EVENT REPORT

Increasing productivity, competitiveness and resilience by tackling the interplay between diabetes and obesity

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Organised by

MEP Prof. Ignazio R. Marino

European Diabetes Forum

EVENT HIGHLIGHTS VIDEO

Supported by

EASD

EFSD

FEND
Foundation of European Nurses in Diabetes

Breakthrough T1D™
Formerly JDRF

International Diabetes Federation
Europe

ISPAD
International Society for Pediatric and Adolescent Diabetes

PCDE
primary care diabetes europe

Société francophone du diabète

Introduction

Diabetes and obesity are twin epidemics that pose a growing threat to public health, quality of life, and economic productivity across Europe. Together, they contribute to complications, premature mortality, and rising healthcare costs—currently estimated at €240 billion annually in the European Union (EU).

The number of people with diabetes in the EU is projected to rise from 32 million today to 55 million by 2050. The sharp increase in overweight and obesity rates is a major driver of this trend: the risk of developing type 2 diabetes is around seven times higher among people living with obesity.

Moreover, in adults with overt type 2 diabetes, obesity is a major contributing factor to diabetes-associated cardiovascular complications. This is a dramatic situation considering that around 90% of adults with type 2 diabetes are affected by obesity or overweight.

Obesity is becoming a health issue also among children and adolescents with type 1 diabetes in whom the prevalence of obesity or overweight is already as high as 30%.

Many of the complications in people with diabetes are preventable. Evidence shows that addressing obesity can prevent the progression from prediabetes to diabetes and reduce complications in those already diagnosed. This translates to improved quality of life and major financial savings: every €1 invested in diabetes care can yield over €5 in societal return.

With childhood and adult diabetes and obesity rates on the rise, urgent action is needed and no further delay should be tolerated. The upcoming EU Cardiovascular Health Plan and growing policy focus on non-communicable diseases offer a timely opportunity for a drastic change. To this end, the European Diabetes Forum (EUDF) has issued policy recommendations to provide an informed basis for the policy action.

These recommendations were at the heart of the event co-organised by **MEP Prof. Ignazio R. Marino** and the EUDF on June 24 at the European Parliament. The event brought together policymakers, healthcare professionals, people with lived experience of diabetes and/or obesity, and other stakeholders to explore integrated approaches to prevention, diagnosis, and treatment of diabetes and obesity.

Comprehensive approach is key to prevent and manage cardiometabolic diseases

In his opening speech, **European Commissioner for Health and Animal Welfare Olivér Várhelyi** made an important statement:

"Diabetes and obesity are major public health challenges closely linked to cardiovascular disease, which could reduce life expectancy in the EU by up to three years by 2050. By tackling key risk factors for cardiovascular health, such as smoking and the consumption of ultra-processed foods, we can also reduce the risk of chronic diseases like diabetes. That's why I am working to deliver an ambitious EU Cardiovascular Health Plan by the end of 2025."

European Commissioner for Health and Animal Welfare Olivér Várhelyi delivering a message.

This statement reinforces our core message: only through a comprehensive, integrated approach to the prevention, diagnosis, and management of all cardiometabolic conditions can we truly improve outcomes for individuals living with—or at risk of—diabetes, obesity, and cardiovascular disease. This message is strongly reinforced in the EUDF recommendations, as highlighted by **Prof. Jean-François Gautier**, representing the French-speaking Diabetes Society (SFD).

Early diagnosis and care must be accessible to ALL

The discussion also emphasised the urgent need for equitable access to care and treatment. As highlighted by the event host, **MEP Prof. Ignazio R. Marino**, diabetes claims the lives of approximately 700,000 people in Europe each year. Without strong political will, many individuals will remain undiagnosed, face severe complications, and experience shorter lifespans—ultimately driving up healthcare costs. Alarmingly, 75% of diabetes-related healthcare spending is currently attributed to otherwise preventable complications.

Left to right: Prof. Stefano del Prato (EUDF, EASD), MEP Prof. Ignazio R. Marino, MEP Adam Jarubas.

Weight loss can significantly reduce the risk of developing diabetes. Yet, the prevalence of obesity is steadily growing in Europe with rates that are disproportionately affecting disadvantaged populations. This underscores the importance of ensuring accessible and equitable care and treatment to all European citizens regardless of their socio-economic status. Tackling health inequalities is essential to give everyone the opportunity to live a healthy and fulfilling life.

As **MEP Adam Jarubas**, Chair of the Public Health Committee (SANT) in the European Parliament, rightly pointed out, the issue is not merely financial, but rather is deeply human. Millions are living with the burden of diabetes and obesity-related complications. To reduce this human toll, we must implement routine screening for high-risk groups, primarily among those with overweight and obesity, to detect prediabetes as well as undiagnosed diabetes. Timely intervention is key, together with obesity management becoming a part of everyday diabetes care.

MEP Vytenis Andriukaitis issued a strong call to action, warning that the future costs of inaction on diabetes and obesity must not be underestimated. Without urgent intervention, these costs will continue to rise and worsen due to the alarming increase in childhood obesity across Europe.

Empowering people and fighting stigma

One of the most powerful moments of the event came from **Susie Birney**, representing the European Coalition for People living with Obesity (ECPO). Susie is a passionate patient advocate and a person living with both diabetes and obesity. Sharing her personal journey, she spoke candidly about the persistent stigma that people like her face—even within healthcare systems—where individuals are too often seen only through the lens of their condition.

Her poignant words, "I am not my disease, I am Susie," left a lasting impression on all participants. They served as a compelling reminder of the urgent need to shift the narrative toward one that recognises the person beyond the diagnosis and actively works to dismantle stigma and discrimination in all settings, especially in healthcare.

Susie's words were echoed by **MEP Veronika Cifrová Ostrihoňová**, who joined the call for a more humane, person-centred approach. She emphasised that to truly break the cycle of stigma, we must ensure that people living with these diseases are meaningfully included in all decision-making processes. Public awareness campaigns that challenge the misconception of diabetes and obesity being the mere consequences of personal choices rather than dramatic diseases are urgently needed, along with proper education of all healthcare professionals on the essentials of compassionate, non-judgmental care.

Together, their voices highlighted a powerful truth: real progress begins when we listen to those with lived experience, confront stigma head-on, and build a healthcare system rooted in dignity, empathy, and inclusion

All hands on deck

Left to right: Prof. Jean-François Gautier (SFD), Prof. Eugenia Vlachou (FEND).

To ensure timely diagnosis and effective treatment for people living with diabetes and obesity, we must embrace a truly integrated model of care—one that values the contributions of all healthcare professionals. **Prof. Eugenia Vlachou**, representing the Foundation of European Nurses in Diabetes (FEND), emphasised the important role of nurses. They are often the first point of contact and play a pivotal role in delivering holistic, personalised care that supports patients throughout their journey.

Equally vital is the inclusion of people with lived experience in shaping healthcare policies and practices. Their insights are essential to building systems that are not only effective but also compassionate and inclusive. The European Health Data Space (EHDS) represents a major step forward in this direction.

As explained by **MEP Tomislav Sokol**, who led the European Parliament's work on the legislation, the EHDS will empower patients to access, manage, and share their health data. At the same time, it will provide healthcare professionals with real-time access to comprehensive patient information, such as medication history, lab results, and imaging. This will enable more accurate diagnoses, reduce medical errors, and allow for truly personalised treatment—especially critical for managing complex, chronic conditions like diabetes and obesity.

European initiatives such as the Joint Action on Cardiovascular Diseases and Diabetes in Europe, JACARDI, are also helping to transform care delivery. **Prof. Graziano Onder**, the Scientific Coordinator of the project, explained that JACARDI supports countries in reducing the burden of cardiovascular disease and diabetes through pilot projects that span the full continuum of care—from prevention and early detection to integrated, continuous treatment.

Left to right: MEP Romana Jerković, MEP Tomislav Sokol, MEP Veronika Cifrová Ostrihoňová.

With the right tools, voices, and commitment, we can transform diabetes and obesity care into a more integrated, inclusive, and effective system. Now is the time to act—turning policy into practice and ensuring better outcomes for all.

Prof. Graziano Onder (JACARDI).

Closing the gender gap

Addressing gender disparities in healthcare was another key theme. **MEP Romana Jerković**, Vice-Chair of the SANT Committee, stressed the importance of recognising and responding to the unique health needs of women. She noted that women still spend 25% more of their lives in poor health compared to men and are often underdiagnosed or misdiagnosed—diabetes being no exception. While women's health is finally gaining more attention, this momentum must translate into concrete improvements in care and equity.

Her remarks were echoed by **Prof. Stefano Del Prato**, Chair of EUDF and representing the European Association for the Study of Diabetes (EASD), who shared his clinical experience as an endocrinologist. He highlighted the distinct ways diabetes and obesity affect women, particularly in relation to reproductive health—underscoring the need for gender-sensitive approaches in both research and care.

To close the gender gap in healthcare, growing awareness must lead to real change. Recognising and addressing the unique health needs of women—especially for conditions like diabetes and obesity—is essential for building a more equitable and effective healthcare system.

Conclusion

The event brought to light the many critical dimensions of diabetes and obesity care—emphasising not only the profound impact on individuals, but also the growing strain on healthcare systems and European economies. The message was clear: we must act now. As policymakers, healthcare professionals, researchers, and patient advocates, we share a collective responsibility to ensure timely, equitable, and effective care for all those affected—and to strengthen prevention efforts that can reduce the incidence and complications of these diseases.

We hope this event, along with the EUDF's policy recommendations, serves as a catalyst for meaningful change—and a powerful reminder that no one should be left behind. Everyone, regardless of background, gender, or circumstance, deserves the opportunity to live a long, healthy, and dignified life.

Targeting the interplay between

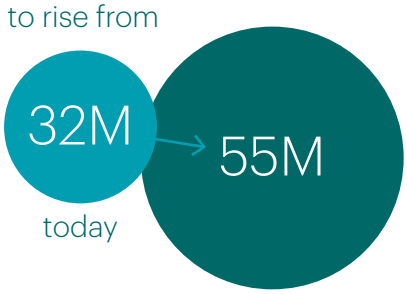
DIABETES & OBESITY

A key to health, quality of life, competitiveness and resilience in the EU

Diabetes and obesity are worldwide twin epidemics affecting the European Union, which together pose a growing threat to health, quality of life, healthcare systems and economic productivity.

THE RISING TIDE OF "DIABESITY"

The number of people with diabetes in the EU is expected to rise from



today

by 2050

of people with diabetes also live with overweight or obesity.

x7

The **risk of developing type 2 diabetes is around 7 times** higher among people with obesity. Combined, diabetes and obesity lead to greater multimorbidity and worse outcomes.

TACKLING DIABETES AND OBESITY TOGETHER MAKES ECONOMIC SENSE

Every year, diabetes, obesity and associated complications cost the EU around **240 billion euros** in healthcare expenditures and productivity losses. Yet, the majority of these costs are avoidable.

The data is clear: tackling obesity can both reduce the onset of diabetes and, among already people with diabetes, reduce the risk of developing debilitating complications.

If left unaddressed, diabetes and obesity-related costs will escalate – particularly due to **rising childhood obesity rates** in the WHO European Region. Children living with obesity are at significantly higher risk of obesity in adulthood.

Policymakers must act now to flatten the curve of obesity and diabetes, thereby reducing the impact of obesity and the risk of complications such as cardiovascular disease, cancer, cognitive impairment and neurodegenerative conditions.

Every €1 spent on diabetes treatment can generate over €5 in societal return.

European Diabetes Forum

SCAN FOR FULL REPORT

Our Recommendations

to target the interplay of diabetes and obesity

Europe's united diabetes community calls for comprehensive policy action to address the twin epidemics of diabetes and obesity. The EU and Member States must shift to a proactive and integrated approach.

European Diabetes Forum

1. **Establish appropriately funded national diabetes prevention, diagnosis and treatment plans integrating obesity management** throughout the diabetes care pathway and setting up adequate disease registries. These plans should include measurable milestones, timelines and accountability mechanisms to ensure implementation.

2. **Enhance interdisciplinary primary care for diabetes and obesity, notably by**
   i. establishing specialised clinics with interdisciplinary teams (physicians, nurses, dieticians, psychologists and other healthcare professionals (HCPs)),
   ii. updating clinical guidelines, and
   iii. incorporating integrated care into HCP educational curricula and training to implement guidelines and promote the use of diabetes and/or obesity management technologies.

3. **Reduce stigma surrounding diabetes and obesity** through HCP educational programmes and public awareness-raising campaigns.

4. **Prioritise prevention of diabetes and its complications** through a body-weight life-course approach, obesity management and lifestyle interventions, with more focus on young adulthood.

5. **Introduce joint diabetes, obesity and cardiovascular health checks,** notably to i. systematically assess people with obesity for prediabetes and diabetes and ii. systematically assess people with prediabetes, diabetes and/or obesity for cardiovascular risk, with the goal of enabling early, holistic interventions.

6. **Eliminate legislative and systemic barriers to enable equitable access to care, EMA-approved treatments and technologies** for all populations, including underserved communities, and support treatment adherence.

MEMBER ORGANISATIONS:

EASD · EFSD · FEND Foundation of European Nurses in Diabetes · Breakthrough T1D™ Formerly JDRF · International Diabetes Federation Europe · ISPAD International Society for Pediatric and Adolescent Diabetes · PCDE primary care diabetes europe · Société Francophone du diabète

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