Diabetes in Europe: a future within a framework?



Dear FEND member,

FEND believes that a pan-European response is urgently required to manage and contain the diabetes epidemic which adversely affects the lives of citizens in

the 25 member states of the European Union (EU). We are particularly concerned by the situation in the 10 new member states of the EU; this requires urgent attention in order to close the gap between the EU 'East' and 'West' in highlighting awareness, early diagnosis, therapeutic interventions and equity of service provision. Currently, 60 million Europeans – 7% of the population – suffer from this chronic and often debilitating disease. The challenge is enormous, but we are convinced that Europe can resolve this crisis and serve as a model for the rest of the world where 194 million people suffer from diabetes.

It is this conviction that has led us to include this editorial letter in the launch issue of European Diabetes Nursing - the official journal of FEND. Amongst its aims, the journal will set out to promote both a greater awareness of the increasing prevalence of diabetes and the significant contribution which nursing plays in the prevention, early diagnosis and management of this multi-system disease. We intend to maintain the momentum begun under the Irish EU Presidency (January–June 2004), which favoured a pan-European collaboration and co-ordination to ensure access to the highest standards of treatment across the enlarged EU. FEND was established in 1996 by specialist nurses from Europe who recognised the need for European collaboration and the influence of non-governmental organisations vis à vis diabetes at national and EU levels.

FEND applauds the initial impetus provided by the Irish Presidency in co-operation with the International Diabetes Federation for a European approach. A highlevel workshop in Dublin (April 2004) opened by Ireland's Minister of Health, Micheál Martin, brought together senior officials of the EU with representatives from non-governmental diabetes organisations, including FEND. The need for a co-ordinated European approach was identified; in addition, participants also called on the European Commission to provide funding, to standardise data collection as the basis for all good programmes, and to promote prevention, screening and healthy lifestyles.

We hope our ongoing efforts with all diabetes

stakeholders in Europe will encourage future EU presidencies, and the UK Presidency in particular, to champion diabetes as a priority and request the EU Commission to develop a strategy and an associated EU recommendation on prevention, diagnosis and control.

We are encouraged to find that we have supporters at the European Commission. Both the EU Health Commissioner, David Byrne, and the Shadow Health Commissioner, Pavel Telicka, have expressed interest in an EU dimension to the diabetes epidemic. Commissioner Byrne recognised in a speech during the 2003 Diabetes Week that, 'We must get the message across to Europe's citizens that a healthy diet and regular exercise will help them avoid debilitating diseases such as diabetes.' And Mr Telicka stated during his confirmation hearings at the European Parliament that, 'The rapid spread of allergies, respiratory diseases and diabetes, and the increasing incidence of obesity are other key problems to be confronted.' Mr John Bowis, MEP, and former MEP, Mrs Mary Banotti, continue their public advocacy of diabetes at a political level within the European Parliament. We in FEND appreciate their support and commitment.

FEND believes that not only is a European dimension essential to dealing with the diabetes crisis, but that Europe needs an EU recommendation on early screening, prevention and control of diabetes. Recommendations are non-binding pieces of legislation which have the advantage of not only focusing member states' attention on identified EU priorities, but also allowing each member state to achieve the objective in the way that best suits its national health care system. Of equal importance, a recommendation provides a healthy amount of peer pressure for each member state to raise its standards to those of the best. FEND believes that Europe owes its citizens access to the best health care standards.

At a national level, the record is not encouraging – only nine of the 25 EU member states have established national diabetes plans or guidelines. Where they exist, they differ significantly, thus creating inequitable emphasis on prevention, diagnosis and control in Europe. This situation argues again in favour of a shared European response.

Diabetes is one of the greatest challenges facing European health care systems. The incidence of this disease is set for exponential growth – due in part to the increasing levels of obesity and sedentary lifestyles, especially among the young and our ageing populations. It can be a life-threatening condition which is extremely costly both in human and economic terms. In some EU member states, treatment of the complications of diabetes represents 10% of total health care budgets.

• People with diabetes are two to four times more likely to develop cardiovascular disease than people without diabetes. Cardiovascular disease is the number one cause of death in industrialised countries

• Diabetes is the most common cause of non-accidental amputation

• Diabetes is the leading cause of blindness and visual impairment in adults in developed countries

• Diabetes is a major contributing factor in the development of end-stage renal failure.

Against this background, while we welcome the European Commission's $\in 40$ million funding over the last four years of diabetes-related research, it is regret-table that this sum cannot meet the challenges of the task that lie ahead.

The World Health Organisation (WHO) confirms our concerns. This spring (2004), WHO forecasted that by 2025 the number of people with diabetes in the EU will have risen by 20%. In our recently enlarged Europe, the situation in the 10 new EU countries is alarming. Although the population of the 10 new states is only 75 million compared to the EU 15's 375 million, there are nearly as many people with diabetes – respectively 27.8 million and 32.2 million, meaning that their incidence rate is nearly triple that of the 15 EU countries.

The European Commission is in the process of transforming health policy into a central EU priority with a view to making Europe more relevant to its citizens. What better way to show its relevance than by identifying diabetes as a top priority and taking the necessary steps to forge a pan-European campaign to promote prevention, early diagnosis and healthy lifestyles in order to minimise complications. FEND believes that this is possible if we all work together.

FEND urges the EU Council and the EU Commission, in partnership with non-governmental diabetes organisations and national ministries of health, to collaborate and agree on a European strategy in the prevention, diagnosis, care and research in diabetes. We believe that a co-ordinated European effort can significantly improve the health of individuals with diabetes throughout aspiring and established EU member states.

Anne-Marie Felton

Chairman, Federation of European Nurses in Diabetes September 2004

[†]All information is derived from the International Diabetes Federation (IDF); http://www.idf.org/home/index.cfm?node=37 FEND website: www.FEND.org

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European Diabetes Nursing

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