





JOINING FORCES TO FIGHT CVD IN PEOPLE WITH DIABETES: PATHWAYS TO SOLUTIONS

SIDE EVENT AT THE 72^{ND} WORLD HEAL TH ASSEMBLY

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SPEAKERS

Dr Larry S. Sperling, Katz Professor in Preventive Cardiology & Director of the Emory Heart Disease Prevention Center (Moderator)





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Mr Lucas Xavier de
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at the University of São
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Ms Stela Prgomelja, Vice-President of the Diabetes Association of Serbia and Member of the <u>IDF Blue</u> <u>Circle Voices</u>

OVERVIEW

"CVD is silent. People must be educated and talk to their doctors" – this is one of the key messages that Stela Prgomelja, WHF, an international health advocate and person living with CVD and diabetes, brought to the side event Joining forces to fight CVD in people with diabetes: pathways to solutions. Co-hosted by the World Heart Federation (WHF) and the International Diabetes Federation (IDF) on the margins of the 72nd World Health Assembly the event brought together high-level policymakers, scientists, healthcare professionals and inspiring health advocates to discuss strategies to prevent and fight cardiovascular disease in people with diabetes.

The panellists discussed the social determinants of health, the taxation of unhealthy products and the role of healthcare professionals and global institutions such as the <u>World Health Organization</u>. They also addressed the need to build an enabling environment for people living with CVD, diabetes and other non-communicable diseases (NCDs).

Click here to watch the recording of the event.



STELA PRGOMELJA'S STORY

Member of IDF's Blue Circle Voices from Serbia



My name is Stela and I live with diabetes and CVD. I was only 5 years old when I was diagnosed with type 1 diabetes. Despite the daily injections of insulin, I continued living my life to the fullest. My parents and I received health and diabetes education every 3-6 months and my healthcare team always did everything possible to help me live a normal life. My entire family supported me in following the healthy lifestyle that I had to adopt.

However, I had a very hard time accessing care and medication through the 90s in Serbia. Due to the war and economic sanctions, I had to travel to Hungary to buy insulin. When I was 27 years old, I suffered a stroke. My doctor had never provided me with any CVD education, so I never thought I could have a stroke so young.

"I encourage people with diabetes to talk with their doctors about their CVD risk. A CVD diagnosis may be hard to accept, but it is possible to live a full life with diabetes and CVD"

LUCAS XAVIER DE OLIVEIRA' STORY

Member of IDF's Young Leaders in Diabetes from Brazil

My name is Lucas and I have been living with type 1 diabetes since the age of 9. I am a nursing student and member of the IDF Young Leaders in Diabetes programme. I am from Brazil, a country with over 12 million people living with diabetes, 46 % of whom do not know they have it.

My father had a heart attack at 32 years old, while playing football. I was 12 at that time and had already been diagnosed with diabetes. However, no one told me that I was at a higher risk of CVD due to my family history. My doctors never explained this to me.

"Education and awareness are key to prevent CVD. Public health campaigns targeting young people on the importance of healthy lifestyles are essential to teach them about the risk factors that they can control"



EVENT KEY MESSAGES

- Diabetes is a global pandemic of emergency proportions. It affects **425 million people worldwide** 80% of whom live in low- and middle-income countries
- Cardiovascular complications are the main cause of death among people living with diabetes. Two thirds of deaths among people with diabetes are due to CVD
- Preventing and managing CVD in people living with diabetes requires multi-sectoral
 partnerships to address social and economic factors, unhealthy behaviours and the
 cultural environment.
- People living with diabetes must **check their CVD risk** with their healthcare providers. Heart disease can be silent, with no apparent symptoms. Lack of awareness can lead to dramatic consequences.
- People living with diabetes may find it hard to accept a CVD diagnosis. However, they can live a full life despite CVD through lifestyle interventions and appropriate medication.
- **Multi-sectoral cooperation** is required to effectively implement fiscal policies for health, such as taxation of unhealthy commodities.
- The <u>WHO HEARTS technical package</u> underlines each of the **key elements** needed within health systems to adequately manage people with diabetes. It is implemented through **15-20 programmes worldwide**. WHO also guides through standardised guidelines, supports with access to health, and educates and supports health care workers to care for people living with CVD and diabetes.
- There are **lifestyle choices and pharmaceutical interventions** that can help prevent CVD in people with diabetes, yet only a small portion of evidence reaches people affected. Healthcare providers must ensure that people with diabetes have all the information they require to be active actors in their own care

RECOMMENDATIONS

- While no solution fits all contexts, several key elements such as education and cross-sector collaboration, are relevant across all environments.
- Engaging public health representatives, policymakers and decision-makers from all sectors is crucial to tackle the diabetes pandemic.
- **Regular physical activity** can dramatically lower the risk of type 2 diabetes, which makes the promotion of guidelines on physical activity even more important.
- **Health systems** should increase the focus on prevention rather than treatment.
- **Taxation of unhealthy commodities** should focus on products that are high in sugar, salt or saturated fat, and have healthy substitutes.
- The design is critical in how taxation is implemented. **Cooperation** is needed across health, finance and other sectors to ensure taxation measures are implemented successfully.
- We need to align the perspectives of health care workers and patients to create better health care systems. We need to change mindsets, promote knowledge in practice, create community of practice, transform knowledge and harness digital health solutions and artificial intelligence.
- In practice, we need to address the social determinants of health, improve basic medical education and create physician-specific interventions.
- We need to raise awareness of the importance of healthy lifestyles. Public health campaigns targeting young people are essential to teach them about the risk factors they can control and how type 2 diabetes and cardiovascular disease can be prevented.
- Health advocates should create a business case for the social determinants of health so that people have the ability to make the right choices.
- There is a missing link between healthcare workers and large-scale programmes in gathering and managing data. Health care models need to be redefined to include community care models.



ONLINE REACH

On IDF social media, the event generated a total of **37,817 impressions** thought 15 tweets and 3 Facebook posts.

On WHF channels, the video registered 549 views and 197 post clicks, reaching 1,670 people and generating 150 reactions, comments & shares.



More information about the event can be found on IDF website:

www.idf.org

We invite you to watch again the event on WHF's Facebook page:

www.facebook.com/worldhealthfederation

Disclaimer

The claims and opinions expressed by the speakers during this side event do not necessarily represent the views or opinions of IDF and WHF.





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