Insulin and associated devices: access for everybody WHO stakeholder workshop 21 and 23–25 September 2020



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Overview

Why this workshop

Diabetes is the seventh leading cause of death globally and a major cause of costly and debilitating complications such as heart attacks, strokes, kidney failure, blindness and lower limb amputations. There are more than 420 million people living with diabetes and this number is estimated to rise to 570 million by 2030 and to 700 million by 2045.

People with type 1 diabetes need insulin for survival while people with type 2 diabetes need insulin for controlling blood glucose levels to avoid complications when oral medicines become less effective in the progressive course of the illness. Only about half of people with type 2 diabetes in need of insulin can access it.

Lack of access to insulin is largely due to high prices and supply challenges. Insulin originator companies control 96% of the global market, setting prices that are prohibitive for many countries. Access to delivery devices for insulin and basic technologies such as blood glucose testing is also limited. Without access to health products for screening, diagnosis, and treatment and control and to health professionals trained in managing diabetes, premature mortality due to diabetes cannot be reduced.

World Health Organization (WHO) Member States recognized prevention, screening, early diagnosis and appropriate treatment of diabetes and other noncommunicable diseases as a priority in 2000, following a call for action by the Fifty-third World Health Assembly. However, over the last two decades WHO has had to report to the World Health Assembly that there is not enough progress in countries in meeting the health-care needs of people living with diabetes.

During the current COVID-19 pandemic, many people who need treatment for diabetes are not receiving the health services and medicines they need. People with diabetes are at increased risk of severe disease and death from COVID-19. Immediate action to correct this is needed as part of the COVID-19 response.

Improving access to insulin and other health products for diagnosis, monitoring and treatment of diabetes is complex, and interventions require collaboration for greater impact at country level.

A call for a collective response

If we want different results, we have to do things differently. Today's workshop is a bold step to influence the imbalance in access to insulin in low-income countries. This is the moment for the international community to heed the current wake-up call, and move ahead with a collective response in unity and solidarity.

REN MINGHUI

WHO ASSISTANT DIRECTOR-GENERAL FOR UHC/COMMUNICABLE AND NONCOMMUNICABLE DISEASES

Insulin is a question of survival

Insulin is a life-saving treatment that has been known for 100 years and it should be available in countries. Urgent actions are needed for improved access to diabetes treatment, delivery devices, screening and diagnostics. Organizations need to take action to overcome the many challenges including improving affordability, strengthening political will and placing people with diabetes at the centre.

> MARIÂNGELA SIMÃO WHO ASSISTANT DIRECTOR-GENERAL FOR ACCESS TO MEDICINES AND HEALTH PRODUCTS

Workshop objectives

The WHO workshop aimed to:

- inform stakeholders of WHO's global objectives to increase availability and affordability of quality-assured insulin, insulin-delivery and glucose monitoring devices;
- increase visibility and awareness of the extent of the barriers to access quality-assured insulins; and
- identify possible solutions through the collaborative efforts and the input of multisectoral stakeholders.

About the workshop

The workshop was held online on 21, 23, 24, and 25 September 2020 from 14:00 to 16:00 (CET) each day. Sessions were chaired by representatives from WHO and presentations were made by a wide range of panellists from the UN and partner organizations, civil society, and country regulators and policy makers and included 4 people with type 1 diabetes (See agenda in Annex 2, list of panellists/speakers in Annex 3 and list of presentations in Annex 4). Fact sheets on specific topics were prepared in advance of the webinar and made available to all participants (Annex 5). An average of 270 speakers/panellists and observers from governments, nongovernmental organizations, patient organizations, academia, United Nations Organizations and private sector representatives participated each day (Figure 1).

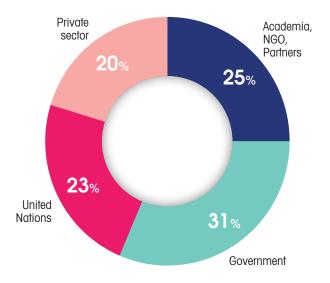


Fig. 1. Observers at the workshop by organization type (average per day)

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