



Working Session 1: Type 2 Diabetes

Introduction and Questions

Introduction:

Diabetes is a major cause of premature death and death, and a major cause of reduced quality of life for the citizens of the European Union. According to the European Health Report 2002 of the World Health Organization, the number of people living with diabetes mellitus is rapidly increasing in most countries with about 22.5 million adults affected in the European Region. On the occasion of the Workshop Diabetes in Europe held in Dublin in 2004, it was stated that 60 million people in the enlarged Europe are living with diabetes over 50% of them being unaware of their condition.

Diabetes mellitus brings about serious complications and subsequent diseases: complications during pregnancy which lead to an increase in perinatal mortality, neuropathy with the risk of gangrene and subsequent amputation, nephropathy, which may lead to the necessity of dialysis or of kidney transplantation, and retinopathy, with the danger of early blindness. The gravest consequence of diabetes mellitus is the significantly higher risk of a cardiovascular disease; according to the WHO European Health Report 2002 the risk of dying prematurely of the consequences of a heart-circulation disease is three to four times higher in diabetes patients than in the remaining population.

Diabetes mellitus is a growing epidemic with high cost for health systems. CODE-2 (first transnational study based on 1999 data analysing the costs of type 2 diabetes in eight countries) showed that the annual average cost per patient is around € 2800. The implications and burden for the individual are not even measurable. In-patient treatment, necessary especially for the treatment of the long-term consequences of diabetes mellitus, accounted for the greatest share of the costs (55%). Thus, avoiding diabetes complications by means of treatment and monitoring of the disease is a key element.

The effectiveness of lifestyle changes in the prevention of diabetes has been scientifically proven in several studies. The development of diabetes can be prevented or delayed if people modify their life style in particular their eating and exercising habits. Preventing diabetes has a direct positive benefit on other non-communicable diseases (e.g. cardiovascular diseases).

Given that

- the growing prevalence of diabetes poses a challenge to all MS,
- our citizens attach great importance to the highest possible level of health
- the European Treaty provides that that Community action is to complement national policies and be directed towards improving public health, preventing human illness,
- preventive measures, early detection, diagnosis, effective management of the disease. Can result in reduced mortality from diabetes, increase life expectancy and quality of life of European populations,

the Austrian Presidency chose to highlight diabetes at the European level to generate added value to the national efforts.

In order to underpin the political discussion the Austrian Presidency organized from 15 to 16 February in Vienna an expert conference: Prevention of Type 2 diabetes, with representatives from all the Member, Accession and Candidate States, including health professionals, diabetes associations and patient groups. Representatives from the European Parliament, the European Commission and WHO participated as well in the conference. The contributions and recommendations are summarized in the conference report.

The Austrian Presidency suggests structuring the exchange of views around the following **questions**:

- 1. What actions can be taken by individual Member States to prevent/reduce the growing incidence and prevalence of diabetes across Europe?**
- 2. What actions can be taken by the EU to combat the growing diabetes epidemic?**