

NEED FOR THE ESTABLISHMENT OF A NATIONAL DIABETES STRATEGY

Honorable Prime Minister,

Diabetes Mellitus is one of the fastest-growing non-communicable diseases worldwide, with significant social, economic, and health consequences. It is a chronic condition directly linked to the development of severe complications such as cardiovascular disease, kidney failure, blindness, and amputations. These complications not only reduce patients' quality of life but also impose a considerable financial burden on healthcare systems. Early diagnosis, intensive glycemic control, and a multifactorial approach to care can reduce both the incidence and the progression of complications.

It is estimated that 66 million adults live with diabetes in Europe, while in Greece the number of patients exceeds one million, including undiagnosed cases. It is concerning that an estimated 1 in 3 patients remains undiagnosed, resulting in delayed intervention and an increased risk of complications. Beyond the steadily rising prevalence of the disease, it must also be noted that modern lifestyle factors (obesity, sedentary behavior, poor diet) are accelerating the onset of diabetes at younger ages, thereby increasing the need for long-term management. Consequently, diabetes is associated with high healthcare costs, both direct (medication, doctor visits, hospitalizations) and indirect (loss of productivity, premature mortality).

The burden on the national healthcare system is substantial, especially in a context of limited resources and fragmented care services. The absence of co-

ordinated prevention and early diagnosis initiatives, the lack of comprehensive patient registries, and of a well-defined care pathway for patients within the healthcare system following initial diagnosis, together with the absence of systematic evaluation of care quality, further exacerbate the problem.

Although data collection in Greece remains insufficient, diabetes appears to be the leading cause of amputations, blindness, and entry into dialysis, while it contributes significantly to cardiovascular complications (heart attacks, strokes). Management of these complications is more costly than the medication required for blood sugar regulation. Patients with diabetes are 2–4 times more likely to develop coronary artery disease, while about 30% of those with coronary disease also suffer from diabetes.

For all these reasons, it is clear that Greece urgently needs a comprehensive **National Strategy on Diabetes**, centered on patients and focused on prevention, early diagnosis, personalized care, and sustainable disease management. The key pillars of such a strategy should include:

1 Strengthening Prevention and Primary Healthcare.

Prevention and early detection are the most cost-effective and socially equitable levers of intervention, requiring close coordination between public health initiatives and primary healthcare structures, as well

as the functional integration of population-level preventive strategies with clinical practice in the community. Organized primary and secondary prevention strategies—such as health education programs, promotion of a healthy lifestyle, urban planning initiatives, and the implementation of a National Screening Program—combined with the reorganization of primary healthcare through the support and further training of physicians, the establishment of diabetes clinics staffed by multidisciplinary teams, and their integration with Specialized Diabetes Centers, can help curb the rising prevalence of the disease, play a decisive role in reducing complications and treatment costs, and relieve the burden on higher-level healthcare facilities.

2 Creation of a National Diabetes Registry.

Collecting demographic, clinical, and therapeutic data in a nationally integrated registry, fully compatible with existing electronic health systems (IDIKA and EOPYY), is critical for evidence-based policy-making. The adoption of a «One Stop Shop» digital infrastructure would provide healthcare professionals and patients with unified access to all relevant data, thereby promoting personalized care and enhancing service interoperability. Emphasis should be placed on the systematic recording of complications and the associated management costs.

3 Re-establishment and Upgrading of the Diabetes Care Network.

Removing bureaucratic barriers in diabetes care specialization will enable the training of sufficient numbers of medical professionals to staff a comprehensive network of Diabetes Centers and Clinics across the National Health System, which currently operates suboptimally or in a fragmented manner. Adequate staffing of such a network with Endocrinologists and Internists specialized in Diabetes, as as stipulated by the regulatory framework governing their operation, will be essential both for improving disease management and for ensuring sufficient medical training in diabetes care. Equally important is the appointment of pediatricians specialized in Diabetes in each Health Region, as well as the formal recognition of specialized diabetes nurses/educators, who constitute a cornerstone of diabetes care in most European healthcare systems.

We, the undersigned, stand ready to cooperate with the State and contribute actively to the launch of a meaningful national dialogue that will lead to the development of a National Diabetes Strategy, oriented towards patient needs and the safeguarding of Public Health. The implementation of this strategy requires the development of a National Diabetes Action Plan with clearly defined and dedicated resources, both from the State budget and European programs, as well as the establishment of transparent mechanisms for evaluating effectiveness and reinvesting savings into prevention and innovation.

We look forward to the undertaking of concrete initiatives from your office toward shaping an effective and sustainable National Diabetes Strategy.

Sincerely,

- **Vlachou Eugenia**, Elected member of the Executive Committee, Foundation of European Nurses in Diabetes
- **Georgopoulos Neoklis**, President, Hellenic Endocrinology Society
- **Daramilas Christos**, President, Panhellenic Federation of People with Diabetes
- **Domeyer Philippos-Richard**, President, Primary Care Diabetes Greece
- **Makrilakis Konstantinos**, President, Hellenic Diabetes Association
- **Nikas Dimitrios**, President, Association of Medical and Biotechnological Product Enterprises
- **Papadimitriou Olympios**, President, Hellenic Association of Pharmaceutical Companies
- **Skoutas Dimitrios**, President, Hellenic Association for the Study & Education of Diabetes Mellitus
- **Tentolouris Nikolaos**, President, Hellenic Society of Internal Medicine
- **Toutouzas Konstantinos**, President, Hellenic Society of Cardiology
- **Tsiakalou Sophia**, President, Hellenic Diabetes Federation