

Annual Review

2023



European
Diabetes Forum

Member Organisations:



Supporting Collaborators:



FEBRUARY 6

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Contents

1. Foreword
2. Our vision & mission
3. Our strategy
4. Our key projects
5. Our external presence
6. Partners in our vision
7. Get involved
8. How we're run

1. Foreword

Dear friends,

It is a pleasure to address you in the fourth EUDF annual report and it is important to take stock of what progress has been made so far.

Thank you to everyone, especially our Members and Supporting Collaborators, who have supported us to achieve so much in the past 12 months.

Our impact on diabetes policy is growing. In 2023, we were able to organize events and create a true forum for our Members and Supporting Collaborators to discuss together how we can optimize the life of people with diabetes and guide policy makers. As such we are proud to support together with our partner association IDF Europe the MEPs Mobilizing for Diabetes, a group of Members of the European Parliament with a particular interest and a big heart for diabetes.

We are particularly proud of the Diabetes Community Pledge and election campaign, which was co-developed and is supported by the united diabetes community. This is the first time ever the united European Diabetes Community goes out together with a joint agenda, requests and recommendations. We take this opportunity to thank all our Members and Supporting Collaborators to develop this joint work and even more important to reach out to policymakers and discuss with them the pledge and the recommendations.

On top of the three existing strategic pillars, EUDF started working in depth on a fourth pillar 'early detection and screening' with as key projects the 'Health Check' exhibition in the European Parliament and the IHI partnership with the EDENT1FI consortium for the diagnosis of early non-clinical type 1 diabetes for disease interception.

The existing concrete recommendations on our 3 strategic priorities; digitalization, data & registries and integrated care are still up to date and served EUDF and its Members and Supporting Collaborators to give input to several European projects.

- [Diabetes Registries: Enabling high quality diabetes care](#)
- [Five Priorities for Advancing Integrated Care](#)
- [The Promise of Digital Tools in Diabetes: A roadmap for apps](#)

We continued the dissemination of these policy recommendations widely at events, through publications and through promotion on the websites of our partners. We engaged with the European Commission, the European Parliament and WHO in the discussion on how to implement the recommendations. Currently the three strategic topics are included in the European Parliament Diabetes Resolution, in the Healthier Together project, the work packages of the European Commission JACARDI (Joint Action Diabetes & Cardiovascular diseases) and in the 3-year strategic workplan with WHO EURO.

Now we are ready to intensify our engagement with policy makers at European level to ensure further action and implementation on diabetes. The year 2024 is a crucial year with the elections for the European Parliament in June 2024 and the change of power in the European Commission, the community asks European policymakers to take action by creating a strong EU diabetes policy framework supportive of national diabetes action plans.

We extend our gratitude to every Member of the Board as well as each and every Member of the Forum and all experts in the Strategic Forums for all the efforts and activities undertaken and the achievements made to improve the lives of people with diabetes and those at risk.



Stefano Del Prato, Chair EUDF



Bart Torbeys, Executive Director EUDF



“Together we speak with one strong voice to improve diabetes care”

2. Our vision & mission

EUDF aims to improve outcomes for people with diabetes, and unite stakeholders from across the diabetes landscape in Europe. This includes, policy makers, researchers, scientific societies, patient organizations, nurse associations, institutions connected to diabetes related co-morbidities, industry, governments, regulators, payers, and many more.

We provide the platform for these stakeholders to collaborate and to improve how we, as societies, manage diabetes and jointly advocate for policy change that enables our healthcare systems to cope with the diabetes pandemic. We support European and national stakeholders in driving a policy conversation, take concrete action to improve diabetes care, and provide a central point of contact for diabetes policy in Europe.

OUR MISSION:

Ensure the translation of research into policy actions towards better diabetes care at national level.

OUR VISION:

Enable healthcare systems to cope with the diabetes pandemic, while achieving the best possible outcomes

3. Our strategy

Our strategy sets out how we're tackling the diabetes crisis. It provides focus for our work, to make sure we rise to the challenges we face.

We made a commitment to working in four key areas. This report will take you through our 2023 journey, focusing on some of our biggest achievements and the work that has helped us meet our strategic aims.

- 1. Recognize the relevance of diabetes on the public and policy agenda**
- 2. Translate research into policy action**
 - 1. Use health data to define, measure and achieve better outcomes;**
 - 2. Empower PwD through digital technologies and innovative therapies;**
 - 3. Rethink health systems to focus on primary and integrated care;**
 - 4. Identify people with undiagnosed diabetes as a basis for prevention & early intervention**
- 3. Establish EUDF as an organization with European and national**

4. Our key projects

1. Recognize the relevance of diabetes on the public and policy agenda

Diabetes Community Pledge for the European Parliament Elections 2024

The Diabetes Community Pledge has been developed by our Members and Supporting Collaborators ahead of the June 2024 European parliamentary elections, a critical moment for setting the EU policy agenda.



The Pledge contains 15 concrete policy recommendations addressed to the European Union and to Member States to improve the lives of People with Diabetes and those at risk. As we rethink the priorities for the next mandate, we call on policymakers to understand what is at stake and implement the right policies at every level of government, whether European, national or regional.

We believe the EU should build a supportive European framework and help Member States design the right policies on diabetes and provide a clear mandate for European and national actions in these four areas:

1. Early detection
2. Equitable high-quality care
3. Empowering people
4. Embracing science and technology.



What matters to our community is to get things done. Together, we can ensure people with diabetes in Europe live longer and more fulfilling lives, avoid preventable costs and strengthen the resilience and sustainability of health systems.



A campaign toolkit has been developed for the Members and Supporting collaborators based on the content of the pledge and our partners are invited to attend a training program.

| CAMPAIGN TOOLKIT

- Pledge available in ENG-DE-FR-IT-ES-PL-RO-NL-PT
- Background on EU elections + **TRAINING VIDEO**
- Key messages
 - Overarching message
 - Policy asks
- Mapping of key milestones and stakeholders
 - High-level timeline overview
 - Upcoming milestones
 - Overview of key outreach targets
- Mock outreach letter to socialise at national levels
- Social Media toolkit + **CAMPAIGN VIDEOS**
 - Calendar
 - Draft LinkedIn/Twitter posts
 - Guidance & best practice document
- Overview of materials
- Guidance for involving campaign supporters

MEPs Mobilizing for Diabetes

Together with our member association, IDF Europe, and our Supporting Collaborator EFPIA, EUDF continued to support a specific interest group of Members of the European Parliament interested in diabetes entitled ‘MEPs Mobilizing for Diabetes’.



Specifically, EUDF provided the MEP Interest Group with in-depth expertise on the latest developments and thinking on diabetes prevention, management and care. Several members of the MEPs Mobilizing for Diabetes participated as speakers or panelists in the EUDF symposia and events.

The progress and initiatives with regard to the MEP Interest Group on Diabetes were discussed during the EUDF Diabetes Policy Network meetings and the EUDF Board and Forum meetings.

WHO EURO

EUDF engaged with the senior NCD leadership and had a fruitful exchanges on how the outcomes for people living with diabetes can be improved.

EUDF members are eager to support the WHO to accelerate the response to diabetes and offered their clinical expertise, research and NCD management experience.



WHO EURO and EUDF discussed the implementation of the joint WHO EURO/EUDF plan for collaboration with a focus on the development of a WHO EURO region report or policy briefs. EUDF will support this work by providing the necessary expertise to write or review specific parts of the report when invited by WHO EURO. EUDF is an official non-state actor NGO for WHO EURO.

EUDF participated in the preparatory meetings for the organization of the high-level technical diabetes summit WHO Europe organized together IDF Europe. The added value of cooperation with the European Diabetes Forum and the power and potential of partnering with their member associations has been



recognized in the ‘Declaration on accelerating action on commitments to improve diabetes detection and quality of care’. EUDF has endorsed this declaration.

WHO Global – Global Diabetes Compact

EUDF engaged with the senior NCD leadership and had fruitful exchanges on how the outcomes for people living with diabetes can be improved. EUDF members are eager to support the WHO to accelerate the response to diabetes and are ready to offer their clinical expertise, research and NCD management experience.



EUDF was an active member at the Global Diabetes Compact meetings and gave updates about our ongoing work during the Diabetes Compact meetings.



European Commission

EUDF welcomed the initiative ‘Healthier Together’ to support EU countries in reducing the burden of non-communicable diseases and committed to support the implementation at country level of the focus areas laid out by the European Commission. EUDF contributed to the development of specific objectives and actions. We introduced the EUDF priorities and shared best practices and highlighted the role we can play in the next steps and implementation.



To implement the ideas listed in the Healthier Together publication, the European Commission started the EU Joint Action JACARDI to reduce the burden of cardiovascular diseases and diabetes. This new four-year project was launched in Rome on 27 November 2023. This initiative, engaging ministries, public health bodies, non-governmental organizations, and universities, aims to assist European Union (EU) member states in

reducing the burden of cardiovascular diseases (CVD), diabetes, and associated risk factors, both at the individual and societal levels.

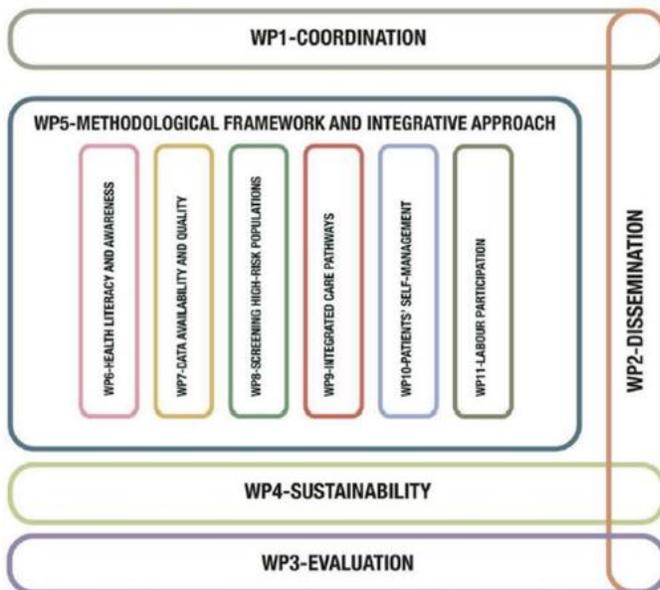


JACARDI emerges as a unified European response to the growing challenge of CVD and diabetes. The project will focus on the implementation of proven and effective practices in the treatment of CVDs and

diabetes through the execution of 142 pilot projects. JACARDI is coordinated by the Italian National Institute of Health (ISS) and has received €53 million in funding from the European Commission. The initiative brings together 21 European countries, involving 76 partners and over 300 public health experts.

EUDF’s chair and Executive Director were invited to attend and contribute to the kick-off meeting. EUDF had several interactions with the Joint Action coordinators and stimulated Members and Supporting Collaborators to take up an active role at country level and to stimulate the public authorities at Member State level to participate in this Joint Action to optimize the management of diabetes at country level.

EUDF will continue to act as an advisor to the coordinators of the Joint Action and will disseminate the Joint Action activities. Above all EUDF will continue to facilitate country engagement and implementation.





2. Translate research into policy action

EUDF offers specific, achievable policy recommendations in four key areas:

- The use of health data to define, measure and achieve better outcomes;
- Empowering people with diabetes through digital technologies and innovative therapies; and
- Rethinking health systems to focus on primary and integrated care
- Identifying people with undiagnosed diabetes as a basis for prevention & early intervention

Data and Registries

Diabetes registries are essential to enable a more evidence-based and data-driven approach to diabetes management. Registries ensure quality control and better adherence to guidelines; track performance across clinics or regions and help identify the reasons for variation in outcomes; and inform the delivery of care and treatments, which can reduce costly complications. Policymakers, health authorities, healthcare professionals, industry, and people with diabetes must work together to advance the development of registries throughout Europe where they do not exist, or to expand and strengthen those where they do.

<https://www.eudf.org/our-work/strategic-forum-data-and-registries/>

EXECUTIVE SUMMARY

Diabetes registries, which collect, track, and analyse patient data on parameters ranging from clinical characteristics, risk factor control indicators, diabetes complications, and treatments, can become an essential tool for improving the quality of diabetes care and securing better outcomes for people with diabetes when integrated in the diabetes care system.

Registries enable evidence-based approach to diabetes management. They ensure quality control and better adherence to guidelines; track performance across clinics or regions and help identify the sources of variation in outcomes; and inform the delivery of care and treatments, which can reduce costly complications.

Yet despite all these benefits, registries are severely underutilised across Europe, with only a handful of countries with national diabetes registries. Given the growing burden of diabetes and the mounting costs to individuals, families, societies, all stakeholders to work together to advance the integration of registries in the diabetes care systems throughout Europe.

There are many political and logistical challenges to realising this vision, but the most important thing is to get registries started – depending on the country in regional settings at first, and then – when successful – to expand nationally.

The European Diabetes Forum, a representative group comprising healthcare professionals, researchers, industry associates, and people with diabetes, have compiled recommendations on building, maintaining, and utilising registries, outlining general principles and guidance on issues related to governance, data collection, and structure and scope. As always, it takes more than just a diabetes registry to improve care. Registries must be designed and used not just for data generation, but always with the goal of improving outcomes for people with diabetes.



Over the course of the year there were several interactions with the public health authorities from Ireland and Belgium concerning the diabetes registries. In order to further work on the implementation of these recommendations, experts proposed to set-up an expert meeting to stimulate national actions and share best practices on how to optimise the clinical use of existing registries. Members of the group will be invited to assess & discuss whether and how the work in this group impacted their current work and members of the group will discuss and reflect what more could be done in their current work. The group wants to inspire countries that plan to set-up a registry and advice on the implementation.

Self-care, Technology and Digitalization

It is essential to hand people with diabetes with the knowledge and tools they need to better manage their condition. Improving the self-management capacities of people with diabetes is key to achieving a high level of compliance to therapy (matching behaviour to medical advice), improved health outcomes and a better quality of life with reduced long-term complications. Here, digital tools including mobile apps can serve as the patient-facing interface for digitally enabled care, giving people with diabetes and their care teams tools to manage their condition through better day-to-day support, greater flexibility and more connectedness with healthcare providers, which can help enable remote monitoring and more data-driven decision-making.

<https://www.eudf.org/our-work/strategic-forum-self-care-technology-and-digitalization/>

EXECUTIVE SUMMARY

Digital technologies are driving significant changes in healthcare, offering new solutions to assist in preventing, diagnosing, and treating chronic diseases. Diabetes is ideally suited to benefit from these types of digital tools, given it is a largely a self-managed condition, and especially data-driven.

The following document and series of recommendations, compiled by a representative group of the European Diabetes Forum consisting of healthcare professionals (HCPs), researchers, industry representatives, and people with diabetes, focuses on one crucial aspect of this digital revolution: mobile health applications, or "apps". Mobile apps is a burgeoning field of innovation in healthcare with enormous potential both to help people with diabetes track the multitude of information related to their condition, while also facilitating a more informed and data-driven approach to decision-making from HCPs.

The following document examines some of general benefits of apps in diabetes, before delving into a more specific consideration of the role of medical apps. Medical apps are, appropriately, more tightly regulated and therefore require policy interventions, as they go beyond purposes of lifestyle, motivational, or educational support, and play a role in monitoring, treating, or managing diabetes.

The integration of medical apps into diabetes care poses many challenges. There are many new apps on the marketplace, but regulations and policy solutions must catch up to keep pace with the new technology. Countries are only now beginning to establish further procedures that allow for review, monitoring, and better integration of medical apps into clinical pathways.

The goal of public policy should be to nurture a **responsible and responsive environment that unlocks the positive potential of digital innovation, one that puts the needs of people with diabetes first**. To realise the potential of mobile apps, two conditions must be in place: apps must be easily **available and accessible** to people with diabetes and HCPs, and they should meet high standards of **effectiveness and quality**.

The recommendations that follow offer guidance and best practice examples on developing a user-centred app, on facilitating an access pathway for apps, and on supporting a swift and appropriate integration of medical apps into health systems.

In a continent as diverse as Europe, policy is not a one-size fits all proposition. But new solutions are needed to improve care and outcomes for people with diabetes, and apps offer enormous promise to give people with diabetes and HCPs alike the tools they need to better manage this condition.

A ROADMAP FOR APPS IN DIABETES

1 DEVELOP A USER-CENTRED APP

2 DEVELOP A BEST PRACTICE ACCESS PATHWAY FOR APPS

3 SUPPORT THE INTEGRATION AND UPTAKE OF HIGH-QUALITY APPS INTO THE HEALTH ECOSYSTEM

European Diabetes Forum

Within the frame of technology, the discussion is growing on the potential and challenges of Artificial Intelligence in the diabetes field. Because of the importance of the topic and its potential implications for the development of a modern approach to health care delivery in diabetes, EUDF has established a new working group on "AI-based clinical decision support".

The use of artificial intelligence (AI) to improve the diagnosis, assessment and treatment of diabetes and its associated cardiometabolic complications is an emerging area of healthcare research and application, that can drive a paradigm shift in the way diabetes care is provided, with the dual objective of minimizing treatment inertia and optimising outcomes for PwD. If the potential for AI in healthcare is realized, it will drive a paradigm shift in the care of people with diabetes, delivering data-driven solutions for disease prediction and management.

This new working group of EUDF investigates this technology as it relates to diabetes, including understanding the possibilities and predicting the scenarios in which AI can improve the delivery of diabetes care and improve outcomes for PwD, as well as increasing the capabilities of diabetes services and HCPs. This includes understanding the limitations of AI technology and the hurdles that must be overcome in delivering these benefits.

Potential areas of activity for this working group may be:

- Reach out to PCPs in Europe (e.g. PCDE, WONCA Europe) to investigate their perception of the benefits and challenges of AI-CDSS from their perspective.
- Providing clinically understandable definitions for AI-CDSS that make it blindingly obvious what their benefits and costs are, and what is needed for them to be used at their full potential.
- Exploring the process that AI-CDSS should undergo during development before being reviewed by regulatory stakeholders and adopted by HCPs and/or PwD.
- Investigate the possibilities for smarter, faster clinical trials, that adapt and accept protocol modifications based on accumulating data.
- Investigating EMA regulatory hurdles and ways in which to lower them.
- Identifying unmet needs for implementation of AI-CDSS and proposing solutions.
- Ensuring retrospective post-market surveillance of AI devices, since prospective pre-market studies may be unrealistic.
- Understanding the competing needs of the multiple stakeholders involved in AI-CDSS development and application, including PwD.
- Recommend minimum standards of education and training for HCPs, including PCPs, and PwD that will maximize outcomes from the use of AI-CDSS.
- At the end of the working-group process, the objective is to present an initial roadmap and recommendations, and explore whether there is both a need and room for a consensus or guidance.

The tasks of this working group are:

- Explore the process that AI-driven healthcare applications should undergo during development before they are reviewed by regulatory stakeholders and adopted by HCPs and/or PwD.
- Identify the unmet needs for implementation of AI in diabetes (e.g. economically, regulatory, educationally, ...).
- Explore the concerns that stakeholders will have before CDSS in diabetes can be used at their full potential.

The objectives of this working group are:

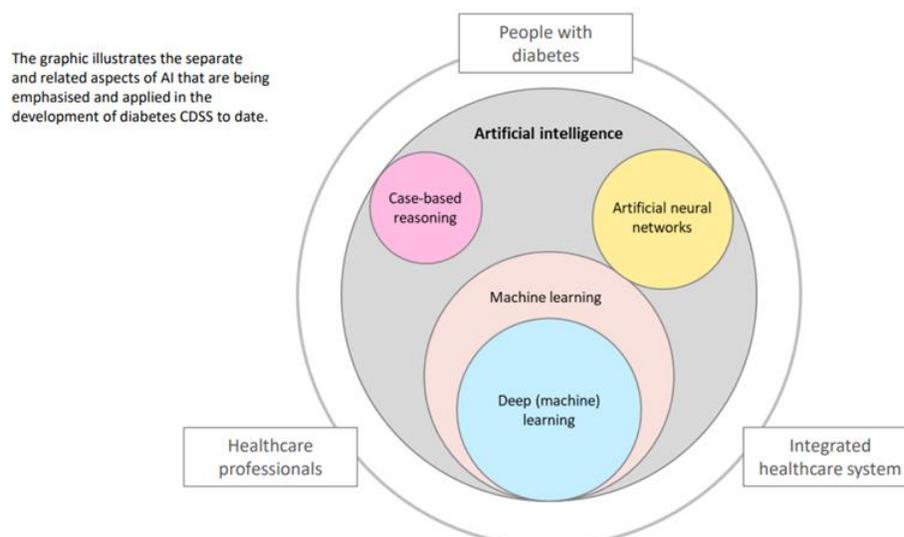
- Present an initial roadmap and recommendations.
- Explore whether there is a need and room for a consensus or guidance.

It is the ultimate goal of the final document that we intend to release in the 2nd quarter of 2024 to raise awareness within the diabetes community and the regulatory bodies of the opportunities and challenges such technology can generate, confident that now is the time to start an open and constructive discussion.

In 2023, we performed a systematic search of the relevant literature on this topic as a basis for our discussions and work, and summarized the key themes visually.

We launched a Delphi Survey to list the priorities, challenges and benefits experts see when AI-based clinical decision support systems would be fully implemented in the healthcare system. We discussed the results of the survey, defined the back-bone of the document to be developed.

Artificial Intelligence and Clinical Decision Support Systems in Diabetes



Integrated Care

We must rethink and redesign care in ways that are better suited to the needs of people with diabetes. That is why integrated care is really the lodestar for assessing all other aspects of diabetes care. At its heart is a longer-term and more holistic approach towards people with diabetes that deals with the condition's complexity.

With this in mind, the EUDF has outlined pragmatic strategies to improve integration in all care settings, including implementing assessment models, developing patient centred pathways for diabetes care, revamping educational curricula, and putting incentives in place to encourage cooperation and teamwork within and between primary and secondary care settings.

<https://www.eudf.org/our-work/strategic-forum-integrated-care/>

EXECUTIVE SUMMARY

Integrated care is an emergent set of practices that seeks to move away from care that is fragmented, episodic, and siloed, with care that is continuous, coordinated, and outcome focused. As the WHO describes it, integrated care is “seamless, smooth, and easy to navigate.”

For people with diabetes, the practical implications of integration are not theoretical, but fundamental to how people access and navigate the health system. Diabetes is a lifelong disease, with daily challenges requiring lifestyle adjustments and consistent engagement with therapies and technologies, a burden that can have significant physical and psychological repercussions if not properly managed. Greater integration of care therefore promotes a long-term and more holistic focus towards people with diabetes that is well suited to the complexity of the disease. Integration is about improving outcomes and improving the quality of life for people with diabetes, two aspects that are interrelated.

Nonetheless, the immensity of the topic often leads to a sense of paralysis and an uncertainty about where to begin. To make advances in integrated care, prioritisation is needed.

The European Diabetes Forum, a group consisting of healthcare professions, researchers, industry representatives, and people with diabetes, have put forward five priorities to make progress in integration. These are pragmatic strategies to improve integration in all care settings, including implementing assessment models, developing patient centred pathways for diabetes care, revamping educational curricula, and putting incentives in place to encourage cooperation and teamwork within and between primary and secondary care settings.

Integration is a process more than an end state. In the diverse countries of Europe, there is no magic formula for integration. What is important is to apply a general set of principles, analytical perspectives, and tools that over time will lead to long-term shifts in the way people experience care, and the way care is provided.

PRIORITIES IN INTEGRATED CARE

- 1 FRAMEWORK TO ASSESS INTEGRATION
- 2 INTEGRATED CARE PATHWAYS
- 3 EDUCATION
- 4 FINANCIAL INCENTIVES
- 5 IMPLEMENTATION STRATEGIES



EUDF is an active member of the [EU Health Coalition](#), a multi-stakeholder initiative representing 49 organisations from across the healthcare sector. EUDF co-chairs the working group on health systems integration and integrated care.

A key recommendation of the coalition is to incentivise integrated care across Europe through dedicated resources, competences development and assessment.

- Support health systems in adopting incentives supporting concrete integration of care and the development of integrated care patient pathways. This could be made possible, for instance, by
 - Researching and implementing innovative financing models, linked to value and outcomes, ensuring affordability, bridging of budget silos and delivery of better care.
 - Linking payments to outcome metrics to incentivise focus on high-quality service delivery, positive patient outcomes and quality of life.
 - Developing a European framework to assess implementation and progress on integrated care (through dedicated EU project) and the inclusion of an integration of care measure in EU projects proposals.
- Boosting health professionals’ integration and interdisciplinary skills. Health systems integration elements should be better included in education and on-the-job training, by working with professional institutions to provide educational materials and opportunities on integrated care.

Within the coalition, we are exploring opportunities with IFIC (International Foundation for Integrated Care).

The EUDF recommendations on Integrated Care were presented at the International Conference on Integrated Care (ICIC), organised by IFIC.

A poster summarising the recommendations was filed for presentation at the 2024 ICIC conference.



Early identification and screening

Diabetes is a rapidly accelerating public health crisis demanding immediate policy attention. Early detection of diabetes is important, as timely and adequate diabetes management could prevent or delay complications, comorbidity, poor quality of life and premature death, as such contributing substantially to decreasing the burden of diabetes for individuals, health systems and societies.

Screening and early diagnosis allows to identify people with undiagnosed diabetes as a basis for prevention and intervention. In 2023 we launched this new workstream with a focus on all types of diabetes.

Type 1 diabetes (T1D) is the most common chronic disease in children and adolescents. The European Region has the highest number of children and adolescents living with T1D (295,000) as well as the highest incidence annually with 31,000 new cases per year. The incidence of T1D is increasing in Europe by more than 3% per year.

A large proportion of people with T1D are diagnosed under dramatic circumstances in the emergency rooms, presenting with abnormally high blood sugars and a dangerous, sometimes fatal, condition called diabetes ketoacidosis (DKA). Detecting T1D before symptoms occur is possible through a simple blood test. Screening for T1D would provide people the time to prepare for the diagnosis, develop a plan for further monitoring with their doctor and avoid serious adverse events and hospitalization.

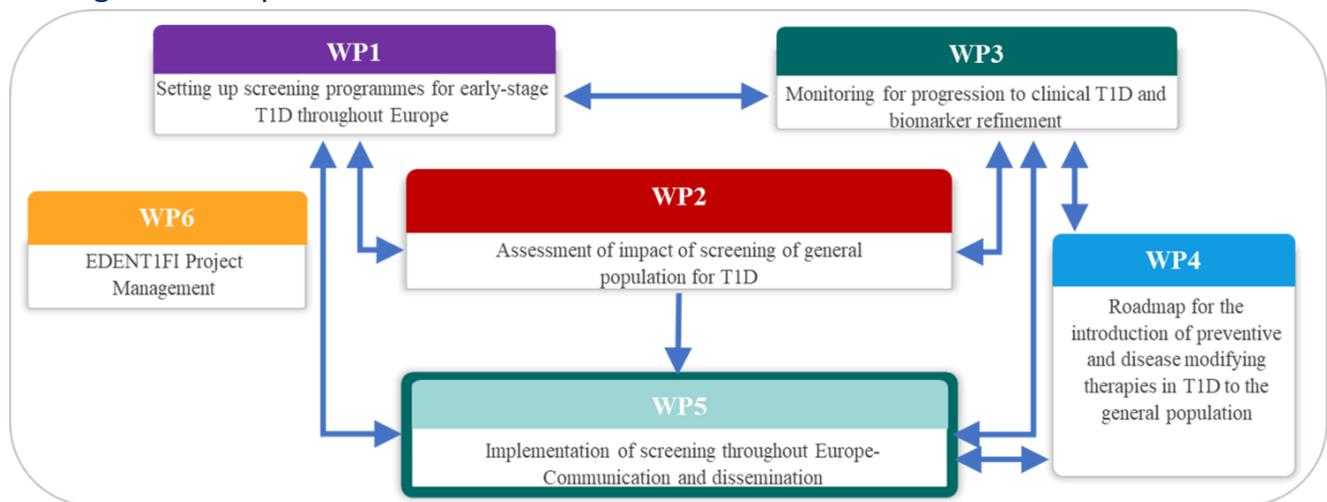
In a groundbreaking collaborative effort, academic researchers, industry leaders, and charities have joined forces to combat Type 1 Diabetes (T1D) with the support of a €22 million grant from the Innovative Health Initiative (IHI).

EDENT1FI, which stands for "European action for the Diagnosis of Early Non-clinical Type 1 diabetes For disease Interception," is a global consortium comprised of 28 partners



spanning 12 countries. These partners have come together with a shared mission: to identify T1D at its pre-clinical stage in children in the general population. The project is funded through the Horizon Europe program and is set to run over five years.

EUDF was selected as partner in this consortium and is a member of the work package 5 'communication and dissemination' working on the implementation of screening throughout Europe.



More information:

[Italian law for national pediatric screening for type 1 diabetes](#)

[EDENT1FI - European action for the Diagnosis of Early Non-clinical Type 1 diabetes For disease Interception](#)

Given the silent and progressive nature of **Type 2 Diabetes (T2D)**, early detection and prompt diagnosis are critical to avoid long-term complications such as heart diseases, kidney diseases and eye disease. Not only are these complications potentially overwhelming from a personal perspective, but they are also hugely costly to health systems.

Screening people for diabetes and diabetes-related complications will help ensure that the relevant action is undertaken early (e.g., initiation of education and treatment) thereby delaying, or reducing the risk of developing, the condition and/ or its complications. While the investment in upfront screening and risk-reduction campaigns might be significant, the case for the cost-effectiveness of prevention has been clearly demonstrated. Furthermore, targeted screening for type 2 diabetes may be considered, in particular among adults with overweight, obesity, high blood pressure, high

cholesterol, or other relevant risk factors. Screening of people at high risk of developing diabetes should be integrated with high blood pressure and hypercholesterolemia screening programs within primary care. Selective screening for diabetes and prediabetes is also recommended for patients with established cardiovascular disease.

A main activity in 2023 was the exhibition on health checks in the European Parliament, EUDF was one of the co-organizers of this event.

Over 150 attendees actively participated in the 3-day event "Because we can't afford not to: Let's make a joint health check for CVD and diabetes happen" event over the course of the week in the European Parliament.

The discussions explored, among others, the current political commitment towards improving conditions for people living with diabetes and cardiovascular disease in Europe, which, as it was pointed out by many speakers, is still insufficient.

MEP ENGAGEMENT



10+ MEPs spoke in one of the meet-the-expert sessions or visited the exhibition:



István Ujhelyi
(S&D, HU), Event Host



Christel Schaldemose
(S&D, DK)



Nicolás González Casares
(S&D, ES)



Franc Bogovic
(EPP, SI)



Maria da Graça Carvalho
(EPP, PT)



EP Vice-President Marc Angel
(S&D, LU)



Susana Solís Pérez
(Renew, ES)



Frédérique Ries
(Renew, BE)



Katerina Konečná
(The Left, CZ)



Stelios Kypourououlos
(EPP, EL)



More needs to be done, and we must draw attention to the fact that EU institutions have the power to make a significant difference in the lives of over 100 million people (collectively) living with CVD and diabetes.

A record number of over 20 Members of the European Parliament attended, including host MEP Istvan Ujhelyi, EP Vice-President Marc Angel, MEP Maria da Graça Carvalho, MEP Christel Schaldemose, MEP Nicolas Gonzalez Casares, MEP Franc Bogovic, MEP

Susana Solis Perez, MEP Frédérique Ries, MEP Kateřina Konečná, to name a few. Many MEPs stated that effective policy action is needed to tackle CVD and diabetes and improve conditions for people living with it. As it was mentioned, policymakers must understand the urgent need for solutions and actions at the EU level. The call for Council Conclusions for the implementation of CVD and diabetes health checks is a step in the right direction for improving conditions for people living with the diseases and releasing pressure on healthcare systems by moving part of the burden currently on secondary care, where most CVD patients are treated after a CV event, to the primary care level by improving screening programs.

More than 10 professors and medical experts on diabetes and CVD were present, including Prof. Mathieu from the European Diabetes Forum (EUDF), Prof. Sinnaeve from KU Leuven, and Prof. Cos from Primary Care Diabetes Europe (PCDE), who actively participated in several sessions throughout the week. The experts stressed repeatedly how more effective financing methods for healthcare systems must be found to ensure that resources are allocated appropriately. Making good use of the data that is available to healthcare systems, insisted the experts, could help prevent complications and unnecessary treatments, becoming an essential tool for improving the quality of diabetes and CVD care and ensuring better outcomes for people with diabetes and CVD when integrated into the care system.

Over 15 representatives from medical and patient associations and industry, and more than 10 patient ambassadors for CVD, Familial Hyperlipidaemia, and both type 1 and 2 diabetes engaged with visitors and participated in discussions. The patient ambassadors explained how screening needs to be made easily comprehensible and accessible to those who need it. According to most of them, people need to be made more aware of the risk factors that are commonly associated with CVD and diabetes, such as smoking habits, cholesterol levels and genetic predisposition to name a few.

The event was made possible by the close collaboration of the International Diabetes Federation – Europe (IDF Europe), the European Diabetes Forum (EUDF), the European Heart Network (EHN), and the European Federation of Pharmaceutical Industries and Associations (EFPIA). The cooperation of all partners strengthened the case that there is a strong link between the two diseases, which is why a joint approach makes sense and would be very effective.



The event featured six different sessions, each with a specific focus on CVD and diabetes, accumulating into more than 6 hours of talks and discussions on how to improve the lives of people living with CVD and diabetes. From many of the sessions a common message came through: there is a strong interconnectedness between the

two diseases, making linked and joint policies solutions necessary. Council Conclusions on the implementation of cardiovascular and diabetes health checks are a cost-effective, easily implementable, and effective solution to reduce premature deaths and improve the lives of people living with CVD and diabetes.

The event was also featured on POLITICO, mentioned by Members of the European Parliament during a Committee on Public Health, and gained a great amount of traction on social media.

More information:

[The case for a Joint Cardiovascular and Diabetes Health Check](#)

[The Diabetes Risk Score](#)

[Do the FINDRISC test](#)

Gestational diabetes places an increased risk for the mother and the child to develop T2D and / or T1D later on in life. Detection of women with hyperglycaemia during pregnancy is crucial as they have a higher risk of developing adverse pregnancy outcomes and neonatal problems. Follow-ups of mothers and babies must also be included in all risk-reduction strategies.

In many countries screening for gestational diabetes among pregnant women has been implemented based on guidelines. These guidelines differ according to screening approaches and criteria for gestational diabetes, which results in various screening practices across and within EU countries. To improve the quality and outcomes of gestational screening, guidelines may need to be updated and aligned, and good practices could be exchanged.

3. Establish EUDF as an organization with European and national impact

In 2023, important progress was made to contribute to our ambition to build a strong coalition on diabetes, including all relevant stakeholders. Importance steps were made to further professionalize the association.

- The existing strategic plan was updated
- An Executive Forum was set-up with the senior management of the industry Supporting Collaborators to exchange on the ambition and priorities of EUDF
- Several General Assembly meetings were organized
- Strategy Forums are operational, including representatives of science, industry, patient organizations, healthcare professionals
- EUDF engaged with Members and partners to ensure EUDF was represented in the main relevant conferences
- External communication and policy outreach was initiated to facilitate the external recognition as the European platform for a united diabetes voice
- There were regular contacts with the existing national diabetes forums in Belgium, Romania and Italy.

EUDF, AN ORGANIZATION WITH NATIONAL IMPACT

ROMANIA



BELGIUM



ITALY



5. Our external presence - uniting stakeholders from across the diabetes landscape

EUDF's participation to Webinars & Symposiums

The case for a joint CVD and diabetes health check - 28 February - 2 March Exhibition in the European Parliament



Improving population lifestyle choices is not enough to tackle the burden of CVD and type 2 diabetes. However, population-wide screening is not the best option either. In addition to comprehensive screening already in place, the addition of quick, inexpensive targeted joint cardiovascular and diabetes health checks would be a cost-effective way to improve early diagnosis. It is crucial to diagnose people with CVD or diabetes as early as possible to prevent complications and save downstream costs. Given the interlinks between CVD and T2D, joint health checks based on common risk factors for both diseases (high BMI, high blood pressure, tobacco use, alcohol consumption, high blood glucose and high LDL cholesterol) are a sensible and cost-effective option for previously identified at-risk individuals.

[Event Report](#)
[Backgrounder](#)
[Infographics](#)
[Event Video](#)



SFD Annual conference – March 22

Thinking about the Ethics of Telemedicine and artificial intelligence in diabetology

EUDF's Executive Director was invited to chair this session and introduced EUDF and its recommendations on digital tools.

- Moderator: Bart TORBEYNS
- How artificial intelligence is used to treat obesity - Karine CLÉMENT
- Care relationship and telemedicine: new legal responsibilities and patient empowerment - Lina WILLIATE-PELLITTERI
- Daily ethics in the relationship between caregivers and diabetics in the era of Connected Medical Devices - Jacques BRINGER



International Conference on Integrated Care - ICIC 23 – May 24

Change Management and collaboration: factors for successful implementation

The EUDF recommendations on Integrated Care were presented at the International Conference on Integrated Care (ICIC), organised by IFIC.

Wednesday 24 May Day 1 Day 2 > Day 3

Parallel Sessions 9 Parallel Sessions 10 Parallel Sessions 11 Parallel Sessions 12 Plenary 4 Close of conference

23rd ICIC23 INTERNATIONAL CONFERENCE ON INTEGRATED CARE 22-24 May 2023 Antwerp, Flanders

2.30pm – 3.45pm **PLENARY 4 Change Management and Collaboration: factors for successful implementation** QE Hall

Chaired by
Dr Arturo Alvarez, Head of Integrated Care Solutions, International Foundation for Integrated Care (IFIC) 
Prof. Dr. Mirella Minkman, Director, Vilans and Board Member, International Foundation for Integrated Care (IFIC) 

Lessons from implementation
Dr Niamh Lennox-Chhugani, Chief Executive, International Foundation for Integrated Care (IFIC) 

A policy-makers response
Maya Matthews, Acting Director, Digital, EU4Health and Health Systems Modernisation, European Commission 
Rafael Cofiño, former General Director of Public Health, Asturias Government 
Stefania Ilinca, Advisor on Long-term Care, World Health Organization - Regional Office for Europe 
Michał Dziegielewski, Director of Health Care Department, Ministry of Health, Polish Government 
Bart Torbeyns, Executive Director, European Diabetes Forum (EUDF) 
Sasa Jenko, Head of Health Sector, European Commission, Directorate General for Structural Reform Support, DG REFORM 



Plenary 4: Change Management and Collaboration factors for successful implementation #ICIC23

International Foundation for Integrated Care

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3

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Revealing policy barriers in diabetes care: how we can improve outcomes – May 24

There are more than 60 million people with diabetes in Europe and this number is likely to continue rising. This poses a major challenge for both individuals and society. In recent decades, better methods for diagnosis, prevention, and treatment of the disease have become available. Some of the new pharmacologic approaches have offered unprecedented opportunities to reduce the risk of chronic complications, which still account for most of the excess costs associated with diabetes.

Despite many innovations, there are still variations in diabetes management across European countries. By revealing gaps and hurdles that create these discrepancies, it may be possible to identify ways to overcome them and achieve the ultimate aim of more uniform treatment of the disease throughout Europe.

EUDF welcomes this publication highlighting the importance of access to innovation. As experts in clinical day-to-day practice, we recognise some of the barriers to innovation access that are linked to guidelines, reimbursement and local processes. As clinical researchers assessing the efficacy and safety of new forms of treatment, we expect beneficial innovations to reach the wider population. It is the EUDF’s mission to “ensure the translation of research into policy actions towards better diabetes care at national level.”

The following pages, therefore, should be seen as a starting point for exploring how diabetes is tackled by different health systems in order, hopefully, to foster a more systematic and analytic assessment of how diabetes is handled across Europe. This publication may serve as a catalyst for all diabetes stakeholders to put in place the necessary strategies to drive timelier adoption of innovation. Doing so will lead to faster diagnosis, more effective disease prevention, a significant reduction of the risk of microvascular and macrovascular complications and a more rational use of financial resources.

The EUDF strives for equal access to innovation and technology for all people in Europe with diabetes, regardless of their age or the type of diabetes they have. We are happy to contribute to the conversation that this publication starts, and we will continue our effort and collaboration with all diabetes stakeholders in finding solutions to improve the quality of life for people with diabetes.

[Publication](#)



Joint PCDE-EUDF session at the International PCDE conference – June 6
Meeting the diabetes challenge: the role of data registries, integrated care and digital tools in improving lives and outcomes for people with diabetes.

Diabetes is one of the greatest health challenges Europe faces today. Across Europe, 1 in 11 adults lives with diabetes, 61 million people total, with costs to individuals, health systems, and society. EUDF convened experts from across the diabetes landscape to devise fresh ideas and solutions in three key areas – digitalisation, data registries, and integrated care. PCDE contributed to the three Strategic Forums and at the event, the PCDE experts presented the recommendations to the audience. Chantal Mathieu, vice-chair of EUDF introduced the session.

INVITATION TO EUDF - PCDE SYMPOSIUM

**Meeting the diabetes challenge:
 The role of data registries, integrated care and digital tools in improving lives and outcomes for people with diabetes**



FRIDAY, 16 JUNE, 15:30-16.30 – REGISTER TO ATTEND THE PCDE CONFERENCE @ [HTTP://WWW.PCDECONFERENCE.ORG/](http://www.pcdeconference.org/)



European Collaborative effort in Diabetes Research - Breakfast debate in the European Parliament - June 7

More than 32 million people live with diabetes in the EU. Diabetes is one of the greatest health challenges of modern times – and this challenge will continue to increase unless we take concrete action and unless we work together. With this event we highlighted that funding diabetes research is the foundation for future success and better outcomes for people with diabetes.

[Watch highlight video](#)

[Read event report](#)

European Collaborative effort in Diabetes Research

European Parliament Breakfast debate
June 7
08³⁰-09⁵⁵
MEP salon
ASP ground floor

Diabetes is one of the greatest health challenges of modern times – join us in this debate and let's take action together towards this increasing challenge,
MEP Dan Nica

Speakers:

- Jeannette Soderberg, Director, Research EU and Middle East, JDRF
- Hugh Laverty, Executive Director, IHI
- Professor Chantal Mathieu, President, EASD, vice-chair, EUDF
- Dr Kate Gajewska, Committee Member, ISPAD
- Cajsa Lindberg, T1D advocate, Advisor, IDF Europe
- Dr Eric Claverol, Program Manager for medical technologies and medical devices, EIC

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Customize channel | Manage videos

European Diabetes Forum
 @europeandiabetesforum706 22 subscribers 25 videos
 The European Diabetes Forum (EUDF) enables healthcare systems to cope...
[eudf.org](#) and 1 more link

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Video Grid:

- Chantal Mathieu (0:47) - 5 views - 3 months ago
- Cajsa Lindberg (0:38) - 5 views - 3 months ago
- Nica Dan (0:53) - 2 views - 3 months ago
- Jeannette Soderberg (1:07) - 13 views - 3 months ago
- Hugh Laverty (0:35) - 5 views - 3 months ago
- Dr Kate Gajewska (0:36) - 5 views - 3 months ago
- Dr Eric Claverol (0:41) - 4 views - 3 months ago
- European Collaborative effort in Diabetes Research - Highlights from the breakfast... (3:13) - 17 views - 3 months ago

EUDF Symposium at EASD 2023 in Hamburg – October 4

From Concept to Coalition: national responses to the diabetes epidemic

Stefano Del Prato reminded the audience that EUDF was founded as an NGO to bring together multiple stakeholders from across the diabetes landscape in Europe in order to present a united voice on the needs of the diabetes community to governments, regulators, payers and others. EUDF members are relevant research and scientific societies, patient organizations,



professional healthcare organizations and institutions connected to diabetes related co-morbidities, pharmaceutical partners and relevant medical technology industries. Similar fora or platforms exist or are emerging at country level to ensure that the relevance of diabetes is recognized on the public and political agenda at country level. Since public health is a shared competence between the European Union and EU countries, action at both levels, national and European, is needed. The EUDF recommends and will support countries to bring together multiple stakeholders from across the diabetes landscape in the country in order to present a united voice on the needs of the diabetes community to governments, regulators, payers and others. The aim is not only to have a united voice - which is more likely to be heard – but also to establish a definitive program of goals developed by and involving all forum members. During the session we heard the success stories of national collaboration from Italy, France, Romania, Belgium and Germany. Agostino Consoli, Jean-François Gautier, Cornelia Bala, Frank Nobels and Baptist Gallwitz presented how they collaborate with other stakeholders in their country, how the initiative started at the national level and who is involved. They delved deeper into the most important issues for people with diabetes and clinicians and the priorities they have defined for the coming months.

EASD Annual Meeting – Best Practice Session

October 4 | 14:00–16:00

From Concept to Coalition:

national responses to the diabetes epidemic

Welcome and opening remarks, the potential of multi-stakeholder alignment in diabetes,
Stefano Del Prato, Chair EUDF

Best practice examples:

- ▶ *Italian Diabetes Forum – Agostino Consoli*
- ▶ *Diabetes cooperation in France – Jean-François Gautier*
- ▶ *Romanian Diabetes Forum – Cornelia Bala*
- ▶ *Belgian Diabetes Forum – Frank Nobels*
- ▶ *Diabetes cooperation in Germany – Baptist Gallwitz*

Panel Q&A: Establishing National Cooperation

Closure *Chantal Mathieu, President EASD, vice-chair EUDF*



Finally they presented a number of very concrete successes and achievements, such a new regulations.

Chantal Mathieu concluded that a continuous bidirectional flow of info and collaboration between EUDF and national fora is of mutual interest and invited the

National Diabetes Forums to follow the activities of the EUDF and use the documents as inspiration for local implementation. We provide countries with qualitative documents validated by all members and supporting collaborators of the EUDF. Given that topics such as ‘integrated care’, ‘data and registries’ and ‘self-care, digitalization and technology’ are important topics in many countries, these documents can save time and resources at a national level and serve as a basis for national policy activities.

[Watch symposium recording](#)

[View symposium slides](#)

EUDF Spotlight Session at EASD 2023 in Hamburg – October 4

AI in Diabetes Care: Potential and Concerns

Chronic diseases are putting more and more pressure on health budgets in Europe. The quality and accessibility of healthcare services are unequal, and the shortage of healthcare professionals increases. There is a growing recognition that decision support systems (DSS) can strengthen healthcare and self-management. To support the integration and uptake of high-quality DSS into the health ecosystem, both HCPs and PwD and the diabetes community at large would benefit from a clear roadmap and guidelines on how to take full advantage of these. Artificial Intelligence driven Decision Support Systems (DSS) in the diabetes world can be divided by the target population they are intended to support. There are DSS that are developed to help the HCPs and others that are developed to serve people with Diabetes. In this session we aim to explore the process that DSS should go through in their production before they are

offered to be used by HCPs and/or PwD. We want to discuss how the medical community can use these at their full potential and address some of the concerns linked to the use of AI DSS. At the end of this session, we want to present an initial roadmap and recommendations and explore with the speakers and audience whether there is a need and room for a consensus or guidance. This session was supported by EUDF and kicks off the work in a newly formed working group.



EUDF Spotlight Session at EASD 2023 in Hamburg – October 6

European elections 2024: the role of EUDF and the diabetes community in raising diabetes on the policy agenda

During the EASD Annual Meeting 2023, the diabetes community pledge for the European elections in June 2024 was presented. This is the first time that the European diabetes community has worked together in a structured way to develop common asks for policy makers.

Stefano Del Prato stressed the importance of engaging with candidates for the European elections and proposing them concrete actions they can take to optimise the outcomes for people living with diabetes.

Niti Pall chaired the working group that developed the Diabetes Community Pledge and explained the diabetes community's key questions to policymakers, keeping in mind that people with diabetes should be at the heart of all actions and even driving the action where possible.

The core pillars are:

- Early Detection - Ensure timely diagnosis and alert people at risk
- Equitable high-quality care - Provide the right treatment for the right person at the right time
- Empowering People - Address lack of awareness and understanding about diabetes
- Embracing Science and Technology - Harness their untapped potential to deliver effective and tailored care for PwD and those at risk



Finally Bart Torbeyns invited all participants to engage at country level with the candidates for the European elections. He explained EUDF is developing a toolkit to facilitate that engagement and that the pledge will be translated in German, French, Italian, Spanish, Polish, Dutch, Romanian. Now it's a good moment to start defining your actions at country level and sharing this common work as widely as possible. We need all of you!

[Watch session video](#)

[View session slides](#)



EASD Annual Meeting | Spotlight Session
October 6 | 10:45-11:15

European Elections 2024:

the role of EUDF and the diabetes community in raising diabetes on the policy agenda



Welcome and opening remarks: **Raising diabetes on the European policy agenda**
Stefano Del Prato



What are we asking for? **The Diabetes Community Pledge for the European elections**
Niti Pall



How can you support the diabetes election campaign? **The National Advocacy Toolkit**
Bart Torbeyns

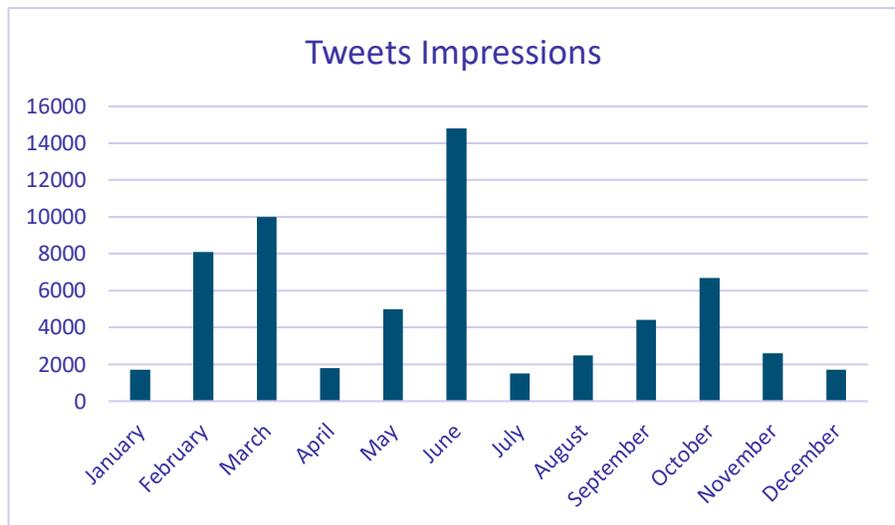
Early Detection | Equitable Care | Empowering People | Embracing Science & Technology

Social media

Coordinated by the Executive Director, the social media presence of the organization further grew with the valuable input of the EASD communications team who supported the implementation of successful social media engagement efforts, related to our external activities and work in the Strategic Forums. In preparation of our symposia and webinars, the communication and promotion of the programs played a huge role in the increase of our social media presence. We increased the volume of social media activities due to the approaching symposia, growing Membership and progress in the work at the Strategic Forums, this resulted in a social media growth.

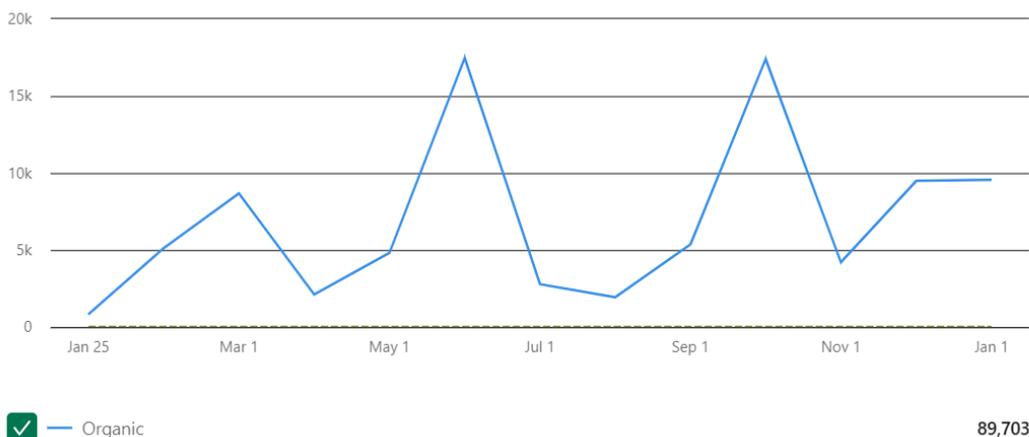
Twitter - On Twitter there were 60.800 tweet impressions and EUDF gained 175 new followers, reaching 1878 followers in total.

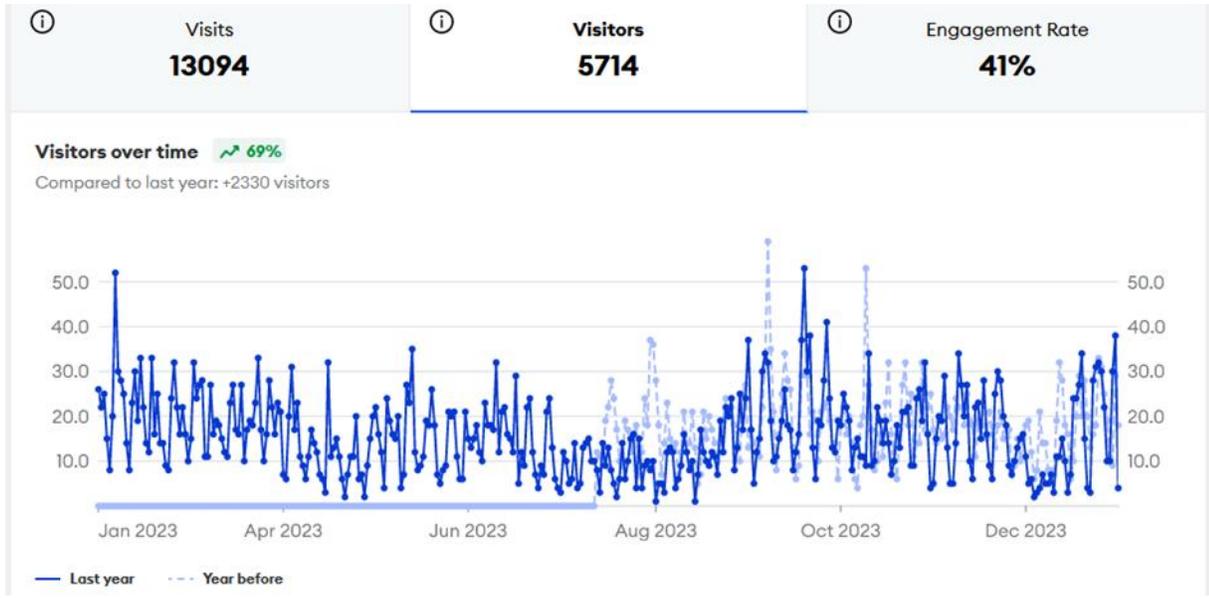
Tweets Impressions:



LinkedIn – EUDF gained 1012 new followers over the year 2023 and has now 2276 followers.

LinkedIn Impressions:





Visits: How many times the site was visited, includes repeat visits

Visitors: How many unique, individual visitors arrived at the site

Engagement Rate: Percentage of visitors who clicked on more than one page on the site

Traffic sources	Top performing pages																																																																	
<p>Learn where your visitors come from to help you expand your reach.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid #ccc;">Organic Traffic (search)</td> <td style="text-align: right; color: green;">+164%</td> <td style="text-align: right;">19%</td> </tr> <tr> <td style="border-bottom: 1px solid #ccc;">Direct Traffic</td> <td style="text-align: right; color: green;">+53%</td> <td style="text-align: right;">73%</td> </tr> <tr> <td style="border-bottom: 1px solid #ccc;">Referral Traffic</td> <td style="text-align: right; color: green;">+70%</td> <td style="text-align: right;">7%</td> </tr> <tr> <td style="border-bottom: 1px solid #ccc;">Social</td> <td style="text-align: right; color: red;">-10%</td> <td style="text-align: right;">1%</td> </tr> <tr> <td style="border-bottom: 1px solid #ccc;">Paid Social</td> <td style="text-align: right; color: red;">-50%</td> <td style="text-align: right;">0%</td> </tr> <tr> <td style="border-bottom: 1px solid #ccc;">Paid Search</td> <td style="text-align: right; color: green;">+0%</td> <td style="text-align: right;">0%</td> </tr> <tr> <td style="border-bottom: 1px solid #ccc;">Others</td> <td style="text-align: right; color: green;">+0%</td> <td style="text-align: right;">0%</td> </tr> </table>	Organic Traffic (search)	+164%	19%	Direct Traffic	+53%	73%	Referral Traffic	+70%	7%	Social	-10%	1%	Paid Social	-50%	0%	Paid Search	+0%	0%	Others	+0%	0%	<p>See which pages are most popular with your visitors.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Page</th> <th style="text-align: right;">%</th> <th style="text-align: right;">Views</th> </tr> </thead> <tbody> <tr><td>home</td><td style="text-align: right;">40</td><td style="text-align: right;">5,339</td></tr> <tr><td>/our-work</td><td style="text-align: right;">23</td><td style="text-align: right;">3,039</td></tr> <tr><td>/about-eudf</td><td style="text-align: right;">17</td><td style="text-align: right;">2,250</td></tr> <tr><td>/events</td><td style="text-align: right;">6</td><td style="text-align: right;">793</td></tr> <tr><td>/news</td><td style="text-align: right;">6</td><td style="text-align: right;">793</td></tr> <tr><td>/publications</td><td style="text-align: right;">3</td><td style="text-align: right;">408</td></tr> <tr><td>/contact</td><td style="text-align: right;">2</td><td style="text-align: right;">305</td></tr> <tr><td>/cvd-and-diabetes-health-check</td><td style="text-align: right;">0</td><td style="text-align: right;">88</td></tr> <tr><td>/cookie-settings</td><td style="text-align: right;">0</td><td style="text-align: right;">22</td></tr> <tr><td>/privacy-policy</td><td style="text-align: right;">0</td><td style="text-align: right;">21</td></tr> <tr><td>/imprint</td><td style="text-align: right;">0</td><td style="text-align: right;">21</td></tr> <tr><td>/static</td><td style="text-align: right;">0</td><td style="text-align: right;">6</td></tr> <tr><td>/pledge</td><td style="text-align: right;">0</td><td style="text-align: right;">3</td></tr> </tbody> </table>	Page	%	Views	home	40	5,339	/our-work	23	3,039	/about-eudf	17	2,250	/events	6	793	/news	6	793	/publications	3	408	/contact	2	305	/cvd-and-diabetes-health-check	0	88	/cookie-settings	0	22	/privacy-policy	0	21	/imprint	0	21	/static	0	6	/pledge	0	3		
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Publications

Relever le défi du diabète: des recommandations pour les décideurs Européens afin d'améliorer la vie des personnes atteintes de diabète.

Diabète & Obésité • juin 2022 • vol. 17 • numéro 155 [Relever le défi du diabète - Diabète et Obésité \(diabeteetobesite.fr\)](#)

The European Diabetes Forum (EUDF): A forum for turning the tide on diabetes in Europe – [Diabetologia The European Diabetes Forum \(EUDF\): a forum for turning the tide on diabetes in Europe | SpringerLink](#)

Diabetes registries: enabling high quality diabetes care –

Lancet Diabetes & Endocrinology

[Read article here](#)

Applying the WHO global targets for diabetes mellitus - [Nature Reviews Endocrinology](#)

[nature](#) > [nature reviews endocrinology](#) > [viewpoint](#) > article

Viewpoint | [Published: 16 January 2023](#)

Applying the WHO global targets for diabetes mellitus

[Alice Y. Y. Cheng](#) , [Marília Brito Gomes](#) , [Sanjay Kalra](#) , [Andre-Pascal Kengne](#) , [Chantal Mathieu](#) 
& [Jonathan E. Shaw](#) 

Relever le défi du diabète

DES RECOMMANDATIONS POUR LES DÉCIDEURS EUROPÉENS
AFIN D'AMÉLIORER LA VIE DES PERSONNES ATTEINTES DE DIABÈTE



DIABÈTE & OBÉSITÉ • JUIN 2022 • VOL. 17 • NUMÉRO 155

The European Diabetes Forum (EUDF): A forum for turning the tide on diabetes

Chantal Mathieu¹, Jeannette Soderberg², Stefano Del Prato³, Anne-Marie Felton⁴, Xavier Cos⁵, Carine de Beaufort⁶, Jean-François Gautier⁷, Bastian Hauck⁸, Angus Forbes⁹, Robert Heine¹⁰, Peter Schwarz¹¹ and Bart Torbeyns¹², on behalf of the European Diabetes Forum



THE LANCET Diabetes & Endocrinology

Volume 11, Issue 2, February 2023, Pages 70-72

Comment

Diabetes registries and high-quality diabetes care

[Kamlesh Khuntia](#)^a , [Chantal Mathieu](#)^b, [Bart Torbeyns](#)^c, [Stefano Del Prato](#)^d, [Robert Heine](#)^e
EUDF Strategic Forum Data and Registries

Preventing and managing diabetes: Strategies for combating the global health crisis - [Open Access Government](#)

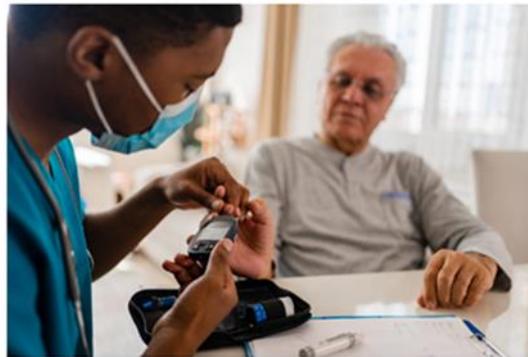


image: © Pymart Studio | dStock

Stefano Del Prato and Bart Torbeyns from the European Diabetes Forum (EUDF) outline the major challenges in preventing and managing diabetes, and the actions policymakers and health systems can take to address them

Follow us on the EUDF Communication Channels

- <http://eudf.org>
- <https://www.youtube.com/channel/UCjcGabHE4mX3lOoc3sPrR5Q>
- <https://twitter.com/EUdiabetesForum>
- <https://www.linkedin.com/in/bart-torbeyns-abb494/>



6. Partners in our vision

EUDF has been created to bring together multiple stakeholders from across the diabetes landscape in Europe. EUDF has 5 pharma companies and 9 medtech companies as Supporting Collaborators, they joined EUDF under the umbrella of the EFPIA Diabetes Platform and the MedTech Diabetes Sector Group.



It's important to highlight that all partners, including the industry partners, are at all moments at the table to discuss the governance, ambition, strategy and the workplan.

7. Get involved

We invite all stakeholders in the European diabetes landscape to join EUDF. Together we will speak with one strong voice to improve diabetes care and make policy makers aware of the urgent and problematic diabetes situation in Europe.

The EUDF is a forum for discussion with all relevant diabetes stakeholders, and for partnership together to achieve explicitly agreed outcomes. Much can be accomplished with a united voice and concerted action.

There is no single way we will achieve our vision to enable healthcare systems to cope with the diabetes pandemic, while achieving the best possible outcomes. And there is no way we can achieve our mission alone. Here are the ways you can be part of our journey.

Full and Associate Membership for non-profit legal entities

As a Full or Associate Member you will have unparalleled access to EUDF and its community of people with diabetes, payers, policy makers, industry Supporting Collaborators and clinicians. The collaboration allows Full and Associate Members to engage in discussion on collaborative projects, and enables Members, with a united voice, to influence the diabetes policies in Europe.

Partnership with Supporting Collaborators

As a Supportive Collaborator you will have unparalleled access to EUDF and its community of people with diabetes, payers, policy makers and clinicians. The collaboration allows companies to engage in discussion on collaborative projects, and enables companies, with a united voice, to influence the diabetes policies in Europe.

For more information on Full and Associate Membership for non-profit legal entities or our partnership with Supporting Collaborators contact info@eudf.org.

8. How we're run

How we're organized and governed

EUDF was co-founded in 2019 by the EASD, EFSD, FEND and JDRF. EUDF is an international non-profit association and is constituted for an indefinite period under the provisions of Book 10 and any other provisions applicable to international non-profit associations of the companies and associations Code of

EUDF STRUCTURE



March 23, 2019. EUDF became a formal non-profit legal entity in March 2020 and in the meantime, Primary Care Diabetes Europe (PCDE), SFD (Société Francophone du Diabète), the International Diabetes Federation Europe (IDF Europe) and the International Society for Pediatric and Adolescent Diabetes (ISPAD) joined EUDF as Full Members. EUDF has pharma and medical technology companies as Supporting Collaborators, they joined EUDF under the umbrella of the EFPIA Diabetes Platform and the MedTech Diabetes Working Group.

EUDF Board of Directors

The EUDF Board has collective responsibility for everything we do and is responsible for:

- Our overall strategic direction, including evaluating progress against our strategic plans
- Ensuring our financial stability
- Acting in the best interests of our organization
- Ensuring that we comply with our governing documents, and any other relevant legislation

We currently have 8 Board Members (the maximum permitted under our Articles of Association is 10) with a broad range of skills, expertise and experience. Some are living with diabetes or caring for someone with diabetes, and some are healthcare



Stefano Del Prato
Chair



Chantal Mathieu
Vice-Chair



Anne-Marie Felton
Board Member



Jeannette Soderberg
Board Member



Niti Pall
Board Member



Jean-François Gautier
Board Member



Xavier Cos
Board Member



Carine de Beaufort
Board Member

professionals. All of our Board Members support and work with us on a voluntary basis. The term of office of the Members of the Board shall be two years, renewable twice.

Board meetings

The Board met 4 times in 2023. The 2023 Board Meetings took place as follows:

- Board Meeting 1 - January 18
- Board Meeting 2 - April 19
- Board Meeting 3 - September 13
- Board Meeting 4 - November 15

General Assembly meetings

The General Assembly met 2 times in 2023. The 2023 General Assembly Meetings took place as follows:

- General Assembly Meeting 1 - 24 May
- General Assembly Meeting 2 - 15 November

Forum meetings

The Forum met 5 times in 2023. The 2023 General Assembly Meetings took place as follows:

- Forum Meeting 1 - February 8
- Forum Meeting 2 - March 29
- Forum Meeting 3 - May 24

-
- Forum Meeting 4 - October 5
 - Forum Meeting 5 - December 6

Diabetes Policy Network Meeting

The Policy network met 4 times in 2023. The meetings took place as follows:

- Policy Network Meeting 1 - March 8
- Policy Network Meeting 2 – June 7
- Policy Network Meeting 3 – September 6
- Policy Network Meeting 4 – November 8

How we organize our work

The Board delegates responsibility for operational management to our Executive Director.

Executive Office



Bart Torbeyns
Executive Director