

Building Resilience for Sustaining Development

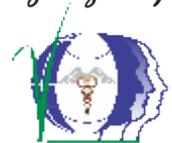
**Workshop on
Building Health Resilience through
Diabetes Care and Management**

Madurai Symposium 2017

Thamukkam Grounds, Madurai

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Organized by



Sustainable Healthcare Advancement (SUHAM) Trust
(A Healthcare Initiative of DHAN Foundation)



The Prologue

India is the diabetes capital of the world with as many as 50 million people suffering from type-2 diabetes, facing hard challenges to address it. However, medical experts feel that timely detection and right management can go a long way in helping patients lead a normal life. Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone that regulates blood sugar. Hyperglycemia, or raised blood sugar, is a common effect of uncontrolled diabetes and over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels.

The Type 1 diabetes (previously known as insulin-dependent, juvenile or childhood-onset) is characterized by deficient insulin production and requires daily administration of insulin. The cause of Type 1 diabetes is not known and it is not preventable with current knowledge. The Type 2 diabetes (formerly called non-insulin-dependent, or adult-onset) results from the body's ineffective use of insulin. Type 2 diabetes comprises the majority of people with diabetes around the world, and is largely the result of excess body weight and physical inactivity. Gestational diabetes is hyperglycemia with blood glucose values above normal but below those diagnostic of diabetes, occurring during pregnancy. Impaired Glucose Tolerance (IGT) and Impaired Fasting Glycaemia (IFG) are intermediate conditions in the transition between normality and diabetes. People with IGT or IFG are at high risk of progressing to Type 2 diabetes, although this is not inevitable

Diabetes mellitus is one of the world's major diseases. India has been witnessing an alarming rise in incidence of diabetes according to the International Journal of Diabetes in Developing Countries. According to a World Health Organization (WHO) fact sheet on diabetes, an estimated 3.4 million deaths are caused due to high blood sugar. The WHO also estimates that 80 per cent of diabetes deaths occur in low and middle-income countries and such deaths will double between 2016 and 2030. It has been further estimated that the global burden of Type-2 diabetes is expected to increase to 438 million by 2030 from 285 million people (recorded in 2010). Similarly, for India this increase is estimated to be 58%, from 51 million people in 2010 to 87 million in 2030.





Diabetic Burden in India

The diabetes burden in India results from various factors. Genetic predisposition combined with lifestyle changes and associated with urbanization and globalization; all together contribute to the rapid rise of diabetes in India. The real burden of diabetes is due to its micro (retinopathy, nephropathy, and neuropathy) and macro vascular (CAD, Cerebrovascular and PVD) complications, which lead to increased morbidity and mortality. It is also known that almost 50% of people with diabetes remain undetected and hence some may even present with micro- and macro vascular complications at the time of diagnosis. The Indian Council of Medical Research (ICMR) study conducted in the 1970s reported a prevalence of 2.3% in urban areas; this number has risen to 12%-19% in the 2000s. Correspondingly, in rural areas, prevalence rates have increased from around 1% to 4%-10% and even 13.2% in one study. Thus, it is clear that both in urban and rural India, prevalence rates of diabetes are increasing rapidly. The ICMR-INDIAB (ICMR-India Diabetes) study reported that the ratio of undiagnosed to diagnosed diabetes is higher in rural compared with urban areas.



Care and management of Diabetes

Awareness and knowledge about diabetes was assessed among the general population, as well as in people with diabetes in Phase I of the ICMR-INDIAB study. Only 43.2% of the overall study population had even heard about a condition called diabetes. Overall, urban residents had significantly higher awareness rates than rural residents. Among the general and diabetic population, 56.3% and 63.4%, respectively, were aware that diabetes could be prevented. Not surprisingly, there was better knowledge regarding diabetes affecting other organs among the self-reported diabetic population (72.7%) than the general population (51.5%). Thus, the results revealed that knowledge and awareness about diabetes in India, particularly in rural areas, is poor. To reduce the disease burden that diabetes creates in India, appropriate government interventions and combined efforts from all the stakeholders of the society are required. Clinicians may be targeted to facilitate the implementation of screening and early detection programmes, diabetes prevention, self-management counseling, and therapeutic management of diabetes in accordance with the appropriate local guidelines form the backbone of controlling the predicted diabetes epidemic. Early screening and detection of pre-diabetes (especially in pregnant women, children and adults with BMI ≥ 25) may yield positive



health outcomes in society. Aggressive clinical measures in terms of early insulin initiation combined with optimal doses of oral hypoglycemic agents and appropriate lifestyle modification could also have long-term positive effects in disease management. AYUSH programmes also addresses this issue in its style in India.

The Workshop Focus

The objective of this workshop is that the alarming situation of increasing Diabetic prevalence rate pushes us to find the solution and implementation of government schemes in needy places for better Diabetic Care and Management. This workshop will focus mainly on the strategies and mechanisms for prevention and Management of Diabetic with the available resources for the poor people. This workshop paves the way and pools all the resources for the community for Health Resilience on Diabetic Care and Management.

Participants

The participants are from the women and farmers from SHG and farmer federations, people representatives, officials from state and district health administration, ICDS, Medical colleges, Public and private colleges, Diabetologists and Nutritionists and representation from NGO sector.

Programme content and structure

1. Presentation on strategies and mechanisms to screen, treat and follow up of people with diabetes towards diabetic care and management
2. Resilience focus – presentation by Diabetologist, Nutritionist and Dieticians
3. Seeding academic knowledge with the community on diabetes and management
4. Defining the role of each stakeholder in addressing diabetic problem in India
5. Evolving strategies and mechanisms for diabetes care and management

For further information, please contact

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