

UK diabetes prevention program may have global impact

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A nationwide program to reduce the risk of developing diabetes in the UK is proven beyond reasonable doubt to work, a new study reveals.

The positive effects observed in the NHS Diabetes Prevention Program—the largest such project in the world helping people across the

UK to lose weight and control their blood sugar levels—may have relevance globally for tackling the [diabetes epidemic](#).

The Diabetes Prevention Program (NHS DPP) in England referred adults with high risk of developing [diabetes](#) to [lifestyle counseling](#) for losing weight, encouraging physical activity, and other lifestyle improvements. The program started in 2016, but doubts have remained about whether it worked or not.

Now, an international team of researchers from the UK, Germany, U.S., and South Africa analyzed English health data from over two million patients— finding strong evidence that referral to the program improved the factors which can lead to people developing type 2 diabetes.

Publishing their [findings](#) in *Nature*, the research team used state-of-the-art [statistical methods](#) that reveal being referred to the that the program has resulted in improved glycemic control, as well as reductions in [body mass index](#) (BMI), weight, high-density lipoprotein (HDL) cholesterol, and triglycerides.

Co-author Professor Justine Davies, from the University of Birmingham, commented, "Our findings clearly demonstrate the huge benefits of intensive lifestyle counseling for improving the health of patients with prediabetes. The evidence also suggests a promising route for improving [population health](#) more broadly.

"The positive effects observed in the program may also extend to other non-communicable diseases such as cancer, which is increasingly thought to be connected to unhealthy lifestyle habits and environments."

The researchers note that doctors' skepticism about the effectiveness of lifestyle counseling for successful behavior change may stem from GPs' experience that brief counseling—often the only feasible approach in

time-constrained consultations—may be of limited benefit.

Lead author Julia Lemp from the University of Heidelberg, in Germany, commented, "There is an urgent need to implement population-based measures that prevent diabetes, enhance its early detection, and address cardiovascular risk factors to prevent or delay its progression to complications.

"Investment in structured, intensive behavior change programs may help prevent development of type 2 diabetes while reducing the risk of complications from diabetes and cardiovascular events.

"Our results show beyond reasonable doubt that investments in programs such as this should continue. At the same time, there are many people at risk for diabetes who remain underserved by existing care pathways and for whom targeted prevention strategies should be further explored."

Diabetes prevalence and related deaths continue to rise in most parts of the world. By 2030, the global number of adults with diabetes is expected to reach 578 million—10% of the world's adult population.

More information: Pascal Geldsetzer, Quasi-experimental evaluation of a nationwide diabetes prevention programme, *Nature* (2023). [DOI: 10.1038/s41586-023-06756-4](https://doi.org/10.1038/s41586-023-06756-4).
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