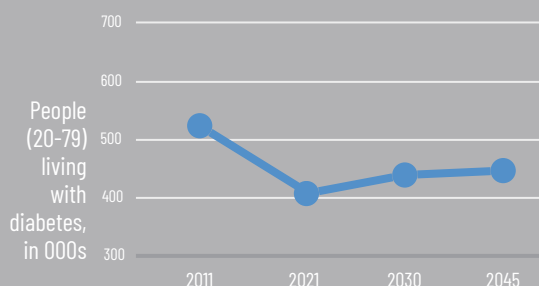




AN OVERVIEW OF DIABETES CARE

DIABETES PREVALENCE



Of which, undiagnosed
33.5% (135,600 people)

Children & adolescents with T1D (0-19y)
4,330

Diabetes prevalence

4.9%



Diabetes-related deaths 10,714



Total expenditure €5407.7 (per person)

Source: IDF Diabetes Atlas 10th edition 2021

According to national estimates, in 2022, diabetes prevalence in Belgium stood at 7.1%, with approximately 810,000 PwD.

In Belgium, there are three separate care pathways for people living with diabetes (PwD). Those living with Type 1 Diabetes (T1D) and Type 2 Diabetes (T2D) on more than three daily insulin injections are eligible to join the "Diabetes Convention" care pathway through which they have access to all types of insulin and most related supplies and technologies free of charge. PwD under the "Diabetes Convention" are treated in specialised centres and they can receive psychological support free of charge. People living with T2D who are treated with injectable diabetes medications and a maximum of two daily insulin injections, are part of the "Trajectory" diabetes care pathway and they have access, free of charge, to the medicines and supplies they require for their therapy, and to some technologies as a co-payment. People living with T2D who are not on injectable therapies are treated in primary care settings with oral medications and lifestyle interventions under the "Start-up" diabetes care pathway, and are not provided with blood monitoring tools. PwD are entitled to a fixed number of hours of diabetes education per year depending on their care pathway.

There are limited healthy living policies in place in the country, targeting obesity, healthy diets, physical activity and smoking.

Screening for all diabetes-related complications is well-structured for people in the convention and trajectory groups but remains suboptimal for the others.

In Belgium, the use of electronic health records became mandatory in 2021. However, there is no unified system to combine the information collected by different healthcare facilities and healthcare professionals. Patient associations and the government have started a dialogue on the implementation of a system in which patients would be able manage their own health records.

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?
Yes, everywhere in the country

NATIONAL
PLAN?

Under
development

PREVENTION &
MANAGEMENT
GUIDELINES

National & international
guidelines

MONITORING
FRAMEWORK?

Yes

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 T1D and T2D on multiple daily injections or insulin pump therapy

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

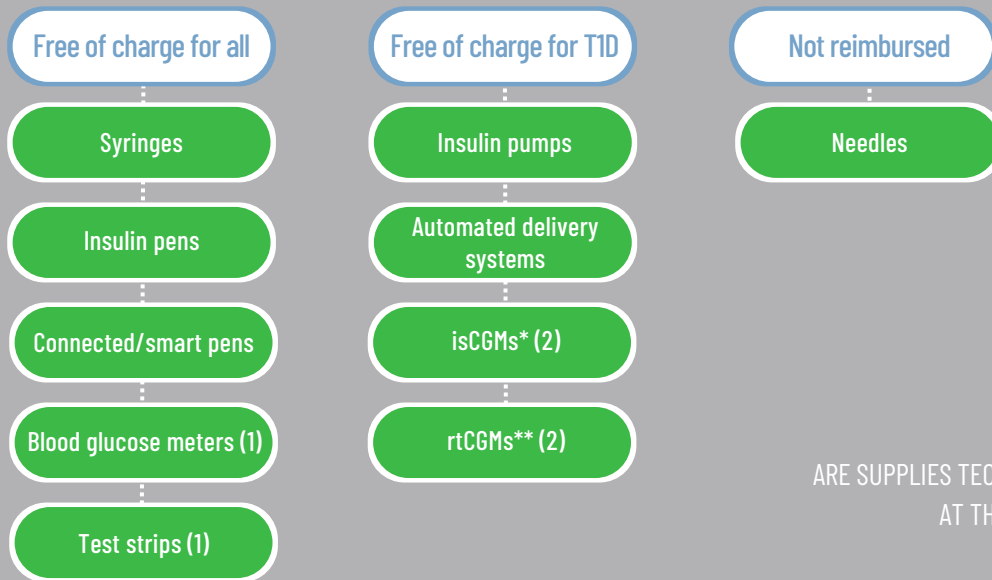
	● Short-acting regular insulin
	○ Rapid-acting (analogues)
	○ Ultra-rapid-acting analogues
	● Intermediate acting
	● Long-acting

APPS



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

SUPPLIES & TECHNOLOGIES



ARE SUPPLIES TECHNOLOGIES AVAILABLE AT THE POINT OF DELIVERY?

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

(1) Except for T2D on oral medication

(2) Free of charge for T2D on multiple insulin injections since July 2023

*Intermittently scanned continuous glucose monitors.

**Real-time continuous glucose monitors.

PSYCHOLOGICAL SUPPORT

PSYCHOLOGICAL SUPPORT PROVIDED AS PART OF DIABETES CARE?

Available free of charge for PwD under the Diabetes Convention.

Available at a cost for other PwD.

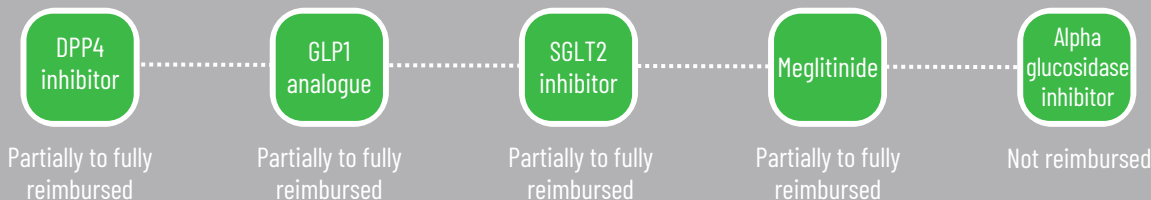


AVAILABLE AT THE POINT OF DELIVERY? ● YES ● MOST OF THE TIME ● SOMETIMES ● NOT OFTEN ● NO

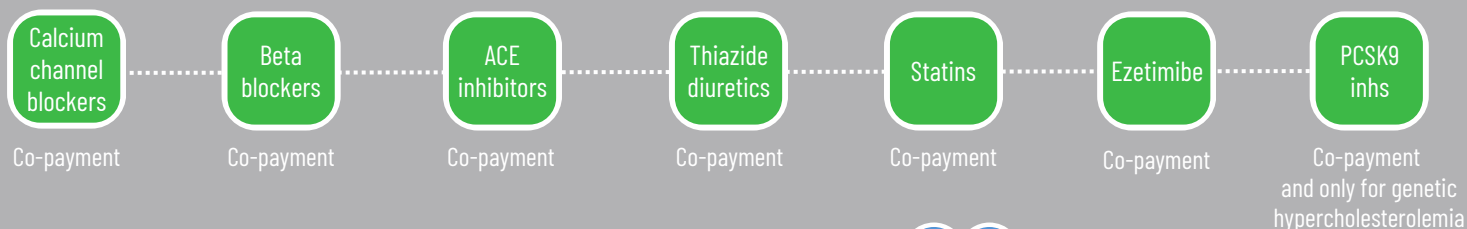
GLUCAGON - METFORMIN/SULFONYLUREAS



OTHER DIABETES MEDICINES



CARDIOVASCULAR MEDICINES



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

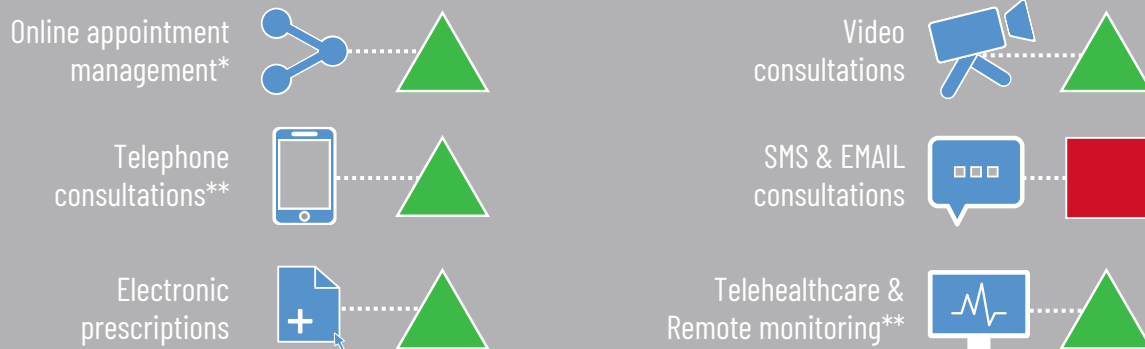
- Do people living with diabetes have access to specialist diabetes educators? (*hard to access*)

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
 **Available for follow ups and not for diagnostics



ELECTRONIC HEALTH RECORDS?

● YES ● NO



WORKING DIABETES REGISTER?

Yes, for T1D

