

# *This is where we stand:*

## the IDF *position statements*

✎ **Martin Silink and Anne Pierson**

*The International Diabetes Federation (IDF) continues to prepare and release the Federation's position statements. Requests are received regularly for the opinion of IDF on topics as varied and, at times, controversial as sucrose and alcohol consumption. Martin Silink and Anne Pierson offer us an update on the position of IDF on the current diabetes issues.*

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Although our position statements are written by a group of recognized experts, the language they use is simple and concise, and deliberately so. It is crucial that the right message is received from the right source, and understood unequivocally by the right people. Those people, our target audience, come from a variety of fields and backgrounds: people living with diabetes, health-care professionals, the media and the general public.

IDF advocates improvements in health policies around the world. In order to do this, we must optimize

communications with the global media, health decision makers and the general public. This is a key function of the position statements, which are distributed on request to the media or to coincide with special events in the diabetes calendar (World Diabetes Day, IDF events, official WHO days).

People with diabetes in communities around the world suffer inadequacies in care: many people still do not have access to the medication, treatment and services required for optimal self management at prices that they can reasonably afford. Furthermore,

people with diabetes are often the victims of discrimination in the labour market, at the workplace, or at school. These factors can have a serious and negative impact on quality of life. To a large extent, the problems arise from the low overall awareness of the condition.

The IDF position statements are potential tools for raising awareness of diabetes amongst the general public and decision makers, and for advocacy work on behalf of people living with the condition and those at risk.

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### **Defending human rights**

The rights of young people with diabetes of school age are addressed in one of the latest statements to be published: *the rights of the child with diabetes in school*. As well as the

children's basic human rights to safety at school – to be able to monitor blood glucose levels and administer medication where necessary without obstruction – and an adequate education in order to achieve their academic potential, this position statement makes clear reference to key issues in young people's development: integration, nutrition and sport and leisure activities.

**Children must be able to manage their diabetes in the school without exclusion.**

The statement calls for arrangements to be made for young people with diabetes in all school-based activities. This includes all activities which take place before, during and after lessons and are performed on the school grounds, as well as for all school-sponsored activities that take place outside school.

### **Better care for feet**

In order to support and enhance the 2005 World Diabetes Day campaign, diabetes and foot care, IDF informed

in another recently issued position statement of the global impact of diabetes foot damage: every year, a million lower-limb amputations occur as a result of diabetes.

**Amputation rates can be reduced through a multidisciplinary approach.**

This statement communicates a number of key messages: that the diabetic foot represents a massive and growing burden in terms of health, quality of life and health-care costs; that the majority of amputations could be prevented; and that significant reductions can be made in the number of amputations through education and a multidisciplinary approach to diabetes care.

### **Protecting the right to choose**

In diabetes care, the scientific and technological innovations of the last century have accelerated over the past 30 years or so. As a result, insulin produced from a human source promises a theoretically limitless supply; state-of-the-art fast-

acting analogue insulins offer people with diabetes new and welcome flexibility to manage their blood glucose levels; devices which employ the latest digital technology offer the ability to accurately monitor blood glucose levels on a continual basis – and the resulting advantages for effective overall glucose control passed on to the 'user'.

However, the advantages gleaned from the application of the new technologies are not enjoyed by the majority of people with diabetes – those who live in developing low- to-middle income countries.

A position statement on animal, human and analogue insulins was in the pipeline for some time but the complexities – ethical, practical and commercial – demanded that a clear consensus be reached before this could be finalized. Released in March 2005, the statement carries the message that while the human insulin opens the way to a potentially secure supply of the hormone, the animal insulins remain an acceptable practical option, one which some people prefer.



**IDF advocates that children must have the right to manage their diabetes at school.**

**This includes the right to:**

- monitor blood glucose levels
- follow a regular meal plan
- participate in physical activity programmes
- take medications
- treat emergency situations.



**Up to 85% of amputations can be prevented**

“Researchers have established that between 49% and 85% of all amputations can be prevented. It is imperative, therefore, that healthcare professionals, policymakers and diabetes representative organizations undertake concerted action to ensure that diabetic foot care is structured as effectively as local resources will allow.”

- diabetes camps
- type 2 diabetes in children and adolescents
- diabetes in the workplace.

Others are planned. The Task Force has commissioned statements on the metabolic syndrome, and diabetes in disadvantaged communities – the latter to be released on World Diabetes Day 2006. And of course, the process of identifying new topics continues.

IDF supports the right of people to choose their diabetes management options. This is applicable in the case of the position statement on urine glucose monitoring as well as that relating to the analogue insulins. Although these insulins have not yet proven able to deliver real long-term additional benefits safely and affordably, according to IDF, they are “appropriate for use in people experiencing specific problems that a specific analogue might reasonably be expected to address”.

**IDF believes that the ability to choose is important and should be supported.**

In the case of urine glucose monitoring, the IDF position statement focuses on the importance of monitoring on a long-term continuous basis. In many developing regions, the cost of blood glucose monitoring makes it inaccessible to people with diabetes; some people

for a variety of reasons simply do not wish to perform blood testing.

IDF believes that measuring glucose levels in urine is a viable, cost-effective method of monitoring diabetes in a number of settings, and should be maintained as a diabetes management option and enhanced by the provision of education.

The ongoing remit of the IDF Task Force on Position statements is to identify and prioritize some of the most important current diabetes issues. The statements relating to these issues, having been reviewed by the Task Force, must be ratified by the IDF Executive Board. While the process for issuing these position statements may seem slow, ensuring the accuracy and exhaustiveness of its statements is a key concern of IDF.

The Task Force is currently reviewing four new statements:

- blood glucose monitoring in developing countries

✉ **Martin Silink and Anne Pierson**

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