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Review

The Berlin Declaration: A call to improve early actions related to type 2 diabetes. Why is primary care important?

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ABSTRACT

Diabetes is epidemic worldwide and places a huge burden on healthcare systems. The majority of the cost of type 2 diabetes (T2D) is related to hospitalization and the management of complications, and these also have a negative impact on the individual's quality of life. The Berlin Declaration is a global call for early action for the identification of high risk

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individuals, prevention of T2D and the prevention of complications in those with T2D, through prevention, early detection, early control and early access to the right multidisciplinary interventions. This should empower people to take action to prevent T2D and its complications.

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1. Introduction

Diabetes currently affects approximately 451 million adults (18–99 years old) worldwide and this epidemic is projected to worsen, with an anticipated 693 million adults affected by 2045; the majority (~79%) reside in low or middle income countries [1]. In addition, globally up to 50% of adults with diabetes remain undiagnosed and their condition therefore remains unmanaged, with complications developing unmonitored [1]. Furthermore, an estimated 352.1 million adults (7.3%) globally have impaired glucose tolerance, placing them at high risk of developing T2D, with this number also expected to increase over time [1]. Although good quality evidence exists that progression to T2D can be delayed or prevented in these individuals if they are identified and managed early enough, many go unidentified [2–4]. In addition to preventing T2D, there is a need to also prevent cardiovascular disease (CVD), as people with T2D are at a higher risk for CVD, the main cause of death [5,6].

Thus, a huge burden is placed on healthcare systems worldwide with the global cost estimated to be ~850 billion US dollars (~705.5 billion Euros) [1]. These costs will rise as life expectancy increases and the number of people with T2D rises in parallel. The majority of this expenditure is related to hospitalization (43% in the US) and management of the complications of type 2 diabetes (T2D) (18% in the US), with about 34.7% of the overall burden related to indirect costs (ranging from 33.5% in low-to-middle income countries to 40.0% in high income countries) [7]. The greatest impact on costs can therefore be made by reducing the risk of complications, and the most effective way of achieving this is through early detection and prevention and timely risk factor management [8–12]. Diabetes complications also have a severe negative impact

on quality of life, which provides another important rationale for driving initiatives to prevent them [13,14]. The *Early Action in Diabetes* initiative aims to translate current scientific evidence into practical, action-oriented policies that can be implemented by decision makers globally. The first output of the initiative was *The Berlin Declaration* which called for early action in diabetes with short-, medium- and long-term international targets [15,16]. The development of the Berlin Declaration is described in [Table 1](#).

2. How should the Berlin Declaration be used

The Berlin Declaration builds upon the work of earlier calls for improvements in healthcare, including the 1978 Declaration of Alma-Ata, which called for primary health care for all [17]; and the St Vincent Declaration (1989), which proposed a number of healthcare goals specifically for patients with diabetes [18]. The Berlin Declaration predominantly focuses on national policy, in particular the development of national diabetes plans and guidelines. Implementation of the policies in the Berlin Declaration will require a wide range of stakeholders to work together, including national governments, professional societies, patient organizations, specialists in diabetes and associated fields, primary care professionals, people with T2D and patient advocates. However, to ensure that the policies are effective they must be adapted to make them relevant to local issues and healthcare settings. The diabetes special interest group in the World Organization of Family Doctors (WONCA) Europe is Primary Care Diabetes Europe and has been actively involved in this project from the beginning, and can provide support when working to implement the programs and policies discussed in this manuscript. The World Heart Federation

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