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Decer Constituent,

Thank you for contacting me about support and treatment for people with diabetes.

Diabetes is a leading cause of premature mortality, doubling an individual's risk of cardiovascular disease. It costs over £10 billion every year to manage and results in over 22,000 additional deaths each year. That is why I believe it is important that high quality diabetes care is available.

A total £5 million was provided in 2021/22 in a national recovery fund to support the recovery of routine diabetes care through innovative projects. The programme approved 28 projects with delivery in 2022/23. A further £75 million of funding is also being allocated between 2020/21 and 2023/24 for the treatment and care of people living with diabetes. NHS England continues to work to identify and develop plans to address gaps in the provision of services.

The Government also supports work to prevent the development of diabetes. The NHS Diabetes Prevention Programme operates to identify people who are at high risk of developing type 2 diabetes and refers them onto a nine-month, evidence-based lifestyle change programme. Latest figures, published in February 2023 shows a 20% reduction in risk for those who are referred to the programme compared to those who are not.

Finally, the Government has announced its intention to develop and publish a Major Conditions Strategy. The strategy will set out a strong and coherent policy agenda that sets out a shift to integrated, whole-person care. Interventions set out in the strategy will aim to alleviate pressure on the health system, as well as support the Government's objective to increase healthy life expectancy and reduce ill-health related labour market inactivity. Diabetes is one of the six major conditions included in the strategy.

On 17th May, the Government launched its call for evidence for the Major Conditions Strategy which ran until 27th June. The Government is analysing responses and will respond shortly.

The Government is aware of some limited issues with the supply of two insulin products and has worked with manufacturers to ensure sufficient supplies are



available to meet demand. The Government is also aware of a discontinuation of one insulin preparation and has issued communications to the NHS with advice on how to manage affected patients.

I strongly appreciate how distressing the possibility of insulin shortages can be, but I would like to assure you that the Department for Health and Social Care has well-established processes to prevent, manage and mitigate medicine shortages.

Where there has been an issue with an insulin product, alternatives have remained available, and a wide range of insulin products exist. Ministerial colleagues are working at pace to ensure that these issues are resolved as quickly as possible. Patients should liaise with their doctor or pharmacist if they have any questions on this matter.

I believe that education plays a key part in the prevention and management of diabetes. Obesity, for instance, is the single greatest factor in developing type 2 diabetes. I am therefore encouraged that the basic principles of healthy eating are taught in schools from Key Stage 1.

The latest Better Health campaign, launched last year, focuses on six key benefits associated with a healthier weight which includes a reduced risk of developing diabetes. A range of free support and guidance has also been made available alongside the campaign to help individuals lose weight and eat more healthily.

I absolutely agree that technology could, and should, provide vital support to people managing diabetes and I know that new treatments and technologies are being created all the time. Integrated Care Boards are responsible for commissioning diabetes services for their local populations. This includes prescribing technologies for people living with diabetes, for example glucose monitoring devices. Following a successful two-year pilot programme that saw a significant increase in the adoption of flash glucose technology across all groups responsible for commissioning, I am encouraged to see that nearly three-fifths of patients living with type 1 diabetes are now benefiting from this monitoring. Commissioning decisions for the adoption of



technology products in diabetes are always guided by clinical and cost-effective assessments, delivered by NICE and other regulatory bodies.

Yours faithfully,

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CHRIS HEATON-HARRIS MP MEMBER OF PARLIAMENT FOR DAVENTRY