



THE BURDEN OF DIABETES AND OPPORTUNITIES FOR REFORM:

**INSIGHTS FOR THE GREEK
HEALTH SYSTEM**

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Athens Club

The Hellenic Association of Pharmaceutical Companies (SFEE) and its Diabetes Platform, recognizing the significant challenges posed by diabetes to both the quality of life of those living with the condition and to the sustainability of the healthcare system, commissioned a comprehensive study by the London School of Economics (LSE) titled: "The Burden of Diabetes and Options for Reform: Insights for the Greek Health System." This study clearly maps the economic and social impact of diabetes while proposing realistic and actionable policy reforms based on international best practices. This is the first time updated data on diabetes management in Greece is being presented, marking this initiative as a pivotal step for the development of a comprehensive National Diabetes Strategy. This meeting, organized by SFEE, brought together for the first time all key stakeholders in the field of diabetes. Representatives from the government, the medical and academic community, patient associations, and the pharmaceutical industry engaged in a meaningful dialogue aimed at improving care for people living with diabetes and strengthening the National Health System. This shared commitment to advancing realistic and actionable solutions underscores the importance of cross-sector collaboration as a key factor in implementing a modern and effective diabetes management policy.

In this context, the President of SFEE, Mr. Olympios Papadimitriou, emphasized the importance of focusing on specific priorities to drive meaningful reforms within the National Health System. He underlined that such changes must be implemented with the consensus not only of the Ministry of Health but also through the active involvement and alignment of all relevant stakeholders.

Presenting the main findings of the study, Professor Panos Kanavos underscored the growing prevalence of diabetes (~12%), noting that between 2014 and 2021, diabetes consistently ranked among the top ten recorded causes of death, with its share of total mortality rising from 1.4% to 2.2% over a period of 7-8 years. At the same time, the need for systematic monitoring of diabetes-related complications and comorbidities-which impose a substantial financial burden on the healthcare system -was highlighted (Aris Angelis, Ilias Mygdalis, Dimitris Skoutas). However, as the available data on the indirect costs of diabetes remain limited, a comprehensive assessment of the economic burden of the disease remains challenging.

The Minister of Health, Mr. Adonis Georgiadis, referred to the recent measures implemented to revise EOPYY's 2024 budget, including the introduction of a rebate mechanism for medical devices aimed at generating savings that can be redirected toward strengthening diabetes care funding. However, he acknowledged that available resources remain insufficient to meet the sharp rise in cost driven by new technologies in glucose monitoring-particularly test strips. Specifically, for EOPYY, a three-month supply using older technology costs around €300, whereas the new technology reaches €1,400 placing significant financial strain on the system.

Professor Panos Kanavos also highlighted the limited role currently played by primary healthcare in the management of diabetes. Particular attention was drawn to population groups with limited access to healthcare services, especially those living in remote areas and islands (Bart Torbeyns, Sofia Tsiakalou). The absence of a clearly defined first point of contact with the healthcare system for people living with diabetes, coupled with low rates of early screening and persistent challenges in the implementation of the personal physician model, underscores the urgent need to strengthen the role of primary healthcare. Organizational restructuring and adequate staffing of primary healthcare-focused



on delivering integrated care-were identified as key pillars for the prevention and management of diabetes (Philip Domayer, Bart Torbeyns, Vasiliki Vassileiou, Giorgos Kohiadakis). The role of telemedicine was also examined as a viable solution to meet the needs of people living with diabetes in geographically isolated regions, offering both improved access and cost savings (Vasiliki Vassileiou, Panos Kanavos). In addition, the importance of effective operation of Diabetes Centers was emphasized, along with the need to expand the role of nursing professionals -which remains significantly underutilized in Greece- by proposing that these centers be strengthened with specialized nursing staff (Eugenia Vlachou, Vasiliki Vassileiou).

Participants placed particular emphasis on the role of prevention through public health initiatives, alongside population-wide education on healthy eating and physical activity, with a special focus on early intervention during childhood (Sofia Tsiakalou, Sofia Manea). Bart Torbeyns, General Director of the European Diabetes Forum, addressed the growing challenge of childhood obesity, noting that one in five minors in Greece-as in many other European countries-is overweight or obese. He stressed the importance of early detection and population-level screening, emphasizing that prevention-related expenditures are significantly lower than



the long-term costs associated with managing diabetes complications. The Minister of Health presented the Ministry's Action Plan to tackle both childhood and adult obesity, underlining the direct link between obesity and the rising incidence of Type 2 diabetes. He acknowledged that lifestyle changes and the promotion of physical activity are fundamental to prevention, while also recognizing the concerning state of physical inactivity in Greece, as well as the persistently high rates of smoking and childhood obesity.

A central theme of the discussion was the lack of comprehensive and reliable data on diabetes management in Greece, a shortcoming that significantly hinders the delivery of high-quality, coordinated care (Panos Kanavos). The fragmentation of data, interoperability issues, and the limited integration of key health information systems have prevented the establishment of a unified National Diabetes Registry. This, in turn, obstructs systematic monitoring of disease complications and restricts shared access to vital information—both for individuals living with diabetes and for healthcare providers. According to the study, the incomplete implementation and underutilization of the Individual Electronic Health Record and the Digital Repository of Diagnostic Examination Results limit access to critical data and disrupt coordination between healthcare providers and levels of care. This leads to diagnostic gaps, delays, and repeated tests. It is a particularly important issue as it directly affects the quality of care provided and is a fundamental component of efforts to strengthen Primary Healthcare. In this context, the development of an interoperable National Diabetes Registry was proposed—integrated with the systems of IDIKA and EOPYY—to record demographic data, clinical outcomes, and complications. The aim is to monitor trends and address gaps in disease management (Sofia Tsiakalou, Christos Daramilas). In parallel, the full implementation and integration of the Individual Electronic Health Record was emphasized, both for optimal disease management and the improvement of the overall quality of healthcare services provided (Dimitris Skoutas, Chara Kani).

Professor Kanavos emphasized the urgent need to strengthen the capabilities of the Health Technology Assessment (HTA) Committee, particularly with regard to medical devices and digital health technologies. This is a longstanding demand from patients, as there is currently

no structured evaluation process in place for medical devices and digital health technologies (Christos Daramilas). The Secretary General of the Ministry of Health, Mr. Aris Angelis, stressed the importance of integrating the HTA Committee's outcomes with therapeutic and diagnostic protocols so that decisions and negotiations are grounded on evidence-based data, thereby enhancing the value and effectiveness of healthcare services provided. Furthermore, he highlighted the necessity of developing tools that enable the monitoring of disease progression and assess the efficacy and cost-effectiveness of all therapeutic interventions—including medications, consumables, and technology-based solutions.

The Comprehensive management of diabetes is a key priority for the State. With a shared goal of establishing a modern, efficient framework for the monitoring and care of people living with diabetes, all key stakeholders—including the scientific and medical community, policymakers, and the pharmaceutical industry—are called upon to contribute to the development and implementation of targeted actions. There was unanimous agreement among speakers on the need to design and implement a National Policy for the prevention, management, and treatment of diabetes, built around clear & measurable objectives.

The discussion concluded with the following immediate implementation proposals:

- ✓ **Full deployment and utilization of the Individual Electronic Health Record**, integrated with the Digital Repository of Diagnostic Examination Results, as essential tools for improving care coordination and service efficiency.
- ✓ **Enhancement of the capabilities of the Health Technology Assessment Committee**, with a specific focus on medical devices and digital health technologies, to ensure the rigorous evaluation and integration of novel solutions into everyday clinical practice.
- ✓ **Establishment of a comprehensive National Diabetes Registry**, designed to capture demographic & clinical data, complications, and treatment outcomes. This registry should be fully interconnected with the IDIKA system and the e-DAPY platform of EOPYY, serving as a foundational resource for tracking disease trends, identifying care gaps, and informing evidence-based policy decisions that advance public health outcomes

Participants

- **Bart Torbeyns**, General Director, European Diabetes Forum (EUDF)
- **Aris Angelis**, Secretary General for Strategic Planning, Ministry of Health
- **Vasiliki Vassileiou**, General Secretary, Hellenic Endocrinology Society
- **Eugenia Vlachou**, Member of the Executive Committee of Foundation of European Nurses in Diabetes (FEND)
- **Adonis Georgiadis**, Minister of Health
- **Christos Daramilas**, President, Panhellenic Federation of Associations of People with Diabetes Mellitus (POSSASDIA)
- **Philippos-Richardos Domeyer**, President, Greek Diabetes Network in Primary Health Care
- **Panos Kanavos**, Professor, London School of Economics (LSE)
- **Chara Kani**, Head of the Pharmaceutical Directorate, EOPYY
- **George Kohniadakis**, Hellenic Society of Cardiology (EKE)
- **Sophia Manea**, President, Panhellenic Association for the Fight against Juvenile Diabetes (PEAND)
- **Ilias Mygdanis**, Member, Hellenic Society of Internal Medicine (EEEP)
- **Olympios Papadimitriou**, President, Hellenic Association of Pharmaceutical Companies (SFEE)
- **Dimitrios Skoutas**, President, Hellenic Association for the Study & Education of Diabetes Mellitus (ELEMEND)
- **Sophia Tsiakalou**, President, Hellenic Diabetes Federation (ELODI)



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From the SFEE Diabetes Platform