Diabetes - a global epidemic and its implications for South Sudan

On April 7 2016, World Health Day, the World Health Organization (WHO) released a report highlighting the increasingly serious epidemic of diabetes - 422 million, or 1 in 11, adults are living with diabetes, the great majority being type 2 diabetes [1]. There has been a four-fold increase over the past 35 years [2], the increase being most rapid in low- and middle-income countries – so diabetes is now most common in poorer countries, like South Sudan, where there is limited access to treatment and lack of awareness of its complications.

Diabetes is a chronic non-communicable disease (NCD) characterized by high levels of blood glucose. It occurs when the pancreas does not produce enough insulin (type 1 diabetes), or when the body cannot effectively use the insulin it produces (type 2 diabetes). Its complications can lead to heart attack, stroke, blindness, kidney failure, lower limb amputation, and premature death [1].

South Sudan is one of many countries where the management of diabetes is poor and resources are lacking, so prevention is of utmost importance. The WHO report recommends promoting healthy eating, weight control, and physical activity from an early age onwards. This implies the need for education of the general public, including schoolage children, as well as the availability of low-cost healthy foods.

Diabetes can be delayed or prevented in people who are overweight and have impaired glucose tolerance. Diet and physical activity interventions and counselling are more effective than medication. For patients with diagnosed type 2 diabetes well-trained staff are essential to provide supportive counselling on practical food choices and weight control, and monitoring for complications. At present these staff are sadly lacking in South Sudan.

On April 1st the United Nations General Assembly proclaimed a Decade of Action on Nutrition [3] and this journal hopes that well before 10 years have passed the nutritional status of the South Sudanese people will be greatly improved. South Sudan has high rates of undernutrition, especially among young children, and especially in areas of conflict and food insecurity – and the Government and many local and international NGOs are involved in its management. Now perhaps is the time for the healthcare community to also collect data on obesity, diabetes and other NCDs with the aim to improving services for these life-threatening conditions [4].

References
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