



Parliamentarians  
for Diabetes  
Global Network

Number Two 2024

# Global Advocacy Diabetes

The newsletter of the Parliamentary Diabetes Global  
Network

Registered charity number 1175548. Company number 10339168

**Inside this issue:** Breakthrough on T1 detection, Glucagon Campaign, T2D rise among under 40's, PDGN's First Parliamentary Champion Award, and lots of advocacy action ideas.

## Study Finds More Than a Billion Obesity Sufferers

More than one billion people around the world are now suffering from obesity with the number having more than quadrupled since 1990, according to a study carried out by the World Health Organisation (WHO) and released by the Lancet medical journal.

The rise in obesity is hitting poorer countries and the rate is growing around the young faster than adults.

The study estimates there were around 226 million obese adults, adolescents and children in the world in 1990 and this had risen to 1.3 Billion in 2022.

Researchers analysed the weight and height measurements of more than 220 million people in more than 190 countries to reach the estimates.

It is well known that the chronic and complex illness of obesity is accompanied

by a greater risk of death from heart disease, diabetes, and certain cancers.

The study noted that some countries, such as Polynesia and Micronesia, the Caribbean, the Middle East, and North Africa now have higher obesity rates than many high-income industrialised countries, especially those in Europe.

**"1990 - 226  
million obese  
adults,  
adolescents and  
children.  
2022 - 1.3 Billion",  
WHO.**

While there are many factors behind the statistics WHO Director General Tedros Adhanom Ghebreyesus said: "This new study highlights the importance of preventing and managing obesity from early life to adulthood, through diet, physical activity, and adequate care, as needed.

He added that "getting back on track" to meet global targets for cutting obesity rates "requires the cooperation of the private

Continued on page 2

This edition of Global Advocacy News has been sponsored by Dexcom.

**Dexcom®**  
CONTINUOUS GLUCOSE MONITORING

# Small Step Towards Common Coverage

**As more and more establishments, public buildings and public places host defibrillators to assist in the event of a cardiac arrest, people with diabetes are campaigning for Glucagon to more widely available to inject when someone with diabetes suffers a hypoglycaemic event.**

Glucagon is a hormone that your pancreas makes to help regulate your blood glucose (sugar) levels. It comes as a solution (liquid) in a prefilled syringe and an auto-injector device to inject subcutaneously (just under the skin) when someone suffers an extreme low blood sugar event.

In the USA, the Arizona state has passed a Bill, House Bill 2174, introduced by Rep. Beverly Pingerelli, R-Peoria, to allow schools to keep a supply of glucagon.

A powerful case was made by Scottsdale Unified School District school nurse Will Graham who explained that unless glucagon medication is provided by the pupil's parents, school nurses cannot do

anything to help a student except calling emergency services and idly awaiting their arrival.

"This period of waiting without (the) option for treatment can result in permanent disability or death to the student," he said.

Several companies make glucagon injection devices. It is easy to administer by

first identifying an injection site - the top of the thigh (upper leg), outer buttock area, or upper outer arm are best - and injecting into the muscle.

## **Advocacy Action:**

Check to see if your Parliament holds a Glucagon injection

device and if not push for one in case staff, visitors or elected members might one day need it. Can you campaign for rules to ensure every place of work, study, and leisure has one? Can you make the case for aeroplanes, trains, ships and other means of passenger transport to carry an up to date Glucagon device and supply. Can you approach your national diabetes association about organising a petition, or other advocacy method to raise the profile of the need for Glucagon injection devices for use in emergencies.



## **Page 1 continued -**

**sector, which must be accountable for the health impacts of their products".**

The WHO has supported taxes on sugary drinks, limiting the marketing of unhealthy foods to children and increasing subsidies for healthy foods. Full report here: <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>

**Advocacy Action:** Are the figures consistent with what is happening in your country? Is there a national plan or strategy to reduce obesity? Has there been any research into the costs of failing to tackle the rise in obesity and diabetes?

# Five Million Malaysians at Risk of Diabetes

Malaysia's Deputy Health Minister, Datuk Lukanisman Awang Sauni MP, right, launched a pre-diabetes screening, diagnosis and management promotion campaign to help prevent the rising numbers of people with T2D.

Nearly five million Malaysians are currently at risk of diabetes according to the Deputy Health Minister.

"An awareness survey of 5,000 people found that 76 percent of the respondents never got tested and we are certainly trying to reduce the number (who don't get tested) through screening tests as that's when we can treat and advise them," he said.

Themed "Check, Confirm, Consult and Change", the campaign aims to educate and encourage the public to verify their risk status by undergoing screening tests and collaborating with healthcare experts to manage their pre-diabetic conditions for the sake of their health.



Advice is then given on any changes that could be made to try and prevent the condition, or, where possible, put it into remission.

**Advocacy Action:** Do you have a similar campaign in your country? Can you help to promote it if you do, or advocate for one to reduce the future numbers of people with T2D in the future? The economic case for doing so wherever you are based is compelling.

Picture credit:: Malaysia Gazette



## NZ CGM Reimbursement Pushed Back

New Zealand's Pharmaceutical Management Agency, Pharmac, reported a significant amount of feedback on their proposal for Continuous Glucose Monitoring reimbursement.

In a statement issued late last month they say: "We have identified aspects of the proposal that we need to consider further. This means that the timeframe for making CGMs available, if approved by the Pharmac Board, will be pushed back.

"At this point we can't provide a definitive timeframe for when a decision will be made".

**Advocacy Action:** Are people who would benefit from CGM technology able to access it in your country? Do people with diabetes have to pay? CGMs are a proven cost effective aid to diabetic control, can you advocate for their availability?

# PM's Commitment Following MP's Invitation

PDGN Vice-President, Canadian MP Sonia Sidhu, invited Prime Minister Justin Trudeau to visit her constituency to learn about some of the health care challenges faced by her constituents.

From pharmacare to diabetes treatments, doctors in her Brampton constituency brought some of the city's unique health care needs to the attention of the Prime Minister, including the large numbers of people with diabetes.

As one of Ontario's fastest-growing and culturally diverse cities, Brampton has the highest rate of diabetes across the province.

The federal government introduced a bill earlier this month that charts a course toward a universal pharmacare plan which, in the interim, will cover birth control and diabetes drugs and supplies.

Following the visit the Prime Minister vowed to save people with diabetes up to \$1,700 per year in the cost of insulin. He said: "If our pharmacare legislation passes and becomes law, we'll cover that cost."

The high rate of diabetic patients in Brampton has led the health system to roll out what it calls "comprehensive diabetes care and education" programs across its hospitals and

sites, including Canada's first Diabetes Education Centre accredited by Diabetes Canada.

Advocacy Action: Inviting a Prime Minister or Party Leader with an agreed offer at the end of a visit to your area, can both advance the cause of diabetes and help your reputation locally and among the diabetes community. Something simple like pledge to improve food labelling to a big ask for a national diabetes plan. Let PDGN know if you have already done this, would like to do this, or need help to do this?



Prime Minister Trudeau, left, and Sonia Sidhu MP, right, visiting Brampton Civic Hospital.



Discussing the work to combat diabetes at the William Osler Health System's Brampton Civic Hospital and the National Pharmacare plan.



# Knowledge -

A team of researchers in Portugal has assessed how many people with Type 2 diabetes (T2D) – both insulin-treated and non-insulin treated - have this knowledge.

People with T2D were asked a number of questions and while results showed a relatively high number had a good knowledge of the positive impact of physical activity and how to test their blood sugar levels, a quarter did not.

<https://www.eurasiareview.com/10032024-many-type-2-diabetes-patients-lack-potentially-life-saving-knowledge-about-their-disease/>

According to a study published by Diabetes UK, diagnoses of T2D, a condition fuelled by obesity, health inequalities and junk food, has risen by 39 percent among those under 40 years of age in the past six years in the UK.

Advocacy Action: Are you seeing similar trends in your country, both in overall numbers and the age group where diabetes is increasingly being found? Is there a plan to combat the rise? Can you raise one or more of the preventative measures being implemented elsewhere? Could PDGN help you identify an initiative you could try?

## Type 1 Classification Breakthrough

Fewer than one in 10 people who have diabetes have type 1 diabetes (T1D). It has always been the case that there is nothing you can do to prevent yourself, or others, developing T1D, and the exact causes are not known.

Consequently, most individuals tend to be diagnosed with T1D at the onset of symptoms, but the disease can in fact be detected months to years before the first symptoms occur.

In April, it was announced three new ICD-10 codes (used by physicians to classify and code all diagnoses, symptoms and procedures) for pre-symptomatic T1D have been proposed and shared to come into effect on October 1.

The breakthrough, created by researchers in the University of Birmingham, UK, comes amidst several positive developments that should help accelerate the approval for early detection, screening, education, and surrounding activities and healthcare systems acceptance of early-stage T1D.

This will allow for monitoring and management strategies to be implemented to provide better care and improve outcomes for people living with T1D.

<https://www.birmingham.ac.uk/research/applied-health?pageindex=2>

See also Research Corner on page 16 'Effect of population-wide screening for presymptomatic early-stage type 1 diabetes on paediatric clinical care'.

## Middle East Obesity Concerns

Saudi Arabia ranks among the worst affected countries globally due to rising obesity. This is according to the World Obesity Federation's World Obesity Atlas 2024, a new report that exposes the enormous health and economic burdens of the disease.

The Atlas reports that both Saudi Arabia and neighbouring United Arab Emirate (UAE) face a growing public health challenge, revealing that possibly more than half the population in both countries will be overweight or obese by 2035.

According to the report, more than three-quarters of Saudi women (78 percent) are overweight, and 76 percent of men.

Obesity is directly linked to 1.1 million lives lost in 2019 from weight-related NCDs. The Atlas 2024 report links costly health burdens with reduced productivity due to disability and premature deaths and with soaring obesity-related healthcare costs.

In neighbouring UAE, obesity is calculated to cost their economy nearly \$12 billion annually.

**Advocacy Action:** Some of the wealthiest nations on earth are finding the costs of diabetes and other Non-Communicable Diseases (NCDs) associated with obesity draining their public finances, hitting productivity and in turn their economies. How well understood are the costs of diabetes? What projections exist on numbers and future costs? Is there an obesity prevention plan in place or could you champion one?

# Fiji Fears for Finance

Fiji's senior civil servant for trade, Permanent Secretary Shaheen Ali, has stressed the crucial link between addressing Non-Communicable Diseases (NCDs) and ensuring economic prosperity.

Mr Ali says that the prevalence of NCDs among the young could significantly harm the economy and this highlights the necessity for a national food policy to combat the trend.



Permanent Secretary  
Shaheen Ali

"The economic cost is not just loss of working hours but in terms of medical bills, loss of skills through premature

mortality and also absenteeism that is also quite prevalent," the Permanent Secretary, pictured, said.

Researchers are evaluating the current economic impact of NCDs, which incurred healthcare costs of \$591 million for Fiji in 2019.

Permanent Secretary Ali says that implementing a new food policy is imperative to tackle the influx of unhealthy foods into Fiji and promote healthier alternatives.

**Advocacy Action:** Is the situation similar in your country? Has anyone assessed the financial costs of not acting to address the issues? Can you raise in your legislative assembly?

# Plan Now for World Diabetes Day 14TH Nov

The International Diabetes Federation (IDF) has designated Diabetes and Well-being as the theme for World Diabetes Day 2024 to 2026.

Over the next three years, the campaign will focus on:

- Raising awareness of the emotional challenges, stress and anxiety that living with diabetes can bring.
- Promoting the importance of physical activity and a healthy diet to reduce the risk of T2D and manage all types of diabetes and its related complications.
- Highlighting the barriers that restrict a person living with diabetes from living a healthy and fulfilling life with their condition.

More information about activities and resources can be found at: [www.worlddiabetesday.org](http://www.worlddiabetesday.org).

**Advocacy Action:** The time to start planning for WDD 2024 is now. Can you talk to your national diabetes association to what they may be planning and whether you can help. Among events in past years have been screening tests for parliamentarians and their staff, events involving information and screening in constituencies, inviting young people with diabetes to parliament to lobby their elected representatives, applying for a debate on a diabetes related topic to coincide with WDD.

For more ideas contact PDGN. [info@pdgn.org.uk](mailto:info@pdgn.org.uk)

# Parliamentary Findings Due

**The eyes of Australia's diabetes community are on the Australian Federal Parliament as it finalises the nation's first Parliamentary Inquiry into Diabetes.**

The inquiry was adopted in May 2023 after a referral from the Minister for Health and



**"Diabetes Australia has given evidence to the Committee that demonstrates the impact of the diabetes epidemic and the need for new initiatives that will change lives", Says Diabetes Australia CEO Justine Cain.**

Aged Care, the Hon Mark Butler MP. The Committee's report is expected in mid-2024.

Nearly 500 submissions have been received by the Committee. Diabetes

Australia's submissions focused on priority areas including:

- Prevention of type 2 diabetes and early diagnosis
- Equitable access to diabetes technologies and medicines
- Supporting Australia's most vulnerable communities, and
- Investing in diabetes research.

Diabetes Australia CEO Justine Cain said Australians were eagerly awaiting the outcomes and recommendations of the Inquiry: "Diabetes Australia has given evidence to the Committee that demonstrates the impact of the diabetes epidemic and the need for new initiatives that will change lives.

"These include a national diabetes prevention program, equitable access to diabetes technologies, and more support for the diabetes workforce.

"The eyes of the diabetes community are now turned to the Committee, and the government, to see how it will respond to those calls," Ms Cain said.

**Advocacy Action:** Can you call for a similar commission in your country and take evidence from people with diabetes and organisations who support them, alongside medical professionals, academics, public and private sector interested parties, to come up with recommendations?

## Virgin Islands Chronic Disease Registry

**It is so obvious when confronted with a challenge that you should know its scale.**

**This is why lawmakers in the Virgin Islands have unanimously supported a bill to establish a registry to track diabetes and chronic kidney disease..**

<https://viconsortium.com/vi-senate/virgin-islands-bill-to-establish-chronic-disease-registry-wins-unanimous-senate-support>



# Early T2D Treatment Crucial

**According to researchers treating people with T2D as early as possible can prolong life and reduce the risk of future complications.**

Scientists from the Universities of Oxford and Edinburgh analysed data spanning more than four decades from the UK Prospective Diabetes Study (UKPDS) - one of the longest type 2 diabetes clinical trials.

The findings showed controlling blood glucose early with insulin and drugs led to 10 percent fewer deaths as well as reducing the risk of heart attack, kidney failure and vision loss.

Professor Rury Holman, the founding director of the University of Oxford Diabetes Trials Unit and chief investigator of the UKPDS, said the findings were "remarkable" and showed the importance of early diagnosis.

The UKPDS trial began in 1977, where newly-diagnosed type 2 diabetes patients were assigned to either intensive or conventional blood glucose control strategy.

<https://www.rdm.ox.ac.uk/about/our-clinical-facilities-and-units/DTU/completed-trials/ukpds#:~:text=The%20UK%20Prospective%20Diabetes%20Study,newly%20diagnosed%20type%202%20diabetes.>

**Advocacy Action:** Reducing disabling and costly complications and prolonging life has gains all round for people, governments and health care systems. Can you use the UKPDS to support calls for early treatment of T2D?

# Light Treatment Could Save Sight

**Diabetic eye disease light treatment could secure important savings for health providers while protecting people with diabetes from serious sight loss.**

Diabetic Retinopathy represents a significant burden of disease for both people with diabetes and healthcare systems around the world. It will develop in more than half of those with diabetes and is a major cause of blindness in working age adults. It is caused by changes to the tiny blood vessels of the retina, the light sensitive layer at the back of the eye.

The most common pathway is to simply monitor patients who have early signs of the disease until their eyes deteriorate, and they qualify for treatment.

A study, published in the US National Library of Medicine, of the Noctura 400 suggests its sleep mask system can help to preserve good eye health, reduce referrals into hospital settings with later stage expensive and invasive interventions avoided.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8249224/>



**The Noctura 400, a diabetic eye disease light treatment that could save the sight of people and the resources of health care systems.**



# African Economic Development Linked to Obesity Rates

**Obesity and excess weight gain, traditionally perceived as health issues predominantly affecting high-income countries, are now increasingly prevalent in low and middle-income regions.**

This was covered in an article written by: Sylvanus Kwaku Afesorgbor, University of Guelph; Edward Martey, University of Illinois at Urbana-Champaign, and Justice Moses K. Aheto, University of Ghana, abridged here.

The increasing prevalence of obesity can be attributed to rising incomes, increasingly sedentary lifestyles, the adoption of western cultures and unhealthy diets and lifestyles.

In Africa, women are more likely to be overweight and obese than men. With women up to 10 times more likely to be obese than men in some regions, and in many countries, economic development is more likely to lead to weight gain in women than in men.

This is partly because women often assume the role of stay-at-home mothers due to childcare and unpaid domestic responsibilities, while men typically work outside the home.

Stay-at-home mothers tend to have more sedentary lifestyles, which increases the risk of weight gain.

African women are stereotypically expected to gain weight after marriage as a symbol of their husbands' wealth and marital bliss. This panders to the prevailing notion that the wealth of an individual in an African society is reflected in her body weight.

A recent study in the journal *Review of Development Economics* specifically examined how local economic development specifically impacts weight gain among African women.

A more general study covering the economic costs of obesity can be found here:

[https://www.nature.com/articles/s41366-023-01398-y?utm\\_medium=affiliate&utm\\_source=commission\\_junction&utm\\_campaign=CONR\\_PF018\\_ECOM\\_GL\\_PBOOK\\_ALWAYS\\_DEEPLINK&utm\\_content=textlink&utm\\_term=PID1612532&CJEVENT=2d3af95827cb11ef820113f90a18b8f6&countryCode=de](https://www.nature.com/articles/s41366-023-01398-y?utm_medium=affiliate&utm_source=commission_junction&utm_campaign=CONR_PF018_ECOM_GL_PBOOK_ALWAYS_DEEPLINK&utm_content=textlink&utm_term=PID1612532&CJEVENT=2d3af95827cb11ef820113f90a18b8f6&countryCode=de)

**Advocacy Action:** Does your country have an obesity reduction strategy with identifiable targets and plans to meet them? Have the costs of lost production, health care and associated costs been factored in to show the savings, or costs of not having a plan? Can you use the economic study and other available data to press home the need for action?

# European President Thanked

**The International Diabetes Federation Europe (IDF Europe) has thanked European Parliament President Roberta Metsola "for her invaluable and continuous support to EU citizens' health and the diabetes community."**

In a statement, IDF Europe said that Metsola played a vital role in raising awareness of diabetes and advocating for better prevention and care for all people living with the condition across the EU.



In November 2022, "the European Parliament's motion for a resolution on the 'Prevention, management, and better care of diabetes in the EU', supported by President Metsola and receiving cross-party support, represented a crucial milestone for our community and an important step forward towards reversing the rising number of people living with diabetes, improving the management of condition and its complications and addressing inequalities in access to care and treatment across Europe.

"IDF Europe also wishes to thank all its Member Associations, including the Maltese Diabetes Association and its President, PDGN Co-Chair, Mr Chris Delicata, for their unfailing support to the diabetes community and IDF Europe's advocacy work."

# Change Lifestyle, Minister Calls

**The WHO STEPS survey has revealed that the number of people with diabetes in Zanzibar has increased from 3.7 percent in 2011 to 7.5 percent, the House of Representatives was informed yesterday with a call for changes in lifestyle to minimize risks of contracting the disease.**

This statement was given by the deputy minister of health Mr Hassan Khamis Hafidh in response to questions from Mr Ameir Abdalla Ameir (Mwanakwerekwe) who wanted to know the level of diabetes in the United Republic of Zanzibar.

The Minister said: "we need to change lifestyle and to be sensitive about what we eat, we also need frequent body exercise, while those who have already contracted the disease should observe medical precautions."

The World Health Organisation (WHO) STEPSwise approach to surveillance, or STEPS, is an internationally comparable, standardized and integrated surveillance tool through which countries can collect, analyse and disseminate core information on noncommunicable diseases (NCDs), such as diabetes.



**"we need to change lifestyle and be sensitive on what we eat", says Health Minister Hassan Khamis Hafidh.**

# Zimbabwe Struggles With Rising Diabetes – and Lack of Data

**Zimbabwe is not alone in struggling with rising diabetes and a lack of data. Like most African countries, non-communicable (NCDs) diseases are increasing in Zimbabwe and children are increasingly affected, according to the UN children's agency, UNICEF.**

In 2022, UNICEF, supported by Eli Lilly, launched an initiative in five countries including Zimbabwe, to focus on NCD prevention, detection, treatment and support.

Zimbabwe's Ministry of Health received a \$2.5 million grant to educate community health workers and increase support and understanding of various NCDs including diabetes in children.

Children are often only diagnosed when they have gone into a diabetic coma.

"NCDs in children result from a combination of genetic, environmental and behavioural factors," Health and Child Care Deputy Minister Dr John Mangwiro explained.

"When a young child is diagnosed with a non-communicable disease, this implies long-term treatment."

Zimbabwe's children are also increasingly being diagnosed with type 2 diabetes, which is generally associated with adults, believed to be a result of sedentary lifestyles, obesity and unhealthy eating habits.

To learn more about the Lilly initiative follow this link: <https://www.unicef.org/lilly-unicef-expand-support-help-millions-young-people-risk-noncommunicable-diseases>

## Diabetic Retinopathy: A Call for Global Action

**The International Diabetes Federation (IDF) and the International Agency for the Prevention of Blindness have launched a policy briefing.**

It advocates for a joint approach to prevent and manage vision loss in people living with diabetes by integrating diabetic retinopathy care into diabetes policies and national health plans.

You can access the policy brief and use it in your advocacy here:

[https://idf.org/media/uploads/2023/04/IAPB-IDF\\_Diabetic-retinopathy-A-call-for-global-action\\_policy-brief.pdf](https://idf.org/media/uploads/2023/04/IAPB-IDF_Diabetic-retinopathy-A-call-for-global-action_policy-brief.pdf)





# 'NCDs among top Three causes of death for children aged 10-14'

**Non-communicable diseases (NCDs) are among the top three causes of death for children aged 10-14 in Pakistan and are the leading cause of death for girls between the ages of 15 and 19, experts have revealed at a conference held by the Aga Khan University's Department of Community Health Sciences (CHS).**

The "Healthy Futures: Preventing Non-Communicable Diseases (NCDs) in Young Hearts and Minds," conference was held in collaboration with the World Health Organisation (WHO) and the UN Children's Emergency Fund (Unicef).

It highlighted the necessity of collaborative efforts to encourage young people to lead healthy and active lifestyles, and emphasised the need for parents, caregivers, teachers, mentors and young people to prioritise the physical and mental health of adolescents.

The conference addressed numerous issues such as screen time, obesity, substance use and abuse, mental health problems, sedentary lifestyles, educational curricula, and lifestyle innovations that need widespread implementation to counter these troubling trends.

The three-day conference featured research presentations, panel discussions, plenary talks, and various activities designed to foster dialogue among academic experts, healthcare professionals, and teachers.

The conference also highlighted the importance of addressing NCDs in teens, which requires attention from governing bodies and the scientific community. Additionally, it addressed pressing concerns such as climate emergencies and the availability of public spaces.

Dr Romaina Iqbal, section head of NCD and Mental Health, Department of CHS, stated, "Evidence suggests that 70 percent of the poor habits that lead to NCDs later in life are developed during adolescence. Aga Khan University is committed to educating adolescents about the dangers of sedentary and unhealthy lifestyles. With promising collaborations

between public and private entities, we are confident we can divert our young population from unhealthy behaviors."

Prof Zainab Samad, chair of the Department of Medicine, emphasized that "Prevention is better than treatment. Poor diet, physical inactivity, tobacco consumption, climate change, and poor mental health are all associated with the development of NCDs in the Pakistani population. It is therefore important to modify all these factors to prevent the development of NCDs."



**THE AGA KHAN UNIVERSITY**

# Sugar Tax News

## Coalition Campaign for a Sugar Tax

The Nigerian National Action on Sugar Reduction (NASR) Coalition is campaigning for the Nigerian government to raise taxes on sugar-sweetened beverages.

They are advocating an increase to N130 per litre tax on drinks with a sugar ingredient, up from N10 when the tax was first introduced in 2018.

A spokesperson for the NASR coalition said the rise is imperative considering that Nigeria is currently one of the largest consumers of soft drinks in Africa and ranks seventh globally.

In a statement, Omei Bongos on behalf of the coalition emphasized that the campaign is a crucial component of the ongoing efforts to address the escalating rates of obesity and T2D in Nigeria.

She said the primary goal is to enlighten Nigerians about the detrimental impacts of consuming such beverages, as they significantly contribute to obesity and various non-communicable diseases.

"With more than 11 million Nigerians suffering from T2D and struggling to afford necessary medication, this campaign highlights the urgent need for policymakers to take action. Consumption of sugar-sweetened beverages is not just a personal choice; it has far-reaching consequences on public health," she said.

**Advocacy Action:** Coalitions of organisations with similar objectives are powerful vehicles for change. Can you help to bring together different advocates for changes to prevent diabetes and other NCDs linked to similar contributing factors?

N.B. N130 per litre is around 9 cents US.

## Nutri-Grade Sugar Tax System

Malaysia will be introducing a grading system on sugary drinks as the government wages war against sugar, the *Malay Mail* and *New Straits Times* (NST) have reported.

In May the Malaysian Health Minister Dzulkefly Ahmad said the grading system will be according to its sugar content. Called a Nutri-Grade system it is based on nutrient profiling.

"This is similar to (what has been done by) our neighbours across the causeway, where the level of sugar in drinks is graded A,B,C, or D," Dzulkefly said, as quoted by NST.

The Health Minister did not provide a timeline for the implementation.

In 2022, Singapore implemented the Nutri-Grade to categorise beverages based on their sugar and saturated fat levels.

The drinks with the lowest sugar and saturated fat content will be categorised as "A" and the highest will be labelled "D".

The Nutri-Grade labels are to keep unhealthy diets in check and prevent diseases such as diabetes.

The move to introduce a grading system on sugary drinks comes following a 2023 National Health and Morbidity Survey which revealed that the number of adults who are overweight or living with obesity is on the rise in Malaysia.

**Advocacy Action:** Do you have a sugar tax in your country? Is it a graded system? Could PDGN help you with the pros and cons?



# Nutrition News

In simplistic terms, unlike type 1 diabetes (T1D), type 2 diabetes (T2D) is a result of poor diet and lifestyle that can be put into remission, or controlled with changes to what is eaten and other lifestyle changes.

In reality, the reasons why some people are diagnosed with T2D are unknown and or have nothing to do with their lifestyle, while many cannot put the condition into remissions. It is much more complex.

Those with T1D are largely controlled with insulin, and diet can be overlooked as an important element to good blood glucose control.

A group of researchers in the US have found that a low-fat vegan diet rich in fruits, vegetables, grains and beans could have beneficial effects for people with T1D, just as previously found for people with T2D.

They found that a low-fat vegan diet can reduce insulin requirements and improve insulin sensitivity for people with T1D.

The research, from the Physicians Committee for Responsible Medicine, based in Washington, DC, looked at the

effects of a low-fat vegan diet versus a portion-controlled diet, as usually followed by patients with type 1 diabetes.

Participants in the study were randomly assigned to one of two groups: one eating a portion-controlled diet and the other a low-fat vegan diet. In the latter case, the diet was rich in fruits, vegetables, grains and beans.

The scientists found that people who followed the plant-based diet significantly reduced the amount of insulin they needed to

take and increased their bodies' sensitivity to insulin, compared to the portion-controlled group. This was associated with changes in body weight. In fact, the researchers report that people in the vegan group lost five kilos, on average, while changes in body weight were not significant in the portion-controlled group. According to the scientists, "changes in insulin sensitivity were also associated with increased carbohydrate and fiber intake."

<https://diabetesjournals.org/clinical/article/doi/10.2337/cd23-0086/154329/Effect-of-a-Dietary-Intervention-on-Insulin>

**Physicians  
Committee**  
for Responsible Medicine  
[PhysiciansCommittee.org](https://PhysiciansCommittee.org)

**PDGN - From Research to Policy, Policy to Legislation**

# Research Corner

Under Research Corner you can find links to research that can support your advocacy. Evidence based studies and solutions make the best case for action.

\*\*\*\*

Effect of population-wide screening for presymptomatic early-stage type 1 diabetes on paediatric clinical care. [https://www.thelancet.com/journals/lanadia/article/PIIS2213-8587\(24\)00101-3/fulltext](https://www.thelancet.com/journals/lanadia/article/PIIS2213-8587(24)00101-3/fulltext)

\*\*\*\*

Use of continuous glucose monitoring (CGM) is now considered standard of care for people with T1D. New data continues to show the clinical benefits from CGM in people with type 2 diabetes, including those who don't use insulin. <https://www.medscape.com/viewarticle/making-invisible-visible-cgms-offer-insights-t2d-2024a10004ug?form=fpf>

\*\*\*\*

Researchers found evidence that higher ultra-processed food intake was associated with increased adverse health impacts including a higher risk of T2D. <https://health.economictimes.indiatimes.com/news/industry/ready-to-eat-food-ice-cream-processed-snacks-linked-to-32-diseases-finds-new-study/108101493>

\*\*\*\*

Study of diabetic foot complications among people living with diabetes in Zimbabwe has global lessons for prevention. <https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-023-17610-7>

# Technology News



Medtronic has achieved a European approval that allows it to combine its latest automated insulin pump with its newest glucose sensor for the first time.

<https://www.fiercebiotech.com/medtech/medtronic-scores-european-green-light-combine-its-latest-diabetes-pump-new-wearable-sensor>



Insulet Omnipod 5 picks up reimbursement in France. The Fédération Française des Diabétiques said it "welcomes the inclusion of Omnipod 5" on its list of reimbursable products and services.

<https://www.massdevice.com/insulet-omnipod-5-picks-up-reimbursement-in-france/>



On June 5, Dexcom announced that its G7 continuous glucose monitor (CGM) now connects directly to the Apple Watch in the US.

The G7 becomes the first and only CGM with an Apple Watch direct-to-app function. Even without an iPhone nearby, it gives consumers the flexibility and convenience of real-time glucose readings.

Dexcom says this feature is also available in the UK and Ireland, and later this month it anticipates launching in more markets.



# Associations News

News from Associate Members of PDGN – diabetes associations and other not-for-profits

## New Name for JDRF

**On June 4, 2024, the Juvenile Diabetes Research Foundation (JDRF) announced that Breakthrough T1D was the new name for the organization.**

During the organization's annual Government Day meeting in Washington, D.C., the new name was announced in a global simulcast.

After a thorough, data-driven selection process, the new name was chosen because it more appropriately represents the non-profit's capacity to engage with and support the whole T1D community. It is hoped the rebrand as Breakthrough T1D will help to accelerate Type 1 research and advocacy.

## PDGN News

### First Regional Champion Revealed

**The first European Parliamentary Diabetes Champion was revealed at the Diabetes UK Professional Conference at the ExCeL Centre in April.**

This was the first of a series of regional awards the Parliamentarians for Diabetes Global Network (PDGN) will be presenting over the coming year.

The European award goes to a globally recognised figure who has not hidden their late diagnosis of T1D but has led them to become a public advocate and role model for people with all types of the condition.

PDGN Co-Chairs, Sir Michael Hirst and John Bowis OBE (right) were joined by Diabetes UK CEO Colette Marshall, PDGN Secretary General Adrian Sanders, and Alessandro Sorrentino from Sanofi (left) to present the award to the Speaker of the House of Commons Rt Hon Sir Lindsay Hoyle MP. The award was accepted by Deputy Speaker Dame Eleanor Laing MP, who attended at short notice following the sad death of Mr Speaker's father



A second presentation in the presence of Mr Speaker is arranged for a date in July

. - Continued on page 18

From page 17 -

The award was decided by a panel of PDGN board members who looked at the nominee's involvement in promoting prevention, early diagnosis and better treatments for people with diabetes, and how they have contributed to overcoming stigma and misinformation as a consequence of their diagnosis.

PDGN is most grateful to Diabetes UK for allowing the presentation to take place during their prestigious annual professional conference

This award has been made possible with support from Sanofi. Sanofi has had no editorial control over any of its contents nor with the selection process of the recipient.



## PDGN on The Hill

**PDGN was delighted to join with our GDAN partners the Diabetes Leadership Council of America (DLC) at the annual 'Hill' event in Washington DC**

PDGN Secretary General Adrian Saunders was able to meet with members of Congress and staff to explain the work of PDGN and how it has been helping parliamentarians around the world since it was formed in 2013.

Several offices expressed an interest in PDGN, and it is hoped they will play an active role in the future alongside the growing numbers of parliamentarians from around the world who advocate on issues of relating to diabetes and its comorbidities.

One of the key events of the week was a meeting organised by DLC where they had

invited the co-chairs of the Diabetes Caucus to address an audience of diabetes advocates and congressional staff. Colorado Democrat Congresswoman Diane DeGette and Florida Republican Congressman Gus M. Bilirakis (both pictured) reported on their activities during the past year and their work in Congress on behalf of people with diabetes.



The following day there was a gathering of people with diabetes from different parts of the USA whom DLC had invited to come and lobby their elected representatives on the hill.

This is where Hill Day gets its name and where people with diabetes get to meet with their elected representative and tell their story which brings to life the need for greater attention to be paid to the issues surrounding prevention of and the treatment of diabetes.

- continued on page 19

- from page 18

All the people invited were accommodated the day before the event and took part in presentations about how to approach their member of Congress and the issues to raise. The most important of which for people with T1D was the price of insulin in the USA.

The issue isn't specific to the US but there are certain factors with their insurance based and distribution systems that has made it a long-running sore. It is now getting the attention it has deserved, in no small measure due to DLC and diabetes advocates within Congress.

PDGN is very grateful to DLC for giving them the opportunity to take part and hope that

with US interest in the activities of PDGN their members can both contribute to and learn about the common challenges and solutions.

**Advocacy Action:** Organising an event where people with diabetes can lobby their elected representatives is not unique to the US and have proved really effective at raising the profile of diabetes within a Parliament and that of the organising member or members who help with the arrangements. Such events are often run in association with a national diabetes body. Can you approach and suggest the idea, or offer to help where such an event is already in existence?

### Future PDGN Events

Parliamentary Panel - date within 16-18 October, ISPAD 2024 in Lisbon, Portugal.

TBC, Parliamentary Panel - date in November, ATTD Asia, in Singapore.

If you would be interested, or can recommend someone as a parliamentary panellist, online, or in person, please let Adrian Sanders know – [adrian@pdgn.org.uk](mailto:adrian@pdgn.org.uk)

### Are You Facing Election?

PDGN's Alumni section continues to grow as elected representatives retire or get retired by the electorate! The latter is an occupational hazard for elected politicians.

Our alumni section allows former elected reps to keep in touch, but unless we have their personal email addresses our communications bounce once their Parliamentary email accounts are closed. Do please let PDGN have a personal email address for yourself. Just email [info@pdgn.org.uk](mailto:info@pdgn.org.uk) with your name, country, work email and personal email address.

### PDGN is very grateful to Dexcom for its sponsorship of Global Advocacy Diabetes

The Parliamentary Diabetes Global Network (PDGN), Registered charity number 1175548. Company number 10339168 © PDGN. All Rights Reserved

Website: [www.pdgn.co.uk](http://www.pdgn.co.uk) Email: [info@pdgn.org.uk](mailto:info@pdgn.org.uk)

Linkedin: <https://www.linkedin.com/company/parliamentarians-for-diabetes-global-network/> Phone: +44 (0)7712633476

THE INCLUSION OF THIRD-PARTY ADVERTISEMENTS DOES NOT CONSTITUTE AN ENDORSEMENT, GUARANTEE, WARRANTY, OR RECOMMENDATION BY PDGN, AND WE

To stop receiving this newsletter email [info@pdgn.org.uk](mailto:info@pdgn.org.uk) with the word unsubscribe.

PDGN is very grateful to sponsors and supporters below for their support in helping PDGN build and maintain a global network of Parliamentary advocates for diabetes.

THE INCLUSION OF THIRD-PARTY ADVERTISEMENTS DOES NOT CONSTITUTE AN ENDORSEMENT, GUARANTEE, WARRANTY, OR RECOMMENDATION BY PDGN, AND WE MAKE NO REPRESENTATIONS OR WARRANTIES ABOUT ANY PRODUCT OR SERVICE



The Parliamentary Diabetes Global Network (PDGN),  
Registered charity number 1175548. Company number 10339168 © PDGN. All Rights Reserved

Website: [www.pdgn.org.uk](http://www.pdgn.org.uk) Email: [info@pdgn.org.uk](mailto:info@pdgn.org.uk)

To stop receiving this newsletter email [info@pdgn.org.uk](mailto:info@pdgn.org.uk) with the word unsubscribe.