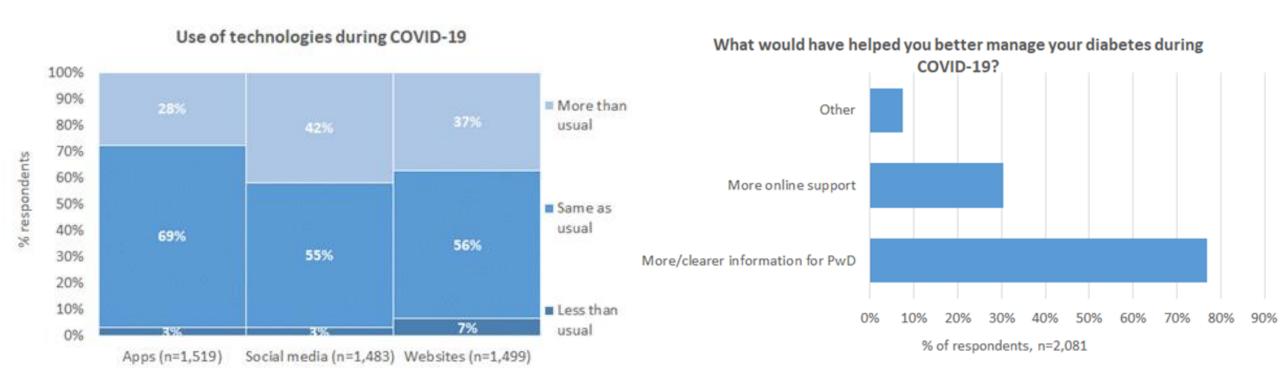
many as

possible virtually, 25%

- Telephone consultations were by far the single most common form of communication during the pandemic
- About a quarter of respondents showed great enthusiasm for virtual consultations



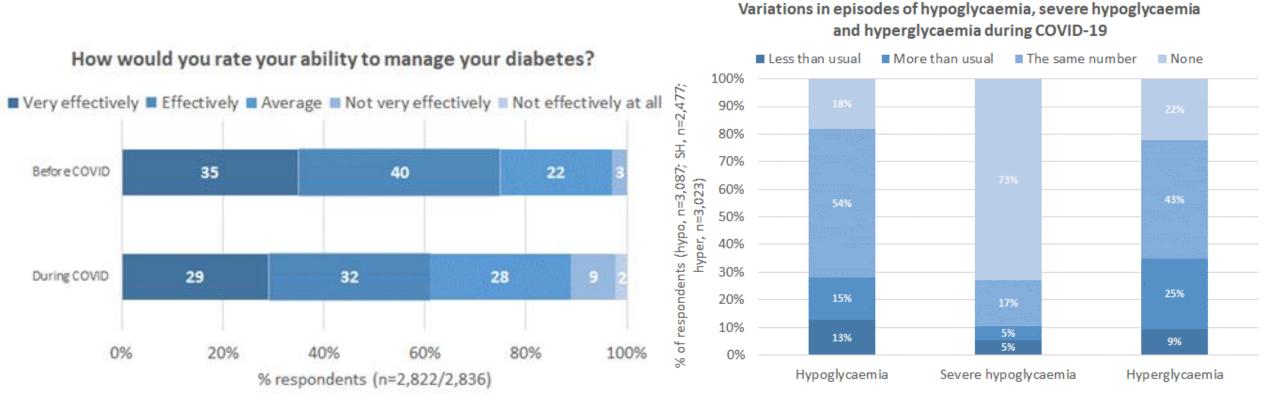
There was a sharp rise in use of social media during the pandemic, perhaps linked to gaps in guidance



- About a quarter of respondents did not use any form of technology to support their care
- Of those that did, there was a sharp increase in use of all formats
- Clearer information was singled out as needed during the pandemic



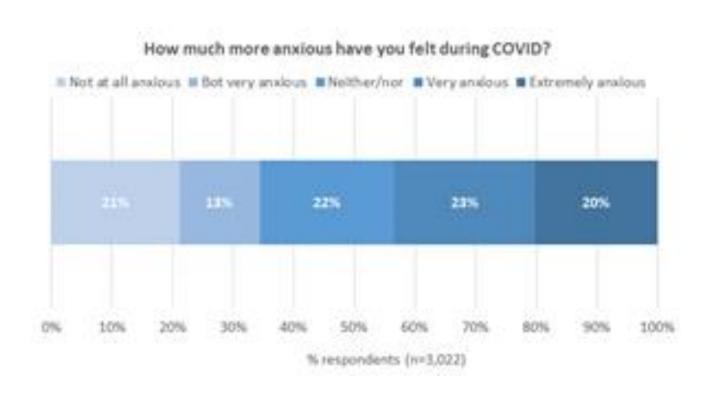
People's ability to manage their diabetes was adversely affected across most countries

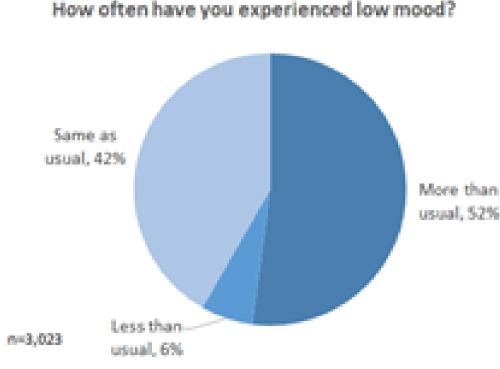


• 31% of respondents gained weight; 57% were less active; 30% reported higher variability in blood glucose levels

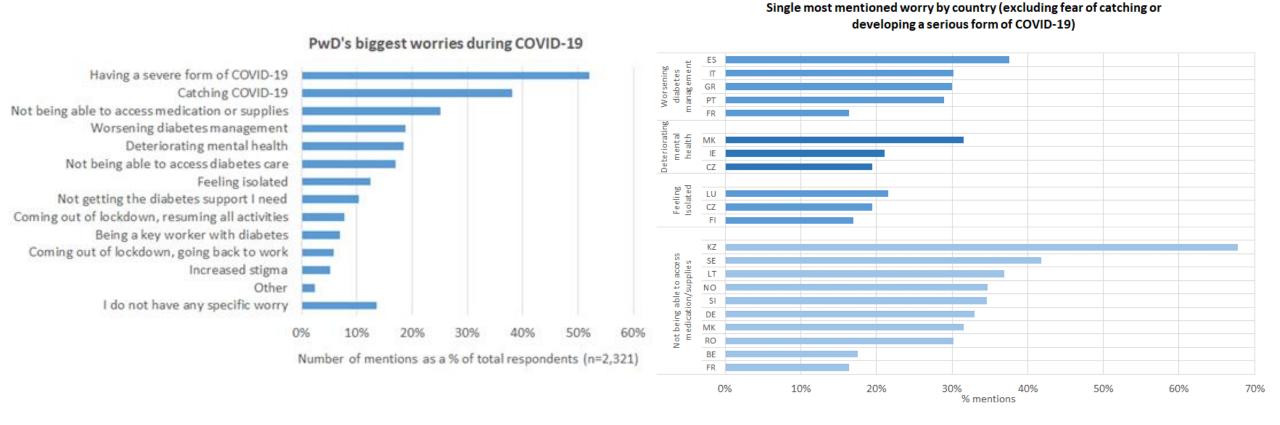


The pandemic and its consequences took a strong toll on the mental health of people living with diabetes

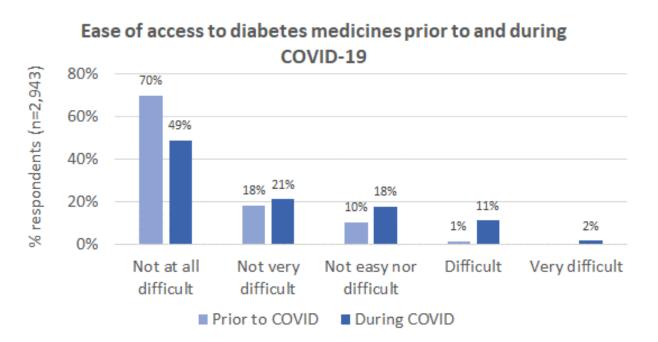


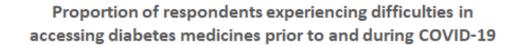


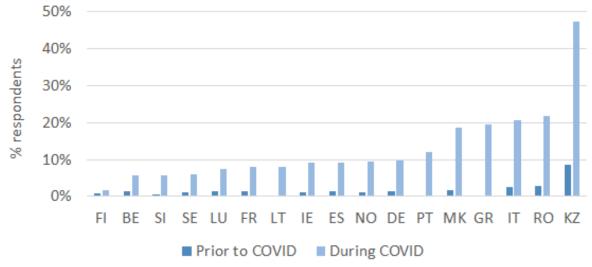
Catching COVID-19 and developing a severe form of the disease were the main worries



The ability of PwD to access medicines varied widely across Europe

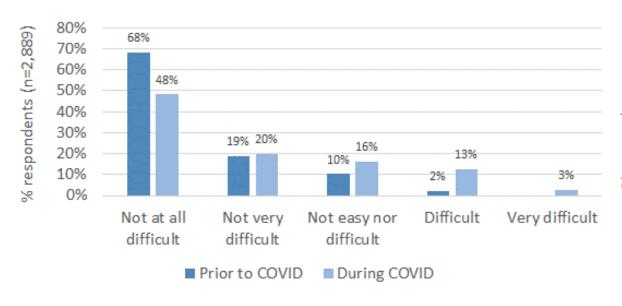




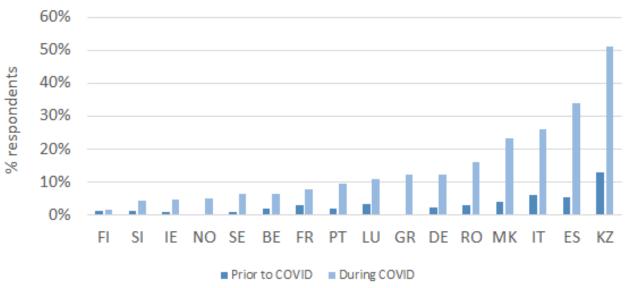


The same was true for supplies...

Ease of access to diabetes supplies prior to and during COVID-19

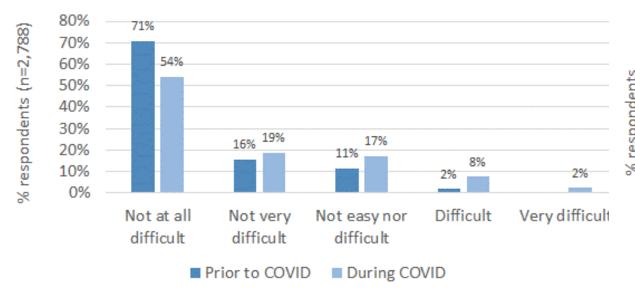


Proportion of respondents experiencing difficulties in accessing diabetes supplies prior to and during COVID-19

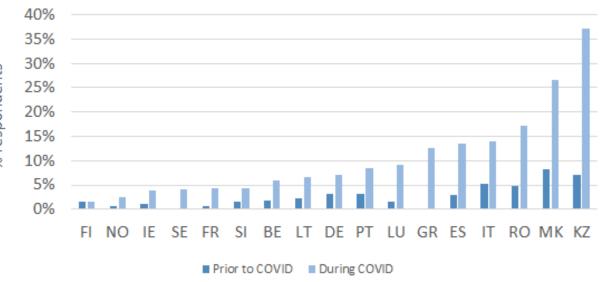


... and technologies

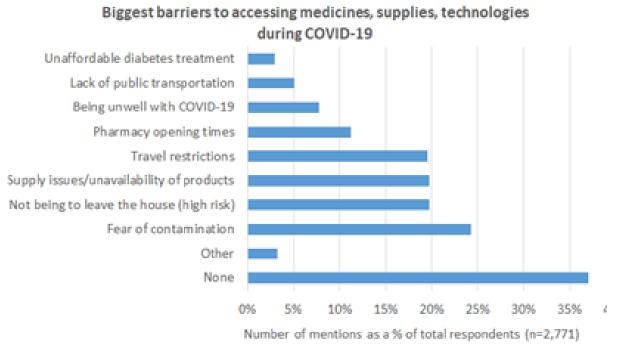
Ease of access to diabetes equipment prior to and during COVID-19

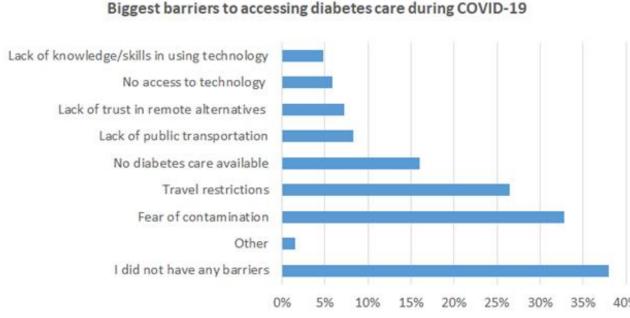


Proportion of respondents experiencing difficulties in accessing diabetes equipment prior to and during COVID-19



Fear of contamination was the single most common barrier to accessing medicines and care





Number of mentions as a % of total respondents (n=2,388)



Lessons from COVID-19 for more resilient health systems and improved quality of life and health outcomes for PwD

1. Reducing the diabetes burden through prevention of T2D and diabetes-related complications

The impact of diabetes

- 59 million PwD (expected to rise to 66 million by 2030)
- Euro148bn in diabetesrelated expenditure – 75% of costs linked to complications
- Key risk factor for other NCDs

Reducing the burden

- •Investment strategies focused on **prevention** rather than management:
 - Raising diabetes awareness
 - Tackling stigma and discrimination
 - Creating health-enabling environments and addressing the socio-economic determinants of health
 - Early action

Improving QoL and health systems

- Improvement in QoL
- Reduction in the economic burden of the condition on healthcare systems
- Freeing up resources for increased investment in strengthening of health systems and preventative measures
- Population better prepared for future health threats



2. Accelerating the pace of innovation and digitalisation

Opportunities & feasibility (1/3 virtual consultations)

Moving forward, taking account of the preferences and needs of PwD



Investment for further digitalisation and building robust data networks

Leveraging initiatives such as EHDS, including PREMs/PROMs

Tackling health, data and digital literacy and the digital divide



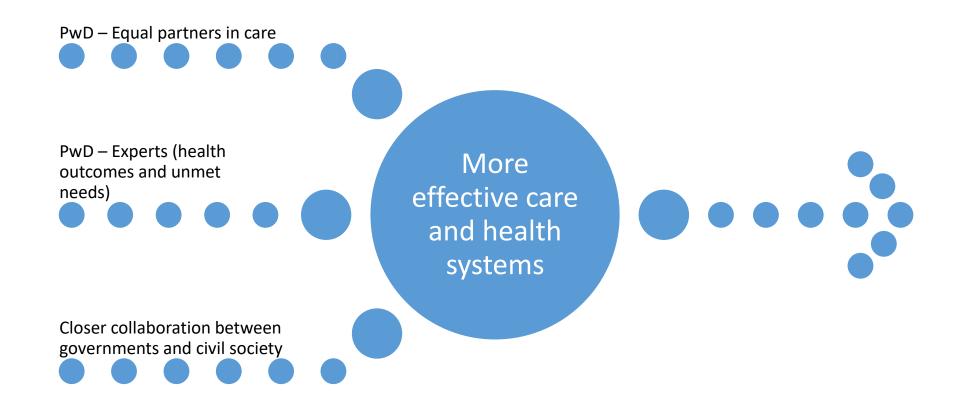
More effective prevention programmes

Development of more evidence-based and personalised care

Better preparation and response to future health crisis



3. Engaging with, and supporting European citizens, diabetes associations and civil society





4. Reducing inequalities across and within Europe

Improving adequate and affordable access to care including medicines, technologies, supplies

Empowering and educating PwD

Tackling the social determinants of health & promoting equity-sensitive healthcare systems





