a report by Wim H J M Wientjens

President, International Diabetes Federation (IDF) European Region



Wim H J M Wientjens is President of the International Diabetes Federation (IDF) European Region. He is also Chairman of the Council of Patients of all eight Dutch academic hospitals and a member of the board of management of IDF Global. Before retirement, Dr Wientiens was Managing Director of one of the Institutes for Applied Scientific Research TNO and secretary of the board of management at TNO. He has also been Vice-President of IDF Global, a board member of IDF European Region, a member of the executive board of IDF. President of the Dutch foundation "Dutch Diabetes Association (DVN) supports Eastern Europe", Vice-President of the Dutch Diabetes Federation (NDF) and President of the DVN, among others.

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Welcome to the inaugural edition of *Business Briefing: European Endocrine Review.* This publication comprises a series of articles that tackle many of the important issues relevant to endocrinologists and diabetologists throughout Europe.

One major concern to this specific healthcare community is the alarming increase in the prevalence of diabetes. It is estimated that at least 194 million people in the world have diabetes. That is more than the populations of Argentina, Australia, South Africa, Saudi Arabia and Spain all put together and, according to WHO figures, there will be more people with diabetes in the world than the entire population of the US by 2025.

The statistics behind this global epidemic are alarming, to say the least. In 1985, there were an estimated 30 million people with diabetes worldwide, which equates to nearly a six-fold increase in almost 20 years. If nothing is done to slow down the epidemic, the number will reach 330 million within 25 years. This creates an overwhelming burden on healthcare systems, and it is currently estimated that the costs of diabetes complications account for between 5% and 10% of total healthcare spending in the world.

As there is currently no cure for diabetes, prevention is vital to any attempts to control this epidemic. Primary prevention identifies and protects individuals at risk from developing diabetes. While there is no conclusive evidence yet to suggest that type 1 diabetes can be prevented, primary prevention of type 2 diabetes is potentially possible through lifestyle changes aimed at weight control and increased physical activity.

Secondary prevention involves early detection and prevention of complications, reducing the need for treatment. Action taken early in the course of diabetes is more beneficial in terms of quality of life and is more cost-effective, especially if this action can prevent hospitalisation. There is now conclusive evidence that good control of blood glucose levels can substantially reduce the risk of developing complications and slow their progression in all types of diabetes. The management of high blood pressure and raised blood lipids is equally important. The International Diabetes Federation (IDF) is the only global advocate for people with diabetes and their healthcare providers. Its mission is to promote diabetes care, prevention and a cure worldwide. To meet its objectives, the IDF carries out a wide range of activities, including education for people with diabetes, promotion of free exchange of diabetes knowledge and public awareness campaigns. This year's global awareness campaign focused on promoting adequate diabetic foot care and preventing amputations for people who have diabetic foot problems. Next year will focus on diabetes and the disadvantaged and vulnerable. It is through campaigns such as these that diabetes can be combated on a global scale.

The diabetes articles within *Business Briefing: European Endocrine Review 2006* look primarily at secondary prevention, but improved global awareness of the lifestyle factors that could prevent an individual developing the illness in the first place is intrinsic to halting the progression of this epidemic.

Other areas discussed in this publication include growth hormone deficiency, thyroid disorders, hyperprolactinaemia, hormone replacement therapy, testosterone replacement therapy and erectile dysfunction. This wide range of articles plays an essential role in highlighting some of the challenges facing endocrinologists in Europe today and provides a variety of answers to the important questions they raise.

This publication will provide the senior European hospital- and office-based specialists, consultants and healthcare directors with key information about new clinical, diagnostic and management developments. With editorial contributions from leading scientific and medical practitioners, this publicatin also serves as vital support for clinicians, who are under increasing pressure to keep up-to-date and base their practice on valid scientific evidence.

Business Briefing: European Endocrine Review 2006 would like to thank the contributing individuals, organisations and media partners for exploring the important issues relating to endocrinology contained within this publication. I trust you will find it a useful and informative read.



European Thyroid Association

www.eurothyroid.com

The European Thyroid Association's aims are to promote knowledge in the thyroid field (fundamental and clinical) and improve knowledge of the thyroid gland and its diseases.

The Association was founded in 1965 and has met each year since then, with the exception of the years in which the International Thyroid Congress has been held.

The Annual Scientific Meeting regularly attracts more than 300 abstracts and over 500 active participants. Membership of the Association consists of honorary, ordinary, junior, corporate, corresponding and senior members. There are 450 ordinary members.