



WORLD **DIABETES** FOUNDATION

## **PRESS RELEASE**



If we don't act now, our children will bear the future burden of diabetes!

### **Innovative Partnerships to Address the Challenge of Diabetes in South-East Asia**

Chennai, India, 28 November 2008 – Leading global health experts, health ministers, donors and national health authorities are convening today in Chennai for the Diabetes Summit for the South-East Asia Region to discuss strategies aimed at tackling the escalating rates of diabetes, one of the most significant public health challenges of the twenty first century.

The Summit has been organised by the World Diabetes Foundation (WDF) in collaboration with the World Health Organization, Regional Office for South-East Asia (WHO SEARO), the International Diabetes Federation (IDF), and the World Bank. Participants will represent development aid and funding agencies, World Diabetes Foundation project partners, local diabetes associations, health-care providers, academics, policy-makers, non-governmental organisations and international media from across the region.

The Diabetes Summit for South-East Asia will highlight the approach that the World Diabetes Foundation and developmental partners are taking to tackle diabetes across the region through a number of replicable projects. Of all chronic non-communicable diseases, diabetes is associated with the highest co-morbidities and complications. In 2007, diabetes resulted in 3.8 million deaths globally (6% of world mortality), the same figure as HIV/AIDS. Unless preventative measures are taken, an estimated 380 million people worldwide will have diabetes by 2025, the largest increase occurring in developing countries.<sup>1</sup>

“If appropriate public health action is not initiated, disability and premature deaths from heart disease, cancer, diabetes and chronic respiratory diseases will grow by more than 21% over the next 10 years in the South-East Asia Region. Almost half of the 89 million non-



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communicable disease-related deaths projected in the Region during the next 10 years will occur prematurely, thus hindering social and economic development of Member countries”, said Dr. Samlee Plianbangchang, WHO Regional Director, South-East Asia.

“We are pleased to be involved in this summit and welcome key stakeholders not only from South-East Asia, but from across the globe to discuss measures for tackling chronic diseases.”, he said.

Non-communicable diseases, such as diabetes, have been identified as a major public health challenge by the World Bank<sup>2</sup> and WHO-SEARO<sup>3</sup> and affect people from all socio-economic backgrounds. A recent study of the poor rural population in Tamil Nadu, India, found that over 43% of people aged; 36-50 years and 50% aged over 50 had diabetes or pre-diabetes<sup>4</sup>. Social determinants of health<sup>5</sup>, such as lack of awareness and education, inadequate access to information and care, are the cause of major inequalities in the occurrence and outcome of non-communicable diseases<sup>6</sup>. Non-communicable diseases are closely linked to global social and economic development, and development that does not take into account health consequences may prove expensive and also perpetuate chronic poverty.

“Diabetes is affecting younger people in South-East Asia at alarming rates. However, along with other non-communicable diseases it is still neglected on many national health agendas and by policy-makers. If left unchecked, diabetes and its associated complications can result in alarming social and economic consequences for the region”, said Professor Martin Sillink, President of the International Diabetes Federation.

According to the WHO, diabetes can have a crippling effect on the budgets of Asian nations and could cost the larger economies up to USD 500 billion each over the next decade, mainly as a result of lost productivity and premature deaths<sup>7</sup>. In India, the estimated annual cost to treat a person with diabetes is around USD 460, rising by 48% for those with complications<sup>8</sup>. Diabetes treatment may consume up to 15–25% of monthly household income<sup>9</sup>. Those who require the most advanced, expensive care for diabetes-related complications are often the people least able to afford it who may have to borrow money for treatment, thus entering a cycle of debt with disastrous consequences to the individuals, their families and society.

Undiagnosed diabetes may be adding to the high burden of communicable diseases in countries where the load is already high. Recent systematic reviews show that diabetes mellitus (DM) increases the risk and odds of developing tuberculosis (TB), especially among young people and in developing countries that have a high incidence of TB<sup>10</sup>. The sixth Millennium Development Goal calls for the incidence of infectious diseases such as TB to be

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halted and reversed by 2015. To succeed in achieving this target, it is important to focus resources in poor countries not only on HIV/AIDS but also on the burgeoning epidemic of diabetes mellitus as a significant epidemiological risk factor.

The Diabetes Summit for South-East Asia will address the rising prevalence of diabetes in South-East Asia, where more than 53.4<sup>11</sup> million people currently live with the condition and 20% of global type 2 diabetes cases are now found<sup>12</sup>. India, the summit venue, is now home to the largest population in the world with diabetes. Around 40 million people live with diabetes, the number rising to a staggering 70 million by 2025.<sup>12</sup>

“During the past six years of the Foundation’s existence, we have learned to respect the importance of using local knowledge to initiate and implement successful projects, which address local needs and are based on existing structures. Identifying committed partners, funding their initiatives and ideas and strengthening their capacity for advocacy have helped us create strong local champions, thereby ensuring commitment and long term sustainability”, explains Dr. Anil Kapur, Managing Director of the World Diabetes Foundation. At the Diabetes Summit for South-East Asia several projects funded by the World Diabetes Foundation will be presented. We hope the Summit will provide a unique platform for all the stakeholders to network, share ideas and take inspiration from what is already being done”, he says.

The World Diabetes Foundation is one of the largest funding sources for projects directed at preventing and improving access to diabetes care in the developing world. Small investments in the right areas and the establishment of effective partnerships can bring about momentous changes, as demonstrated through a number of replicable projects funded by the World Diabetes Foundation which are being highlighted to global media prior to the Summit. The World Diabetes Foundation will showcase six major projects across India in the area of capacity building of health-care professionals, public awareness in rural areas, gestational diabetes, primary prevention interventions in schools, innovative diabetic foot and eye care projects to demonstrate how effective collaboration can work at the practical level.



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## Notes to the editor

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### World Diabetes Foundation

The World Diabetes Foundation (WDF) was established in 2002 and is dedicated to supporting the prevention and treatment of diabetes in the developing world. The Foundation strives to educate and advocate globally in an effort to create awareness, care and relief to those impacted by the disease.

During its six years of existence, WDF has established project-related partnerships and collaboration with organisations such as the World Health Organization (WHO), the Pan American Health Organization (PAHO), the World Health Organization, Regional Office for Africa (AFRO), the World Health Organization, Regional Office for South-East Asia (SEARO), the International Diabetes Federation (IDF), the Danish International Development Agency (Danida), the World Bank, various non-governmental organisations (NGO), including DanChurchAid, WDF partners with Ministries of Health in developing countries, local diabetes associations and other local NGOs.

The Foundation is registered as an independent and legal trust, governed by a board of six experts in the field of diabetes, access to health and development assistance.

Since its inception, the WDF has funded 164 projects to date focusing on diabetes awareness, education and capacity building at local, regional and global levels. The value of funding to the current projects amounts to USD 170.6 million, of which the Foundation contributes about USD 54.7 million. In addition, the Foundation has helped facilitate 18 fundraising projects through various donations emanating from Novo Nordisk employees worldwide.

The projects funded by the WDF will directly influence the diabetes treatment, advocacy and awareness efforts of potentially 64.8 million people in the developing countries. Please visit; [www.worlddiabetesfoundation.org](http://www.worlddiabetesfoundation.org)

### Millennium Development Goals

The Millennium Development Goals (MDGs) are eight goals to be achieved by 2015 that respond to the world's main development challenges. The MDGs are drawn from the actions and targets contained in the Millennium Declaration that was adopted by 189 nations and signed by 147 heads of state and governments at the UN Millennium Summit in September 2000.



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There are eight MDGs (see below) but Goals 3, 4, 5, 6 and 8 specifically incorporate actions required to address non-communicable diseases in developing countries.

**Goal 1: Eradicate extreme poverty and hunger**

**Goal 2: Achieve universal primary education**

**Goal 3: Promote gender equality and empower women**

**Goal 4: Reduce child mortality**

**Goal 5: Improve maternal health**

**Goal 6: Combat HIV/AIDS, malaria and other diseases**

**Goal 7: Ensure environmental sustainability**

**Goal 8: Develop a Global Partnership for Development**

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<sup>1</sup> Roglic G, Unwin N, Bennett PH, Mathers C, Tuomilehto J, Nag S et al. The burden of mortality attributable to diabetes. Realistic estimates for the year 2000. *Diabetes Care*. 2005; 28 (9): 2130-2135).

<sup>2</sup> World Bank Newsletter website: Public Policy and the Challenge of Chronic Non Communicable Diseases. [http://newsletters.worldbank.org/external/default/main?menuPK=571347&theSitePK=571341&pagePK=64133601&contentMDK=21420909&piPK=64129599Topic\\_Article](http://newsletters.worldbank.org/external/default/main?menuPK=571347&theSitePK=571341&pagePK=64133601&contentMDK=21420909&piPK=64129599Topic_Article)

<sup>3</sup> WHO SEARO Regional Committee Document: Scaling up Prevention and Control of Chronic Non Communicable Diseases in the SEA Region. Regional Framework.

<sup>4</sup> Balagopal P et al. A Community-Based Diabetes Prevention and Management Education Program in a Rural Village in India. *Diabetes Care* 31:1097-1104, 2008.

<sup>5</sup> As referred to in the findings from a three-year investigation by the World Health Organization's Commission on the Social Determinants of Health. August 2008. <http://www.who.int/mediacentre/news/releases/2008/pr29/en/index.html>

<sup>6</sup> Prevention and Control of Non-communicable Diseases: Implementation of the Global Strategy. Report by the Secretariat. World Health Organisation. Sixty-First World Health Assembly. 18 April 2008.



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<sup>7</sup> WHO. Preventing chronic diseases: A vital investment. [http://www.who.int/chp/chronic\\_disease\\_report/contents/en/index.html](http://www.who.int/chp/chronic_disease_report/contents/en/index.html)

<sup>8</sup> Anil Kapur, Stefan Björk, Jyotsna Nair, Sanjeev Kelkar, Ambady Ramachandran. Socio-economic determinants of the cost of diabetes in India. *Diabetes Voice*. September 2004 Volume 49 Issue 3.

<sup>9</sup> Directions in Development. Human Development Public Policy and the Challenge of Chronic Non-communicable Diseases. The International Bank for Reconstruction and Development / The World Bank. 2007.

<sup>10</sup> Christie Y. Jeon\*, Megan B. Murray. Department of Epidemiology, Harvard School of Public Health, Boston, Massachusetts, United States of America Diabetes Mellitus Increases the Risk of Active Tuberculosis: A Systematic Review of 13 Observational Studies.

<sup>11</sup> International Diabetes Federation: Diabetes Atlas Third Edition, 2007 (page 6). Including numbers from countries in the WHO SEA region; Myanmar, Indonesia (2.888), Thailand (3.162) and North Korea (.806).

<sup>12</sup> International Diabetes Federation: World Diabetes Day Media Kit. [www.worlddiabetesdat.org/](http://www.worlddiabetesdat.org/) / International Diabetes Federation: Diabetes Atlas Third Edition, 2006.



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