

#WeWontRest



Every
6 seconds...

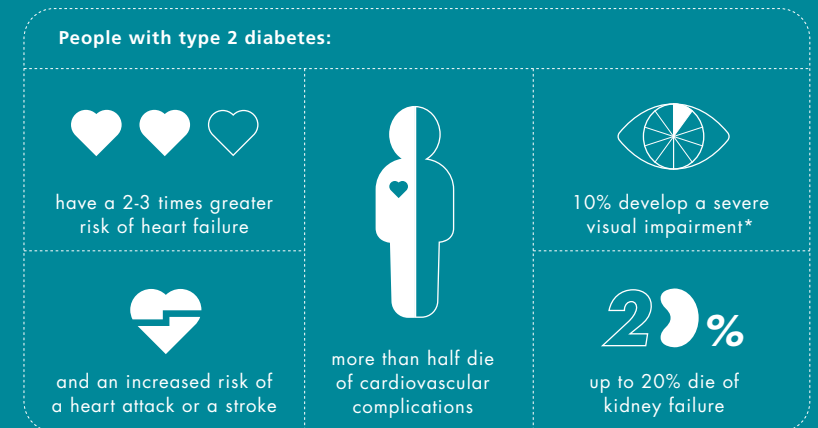
someone in Europe
dies of a **diabetes**
related condition

efpia*

Diabetes is one of the most serious and widespread health conditions in Europe.

One in ten Europeans have diabetes today.

A number that is projected to increase to 80 million by 2045. Diabetes shortens lifespan by up to 15 years and is associated with a higher risk of serious complications, which take a personal, social and economic toll, reducing quality of life and incurring heavy financial costs.



*people with type 1 and type 2 diabetes

Improving care for people with diabetes requires us to think differently.

To improve diabetes care in Europe, we should unlock the full potential of data, empower patients and rethink our health systems.

efpia*

Define, track, measure, improve: registries, health data and improving outcomes in diabetes

Measuring and comparing diabetes outcomes – and identifying the causes of variation – helps to highlight areas where better outcomes and efficiency gains can be achieved.

Establishing the infrastructure to collect and analyse health data scattered across the health system, as well as securing the political will to apply learnings from outcomes data, is crucial.



RECOMMENDATION

The European Commission should develop a policy framework promoting outcomes-based healthcare and actively encourage Member States to embrace outcomes-based diabetes care.

Alignment on what data to collect is essential to the analysis of health system performance and to inform decision making at EU and national level. This data should be used as part of the European Commission's State of Health in the EU and the European Semester processes to support a policy framework promoting an outcomes-based approach to the management of diabetes.

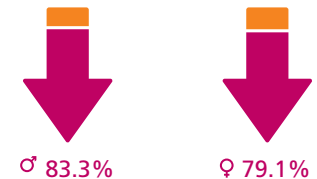
CASE STUDY

Denmark:

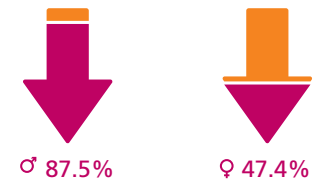
The Steno Diabetes Center in Copenhagen is using health data to deliver significant improvements. Between 2000 and 2011, incidence of all lower-extremity amputations has decreased by 87.5% among men and 47.4% among women with type 1 diabetes, and by 83.3% among men and 79.1% among women with type 2 diabetes. This has helped to preserve quality of life and avoid health and social care costs.

REDUCTION IN LOWER-EXTREMITY AMPUTATIONS

TYPE 2



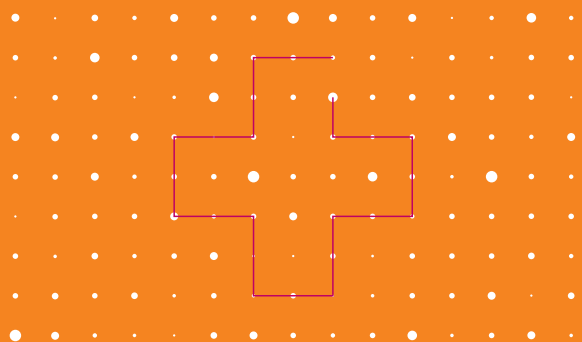
TYPE 1



Empowering people with diabetes: supporting self-management through digital technologies and innovative therapies

Digital tools and innovative therapies are game-changers in diabetes prevention, management and research.

New technologies are enabling a shift from traditional diabetes care to a new era where people with diabetes, healthcare professionals and researchers have access to and share data, which can inform decision-making and lead to better disease management.



RECOMMENDATION

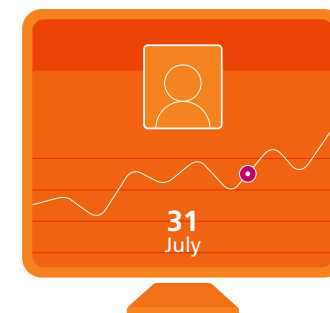
The European Commission, in collaboration with Member States, should promote clear and sustainable funding pathways for innovative treatments and digital health.

The uptake of proven interventions, including medicines, e-health and m-health solutions, that improve outcomes and implement the highest clinical standards should be encouraged. Experiences should be shared between Member States where innovative therapies and tools have been successfully integrated into health systems. Best practices on funding and reimbursement models for new technologies should be highlighted and shared.

CASE STUDY

Spain:

Diacare is a system for real-time care that helps people with diabetes self-manage their condition via personalised features. The project is supported by the regional political bodies, the pharmaceutical industry and scientific expert groups. People using Diacare get digital personal assistance with daily decisions, such as what to buy in the supermarket, and report on their physical and psychological well-being. This way overall well-being can be monitored, and therapeutic measures can be adapted quickly.



Rethinking health systems: integrated care and empowerment of primary care

Integrated care has the potential to improve continuity, drive patient empowerment and foster health system sustainability.

Primary care is a crucial component of an integrated health system. The empowerment of people with diabetes to self-manage their condition must be at the heart of a successful approach to organising integrated care.

Diabetes care should be organised in a flexible way that enables healthcare professionals to tailor care to the needs of people with diabetes, while allowing them to adjust to new, disruptive practices.



RECOMMENDATION

The European Commission should use the European Semester to guide Member States in transitioning their healthcare systems.

The European Semester should be used to drive changes in structural provision of healthcare and allocation of workforce to ensure appropriate support for primary and integrated care. Consideration should be given to ensuring Member States have the appropriate resources, capabilities and capacity to manage this change. This should include training for healthcare professionals and avoiding siloed budgeting. The recommendations of the European Semester should be linked with the allocation of structural funds to support Member States in transitioning to a model focused on primary and integrated care.

CASE STUDY

Belgium:

Diabetes Project Aalst provides chronic disease management in a primary care setting. It focuses on establishing an integrated care team, including diabetes educators, that helps patients manage their condition. 69% of GPs within the Aalst region signed up to participate. The project has led to a significant improvement in patient outcomes within a short period. The rapid success of the project led to adoption and promotion of this approach by the national authorities across Belgium.



We need to re-imagine
how diabetes care is
delivered and work
together to make its
diagnosis, treatment
and management better.

By taking a long-term view of
the condition and its implications,
we can improve the lives of the
growing number of people
living with diabetes.

#WeWontRest
until diabetes is defeated.

The European Federation of Pharmaceutical Industries and Associations (EFPIA) represents the pharmaceutical industry operating in Europe. Through its direct membership of 36 national associations and 39 leading pharmaceutical companies, EFPIA's mission is to create a collaborative environment that enables our members to innovate, discover, develop and deliver new therapies and vaccines for people across Europe, as well as contribute to the European economy. Our vision is for a healthier future for Europe. A future based on prevention, innovation, access to new treatments and better outcomes for patients.

efpia*

Leopold Plaza Building * Rue du Trone 108
B-1050 Brussels * Belgium
Tel: +32 (0)2 626 25 55

www.efpia.eu * info@efpia.eu