

# New guidance for preventative action against diabetes

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Dr. Danielle Bodicoat, University of Leicester. Credit: Danielle Bodicoat

A team of academics from the University of Leicester has been instrumental in shaping National Institute for Health and Care Excellence (NICE) guidance that will influence medical policy towards diabetes prevention nationwide.

NICE's recommendations in the form of a local government briefing,

which have been developed with advice from NICE's Local Government Reference Group using feedback from council officers, councillors and directors of public health, encourage local authorities and partner organisations to use [body mass index](#) (BMI) as a signal for preventive action against long-term medical conditions, such as diabetes.

The Leicester Diabetes Centre has a close relationship with NICE. The Leicester Diabetes Centre is an alliance between the University Hospitals of Leicester NHS Trust (Leicester's Hospitals), the University of Leicester, the local community and Primary Care and is located at Leicester General Hospital.

Professor Kamlesh Khunti, of the University of Leicester, was Chair of the NICE Early Identification and Prevention of Diabetes Guidance Group and Professor Melanie Davies and Dr Thomas Yates, from the University of Leicester and Leicester Hospitals, were also members of this group.

Dr Danielle Bodicoat from the Leicester Diabetes Centre, who performed the analysis for the study, said: "This new guidance will mean that more people will receive interventions to help them make such changes earlier, which is very important if we are to halt the rise in diabetes. Action now will result in significant social care and health savings, by delaying and improving the management of complications associated with limiting long-term illnesses."

The focus is on people from black, Asian and other minority ethnic groups. The prevalence of chronic conditions such as type 2 diabetes, coronary heart disease and stroke is up to 6 times higher, and occurs from a younger age, among these groups.

In addition, these groups progress from being at-risk to being diagnosed with these conditions at twice the rate of white populations.

Existing lifestyle interventions targeting sedentary lifestyles and diet have reduced the incidence of diabetes by about 50% among high-risk individuals. This includes people from South Asian, Chinese, black African and African Caribbean descent with a BMI of 23 kg/m<sup>2</sup> or more, where interventions to identify and manage pre-diabetes have been found to be cost effective.

Diabetes, however, is the most common cause of visual impairment and blindness among people of working age and the most common cause of kidney failure and non-traumatic lower limb amputations. NICE's guidelines will put greater focus on preventing diabetes in high-risk individuals.

Dr Bodicoat added: "The number of people who have [diabetes](#) is rapidly increasing and is one of the biggest challenges currently facing our healthcare system. We know that this can be prevented, especially by increasing physical activity and eating a healthier diet."

**More information:** [dx.plos.org/10.1371/journal.pone.0090813](https://doi.org/10.1371/journal.pone.0090813)

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