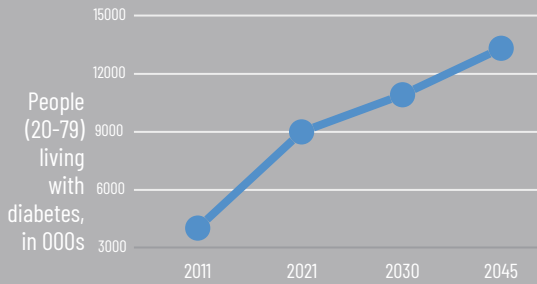




AN OVERVIEW OF DIABETES CARE

DIABETES PREVALENCE



Of which, undiagnosed
41.8% (3,770,000 people)

Children & adolescents with T1D (0-19y)
25,800

Diabetes prevalence **15.9%**

Diabetes-related deaths **83,221.4**

Total expenditure **€878** (per person)

Source: IDF Diabetes Atlas 10th edition 2021

According national estimates, in 2010, the number of adults living with diabetes (>20 y/o) stood at approximately 7,000,000.

In Turkey, about 80% of the population is covered by the national social security. People living with diabetes (PwD) are either fully exempt from or partially required to cover the cost of their diabetes care, depending on the medications, supplies and technologies they require for their treatment.

All PwD are treated in secondary and tertiary care settings, where diabetes education is also provided. There is no shortage of internal specialists or endocrinologists and the waiting lists are short.

Prescriptions can be renewed by primary care physicians who are also allowed to order some lab tests. There is, however, a very limited number of diabetes nurses and a shortage of dietitians. Multidisciplinary teams are not yet in place in diabetes centres. There is also a need for better diabetes care at primary care level.

Diabetes education was initiated by the Turkish Diabetes Foundation in primary care health centres for people living with Type 2 Diabetes (T2D). The Foundation also carried out a structured peer-to-peer education programme in 21 cities and reached more than 25,000 PwD.

There is a national diabetes registry, based on the International Classification of Diseases (ICD)-10 codes. PwD are registered either as IDDM (insulin dependent diabetes mellitus) or as NIDDM (non-insulin dependent diabetes mellitus). Data is accessible primarily by the Ministry of Health (MoH). Physicians can also request access to their patients' data, with their permission only. There is a National Diabetes Plan, supplemented by two other initiatives "Diabetes 2020: Vision and targets-Turkey" and the "Diabetes Parliament". The latter was initially driven by the Turkish Diabetes Foundation and gathers all diabetes stakeholders and decision-makers (patient organisations; as well as representatives of all diabetes-related HCPs, the social security institution, every political party of the government; and a representative from the MoH or the Minister of Health himself and a representative of the Presidency). Conventions, led by civil society, are held twice a year. Diabetes is considered a "political" priority.

E-health was very much on the agenda during the COVID-19 pandemic. Real-time consultations were used in some centres, and people who developed COVID-19 or were at high risk were closely followed online. There remain, nevertheless, many gaps in the legal and regulatory frameworks, as well as issues with data and PwD's safety and healthcare professionals' (HCPs) liability.

DIABETES PREVENTION & MANAGEMENT

● YES ● WITH VARIATIONS ● NO

HEALTHY LIVING POLICIES

- Obesity/overweight: YES
- Healthy food & diet: YES
- Physical activity: YES
- Smoking: YES
- Regulations for healthy diets: WITH VARIATIONS

PREVENTION OF COMPLICATIONS

- Eye screening: YES
- CVD: WITH VARIATIONS
- Kidney disease: YES
- Diabetes foot: WITH VARIATIONS
- Gestational diabetes: YES

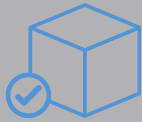
EDUCATION

- At or around the time of diagnosis: YES
- Throughout the life course: YES
- Integrated peer-to-peer support: NO

Is there a programme to follow mothers with gestational diabetes after the birth of the baby?
Yes, everywhere in the country

- NATIONAL PLAN? Stand alone Fully implemented
- PREVENTION & MANAGEMENT GUIDELINES National guidelines
- MONITORING FRAMEWORK? No
- GOVERNMENT ENGAGEMENT WITH PwD? Yes

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>	● Short-acting regular insulin	●	<p>Adults</p>
	● 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

APPS



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

SUPPLIES & TECHNOLOGIES

Free of charge for all PwD

- Syringes & Needles
- Insulin pens
- Connected smart pens
- Test strips (1)

Partially reimbursed

- Blood glucose meters
- Insulin pumps
- Automated delivery systems
- rtCGMs*
- isCGMs**

(1) For T2D on oral medications, 1 strip/day

*real-time continuous glucose monitors.

**intermittently scanned continuous glucose monitors.

ARE SUPPLIES TECHNOLOGIES AVAILABLE AT THE POINT OF DELIVERY?

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

PSYCHOLOGICAL SUPPORT

PSYCHOLOGICAL SUPPORT PROVIDED AS PART OF DIABETES CARE?

Available and easily accessible
Free / fully reimbursed

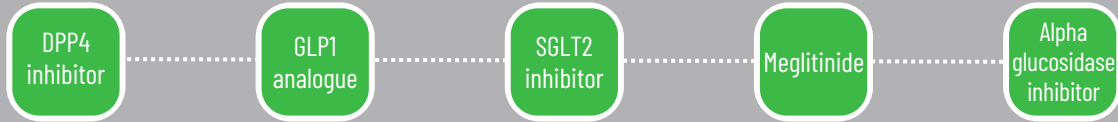


AVAILABLE AT THE POINT OF DELIVERY? ● YES ● MOST OF THE TIME ● SOMETIMES ● NOT OFTEN ● NO

GLUCAGON - METFORMIN/SULFONYLUREAS

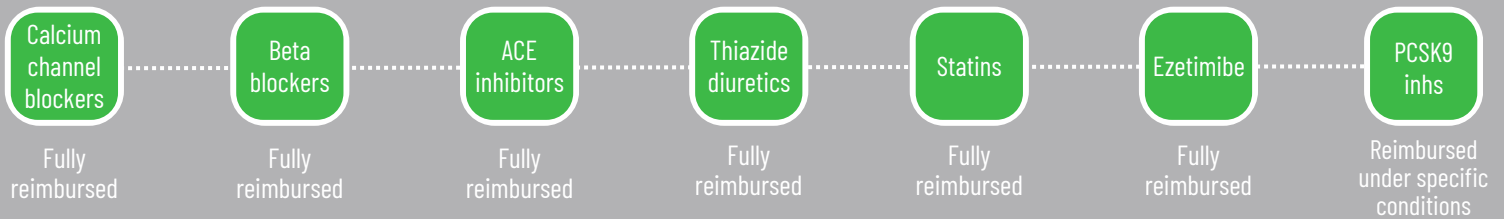


OTHER DIABETES MEDICINES



All diabetes medicines are fully reimbursed and require an initial prescription by an internist/endocrinologist, after which they can be renewed by GPs

CARDIOVASCULAR MEDICINES



HEALTH SYSTEMS

● YES ● NO

*Available in limited number

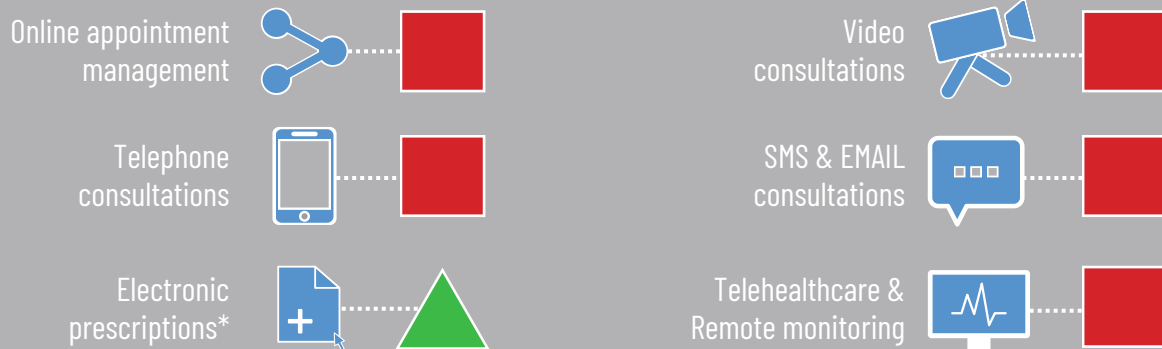
- Are diabetes specialist nurses (DSNs) available?*
 - Do nurses play a role in diabetes prevention?
 - Is there a special academic training required to become a specialist diabetes nurse?
 - Are nurses allowed to prescribe medicines?
 - Do people living with diabetes have access to specialist diabetes educators?
- Do nurses play a role in the diabetes management of?
- Adults & children with T1D
 - People with T2D
 - Women with GDM

HOW WIDESPREAD IS THE USE OF E-HEALTH?

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

*Legally required

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



ELECTRONIC HEALTH RECORDS?

● YES ● NO



WORKING DIABETES REGISTER?

Yes

