Nam Han Cho – President, International Diabetes Federation, South Korea



I quickly observed that simply conducting research is insufficient to create an influential message in this area, so I began my involvement in the IDF, an umbrella organization for domestic diabetes associations of more than 160 countries

01.02.2019

Tags: Korea, Diabetes, IDF, Association

Dr Nam Han Cho, president of the International Diabetes Federation (IDF) and professor of Preventive Medicine at the Ajou University School of Medicine in South Korea is taking stock of his activities and achievements after passing the halfway mark of his two-year mandate at the helm of the organization. He also explains why collaboration with Big Pharma is needed and how AI is changing the fight against diabetes.

Dr Cho, could you please introduce yourself to our international readers and explain why you have chosen a career in the diabetes field?

I have been working in the diabetes field for more than 33 years, including as a professor in Endocrinology, Metabolism and Nutrition during my time at Northwestern Medical School in Chicago. Upon completing my medical training, I realized that diabetes interacts with all kinds of diseases, even infectious diseases. Therefore, my motivation was to work in this field, as it overlaps with other fields of medicine. I quickly observed that simply conducting research is insufficient to create an influential message in this area, so I began my involvement in the IDF, an umbrella organization for domestic diabetes associations of more than 160 countries.

I initially started volunteering in the Western Pacific region of the organization, serving for ten years as a regional executive consul and also as the regional chair. In this capacity, I focused on

developing disaster plans and humanitarian issues. In 2017, I was elected as the president of the federation, serving the global membership of one of the largest medical NGOs in the world. In my opinion, the IDF is the best instrument to create a positive impact on a global scale for sufferers of diabetes.

You have passed the halfway mark of your 2-year mandate leading the IDF. What are the main priorities of your presidency and what progress has been made in achieving them?

My focus is on education around non-communicable diseases. To increase education, we have created a web school for professionals and patients. The system has been set up in the seven different regions of the IDF, combining the web school and a school of excellence. Consequently, there are various levels of how we are educating and informing citizens on diabetes. Similar to my role as a regional chair, my presidency has a large emphasis on humanitarian service. Poverty in medicine is a global issue: there are people who either lack or have limited access to medicine for economic reasons, both in low and high-income countries. Our role is to publicize this message and raise awareness around this issue.

The IDF has also assumed a key role in providing medicine to low-income countries. Our program “Live for Child” provides insulin to low-income countries, such as Palestine, which would otherwise have no access to this drug. We are also planning to provide medicine to North Korea in the near future. We have received drugs from many multinational pharma companies, which truly want to assist and are not just driven by profit. The challenge for the IDF and for myself is how to orchestrate the distribution to the countries in need.

The IDF is collaborating with many big pharma companies, such as Astra Zeneca, Novo Nordisk and Sanofi Diabetes. What do these partnerships look like?

There is a misunderstanding that pharma companies are establishing relationships with NGOs selfishly in order to promote their product. At the IDF, we build long-lasting relationships with both MNCs and domestic companies that are willing to help people. The usual process is that these actors disseminate their product without promoting the company. They become members of the IDF, but as they are profit-driven they do not possess the right to vote. Every year we invite our partners to a conference where we discuss the best way to help people in need through products

and projects. Sponsorships and scholarships provided by big pharma companies are also elements of this collaboration, as they are funded by big pharma companies. While the industry traditionally has been focusing more on physicians, we see a trend towards patient centricity. It is a lengthy process involving the changing of mindsets – never a straightforward task. In today's environment, international pharma companies that are not focused on patients will face bankruptcy in the future. The internet and social media are empowering the patient even more today, as their perceptions and knowledge of diseases and drugs are changing.

> There is a misunderstanding that pharma companies are establishing relationships with NGOs selfishly in order to promote their product. At the IDF, we build long-lasting relationships with both MNCs and domestic companies that are willing to help people.

How are other disruptive trends, like AI, changing the fight against diabetes?

Diabetes is a treatment area which in general has been profiting in many ways from AI. Glucose checking devices have been bringing many benefits. For example, fingerpicks have been rendered obsolete and doctors can now automatically receive information through data transfer. New technology allows us to tackle even more complicated issues today, such as nephropathy – a life-threatening disease.

Thanks to AI, today we are able to detect diabetes earlier and more accurately than ever before. Prevention and early detection are crucial: once a patient has diabetes, it can lead to blindness in 27% of the cases within ten years. We have recently purchased 100 mobile fundoscopic devices, driven by AI, and sent them to low-income countries to facilitate early detection. The IDF has been collaborating with different companies from the healthcare industry, which agreed to provide their products at a very low price. The advantage of the device is that no ophthalmologist is needed to detect the disease at the earlier stage, which is a huge step. In China, for example, there is one ophthalmologist for 40,000 people with diabetes; it is almost impossible to get an appointment.

The internet and digital devices also help to raise awareness for diabetes and its implications around the world. Therefore, in 2016, the IDF established a program called Blue Circle Voice, which aims to represent the interests of people living with or affected by diabetes through a worldwide network of members and other stakeholders. The IDF is more than a patient organization – we work with practitioners, governments and the industry.

Type 2 diabetes mellitus (T2DM) has experienced an explosive increase in prevalence during the last three decades in the Asian population, even rising up to 12% in Korea. How does this compare to other countries?

The increase in the prevalence of Diabetes Type 2 is global. However, Korea has a relatively high percentage with approximately five million Koreans affected. Considering the people in the pre-stage of diabetes, more than ten million are affected. In global terms, 425 million people have been diagnosed with diabetes and 352 million are in the early stage, which summarizes to 777 million people suffering from the disease, costing health systems more than USD 1.3 trillion.

> Collaboration between all stakeholders is imperative. This includes governments, health professionals, civil society, and pharma companies

While diabetes is a global problem, Asians are predominantly affected: genetically they have a low insulin secretion capacity, meaning that more than 60% of diabetes patients are from Asia. Lack of exercise, changing city environments and unhealthy diets are the main risk factors for diabetes. The Korean diet is nowadays a risk factor in particular as it includes high levels of fat and protein, thus requiring a lot of insulin. Diabetes is sometimes called World War III, as it kills more than five million people annually. We are fighting a war not against another country, but against the disease.

What steps need to be taken next?

Collaboration between all stakeholders is imperative. This includes governments, health professionals, civil society, and pharma companies. Recently, there has been a publication saying that there is a shortage of Insulin. This is incorrect. More than anything else it is access to insulin that it the main issue because low-income countries are unable to afford high-priced drugs. Controlling the price of medicine through collaboration is essential, while also promoting the access to the medicine. Changing lifestyles and diets is a major point in preventing diabetes. Nonetheless, collaboration is needed again to effectively achieve this target.

What is your goal after stepping down as the president of the IDF in December 2019?

Similar to the priorities of my presidency, I will continue to focus on problems in low-income companies. I am already in the process of establishing a charity foundation, whose target is widening access to medicine, especially for non-communicable diseases like diabetes. The

emphasis will be on children and older people, as diabetes is very dominant amongst these age groups.

See more interviews