Let us make the prevention of type 2 diabetes a Health care priority

A plethora of studies and clinical trials with lifestyle interventions have convincingly shown that prevention with lifestyle work extremely well to prevent Type 2 Diabetes (T2D). Half of cases of T2D in high-risk people can be prevented. While clinical trials include volunteers, who have participated in the study and the next phase of research will be how to implement prevention at the population level. If people are ready, willing and able to change their lifestyle for the better, it actually doesn’t take much—a little more physical activity, small changes in diet, avoiding obesity or reducing existing obesity. There are a number of arguments for both early activities for the prevention of diabetes, as well as for concepts and strategies at later intervention stages. Sustainability within a diabetes prevention program is important. The quality of intervention, as well as the intensity varies with the degree of the identified risk. It can be summarized that interventions should start as early as possible to allow a wide variety of low and mild intensity programs. The later the risk is identified, the more intensive the intervention should be. Public Health interventions for diabetes prevention are an optimal model for early intervention. Late interventions will be targeted to people who already have significant pathophysiological derangements that can be considered as steps leading to the development of T2D. These derangements may be difficult to reverse, but the worsening of dysglycaemia may be halted and thus the onset of T2D can be postponed.

Biography

Jaakko Tuomilehto has pursued his MD from Turku University in 1973 and completed PhD in Public Health at Kuopio University in 1975. He is Professor Emeritus of Public Health of University of Helsinki and affiliated with the National Institute for Health and Welfare in Finland. His research interests include epidemiology and prevention of diabetes and other non-communicable diseases. He has published over 1800 peer-reviewed publications with >138,000 citations and h-index 165. He has received many prestigious scientific awards. He has been involved in several editorial and advisory boards nationally and internationally. Currently, he serves as the Editor-in-Chief of Primary Care Diabetes.