Diabetes Association of Sri Lanka:
Greetings from Sri Lanka!

My name is Chamari Warnapura - I am the Deputy Medical Director of the Diabetes Association of Sri Lanka which is a part of the NCD Alliance Lanka. I have looked after my father who had Diabetes and Heart disease and this lived experience was the driver for me to enter this field.

I will focus on why countries should commit to implementing best buys on diabetes by 2020. In doing so, we need to consider focusing on Primary Prevention as it is the most effective way to reduce the disease burden of diabetes globally. Prevalence of T2DM is rising at an alarming rate - from 108 million in 1980 to 422 million in 2014. It has risen faster in low and middle income countries such as Sri Lanka. Also, the age of onset is decreasing rapidly.

To prevent, we need to know the aetiology of Diabetes. Sri Lanka spearheaded the Consensus on Aetiology of T2DM and development of a primary prevention strategy in 2002 which was accepted and published by International Diabetes Federation in Colombo. The factors that were accepted were Genetics, foetal origins, lifestyles and stress while the strategy for Primary Prevention was through education and awareness.

In addition, Sri Lanka was the co sponsor of the IDF UN resolution 61/225 in December 2006. What followed in 2008 was the IDF UNR implementation strategy that is the “Life Circle” approach for prevention and control of diabetes namely the Kathmandu Declaration. This incorporates interventions to reduce unhealthy diets to overcome
obesity at all ages especially in childhood, increase physical activity due to the current sedentary lifestyles, reduction of stress and harmful use of tobacco and alcohol which are the main risk factors of diabetes and other NCDs. It is early in life, that long term programming and regulation of energy balance is set where eating and physical activity habits are formed. It is a critical period to preset intervention to mitigate the risk of obesity and diabetes in later life. The importance of the “Girl child” in this life circle approach cannot be overstated.

The focus of Secondary Prevention should be considered through a multifactorial and multi-disciplinary strategies for early detection, good glycaemic control to prevent complications and management of psychosocial stress. Accessibility, affordability and availability to essential medicine and quality care should be based on best practices formulated on evidence based research.

Sri Lanka is classified as a “fast track” country and has received “One WHO” status due to its progressive approach by Government in their policies to Prevent and Control NCDs.

We have achieved more than 70% of Universal Health Coverage which started way back in 1931. Last year, drastic cost reduction of essential medicines in private sector by more than 50%, improved affordability. Last week, the Ministry of Education unveiled an insurance policy for all school children which will escalate the ascent to reach our targets by 2030.
Are there any gaps and recommendations where NCD’s are concerned in the final draft for UN HLM? Yes.

- Should the age range of premature death be kept at 30-69? Or should we consider lowering it to account for the decrease in age of onset of diabetes and other NCDs?
- Stress is a vital risk factor in the development of diabetes and other NCDs. It is an integral component of mental health and wellbeing.
- Absence of Tax on sugar is a major drawback. Deaths due to diabetes equal that of tobacco as indicated in the DASL awareness campaign #1every6seconds which was the basis of the IDF sugar frame work in May 2016. SSB tax is recommended by WHO and it is implemented in Sri Lanka.
- Air pollution has been linked to 3.2 million new diabetes cases in one year globally according to a new publication in the Lancet. Smart fiscal policy for healthy food, clean water and safe air should be highlighted more to ensure that prevention is a cornerstone of NCD response.
- Should we campaign for a ban on sale of duty free alcohol and cigarettes?

For 2018 UN HLM, a political commitment should be made to ensure the meaningful involvement of people living with NCD’s in the NCD response. To develop principles for meaningful involvement so that we can ensure that people living with NCD’s across the world have the opportunity to speak up. Our Views and voices cannot be ignored or drowned any more -
We have had ENOUGH: We want change NOW - Good HEALTH is OUR RIGHT and we want it RIGHT NOW!

Thank you