

13 MESSAGE ON WORLD HEALTH DAY 7th April 2016

Every year, World Health Day is celebrated on 7 April to mark the anniversary of the founding of WHO in 1948. Each year a theme is selected that highlights a priority area of public health. The day provides an opportunity for individuals in every community to get involved in activities that can lead to better health.

The theme for World Health Day 2016 is diabetes.

Background

In 2008, an estimated 347 million people in the world had diabetes and the prevalence is growing, particularly in low- and middle-income countries. India had 69.2 million people living with diabetes (8.7%) as per the 2015 data. Of these, it remained undiagnosed in more than 36 million people.

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin, a hormone that regulates blood sugar, gives us the energy that we need to live. If it cannot get into the cells to be burned as energy, sugar builds up to harmful levels in the blood.

Over time, high blood sugar can seriously compromise every major organ system in the body, causing heart attacks, strokes, nerve damage, kidney failure, blindness, impotence and infections that can lead to amputations.

Goal of World Health Day 2016: Scale up prevention, strengthen care, and enhance surveillance of diabetes

The main goals of the World Health Day 2016 campaign aims to:

- Increase awareness about the rise in diabetes, and its staggering burden and consequences, in particular in low- and middle-income countries;
- Trigger a set of specific, effective and affordable actions to tackle diabetes. These will include steps to prevent diabetes and diagnose, treat and care for people with diabetes; and
- Launch the first Global report on diabetes, which will describe the burden and consequences of diabetes and advocate for stronger health systems to ensure improved surveillance, enhanced prevention, and more effective management of diabetes.

There are two main forms of the diabetes. People with type 1 diabetes typically make none of their own insulin and therefore require insulin injections to survive. People with type 2 diabetes, the form that comprises some 90% of cases, usually produce their own insulin, but not enough or they are unable to use it properly. People with type 2 diabetes are typically overweight and sedentary, two conditions that raise a person's insulin needs. It may also be seen during pregnancy.

World Health Day 2016: Key messages

1. The diabetes epidemic is rapidly increasing in many countries, with the documented increase most dramatic in low- and middle-income countries.
2. A large proportion of diabetes cases are preventable. Simple lifestyle measures have been shown to be effective in preventing or delaying the onset of type 2 diabetes. Maintaining normal body weight, engaging in regular physical activity, and eating a healthy diet can reduce the risk of diabetes.
3. Diabetes is treatable. Diabetes can be controlled and managed to prevent complications. Increasing access to diagnosis, self-management education and affordable treatment are vital components of the response.
4. Efforts to prevent and treat diabetes will be important to achieve the global Sustainable Development Goal 3 target of reducing premature mortality from noncommunicable diseases (NCDs) by one-third by 2030. Many sectors of society have a role to play, including

governments, employers, educators, manufacturers, civil society, private sector, the media and individuals themselves.

WHO Director-General Dr Margaret Chan Director-General of the World Health Organization make Opening remarks on World Health Day and the launch of the WHO *Global report on diabetes*. Geneva, Switzerland on 7 April 2016

A warm welcome to all who have joined us, in this room and online, as we celebrate World Health Day.

This is the day, set aside each year, when we focus on a major public health issue to commemorate the establishment of WHO in 1948.

This year, we are highlighting diabetes as an especially challenging disease that deserves much more attention. The impact of this chronic metabolic disease on individuals, families, communities, health systems, and health budgets is staggering.

The concern is universal. Long considered a disease of rich societies, diabetes is now increasing in prevalence everywhere, with the most striking, and devastating, increases seen in the developing world.

Worldwide, the prevalence of diabetes has doubled since 1980. WHO estimates that 422 million adults had diabetes in 2014.

When diabetes is not detected early and not controlled early, the health consequences are dire. Diabetes can damage the heart, blood vessels, kidneys, eyes and nerves. For example, lower limb amputation rates are from 10 to 20 times higher among people with diabetes. In poor populations everywhere, the costs of managing diabetes can be catastrophic, pushing households below the poverty line. The costs are likewise crippling for health budgets and national economies. WHO estimates that, each year, diabetes costs the world nearly \$830 billion in direct medical costs alone.

Diabetes debilitates, but it also kills. Diabetes is responsible for around 1.5 million deaths each year. High blood glucose levels contribute to an additional 2.2 million deaths, mainly by increasing the risk of cardiovascular disease. Many of these deaths are preventable.

The lives of people living with diabetes can be improved by expanding access to essential medicines, including life-saving insulin, and making technologies, such as those needed to measure blood glucose levels, more readily available.

At present, insulin is generally available in only around 23% of low-income countries. In such settings, diabetes patients who depend on insulin for survival pay the ultimate price for this failure to make essential medicines and technologies readily available and affordable.

The 2030 Agenda for Sustainable Development sets a very ambitious target of reducing premature mortality from four noncommunicable diseases, including diabetes, by one third. This is truly ambitious. Against the background of what I have just highlighted, much more needs to be done. Other targets call on countries to reach universal health coverage and ensure access to affordable essential medicines. WHO's own global action plan on NCDs seeks to stop the rise in diabetes and obesity by 2025.

Ladies and gentlemen,

We have a great deal of work to do, but we also have good guidance. Today, we are launching the first WHO Global report on diabetes. This is good guidance.

The report makes an important contribution to our understanding of diabetes and its consequences. Its recommendations are a call to action on multiple fronts.

Data set out in the report underscore the need for action, not only from people living with diabetes, but also from different sectors of government, health care providers, civil society,

and the manufacturers of medicines and medical technologies. We also need to engage the system that produces and markets our food.

I invite all of you to do your part. In your personal lives, this means eating healthy foods, being physically active, and guarding against excessive weight gain. Have your blood glucose measured periodically, and strictly follow the advice of your health care provider.

In fact, the diabetes crisis and its huge costs provide one of the most compelling incentives for preventing excess body weight through diet and exercise. This point was strongly underscored by the Commission on Ending Childhood Obesity.

Obesity in childhood can be a direct cause of accelerated onset of diabetes, which was once considered an adult disease. This is no longer the case, as we are seeing more and more cases of diabetes in children and adolescents.

Moreover, the prevention of childhood obesity must start with good nutrition in mothers and fathers even before pregnancy begins.

For governments, reducing the diabetes burden means putting policies in place that promote healthy eating and physical activity throughout the life course. Policies that promote breastfeeding and protect children from the marketing of unhealthy foods and beverages are especially important.

It also means improving the diagnosis and treatment of diabetes by putting in place standard protocols and making the necessary medicines and technologies readily available and affordable.

Since its inception 68 years ago, WHO has drawn on the power of population-wide preventive strategies as a way of lowering morbidity and mortality.

On this World Health Day, diabetes represents a prime opportunity for putting this power to work. The payback will be immense.

Thank you.

Measures needed include expanding health-promoting environments to reduce diabetes risk factors, like physical inactivity and unhealthy diets, and strengthening national capacities to help people with diabetes receive the treatment and care they need to manage their conditions.

"If we are to make any headway in halting the rise in diabetes, we need to rethink our daily lives: to eat healthily, be physically active, and avoid excessive weight gain," says Dr Margaret Chan, WHO Director-General. "Even in the poorest settings, governments must ensure that people are able to make these healthy choices and that health systems are able to diagnose and treat people with diabetes."

Diabetes is a chronic, progressive noncommunicable disease (NCD) characterized by elevated levels of blood glucose (blood sugar). It occurs either when the pancreas does not produce enough of the insulin hormone, which regulates blood sugar, or when the body cannot effectively use the insulin it produces.

Key findings from WHO's "Global report on diabetes"

Among the key findings from the "Global report on diabetes" are:

- The number of people living with diabetes and its prevalence are growing in all regions of the world. In 2014, 422 million adults (or 8.5% of the population) had diabetes, compared with 108 million (4.7%) in 1980.
- The epidemic of diabetes has major health and socioeconomic impacts, especially in developing countries.

- In 2014, more than 1 in 3 adults aged over 18 years were overweight and more than one in 10 were obese.
- The complications of diabetes can lead to heart attack, stroke, blindness, kidney failure and lower limb amputation. For example, rates of lower limb amputation are 10 to 20 times higher for people with diabetes.
- Diabetes caused 1.5 million deaths in 2012. Higher-than-optimal blood glucose caused an additional 2.2 million deaths by increasing the risks of cardiovascular and other diseases.
- Many of these deaths (43%) occur prematurely, before the age of 70 years, and are largely preventable through adoption of policies to create supportive environments for healthy lifestyles and better detection and treatment of the disease.
- Good management includes use of a small set of generic medicines; interventions to promote healthy lifestyles; patient education to facilitate self-care; and regular screening for early detection and treatment of complications.

Global commitments to reduce diabetes

“Many cases of diabetes can be prevented, and measures exist to detect and manage the condition, improving the odds that people with diabetes live long and healthy lives,” says Dr Oleg Chestnov, WHO’s Assistant Director-General for NCDs and Mental Health. “But change greatly depends on governments doing more, including by implementing global commitments to address diabetes and other NCDs.”

These include meeting Sustainable Development Goal (SDG) target 3.4, which calls for reducing premature death from NCDs, including diabetes, by 30% by 2030. Governments have also committed to achieving 4 time-bound national commitments set out in the 2014 UN General Assembly “Outcome Document on Noncommunicable Diseases”, and attaining the 9 global targets laid out in the WHO “Global Action Plan for the Prevention and Control of NCDs”, which include halting the rise in diabetes and obesity.

“Around 100 years after the insulin hormone was discovered, the “Global report on diabetes” shows that essential diabetes medicines and technologies, including insulin, needed for treatment are generally available in only 1 in 3 of the world’s poorest countries,” says Dr Etienne Krug, Director of WHO’s Department for the Management of NCDs, Disability, Violence and Injury Prevention. “Access to insulin is a matter of life or death for many people with diabetes. Improving access to insulin and NCD medicines in general should be a priority.” Global efforts are underway to make medicines, including for NCDs, more available and affordable. Commitments from world leaders, including the SDGs, the 2011 “UN Political Declaration on the Prevention and Control of Noncommunicable Diseases”, the 2014 UN General Assembly “Outcome Document on Noncommunicable Diseases”, and the work of the UN Secretary-General’s high-level panel on access to essential medicines are aimed at improving affordability and availability of essential drugs for people living with diabetes.

WHO website