

Position Paper on the SANT Subcommittee Own-Initiative Report on Non-Communicable Diseases (NCDs)

August 2023

Key messages

- Numerous policies and initiatives at the EU level in recent years have helped shine a light on the importance of NCD prevention. However, more ambitious actions are needed to reverse the growing number of people living with NCDs, specifically diabetes, and improve people's quality of life and well-being.
- Addressing NCDs requires a holistic and integrated approach that considers the
 interconnections between different conditions. However, it is also crucial to consider the
 distinctive characteristics of different conditions and develop specific management
 approaches tailored to their requirements.
- Prevention is essential to combat the rise of NCDs in Europe. Raising awareness, fostering
 enabling environments and providing targeted screening programmes, all work together
 to catalyse effective disease management that results in improved health and ease
 burdens on health systems.
- Integrated and patient-centred care models promote comprehensive, coordinated and value-based care, ensuring the well-being of people living with NCDs.
- It is essential to meaningfully integrate patients throughout the entire policymaking process at the EU and Member State levels to ensure that healthcare policies and services are tailored to the individuals who use and require them.

Background

On 14 February 2023, the European Parliament (EP) took a significant step towards addressing public health concerns in the European Union (EU) by approving the establishment of the Subcommittee on Public Health (SANT). One of the first actions undertaken by SANT was the initiation of an Own-Initiative (INI) Report on NCDs, drafted by MEP Erik Poulsen (Renew Europe, Denmark).

IDF Europe fully supports the continued interest and engagement of MEPs in the overall status and specificities of the prevention, management and treatment of NCDs. This Position Paper aims at providing IDF Europe's input to the INI Report currently in the making, from the perspective of people living with diabetes (PwD).

One of the four major types of NCDs, diabetes poses lifelong challenges and progresses over time, imposing a considerable burden not only on PwD but on our healthcare systems and society as a whole. More than 32 million people live with diabetes in the EU, amounting to one in ten adults. The impact of this life-long condition on individual health and well-being is often underestimated, not to mention the substantial economic burden on health budgets – estimated at about 9% of EU health expenditure in 2019¹.

¹ MEPs Mobilising for Diabetes Blueprint for Action on Diabetes in the European Union by 2030, https://www.mepinterestgroupdiabetes.eu/wp-content/uploads/2021/03/MMD-BLUEPRINT-FOR-ACTION-ON-DIABETES.pdf



The WHO's 2019 Classification of Diabetes Mellitus² outlines more than 10 different types of diabetes, with Type 1 and Type 2 being the most prevalent. These account for around 90-95% of all diabetes cases. More information on diabetes, its various types, and its impact on individuals, health systems and society can be found in Annex 1.

IDF Europe's calls to SANT Subcommittee members

IDF Europe acknowledges the efforts of the European Commission to support Member States in reducing the burden of NCDs with the launch of the <u>"Healthier Together – EU non-communicable diseases initiative"</u> in December 2021; notwithstanding, more ambitious actions at the EU level are needed to reverse the growing number of NCDs and improve people's quality of life and well-being.

IDF Europe supports the necessity of a unified approach to the prevention of NCDs and an integrated disease management strategy, whenever applicable. The complexity of caring for numerous chronic diseases requires a holistic perspective to understand the clinical interconnections among NCDs, as demonstrated in <u>Annex 2</u>. Such an approach ensures that these interconnections are considered throughout the entirety of the clinical pathway.

However, it is also crucial to consider the distinctive characteristics of different conditions and develop specific management approaches tailored to their requirements. This was notably underlined in the Resolution on prevention, management, and improved care of diabetes in the EU on the occasion of World Diabetes Day, adopted by the EP on November 18, 2022, which IDF Europe applauded.

IDF Europe calls on MEPs from the SANT subcommittee to consider the following aspects when working on the INI Report on NCDs. We stand ready to contribute further to the development and adoption of an impactful Report by providing additional data and information.

Investing in prevention, screening and early detection

Prevention is a cornerstone of action on NCDs, including diabetes. Creating enabling environments that address modifiable risk factors and socio-economic determinants of health is crucial. By implementing fiscal measures, environmental legislation, food system reforms and advertising regulations, we can reduce the risk of developing diabetes and its complications.

Furthermore, **targeted screening** for all types of diabetes and diabetes-related complications, coupled with awareness-raising and early-detection approaches, can play a significant role in diagnosing people with NCDs and reducing their burden. In Europe today, one in three people living with diabetes, are currently undiagnosed, placing them at a high risk of developing costly and life-altering complications. **Strengthening primary care and optimising data collection and analysis** is vital for effective population health management and prompt action.

Effective prevention and management of diabetes have an array of positive, knock-on effects. In addition to, first and foremost, helping citizens maintain a healthy and productive lifestyle by lowering the risk of developing other NCDs and complications, it also **eases the burden on healthcare systems** and ultimately shores up their resilience.

² Classification of diabetes mellitus. Geneva: World Health Organization; 2019. Licence: CC BY-NC-SA 3.0 IGO.



Improving healthcare & disease management

To a greater extent than other NCDs, diabetes prevention, management, and care touch on all aspects of a national health system, making it a **marker of quality, effectiveness, performance and resilience**. Effective prevention and management will reduce user reliance on the healthcare system, lower costs, reduce hospital admissions and improve resource management, to name a few, all the while improving citizens' quality of life and reducing inequalities.

As mentioned above, addressing NCDs requires a holistic and integrated approach that considers the interconnections between different conditions. Diabetes, cardiovascular diseases, renal diseases, obesity, and mental health are intricately linked, requiring **comprehensive strategies with disease-specific targets to address them**.

Diabetes is often the **root cause of many other NCDs** such as cardiovascular disease, chronic kidney disease, neuropathy, and retinopathy (as demonstrated in Annex 2). Uncontrolled diabetes can lead to damage in nearly every organ system in the body, with the extent of damage closely tied to the duration of, lack of, or poor glycaemic control. **Successfully managing diabetes can thus significantly delay or prevent many diabetes-related complications and associated NCDs**. This demonstrates the critical importance of disease-specific prevention and treatment approaches for diabetes itself.

Optimal glycaemic control, management of risk factors, and access to interventions and innovative technologies are pivotal for preventing diabetes-related complications and improving disease management. As the central driver of so many other NCDs, optimal diabetes care must be a top priority.

Moreover, national models of care should be extensively reviewed and overhauled with a focus on **prevention-oriented primary care systems** through the <u>Recovery and Resilience Facility</u>, guided by the European Semester process, to reduce inequalities across Member States, and improve the resilience of health systems.

Integrated and patient-centred care models, supported by patient registries, electronic health records, and patient-reported outcome measures promote comprehensive, coordinated, and value-based care, ensuring the well-being of individuals with NCDs.

Empowering and engaging with people living with NCDs, including PwD

To achieve positive health outcomes, it is imperative to engage with patient organisations and people living with NCDs, including PwD. By embedding patient engagement into all EU activities and initiatives, fostering engagement at the Member States level and developing common outcome measures that matter most to people with chronic conditions, we can ensure that healthcare policies and services are tailored to their needs and preferences.

Additionally, empowering people with chronic conditions such as diabetes through **education**, **self-management support**, **and digital tools** enhances disease management and overall quality of life.



Increasing awareness, research and knowledge-sharing and fostering the adoption of innovation

IDF Europe is committed to raising awareness and facilitating research and knowledge sharing to advance the body of knowledge on diabetes and associated NCDs.

By adopting a holistic approach, investing in research, and facilitating knowledge sharing, we can develop effective strategies for addressing diabetes, as well as cardiovascular diseases, renal diseases, obesity and mental health, throughout the life cycle. This comprehensive approach to NCDs reflects the diversity of challenges ahead and seeks to foster innovation, drive progress and contribute to better health outcomes for individuals and society.

IDF Europe urges MEPs to consider these strategies and recommendations in the INI Report on NCDs.

By implementing comprehensive national diabetes plans, empowering individuals with diabetes, promoting integrated care models, reducing inequalities, and fostering research and knowledge sharing, we can make significant progress in the fight against diabetes and other NCDs. These actions will not only improve the lives of individuals with diabetes but also benefit all people at risk of NCDs, enhance healthcare system resilience, and contribute to a healthier and more equitable society.

About IDF Europe

IDF Europe is the European chapter of the International Diabetes Federation (IDF). We are an umbrella organization representing 73 national diabetes organisations in 46 countries across Europe. We are a diverse and inclusive multicultural network of national diabetes associations, representing both PwD and healthcare professionals. More information can be found on our <u>website</u>.

Annex 1: Background on Diabetes

What is diabetes?

Diabetes is a group of metabolic disorders characterised by elevated levels of blood glucose. Diabetes is a highly complex condition, whose onset involves different mechanisms, facilitated by risk factors. The World Health Organization recognizes more than 10 forms of the disease³.

Type 2 diabetes (T2D) is the most common form, which develops due to a combination of unmodifiable, genetic, physiological, environmental, and modifiable, behavioural risk factors. In Type 2 diabetes, the body may not produce enough insulin and/or not be able to use the insulin it produces effectively. As a result, glucose cannot get into the cells, causing glucose levels in the blood to rise, potentially creating life-altering complications. Blood glucose levels in people living with T2D can be managed in a variety of ways, with some oral medications sometimes associated with lifestyle programmes, and for some people, through administering insulin.

³ Classification of diabetes mellitus. Geneva: World Health Organization; 2019



Type 1 diabetes (T1D) is an auto-immune disease, whereby the body destroys insulin-producing cells (β -cells) in the pancreas. Living without insulin is impossible, so a person living with Type 1 will receive insulin through injections (generally, in Europe, through insulin pens) or via an insulin pump.

Gestational diabetes (GDM) is a form of diabetes which develops during pregnancy. It is managed through a mix of diet, exercise, and as required, appropriate medication (insulin or oral medication). Once the mother has given birth, diabetes disappears, but the mother and baby are at a higher risk of developing T2D later in life.

Many other, much rarer, forms of diabetes exist, of which the most frequent is monogenic diabetes.

What is the impact of diabetes?

Diabetes is a major health burden on individuals, health systems and society. Across Europe, more than **61 million people** live with diabetes (32 million in the EU), forecast to increase by 2030 to 67 million and 33 million, respectively; direct **European expenditure** on diabetes stood at **€147.9 billion** (**€104bn** in the EU) in 2021; and it is the **root cause of several other non-communicable diseases (NCDs).**

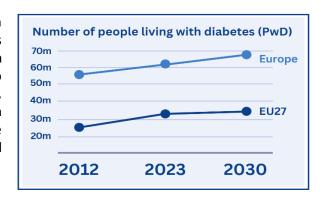


Figure 1: Diabetes prevalence4

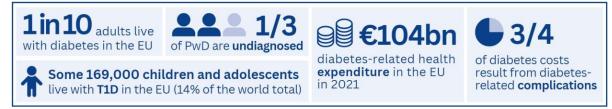


Figure 2: Diabetes prevalence; undiagnosed diabetes; and diabetes related expenditure⁵

Despite significant advances in treatment options, diabetes management remains hard, relentless and all-consuming. PwD and/or their relatives/carers need to take care of their diabetes seven days a week, 24 hours a day, to prevent the development of life-altering diabetes-related complications. Despite strenuous management, many PwD do not meet their health outcome targets and many develop diabetes-related complications such as cardiovascular diseases (CVD), diabetes retinopathy and chronic kidney disease. Less visible and front-of-mind, but no less damaging, are mental health-related complications. Besides the mental stress of those potential long-term complications, the everyday routine of treating a life-long condition for a minimum of 20-30 and potentially, up to 80+years, can become overwhelming.

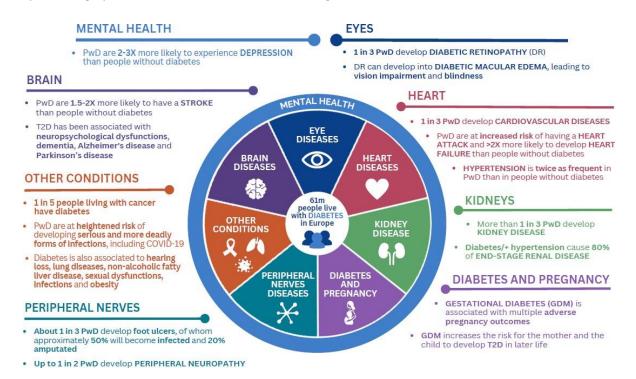
⁴ IDF Atlas – 10th edition, 2021, https://diabetesatlas.org/

⁵ IDF Atlas – 10th edition, 2021, https://diabetesatlas.org/



Annex 2: Complications and Comorbidities of Diabetes

Diabetes can affect every organ system in the human body. The extent of potential organ damage depends largely on its duration and successful management.



Sources:

Mental health:

1. The association between Diabetes mellitus and Depression

Brain:

- 2. <u>Prevalence of diabetes and its effects on stroke outcomes: A meta-analysis and literature review</u>
- 3. The link between type 2 diabetes and dementia: from biomarkers to treatment
- 4. Regional Brain Gray Matter Changes in Patients with Type 2 Diabetes Mellitus
- 5. The Impact of Type 2 Diabetes in Parkinson's Disease

Eyes:

- 6. <u>Screening for diabetic retinopathy: new perspectives and challenges</u>
- 7. <u>Diabetic retinopathy and diabetic macular oedema pathways</u> and management: UK Consensus Working Group
- 8. <u>Diabetic macular edema</u>

Heart:

- 9. <u>Prevalence of cardiovascular disease in type 2 diabetes: a systematic literature review of scientific evidence from across the world in 2007–2017</u>
- 10. Heart Failure in Type 2 Diabetes Mellitus
- 11. Heart Failure in Patients with Diabetes Mellitus
- 12. <u>Diabetes, Hypertension, and Cardiovascular Disease: Clinical Insights and Vascular Mechanisms</u>

Kidneys:

- 13. <u>Diabetic Kidney Disease Challenges, Progress, and Possibilities</u>
- 14. The Global Epidemiology of Diabetes and Kidney Disease
- 15. <u>IDF Europe: Factsheet on Diabetes and Chronic Kidney Disease</u>

Peripheral nerves:

- 16. Epidemiology of Peripheral Neuropathy and Lower Extremity Disease in Diabetes
- 17. <u>Global Disability Burdens of Diabetes-Related Lower-Extremity Complications in 1990 and 2016</u>

Diabetes and pregnancy:

- 18. <u>Gestational Diabetes Mellitus in Europe: A Systematic Review and Meta-Analysis of Prevalence Studies</u>
- 19. Gestational Diabetes Mellitus

Other conditions:

- 20. Diabetes Mellitus in People with Cancer
- 21. <u>Diabetes UK: Diabetes and Cancer</u>
- 22. Latest insights into the risk of cancer in diabetes
- 23. <u>Diabetes and Cancer</u>
- 24. <u>Diabetes in COVID-19: Prevalence, pathophysiology, prognosis and practical considerations</u>
- 25. Diabetes mellitus and hearing loss: A review
- 26. <u>Increased risk of respiratory diseases in adults with Type 1 and Type 2 diabetes</u>
- 27. <u>Type 2 diabetes is associated with an increased prevalence of respiratory symptoms as compared to the general population</u>
- 28. Non-alcoholic fatty liver disease and diabetes
- 29. <u>Diabetes and sexual dysfunction: current perspectives</u>
- 30. The association between diabetes mellitus and incident infections: a systematic review and meta-analysis of observational studies
- 31. Mechanism linking diabetes mellitus and obesity