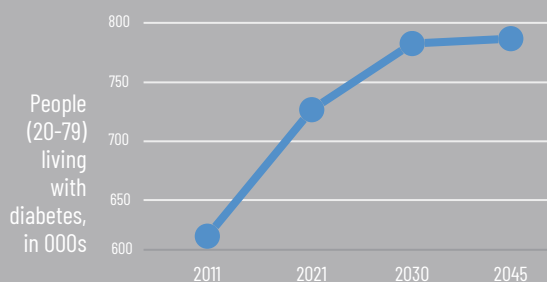




AN OVERVIEW OF DIABETES CARE

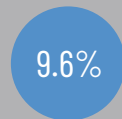
DIABETES PREVALENCE



Of which, undiagnosed 33.5% (246,000 people)

Children & adolescents with T1D (0-19y) 2,905

Diabetes prevalence



Diabetes-related deaths 22,350



Total expenditure €1468.6 (per person)

Source: IDF Diabetes Atlas 10th edition 2021

The Greek healthcare system offers free high-quality care to people living with diabetes. Diabetology is a sub-specialisation of Internal Medicine and Paediatrics. Because of the structure of the health system and of the geographical specificities of Greece (many islands), most people living with Type 2 Diabetes (T2D) are seen by internists specialised in diabetes or by general practitioners, not by endocrinologists.

National guidelines published by the Hellenic Diabetes Association (HDA) are updated every year as per international guidelines. Based on these guidelines, doctors decide what therapy is best for people living with diabetes (PwD). All insulins, diabetes medicines as well as cardiovascular medicines are fully reimbursed by the national insurance (National Organization for the Provision of Health Services [EOPYY]). As per recent studies, PwD in Greece have a well-managed diabetes, with a mean HbA1c close to 7%.

Continuous Glucose Monitors (CGMs) are fully reimbursed for people living with Type 1 Diabetes (T1D). Diabetes associations are currently advocating for CGMs to be reimbursed for people with T2D on intensified insulin regimen. Pumps and consumables are also fully reimbursed for T1D.

There is no formal education for specialist nurses in diabetes, although some nurses and "health visitors" work in diabetes centres and have some informal knowledge of diabetes care. There is no formal curriculum yet for diabetes educators in general, but the HDA is planning on creating one in collaboration with the Nurses' Association.

Regarding eHealth, prescriptions are sent to the patients and are filled in the pharmacy or the labs electronically, as long as the patients have activated the "intangible prescription system", which is available for all. Remote consultations are done on an individual basis.

The main gaps in diabetes care include the lack of specialised diabetes training for nurses; the absence of a diabetes registry (although much diabetes-related information is captured in the national prescription database, covering more than 99% of individuals with a social security number); and the implementation of effective prevention programmes.

DIABETES PREVENTION & MANAGEMENT

● YES ● WITH VARIATIONS ● NO

HEALTHY LIVING POLICIES



Obesity/ overweight



Healthy food & diet



Physical activity



Smoking



Regulations for healthy diets

PREVENTION OF COMPLICATIONS



Eye screening



CVD



Kidney disease



Diabetes foot



Gestational diabetes

EDUCATION



At or around the time of diagnosis



Throughout the life course



Integrated peer-to-peer support

Is there a programme to follow mothers with gestational diabetes after the birth of the baby?

No

Always available for T1D, with variations for T2D

NATIONAL PLAN?

Stand alone

PREVENTION & MANAGEMENT GUIDELINES

National guidelines

MONITORING FRAMEWORK?

No

GOVERNMENT ENGAGEMENT WITH PwD?

Yes

Notes:

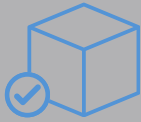
Screening is scheduled by primary care physicians/specialists and is mostly covered by the public insurance system.

HCPs education is provided through seminars organized mostly by scientific organizations, like the Hellenic Diabetes Association and other relevant Associations.

A "National Plan for the Prevention and Treatment of Diabetes and its Complications" was produced by the HDA and the National Diabetes Center (NDC), under the auspices of the Hellenic Ministry of Health, in 2012, but was never implemented in practice.

The HDA guidelines cover primary prevention strategies, screening and diagnosis, healthcare pathways and management of all major forms of diabetes, diabetes-related complications, and structured education. There is no monitoring protocol in place, to assess the implementation of these guidelines.

ACCESS TO CARE, TECHNOLOGIES, MEDICINES AND SUPPLIES



Is INSULIN available at the point of delivery?

- Always
- Most of the time
- Sometimes
- Not often
- Never



Is available INSULIN free of charge?

- For all PwD
- For all T1D only*
- For children only
- Other

<p>Children</p> <ul style="list-style-type: none"> ● Short-acting regular insulin ● Rapid-acting (analogues) ● Ultra-rapid-acting analogues ● Intermediate-acting ● Long-acting 	<p>Adults</p> <ul style="list-style-type: none"> ● Short-acting regular insulin ● Rapid-acting (analogues) ● Ultra-rapid-acting analogues ● Intermediate-acting ● Long-acting
--	--

- Short-acting regular insulin
- Rapid-acting (analogues)
- Ultra-rapid-acting analogues
- Intermediate-acting
- Long-acting

*For other diabetes types, reimbursement up to 90% of cost

APPS



Do apps get recommended by the health system/HCPs to manage/prevent diabetes?	YES
When they are recommended, are these apps fully reimbursed?	NO

SUPPLIES & TECHNOLOGIES

Free of charge for all PwD	Free of charge for T1D	Not reimbursed
Syringes & Needles	Automated delivery systems	Connected smart pens
Insulin pens	rtCGMs*	
Blood glucose meters	isCGMs**	
Test strips		
Insulin pumps		

ARE SUPPLIES TECHNOLOGIES AVAILABLE AT THE POINT OF DELIVERY?

- Always
- Most of the time
- Sometimes
- Not often
- Never

Note: the number of test strips, lancets and needles available for free varies by type of diabetes and treatment received.

T1D: 200 strips, lancets and needles per month; 50 blood ketone strips per year.

T2D on insulin: 100 strips and lancets and 60 needles per month.

PwD on antidiabetic tablets or other injectable non-insulin treatment: up to 50 blood glucose test strips per two months, up to 50 lancets biweekly and up to 60 insulin needles per month for PwD on glucagon like peptide 1 (GLP1) in built in needle in the pre-filled syringe.

PwD on lifestyle programmes: up to 50 strips and lancets per quarter).

GDM: 150 strips, lancets and needles, per month.

PwD with a continuous insulin infusion pump: a glucose monitoring or recording system is provided according to a justified medical opinion, glucose recording supplies connected or not connected to the pump in an amount of up to five per month, up to 200 strips and 200 lancets per month, 100 needles for insulin administration with pen per semester (in case of pump blockage or overdose) and up to 50 blood ketone test strips per year.

*real-time continuous glucose monitors.

**intermittently scanned continuous glucose monitors.

PSYCHOLOGICAL SUPPORT

PSYCHOLOGICAL SUPPORT PROVIDED AS PART OF DIABETES CARE?

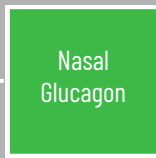
Available but hard to access

Note: there is no formal psychological support provided in the Diabetes Centres



AVAILABLE AT THE POINT OF DELIVERY? ● YES ● MOST OF THE TIME ● SOMETIMES ● NOT OFTEN ● NO

GLUCAGON - METFORMIN/SULFONYLUREAS



FREE OF CHARGE?

- For all PwD
- For all T1D only
- For children only
- Other



FREE OF CHARGE?

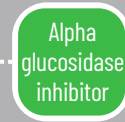
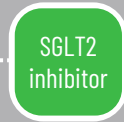
- For all PwD
- For all T1D only
- For children only
- Other



Injectable glucagon reimbursed up to 75%
Nasal glucagon available, but not yet reimbursed

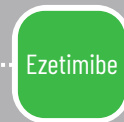
90% of the price is reimbursed, for either adults or children, if prescribed through the national prescription database

OTHER DIABETES MEDICINES



90% of the price is reimbursed, if prescribed through the national prescription database

CARDIOVASCULAR MEDICINES



90% of the price is reimbursed, if prescribed through the national prescription database

*PCSK9 Inhibitors require special approval by the Supreme Health Council of the EOPYY

HEALTH SYSTEMS



● YES ● NO

- Are diabetes specialist nurses (DSNs) available?
- Do nurses play a role in diabetes prevention?
- Is there a special academic training required to become a specialist diabetes nurse?
- Are nurses allowed to prescribe medicines?

Do nurses play a role in the diabetes management of?

- Adults & children with T1D
- People with T2D
- Women with GDM

- Do people living with diabetes have access to specialist diabetes educators?

HOW WIDESPREAD IS THE USE OF E-HEALTH?

AVAILABLE FOR ALL PEOPLE LIVING WITH DIABETES? ● YES ● NO

AVAILABLE AT THE SAME COST AS TRADITIONAL OPTIONS? ▲ YES ■ NO

*Available depending on the clinic and/or physician

Online appointment management*



Video consultations*



Telephone consultations*



SMS & EMAIL consultations*



Electronic prescriptions



Telehealthcare & Remote monitoring*



ELECTRONIC HEALTH RECORDS?

● YES ● NO



WORKING DIABETES REGISTER?

No

