

On behalf of the diabetes community, Diabetes Ireland calls on the Government and the Department of Health to ensure that Budget 2024 includes:

- 1) Costs to **set up a Taskforce to develop a 10-Year National Diabetes Strategy** to improve access and delivery of diabetes care services, improve quality of life (QoL), health and well being of more than 300,000 people living with diabetes in Ireland, their families, carers, employers and friends **[Cost: Negligible]**
- 2) Investment of €5 m to **improve access to any form of a continuous glucose monitoring (CGM)**, for people with Type 1 diabetes as recommended by national and international guidelines. **[Cost: €5 million]**

**DIABETES IN IRELAND**

- The most prevalent chronic condition in people aged between 45-75, but incidence and prevalence increase in people of all ages
- Up to €1 bn is spent annually on diabetes, with more than 50% spent on diabetes complications and hospitalisations
- A leading cause of morbidity and mortality, affecting approx. 308,000 people and their families
- Often goes misdiagnosed, is diagnosed very late or mistreated - this increases the rates and risk of diabetes-related complications
- Diabetes technology, e.g. CGM, improves diabetes management, outcomes and QoL in those using insulin

The Diabetes Ireland survey on 'Accessing diabetes services by people with diabetes in Ireland' conducted in 2023 found that:

- 36.5% of respondents have diabetes-related complications or comorbidities.
- Approx. 40% (mainly those with type 1 diabetes) experienced DKA – Diabetes Ketoacidosis, usually at the time of diagnosis. This could and should have been avoided through better awareness and recognition of symptoms (e.g., in primary care), leading to quicker diagnosis.
- 46% of respondents with type 2 diabetes pay privately for their diabetes appointments.
- Almost half of those with type 2 diabetes and parents of children with diabetes assess their general wellbeing as fair, poor or very poor.
- Up to 75% of respondents do not discuss mental health and wellbeing as part of their diabetes care. Half of them would have liked an opportunity to do so.
- All children had at least one diabetes appointment in 2022. 13% of adult respondents had no diabetes appointment in 2022.

Click [HERE](#) or scan for more info about the survey



Diabetes is a serious global public health issue which has been described as **the most challenging health problem in the 21st century with high individual, social and economic burden.** The cost of diabetes care and complications is a major challenge for the government and the Health Service Executive (HSE). Due to poor resourcing, there are significant gaps in current services which need to be tackled in order to provide optimum diabetes care to everyone in need. With no data - diabetes registry nor clinical audits, we cannot even fully identify what the gaps and issues are. From what we know, despite the best efforts of current diabetes staff, **the delivery of diabetes services in Ireland is at best piecemeal, uncoordinated and unstructured.**

**PRIORITY**

**WE NEED TO ACT NOW AND DEVELOP THE 10-YEAR NATIONAL DIABETES STRATEGY TO:**

1. **REDUCE** the NATIONAL BURDEN of DIABETES
2. **ENSURE** provision of OPTIMAL CARE across the country
3. **MAXIMISE** People's with Diabetes INVOLVEMENT in their CARE and IMPROVE the QUALITY OF LIFE (QoL)
4. **ENABLE** and ASSURE CHANGE



Despite the positive work of the HSE National Diabetes Clinical Programmes and Sláintecare reform, **the lack of available resources to implement current clinical guidelines means people living with diabetes are suffering from a postcode lottery** when it comes to accessing diabetes services and treatments, as well as diabetes-related technology (CGM or insulin pumps). With continuously increasing prevalence and incidence of both, Type 1 and Type 2 diabetes, in children and in adults, and with very high prevalence of pre-diabetes, gestational diabetes, other types of diabetes and obesity in Ireland, **without strategic planning and long-term thinking, the prevalence of diabetes-related comorbidities and complications such as macrovascular disease, chronic kidney disease, retinopathy and blindness, as well as foot amputations will hugely affect Government budgets due to unnecessary and avoidable hospitalisations and admissions.**

**WE CALL ON THE GOVERNMENT TO INCLUDE IN BUDGET 2024:**

**1) COSTS FOR SETTING UP A DIABETES TASKFORCE OF RELEVANT STAKEHOLDERS:**

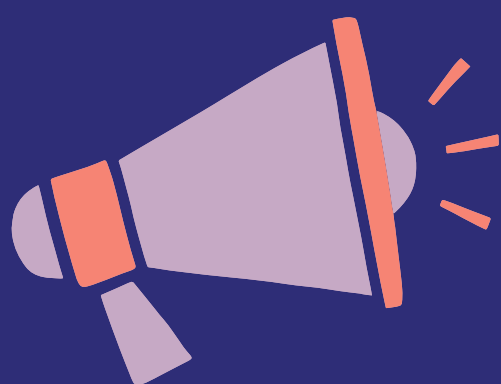
healthcare professionals, academics and researchers, patient advocates, as well as Department of Health and Health Service Executive representants to develop a 10-year National Diabetes Strategy, that provides vision, leadership, goals and priorities, as well as identifying and securing the future funding required that will provide optimum care for every person living with diabetes in Ireland.

**2) €5 M FOR WIDENING ACCESS TO CONTINUOUS GLUCOSE MONITORING TECHNOLOGY (CGM)**

for people with Type 1 diabetes to improve their diabetes management and quality of life.

**REDUCE the NATIONAL BURDEN of DIABETES**

- Improve prevention and educate about risk factors
- Provide better screening for groups at risk
- Ensure early diagnosis



**ENSURE provision of OPTIMAL CARE**

- Provide access to Multidisciplinary Diabetes Teams (MDT), follow integrated model of care, provide safe high quality, person-centered care to all
- Provide treatment, including diabetes technology, to all people with diabetes based on their clinical needs

**MAXIMIZE People's with Diabetes INVOLVEMENT and QUALITY OF LIFE**

- Involve people with diabetes in their care, assure person-centered approach, support advocacy
- Provide mental health and wellbeing support to those in need and ensure involvement of psychologist in MDTs

**ENABLE and ASSURE CHANGE**

- Provide governance, funding and management of diabetes services
- Develop diabetes registry and audits to improve outcomes and workforce planning
- Invest and oversee diabetes research

**All people with diabetes need and deserve access to high standards of care, expertise, treatment aligned with clinical recommendations, access to medicines and technology to maintain good health and quality of life, as recommended by national and international clinical guidelines. With dedicated healthcare professionals, researchers, advocates and decision-makers, with Sláintecare reform, Long-Term Illness Scheme and other good things in Ireland, all we need is a better plan, coordination, governance and a strategy that oversees all aspects of diabetes care in Ireland.**

Click [HERE](#) or scan for more info & references

