

COUNCIL OF THE EUROPEAN UNION

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NOTE

From:	Presidency
То	Council
Subject:	Diabetes
	- Information by the Presidency

DIABETES: WHAT IS IT?

Diabetes is a chronic, progressive metabolic disease, and it is estimated that up to 7% of the population suffer from diabetes. According to the latest WHO study (published 6 May 2004), diabetes is a leading cause of death in Europe, with 60 million people in the enlarged Europe living with diabetes, and over 50% of those being unaware of their condition. Type 1 diabetes is one of the most common chronic childhood illnesses and its incidence is increasing. Type II diabetes usually effects adults and accounts for 90% of cases and is closely linked to obesity. Sufferers are at higher risk of heart disease, blindness, amputation and kidney failure.

There are a number of risk factors that increase the likelihood of a person developing diabetes:

- Family history & genetic predisposition
- Increased weight (>20% over desired body weight or Body Mass index>27 kg per m2)
- Increasing age
- Previously identified Impaired Fasting Glycaemia (IFG) or Impaired Glucose Tolerance
- (IGT).
- Individuals previously screened and identified with IFG and IGT have blood glucose concentrations above the normal range, but below diagnostic threshold levels for Type II Diabetes.
- Lack of physical activity
- Low birth weight

Type II Diabetes presents a huge challenge both to patients and their families and to medical services. It has been estimated that approximately 150 million people worldwide have diabetes, with Type II Diabetes accounting for about 90% of these cases. Projections by the WHO indicate that by the year 2025, more than 300 million people will have Type II Diabetes. The prevalence of Type II Diabetes in the major European countries (UK, Germany, France, Italy, Spain) was 45.3 million in 2002 and is expected to climb to 60 million by 2012. European prevalence is estimated at well over 30 million among adults ages 20 to 79.

The true prevalence of Type II Diabetes is likely to be underestimated. An increase in diabetes incidence and prevalence translates into a significant economic impact (time away from work, disability allowances, hospital care).

CONCLUSION

Diabetes requires the development of a comprehensive, integrated programme of prevention, care and rehabilitation. It constitutes a significant public health problem with high mortality and serious levels of illness and disability. There exist identifiable interventions and sound evidence based strategies which could have a potential to significantly improve the health of individuals and populations health across Europe.

The fast rise in diabetes prevalence in Europe needs to be recognised as a European public health concern beyond merely awareness-raising. Progress made in cardiovascular and cancer strategies demonstrate the merit of addressing conditions like diabetes in a co-ordinated, strategic and comprehensive way across Europe, given that it can have wide-ranging complications. Indeed, a European strategy for diabetes, a major risk factor of other related diseases such as cardiovascular disease, could make an important contribution to the reduction of public health expenditures in all 25 EU member states.

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