From the desk of the Chairman, Dinesh Nagi

Since my last communication in May 2018, there have been significant developments both within the ABCD and nationally related to diabetes. We continue to make progress on the core priorities for the ABCD which the executive team has been working on and well supported by our efficient secretariat.

Website update
Our website redevelopment is a priority, making everything accessible from abcd.care. This work was undertaken as a priority and has been completed and the new website went live during the month of August. This has been a significant piece of work and thank you to all involved, especially my colleague Bob Ryder and Heather and Tricia at Red Hot Irons.

Clinical and Commissioning News Live
The ABCD supported the ‘Clinical and Commissioning News Live’ event which took place in July with a slightly different format. The programme was of high quality but unfortunately the meeting was poorly attended. While ABCD continues to look at the sustainability of this event to get the best value for money for the members, one positive outcome has been the planned round table meeting of experts in November to explore how ABCD and the Diabetes Technology Network (DTN) can help increase the uptake of technologies to help people who have diabetes manage their condition more successfully. With the imminent announcement of five-year funding for the NHS, the professional associations need to give a clear steer to the NHS as to how we can spend the resource wisely to get the best outcomes.

Regional ABCD meetings pilots
The first meeting was held at the University of Wolverhampton which I was privileged to attend and open. Unfortunately the planned second pilot event on 18 October in Yorkshire had to be postponed and is now planned for 6 February 2019 at York race course. The final detailed programme will be available online soon.

ABCD–RA collaboration
ABCD–RA collaboration continues to be strong. After producing key guidelines which have been endorsed by the Royal College of Physicians and Diabetes UK (DUK), ABCD and the Renal Association have recently agreed to produce guidelines for post-transplant diabetes and have recently written to the British Transplant Society asking them to support this new development and collaborate with ABCD and the Renal Association.

Position statements
ABCD continues to produce position statements on a regular basis and the three previous commissioned statements are ready for publication. These will cover important areas around the use of SGLT-2 inhibitors in Type 1 Diabetes, use of Biosimilar insulins in Diabetes and Cardiovascular impact of GLP-1 analogues.

Funding
The funding for the Association is dependent on corporate support and successive treasurers have designed schemes that comply with ABPI regulations to cover the whole range of activities. We had a very vibrant and successful meeting where all our sponsors were invited for the first time, compared with previous years where the executive team met with gold sponsors only. The ABCD Executive discussed with corporate sponsors the support for future years and various options which will be of mutual benefit to our corporate partners.

Society for Endocrinology Clinical Committee
ABCD will collaborate with the Society for Endocrinology Clinical Committee to work together in light of ‘Shape of Training’, and ongoing concerns about recruitment to Endocrinology & Diabetes specialty training. The plan is to ensure that we push for protected specialty training time for Endocrinology & Diabetes trainees to enhance their training and experience in our specialty.

ExTOD/PEAK exercise annual conference
ABCD continues to support the ExTOD/PEAK exercise annual conference and the event for this year will take place in Manchester on 19 October 2018. The Spring Meeting of ABCD is taking place in Enterprise Park in Loughborough in May 2019 and I am delighted that Professor Peter Grant will be delivering the second John Wales Memorial Lecture which has become an important part of the programme for the Spring ABCD meetings.

Finally ...
This brief report is an excellent opportunity for me to extend my personal thanks to my friend, Dr Rob Gregory, for his ongoing support and the executive team which includes Andy Macklin, Russell Drummond and Dipesh Patel for discharging their responsibilities so well and so conscientiously. Professor Hugh Jones continues to lead the academic sub-committee and we have plans to refresh the research sub-groups and also add on to the activities this group has undertaken in the past years and online tools for the application for various funding schemes and including future succession planning. Professor Dev Singh continues in his role as leadership on professional development. The education sub-group is also in the final stages of selecting two deputies to work alongside Professor Dev Singh to ensure that we plan for future sustainability of this excellent programme, the funding for which has been secured.

My thanks also to all the ABCD committee members for their commitment and support. The trustees have backed the executive team and ABCD activities financially and with wise advice. I must also thank the ABCD secretariat and Red Hot Irons – Tricia, Elise, Jen and Heather – who remain the backbone of the back room functions for the Association, and Joyce for ensuring that our finances are up to date.
I am looking forward to my first ever trip to the Houses of Parliament to represent the ABCD at the Diabetes Awareness Day on 31 October, an event hosted by the All Party Parliamentary Group on Diabetes and supported by our corporate sponsor Novo-Nordisk.

Goodbye until next time.

From the desk of Umesh Dashora

Rowan Hillson Award 2017

The winners of this prestigious competition received their award at the Association of British Clinical Diabetologists’ Spring meeting on 23 May 2018 from Dr Umesh Dashora (Lead, Safer Insulin Prescribing Group) and Dr Dinesh Nagi (Chairman, ABCD). Dr Stuart Ritchie and Tracey Rapson on behalf of the Western General Hospital team received the award for the development of a diabetes dashboard which led to reduction in hypoglycaemia and improvement in hypoglycaemia. Dr Charlotte Boughton and Dr Danielle Dixon on behalf of the King’s College team received the runner-up award for their initiative which helped reduce hypoglycaemia during treatment of hyperkalaemia by mandating personalised dose of dextrose with insulin added to it.

From the desk of Rebecca Reeve

Prime Minister announces new NHS funding settlement

Following calls for a funding increase ahead of its 70th birthday, the Prime Minister, Theresa May MP, has announced that NHS England is to receive an average annual 3.4% rise in real-terms funding over the next five years, an extra £20 billion per year. This is understood to be frontloaded at a 3.6% (above inflation) increase in the first two years. The details on how this will be funded will be announced in the Autumn Spending Review, although the Prime Minister hinted that this would be achieved via a ‘Brexit dividend’ and from tax increases. The funding increase will also be accompanied by an NHS England plan for delivering key clinical priorities, including improving cancer outcomes shortly. The Association of the British Pharmaceutical Industry (ABPI) welcomed the announcement, highlighting that the settlement will enable partners to work together and focus on improving services, delivering better health outcomes and ensuring greater access to treatment. The King’s Fund also welcomed the announcement, but highlighted that the funding falls short of the 4% increase that most health think-tanks had called for. They also called for more detail from Government on funding areas currently outside of the NHS England ring-fence, such as public health, capital investment and staff training.

NHS Digital launches National Diabetes Inpatient Harms Audit

NHS Digital has launched a new year-long audit across all acute hospitals in England to collect data on four harms that can occur to inpatients who have diabetes. The four harms included are severe hypoglycaemia, diabetic ketoacidosis (DKA), hyperosmolar hyperglycaemic state and foot ulcers. Although insulin safety has not been identified as one of the four major harms, medication errors could be included in data on severe hypoglycaemia and DKA.

http://diabetestimes.co.uk/nhs-launches-new-inpatient-harms-audit/

ONS publishes UK health expenditure figures for 2016

The Office for National Statistics (ONS) published its ‘UK Health Accounts: 2016’. The report reveals that the total current healthcare expenditure in 2016 was £191.7 billion, an increase of 3.6% on spending in 2015, when £185 billion was spent on healthcare in the UK. This represents 9.8% of gross domestic product (GDP), higher than the median for OECD (Organisation for Economic Co-operation and Development) member states but second lowest of the seven nations in the G7, a position which has remained unchanged since UK health accounts were introduced for 2013. Also of note, Government-financed healthcare expenditure accounted for 79.4% of total spending, £152.2 billion. Spending on health-related long-term care was £35.5 billion in 2016, with an additional £10.9 billion spent on social care outside the health accounts definitions. Government spending accounted for 62% of all spending on long-term care, with most other long-term care spending financed by out-of-pocket payments.

http://diabetestimes.co.uk/nhs-launches-new-inpatient-harms-audit/

NHS Diabetes Prevention Programme goes digital

NHS England’s flagship Diabetes Prevention Programme (DPP) has strengthened its digital workstream. Up to 5,000 people living with type 2 diabetes will be recruited over a six-month period, with access to the digital interventions for up to 12 months.


Diary dates

<table>
<thead>
<tr>
<th>2018</th>
<th>15 October</th>
<th>DTN-UK Team Education Days</th>
<th>Manchester</th>
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<tr>
<td></td>
<td>19 October</td>
<td>PEAK/EXTOD – Performing at your PEAK</td>
<td>Manchester</td>
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<td>8/9 November</td>
<td>ABCD Autumn Meeting</td>
<td>London</td>
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<td>9/10 November</td>
<td>ABCD SpR Meeting</td>
<td>London</td>
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<td></td>
<td>26–30 November</td>
<td>ABCD CDP Course</td>
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<td>2019</td>
<td>13 February</td>
<td>ABCD/Renal Association Meeting</td>
<td>NEC, Birmingham</td>
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<td></td>
<td>16 May</td>
<td>DTN-UK Annual Meeting</td>
<td>Loughborough</td>
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<td></td>
<td>16/17 May</td>
<td>ABCD Spring Meeting</td>
<td>Loughborough</td>
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For other meetings see https://www.abcd.care/events
### Interesting recent research
(Umesh Dashora)

A rapid-fire collection of interesting recent developments in diabetes

<table>
<thead>
<tr>
<th>Authors, Journal</th>
<th>Type of study</th>
<th>Main results</th>
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<tbody>
<tr>
<td>Gilbert-Ouimet et al, BMJ Open Diabetes Research and Care</td>
<td>Prospective observational study from Canada</td>
<td>Diabetes risk is increased in women but not men working over 45 hours a week. The risk was higher compared with women working 35–40 hours a week (HR 1.63, 95% CI 1.04 to 2.57). The effect was slightly attenuated when adjusted for potentially modifying additional risk factors. <a href="https://drc.bmj.com/content/6/1/e000496">https://drc.bmj.com/content/6/1/e000496</a></td>
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<tr>
<td>Bowe et al, The Lancet Planetary Health</td>
<td>Longitudinal cohort study for 8.5 years in the USA</td>
<td>Diabetes risk is increased with pollution. In this study PM$_{2.5}$ air pollution was associated with a higher incidence of diabetes (HR 1.15, 95 CI 1.08 to 1.22). <a href="https://www.thelancet.com/journals/lanpla/article/PIIS2542-5196(18)30140-2/fulltext">https://www.thelancet.com/journals/lanpla/article/PIIS2542-5196(18)30140-2/fulltext</a></td>
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<tr>
<td>Banerjee et al, Proc Natl Acad Sci USA</td>
<td>Animal studies on rat</td>
<td>Development of oral insulin using choline and geranate (CAGE) ionic liquid. CAGE prevented intestinal degradation of orally delivered insulin leading to a reduction in glucose in rats for a period of 12 hours after food. <a href="http://www.pnas.org/content/early/2018/06/19/1722338115">http://www.pnas.org/content/early/2018/06/19/1722338115</a></td>
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<tr>
<td>Difeliceantonio et al, Cell Metab</td>
<td>Study on 206 participants</td>
<td>Processed food with combined fat and carbohydrate stimulated brain reward centres. Participants in the study were prepared to pay more for fat+carbohydrate compared with equally familiar, liked and caloric fat or carbohydrate. This response is mediated through areas critical for reward valuation including the dorsum striatum and mediodorsal thalamus, as evidenced by functional MRIs. <a href="https://www.cell.com/cell-metabolism/fulltext/S1550-4131(18)30325-5">https://www.cell.com/cell-metabolism/fulltext/S1550-4131(18)30325-5</a></td>
</tr>
<tr>
<td>Lee et al, Nature Materials</td>
<td>Animal study</td>
<td>Chemical coating of intestine can reduce intestinal absorption. Researchers have developed an orally administered intestinal coating (sucrose octasulphate aluminium complex derived product) which reduces the glucose response following a meal in rodent models. <a href="https://www.nature.com/articles/s41563-018-0106-5">https://www.nature.com/articles/s41563-018-0106-5</a></td>
</tr>
<tr>
<td>Huo et al, Diabetologia</td>
<td>Registry-based study</td>
<td>Diagnosis of diabetes at an early age is associated with higher risk of stroke and ischaemic heart disease but not cancer. In this Australian study all-cause and cancer mortality reduced during the first 1.8 years of diagnosis and CVD mortality was unchanged. All mortality rates increased with age. Earlier diagnosis and longer duration of diabetes was associated with higher risk of all-cause mortality mainly due to CVD mortality but lower mortality due to cancers. <a href="https://link.springer.com/article/10.1007/s00125-018-4544-z">https://link.springer.com/article/10.1007/s00125-018-4544-z</a></td>
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<td>Yamamoto et al, Diabetologia</td>
<td>Prospective cohort study</td>
<td>Community-based pre-conception initiative improves preparation for pregnancy in people with pre-gestational diabetes. A comprehensive pre-conception education programme targeted at women between 18 and 45 years of age led to more women achieving target HbA1c level of &lt;48 mmol/mol (58.5% vs. 44.4%, p=0.016) and more women taking 5 mg folic acid daily (41.8% vs. 23.5%, p=0.001). <a href="https://link.springer.com/content/pdf/10.1007%2Fs00125-018-4613-3.pdf">https://link.springer.com/content/pdf/10.1007%2Fs00125-018-4613-3.pdf</a></td>
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<td>Oelgaard et al, Diabetologia</td>
<td>RCT</td>
<td>Steno-2 trial 21-year follow-up shows reduction in heart failure in patients with diabetes and microalbuminuria in the intensive treatment group. Hospitalisation due to heart failure was reduced by 70% in the intensively treated group. The composite endpoints, heart failure hospitalisation or cardiovascular death and heart failure or all-cause mortality, were significantly reduced by 62% and 49%, respectively. <a href="https://link.springer.com/article/10.1007/s00125-018-4661-8">https://link.springer.com/article/10.1007/s00125-018-4661-8</a></td>
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<tr>
<td>Jenkins et al, Diabetologia</td>
<td>Re-analysis of RCT</td>
<td>Replacing carbohydrates with nuts in people with diabetes improves health measures. Compared with a full-dose muffin diet, a full-dose nut group (75 g/daily) reduced HBA1c by 2.0 mmol/mol, cholesterol by 0.25 mmol/L, non-HDL cholesterol by 0.23 mmol/L, apolipoprotein B by 0.06 g/L and LDL cholesterol by 0.42 mmol/L. <a href="https://link.springer.com/article/10.1007/s00125-018-4628-9">https://link.springer.com/article/10.1007/s00125-018-4628-9</a></td>
</tr>
<tr>
<td>Ericsson et al, Diabetologia</td>
<td>RCT</td>
<td>Dapagliflozin and omega-3 carboxylic acid are helpful in patients with diabetes suffering from non-alcoholic fatty liver disease (NAFLD). Both treatments reduced liver fat content. Dapagliflozin monotherapy reduced all measured hepatocyte injury biomarkers such as ALT and plasma fibroblast growth factor 21, suggesting a disease-modifying effect in NAFLD. <a href="https://link.springer.com/article/10.1007/s00125-018-4675-2">https://link.springer.com/article/10.1007/s00125-018-4675-2</a></td>
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Main results

**Obesity is associated with an increased risk of latent autoimmune diabetes of adults**

In this study obesity was associated with a higher incidence of LADA (OR 2.93, 95% CI 2.17 to 3.97) and type 2 diabetes (OR 18.88, 95% CI 14.29 to 24.94). The association was higher with LADA with low GAD antibody but was also present in LADA with high GAD antibody.

https://link.springer.com/article/10.1007/s00125-018-4596-0

**Modified diet can improve pregnancy outcomes in patients with gestational diabetes**

The analysis showed that modified dietary interventions reduced fasting and postprandial glucose and lowered the need for medication treatment compared with a control group. The modified diet was also associated with lower infant birth weight and less macrosomia.

http://care.diabetesjournals.org/content/early/2018/06/12/dc18-0787

**Sotagliflozin added to insulin reduces HbA1c and hypoglycaemia in people with type 1 diabetes**

At 24 weeks, HbA1c reduced by 0.37% and 0.35% with sotagliflozin 200 mg and 400 mg dose, respectively, and the reduction was maintained at 52 weeks. A greater number of patients treated with sotagliflozin attained composite end points. Weight, fasting glucose and insulin dose was reduced with sotagliflozin 400 mg dose. The period spent in the target range of 3.9–10.0 mmol/L was three times higher in the sotagliflozin group. Hypoglycaemia was reduced in the sotagliflozin group. DKA occurred in none of the placebo patients but in 6 of 261 (2.3%) patients on sotagliflozin 200 mg and 9 of 263 (3.4%) patients on sotagliflozin 400 mg.

http://care.diabetesjournals.org/content/early/2018/06/21/dc18-0342

**Emagliflozin is not associated with increased risk of fracture**

Compared with glimepiride over 4 years of treatment emagliflozin was not associated with any excess fracture risk.

http://care.diabetesjournals.org/content/early/2018/06/04/dc17-1525

**Severe hypoglycaemia is associated with adverse cardiovascular outcomes**

In this post hoc analysis severe hypoglycaemia in the combined group (li raglutide and placebo) was associated with higher MACE, CV death and all-cause mortality.

http://care.diabetesjournals.org/content/early/2018/06/12/dc17-2677

**Liraglutide and neoplasms**

10.1% of patients taking liraglutide developed neoplasm versus 9.0% with placebo (HR 1.06 for malignant neoplasms and 1.16 for benign neoplasms). Further long-term studies are needed.

http://care.diabetesjournals.org/content/early/2018/06/04/dc17-1825

**Evening preference and late breakfast is associated with higher BMI**

In this study higher BMI was associated with greater evening preference (assessed by a composite questionnaire scale) and non-significantly associated with late breakfast time. Late breakfast time was also associated with evening preference. Morning preference was associated with earlier breakfast time and lower BMI.

Supporting Trainees, Promoting Research and Enhancing Education: A YDEF Summer Update

The Young Diabetologists and Endocrinologists Forum is the trainee and young consultant wing of Diabetes UK, with over 20 years of experience supporting Diabetes & Endocrinology (D&E) SpRs. It will probably be well known to many readers, some of whom would have attended our events. Despite a long track record, we are continually looking to innovate in order to meet our mission of ‘enabling high quality care for people with diabetes and endocrine conditions by delivering excellence in specialist education and providing an effective voice for our members’.

Over recent months we have been joined by four new committee members to create a diverse committee of 10 people that we hope reflects the trainees we represent. Our new committee members are:

- Dr Giulia Argentesi, an NIHR Academic Clinical Fellow in her ST4 year at University College London.
- Dr Najaf Haider, an ST5 Trainee in Wessex with significant international healthcare experience across multiple countries.
- Dr Swarupini Ponnapalam, an ST5 trainee with experience of Malaysian healthcare currently in training at the Whittington Hospital in London.
- Dr Tim Robbins, a PhD candidate and ST4 trainee working at University Hospitals Coventry and Warwickshire NHS Trust

We are particularly keen to look at recruiting more committee members from the North of England, so if you are an interested trainee or know any keen motivated trainees, please do get in touch and make sure you apply during the next round of committee applications prior to Diabetes UK 2019.

We have recently launched an exciting new website, available at www.youngdiabetologists.org.uk/. We hope that this will provide a valuable resource both for current trainees and those considering a career in D&E. Please do take a look and feel free to start a thread on our new online forum.

High quality training events are at the heart of YDEF’s activities. We ran a successful ABC of D&E for new registrars in Birmingham. Our ambition was to provide a theoretical foundation to life as a D&E SpR. The feedback received was exceptionally strong, and this will now be a regular fixture on the YDEF calendar.

Eight trainees were selected by YDEF to attend the North European Young Diabetologist Conference in Egmond aan Zee in Holland. They presented their research alongside participants from Holland, Denmark and Belgium. Particular congratulations to Ioannis Spiliotis who won the overall conference presentation prize with his research examining low-dose sulfonlureas in patients with type 2 diabetes. We are also particularly grateful to Dr Hermione Price from Southern Health NHS Foundation Trust, the UK’s senior member who represented the UK in the senior debate ‘Is it justified that metformin is first line drug in type 2 diabetes?’ YDEF has been pleased to further support research through the provision of European Association for the Study of Diabetes Conference bursaries, which were hotly competed this year, and we hope those who were successful have an enjoyable and educational time in Berlin.

Under the stewardship of our current Chair, Myuri Moorthy, we have many more exciting events planned soon including a Taster Day in London for those considering a career in D&E and a retinopathy course in the West Midlands for those already committed to this exciting and dynamic specialty.

Recruitment and retention remains a challenge across many medical specialties, and it will be important to monitor and assess the impact of the new 3-year Internal Medicine curriculum being introduced by the Royal College of Physicians. YDEF, however, hopes that it will be able to continue to provide inspiring events, valuable resources and a voice to D&E trainees for many more years to come. We would like to thank all those consultants, sponsors, supporters and Diabetes UK staff who make that possible.

YDEF is dedicated to all diabetes and endocrine trainees and is open for new members to register on our website. Take advantage of our regular newsletters and up-to-date advertising of a wide variety of courses and meetings to complement your training.

As always, we are continuously looking to develop and propagate our specialty so do not hesitate to contact us if you have any suggestions or questions!

www.youngdiabetologists.org.uk  @youngdiab on twitter

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