Access to diabetes care – a global issue demanding local solutions

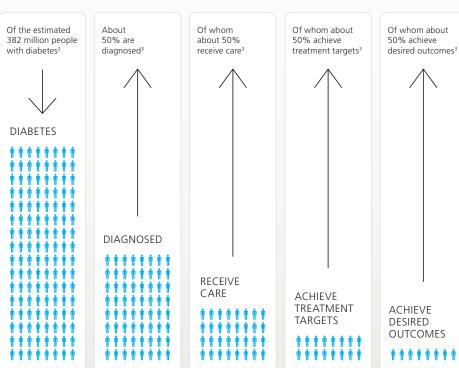
Non-communicable diseases are the leading cause of death in the world today¹. Diabetes is one of the major noncommunicable diseases, as more than 382 million people are living with diabetes worldwide². 4 out of 5 of these people live in low-and middle-income countries².

The diabetes 'Rule of Halves', illustrated below, outlines missed opportunities along the care pathway and inequalities in access to diabetes care. Today, only half of people

living with diabetes have been diagnosed - and only half of those receive diabetes care and treatment³. As a result, many are at risk of developing diabetes-related complications², which means compromising their quality of life.

Novo Nordisk would like to see a world where everyone who has diabetes is diagnosed, everyone who is diagnosed gets treated and everyone who is treated can live their life to the full.

The diabetes 'Rule of Halves'



Changing Diabetes® is the Novo Nordisk response to the global diabetes challenge. That means stopping diabetes ruining peoples' lives. Through our programmes and partnerships, we are working around the world to break the diabetes 'Rule of Halves' by increasing diabetes awareness and improving access to care and treatment options. Access to diabetes care is a global issue. Our key contribution is to discover and develop products, which serve the diverse needs of people with diabetes globally, and to make them accessible to patients across the world. We are committed to offering a product portfolio which includes low-priced insulin.

SCALING-UP TO IMPROVE GLOBAL ACCESS TO CARE

Our 90 years of innovation and leadership in and our differential pricing policy for least diabetes care mean we have an important role to play in improving access to care. Our efforts across the world in recent years have shown us that business integration is essential to making access to care sustainable and work at scale. It is with this focus that we have embarked on a renewed strategy for global access to diabetes care.

As part of this strategy, we have set ourselves a long-term target to treat 40 million people with our diabetes medicines by 2020 – our 40by20 ambition. This equals NCDs to ensure a healthier future. a doubling of the number of people we treat⁴ and it means that reaching more people is part of our planning process – a way of integrating our efforts to improve access to care with our core business. 40by20 is also a contribution towards meeting the World Health Organisation's 25by25 target – a 25% reduction in premature mortality from NCDs by 20251. Our renewed strategy also entails a scalingup of activities in three cross-cutting areas:

1. Health for the next generation Promoting a life-course approach to care for patients by focusing on disease prevention and access to care for

particularly women and children

- 2. Reaching the base of the pyramid Developing innovative and sustainable models for diabetes treatment and care for the working poor
- 3. Building healthcare capacity Contributing to the training of healthcare professionals globally to build awareness of diabetes and capacity to diagnose and treat the condition.

These efforts – together with our financial support to the World Diabetes Foundation developed countries – will help us and partners raise awareness about diabetes and improve global access to treatment and care.

Controlling diabetes is a massive global challenge that demands action by all stakeholders. As this symposium shows, it takes partnerships that span NGOs, public institutions, patient organisations and other players to overcome the barriers to access to diabetes care. Let's build on our experiences and the growing public impetus to tackle

Learn more about how we aim to change diabetes at novonordisk.com/sustainability and changingdiabetesaccess.com.



Breaking the barriers to sustainable access to care

Let's share experiences

A SYMPOSIUM HOSTED BY NOVO NORDISK AT THE WORLD DIABETES CONGRESS

3 DECEMBER 2013 FROM 17:15 TO 19:15 **ROOM 210/211, MELBOURNE CONVENTION** AND EXHIBITION CENTRE



Actual rates of diagnosis, treatment, targets and outcomes vary in different countries.

Symposium agenda

MODERATOR: JEFFREY L. STURCHIO, PH.D., SENIOR PARTNER AT RABIN MARTIN. JEFF IS A THOUGHT LEADER IN GLOBAL HEALTH AND FORMER PRESIDENT & CEO OF THE GLOBAL HEALTH COUNCIL.

- 17.15 Welcome and introduction to panel consisting of global health experts and project partners
- 17.20 A word from the panel:

 Barriers to sustainable access to diabetes care

 Durhane Wong-Rieger, Ph.D., President and CEO International Alliance of Patient Organizations

 Nalini Saligram, Ph.D., Founder and CEO, Arogya World
- 17.40 From philanthropy to sustainability:
 Improving access to care as a business imperative
 Charlotte Ersbøll, Corporate Vice President, Novo Nordisk
- 18.00 Health for the next generation
 Changing Diabetes® in Children towards a sustainable future
 Partner presentation by Dr. Ahmed Reja, President of Ethiopian
 Diabetes Association
- 18.10 Reaching the base of the pyramid

 Towards sustainable care and access to affordable insulin in Kenya
 Partner presentation by Zachary Ndegwa, Project Manager for the
 National Diabetes Control Program, Ministry of Health, Kenya
- 18.20 **Building healthcare capacity**Healthcare professional training programmes
 Peter Rossing MD DMSc, Head of Research and Chief Physician,
 Steno Diabetes Center
- 18.30 Panel discussion on the challenges of sustainability in access to diabetes care
- 19.10 Final remarks
- 19.15 Reception with light dinner

Please welcome our moderator, speakers and panelists



MODERATOR

Jeffrey L. Sturchio, Ph.D. Senior Partner, Rabin Martin

Jeffrey L. Sturchio is senior partner at Rabin Martin, a global health strategy consulting firm, and former president & CEO of the Global Health Council. Dr. Sturchio is currently a visiting scholar at the Johns Hopkins Institute for Applied Economics, Global Health and the Study of Business Enterprise; a senior associate at the Center for Strategic and International Studies; a principal of the Modernizing Foreign Assistance Network; and a member of the Council on Foreign Relations. His publications include, most recently, Noncommunicable Diseases in the Developing World: Addressing Gaps in Global Policy and Research, edited with Louis Galambos (Baltimore, Marvland: Johns Hopkins University Press, 2014).



NOVO NORDISK REPRESENTATIVE

Charlotte Ersbøll Corporate Vice President, Global Stakeholder Engagement, Novo Nordisk

Charlotte Ersbøll is responsible for the company's corporate social responsibility, external relations and reputation activities

according to the company's Triple Bottom Line business principle. Since she joined Novo Nordisk in January 2005, she has been responsible for the development and implementation of the company's global Changing Diabetes® and Changing Possibilities in Haemophilia[®] leadership initiatives. She is actively involved in initiatives promoting social change, particularly in the field of health and development, in collaboration with a wide range of international organisations. She is on the faculty of Cambridge University's Sustainability Leadership Programme, she is a member of the Policy Committee for Trust, Reputation and Compliance of the European Federation of the Pharmaceutical Industry, and is a council member of the Novo Nordisk Haemophilia Foundation. Prior to joining Novo Nordisk, she was a senior communications expert advising global healthcare industry and non-governmental organisations on communications, public health, health advocacy and policy development issues.



SPEAKER AND PROJECT PARTNER

Dr. Ahmed Reja Chief Executive Director, College of Health Sciences, Addis Ababa University (AAU)

Dr. Ahmed Reja is Consultant Physician and Chief Executive Director of the College of Health Sciences, Addis Ababa University (AAU). He also served as Head of the Department of Internal Medicine and Endocrine Unit, AAU. As President of the Ethiopian Diabetes Association, he secured two grants from the World Diabetes Foundation: Early Detection and Treatment of Diabetic Retinopathy in 5 university hospitals and Diabetes Outpatient Services in 12 Hospitals of Ethiopia. He also leads the Changing Diabetes® in Children Programme – a Novo Nordisk initiative to improve diabetes care of over 2400 Ethiopian children & adolescents. Since July 2012, he has become Chair-Elect, International Diabetes Federation, Africa Region.



SPEAKER AND PROJECT PARTNER

Zachary Ndegwa Muriuki National Coordinator, Kenya Diabetes Prevention and Control Program

Zachary Ndegwa is a clinical nutritionist with public health training and vast experience in Diabetes Nutrition Therapy. He is the National Coordinator of the Kenya Diabetes Prevention and Control Program which is a World Diabetes Foundation (WDF) funded project to mainstream comprehensive, multidisciplinary diabetes care in the national health care delivery system. He has been coordinating the implementation of key diabetes initiatives focusing on education, capacity building and advocacy at the national level. Ndegwa has been involved in overseeing the running of several diabetes initiatives in Kenya,

among this is the Base of Pyramid Project (BOP), whose aim is to improve access to insulin and diabetes care.



SPEAKER AND PROJECT PARTNER

Peter Rossing, MD DMSc Head of Research and Chief Physician, Steno Diabetes Center

University of Copenhagen Medical School in 1991. He had his clinical training at the University of Copenhagen Hospitals, to obtain a specialist degree in internal medicine and endocrinology 2004. Then he rejoined the Steno Diabetes Center as senior physician. Since 2007 he has been a chief physician and manager of the Steno Diabetes Center research team dedicated to the research of micro-and macrovascular complications of diabetes, and since 2010 head of research at Steno Diabetes Center. Peter Rossing was appointed professor in diabetic angiopathy in 2012 at Aarhus University and at University of Copenhagen. He has co-authored >200 papers, and his h-index is 43. He has received several national and international awards including The Minkowski prize from the EASD in 2005 and the Viswanathan prize 2012 and the Ruth Østerby award from EDNSG 2013. He is president of the Danish Endocrine Society, and member of the board of the

Peter Rossing graduated as a MD from the



PANELIST

Durhane Wong-Rieger, PhD is Immediate

Durhane Wong-Rieger, Ph.D. President and CEO, International Alliance of Patient Organizations

Past-Chair of the International Alliance of Patient Organizations, Co-Chair of the Health Technology Assessment International Patient /Citizen Involvement Interest Group and Board Member of DIA International. In Canada, she is President of the Institute for Optimizing Health Outcomes, President of the Canadian Organization for Rare Disorders and chair of the Consumer Advocare Network, a national network for patient engagement in healthcare policy and advocacy. She is a certified Health Coach and licensed T-Trainer with the Stanford-based Living A Healthy Life with Chronic Conditions. Dr. Wong-Rieger has served on numerous health policy advisory committees and panels and is member of the Advisory Board for the Canadian Institutes of Health Research Institute of Genetics. Durhane has a PhD in psychology from McGill University and was professor of psychology at the



PANELIST

Nalini Saligram, Ph.D. Founder and CEO Arogya World

Nalini Saligram is Founder and CEO of Arogya World, a global health non-profit committed to changing the course of chronic disease. Through Arogya World, she is putting a spotlight on NCDs and is turning that awareness into action. Nalini has led Arogya World in the design and implementation of large, scalable diabetes prevention programs such as mDiabetes, a Clinton Global Initiative Commitment that reached 1 million consumers in India through text messages in 12 languages. A Ph.D. in biochemistry from the Indian Institute of Science, she has worked at Merck, Glaxo Wellcome, Hill & Knowlton, and Merial. She serves on the Dean's Council at Emory's School of Public Health.

REFERENCES

¹World Health Organization, Global Action Plan for the Prevention and Control of NCDs 2013–2020, 2013, viewed 13 November 2013, who.int/nmh/events/ncd_action_plan/en ²International Diabetes Federation. IDF Diabetes Atlas, sixth edition, 2013. ³Hart JT. Rule of Halves: implications of increasing diagnosis and reducing dropout for future

University of Windsor in Canada.

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4 Novo Nordisk A/S, Novo Nordisk Annual Report 2012, p 12, viewed 16 November 2013, http://www.novonordisk.com/images/annual_report/2012/Novo-Nordisk-AR-2012-en.pdf