International Diabetes Federation Europe

IS DIABETES EVER JUST DIABETES?

BEYOND DIABETES

One condition. Many connections. Integrated care matters.

Diabetes can affect every organ system in the human body and is the root cause of many other chronic conditions and comorbidities. This makes it a complex condition to manage, requiring coordination across many specialties and care levels, as well as robust and constant self-management on the part of people living with diabetes (PwD).

Despite advances in treatment, many PwD do not meet their health targets and develop diabetes-related complications such as cardiovascular disease (CVD), diabetes retinopathy and chronic kidney disease (CKD). The extent of potential organ damage depends largely on its duration and successful management.

> **Diabetes often coexist with other non-communicable diseases (NCDs). PwD need integrated, person-centred care across their whole life course.**

Integrated care helps people live healthier lives and reduces pressure on health systems.

DIABETES CAN AFFECT EVERY ORGAN SYSTEM

Higher risk. Greater complexity. Wider impact.

- **1 in 3** PwD develop diabetes **retinopathy**
- Diabetes retinopathy can develop into **diabetes macular oedema**, leading to vision impairment and blindness

- **1 in 3** PwD develop **CVD**
- PwD are **>2 times more likely to have a heart attack** and develop heart failure

- PwD are **1.5-2 times more likely** to have a **stroke**
- T2D is associated with increased risk of **neuropsychological dysfunctions**, dementia, Alzheimer's disease and Parkinson's disease

- More than **1 in 3** PwD develop **CKD**
- Diabetes and/or hypertension cause **80%** of **end-stage renal disease**

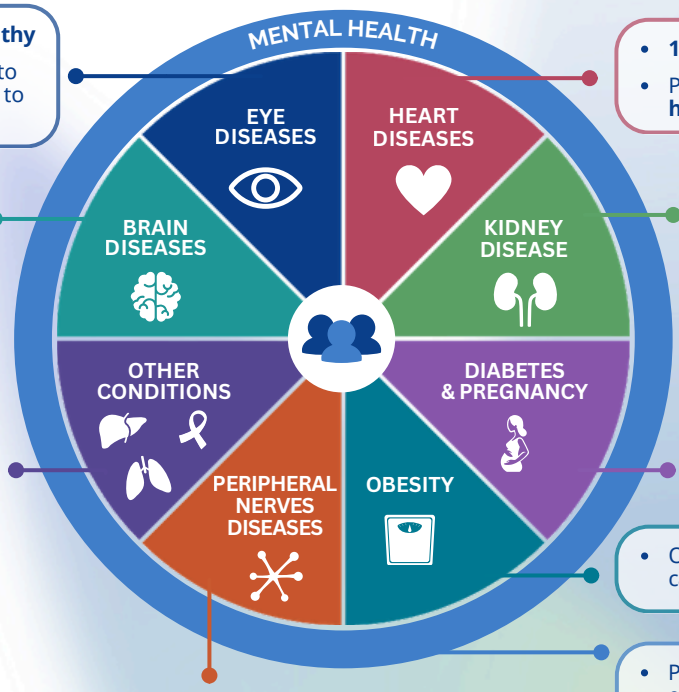
- **1 in 5** people with **cancer** live with diabetes
- PwD are at heightened risk of developing serious and more deadly forms of **infections**, including COVID-19
- Diabetes is associated with hearing loss, lung diseases, liver disease, sexual dysfunctions and infections

- Gestational diabetes is associated with **adverse pregnancy outcomes**
- It increases the **risk of T2D** for both the person giving birth and the baby

- Obesity drives **insulin resistance** and can lead to T2D

- PwD are **2-3 times more likely** to experience **depression**

- Up to **1 in 2** PwD develop **peripheral neuropathy**
- About **1 in 3** PwD develop a **foot ulcer** and about **half** of those ulcers will become **infected**
- **Lower-extremity amputations** are 10 times more common in PwD



WHAT CAN BE DONE?

Re-designing health systems to ensure better lives for all people living with diabetes.

1 MAKE INTEGRATED CARE A PRIORITY

- Include integrated diabetes care in national NCD plans.
- Set clear targets and accountability for delivery.
- Involve PwD in the design and implementation of care models.

2 STRENGTHEN CARE DELIVERY

- Invest and train multidisciplinary teams with diabetes expertise.
- Expand person-centred care across all levels (primary, secondary and community).
- Improve coordination across specialties and care settings.

3 IMPROVE ACCESS & REDUCE INEQUALITIES

- Ensure equitable access to essential medicines, technologies and digital tools.
- Target support for underserved groups (e.g. migrants, low-income groups, rural areas).
- Address social and environmental barriers to health.

4 ADDRESS STIGMA AND EMPOWER PEOPLE

- Co-design non-stigmatising communication with PwD.
- Provide structured diabetes education and self-management support throughout life.
- Ensure access to psychological support and empower PwD to seek the care they are entitled to.