







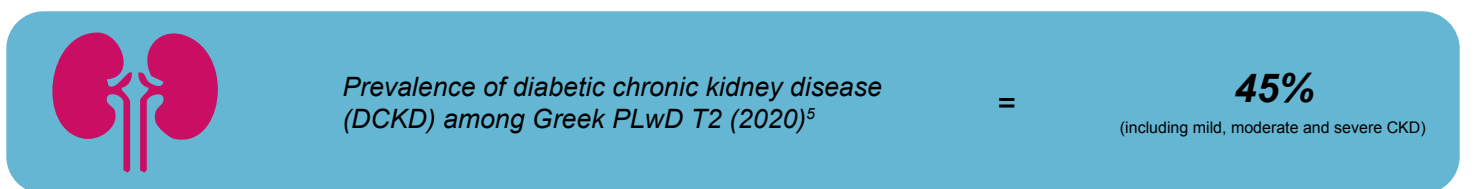


# THE BURDEN OF DIABETES MELLITUS AND OPPORTUNITIES FOR REFORM

## Insights for the Greek Healthcare System

Diabetes mellitus is a rapidly growing global health crisis, causing significant health and economic burdens worldwide. This chronic condition can lead to severe complications such as heart disease, stroke, nerve damage, kidney disease, blindness, and limb amputations. Type 1 diabetes (T1DM) is primarily genetic, while type 2 diabetes (T2DM) is influenced by risk factors such as obesity, physical inactivity, and unhealthy diet.<sup>1</sup> People living with diabetes (PLwD) face unique challenges in managing their condition and preventing complications.






	<b>Prevalence of diabetes among adults (2021)</b>	<b>Number of deaths diabetes contributes to (2021)</b> <sup>2,3</sup>	<b>Diabetes related health expenditure per person (2021)</b> <sup>2,3</sup>
 EUROPE	 <b>9.2%</b> <sup>2</sup>	 <b>1.1 million deaths</b>	 <b>€2,872.37 per PLwD<sup>2</sup></b>
 GREECE	 <b>11.9%</b> <sup>3</sup> <small>(Of which ~10% T1DM &amp; ~90% are T2DM)<sup>4</sup></small>	 <b>22,350 deaths</b>	 <b>€1,747.1 per PLwD<sup>4</sup></b>









## CHALLENGES OF DIABETES CARE IN GREECE

The Greek Healthcare System has made progress in diabetes care, improving access to therapies for PLwD and promoting primary prevention. However, significant challenges persist, primarily related to the coordination and delivery of care.

### Positive Aspects of Greece's Diabetes Healthcare:

-  Universal Health Coverage
-  Access to experts via Diabetes centres
-  Access to continuous glucose monitors (CGMs) and insulin pumps
-  National Action Plan for Public Health (NAPPH)
-  National e-prescription infrastructure

### Issues in Greece's Diabetes Care:

-  Inadequately established system for a designated HCP to guide PLwD care and coordinate services
-  Lack of national diabetes strategy
-  No guidelines directed medical treatment implemented in clinical practice
-  No health technology assessment (HTA) for medical devices and digital health technologies
-  Limited data interoperability across geographies and provider
-  EFPIA WAIT survey indicates that new diabetes medications take significantly longer to reach PLwD in Greece (761 days) compared to the European average (647 days)<sup>6</sup>

# POLICY RECOMMENDATIONS

To achieve these goals, the following policy recommendations are proposed

## 1. DEVELOP A NATIONAL STRATEGY FOR THE PREVENTION AND MANAGEMENT OF DIABETES

- Implement a national diabetes plan that includes national programs for early diagnosis, screening, prevention and management of diabetes and its associated comorbidities
- Develop a national diabetes plan that integrates with the future National Action Plan for Public Health
- Adopt and implement national guidelines to ensure uniform care delivery
- Improve care coordination by establishing a clear access framework for people living with diabetes
- Implement targeted strategies for high-risk populations
- Increase diabetes self-management education and preventative education, with a focus on youth and nutrition
- Introduce policies to promote the uptake of and access to novel technologies through sustainable health system incentives

## 2. INVEST IN DATA ACCESS

- Improve data interoperability across regions and care levels
- Consider adopting telehealth consultations and remote monitoring
- Develop a comprehensive and centralized registry of people living with diabetes and link it to the results of lab examinations and the patient file

## 3. ENABLE A SHIFT TOWARDS HOLISTIC INTEGRATED CARE

- A person-centered approach that empowers multidisciplinary teams including diabetes HCPs & nurses, dietitians, nutritionists and psychologists, to collaborate and provide individualized care
- Increase the role of primary care in care coordination for the prevention and management of diabetes
- Improve access to multi-specialty care for people living with diabetes
- Update e-prescription therapeutic protocols to include provisions for renal function tests (eGFR and uACR) for people living with diabetes to enable early detection and management of diabetic kidney disease

## 4. ADVANCE HTA CAPABILITIES FOR DIGITAL TECHNOLOGIES

- Implement HTA for medical devices to enable evidence-based decision-making for reimbursement of diabetes technologies such as CGMs

## 5. EXPLORE FINANCIAL INCENTIVE MECHANISMS

- Improve HTA and data access capabilities to leverage new insights, leverage new insights for data-driven decision-making and value-based negotiations

### SEE MORE INFORMATION:

<http://www.lse.ac.uk/business/consulting/reports/the-burden-of-diabetes-in-greece>



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