



# Detect Early, Act Early: Improving Diagnosis of Type 1 Diabetes

## Online event

6 February 2026  
14:00-15:30 CET





# DETECT EARLY, ACT EARLY: IMPROVING DIAGNOSIS OF TYPE 1 DIABETES

## WELCOME FROM THE MODERATOR



### **MS ANA ÁLVAREZ PAGOLA**

IDF Blue Circle Voice, INPACT Coordinator at INNODIA and Head of Scientific Relations at #dedoc°

*Argentina/Spain*

## HOUSEKEEPING RULES

- This webinar will be recorded.
- You can activate Zoom-generated subtitles for this webinar by clicking on the closed caption (cc) button at the bottom of your Zoom window. Please note these subtitles are not 100% accurate.
- The recording, slides and feedback questionnaire will be sent to all registrants in a few days.
- Participants who attend at least 80% of this event live will receive an attendance certificate only if they complete a feedback questionnaire. Please check your spam folders if you have not received them by 6 March.
- **Please use the Q&A function to post your questions to speakers and panellists.**



# DETECT EARLY, ACT EARLY: IMPROVING DIAGNOSIS OF TYPE 1 DIABETES

## WELCOME FROM THE IDF PRESIDENT



**PROF PETER SCHWARZ**

President, International Diabetes Federation

*Germany*



# DETECT EARLY, ACT EARLY: IMPROVING DIAGNOSIS OF TYPE 1 DIABETES

## WELCOME FROM THE ISPAD PRESIDENT



**PROF FERGUS CAMERON**

President, International Society of Pediatric and Adolescent Diabetes

*Australia*

# Setting the scene





# DETECT EARLY, ACT EARLY: IMPROVING DIAGNOSIS OF TYPE 1 DIABETES

## KEY TAKEAWAYS FROM THE IDF-ISPAD POLICY BRIEF

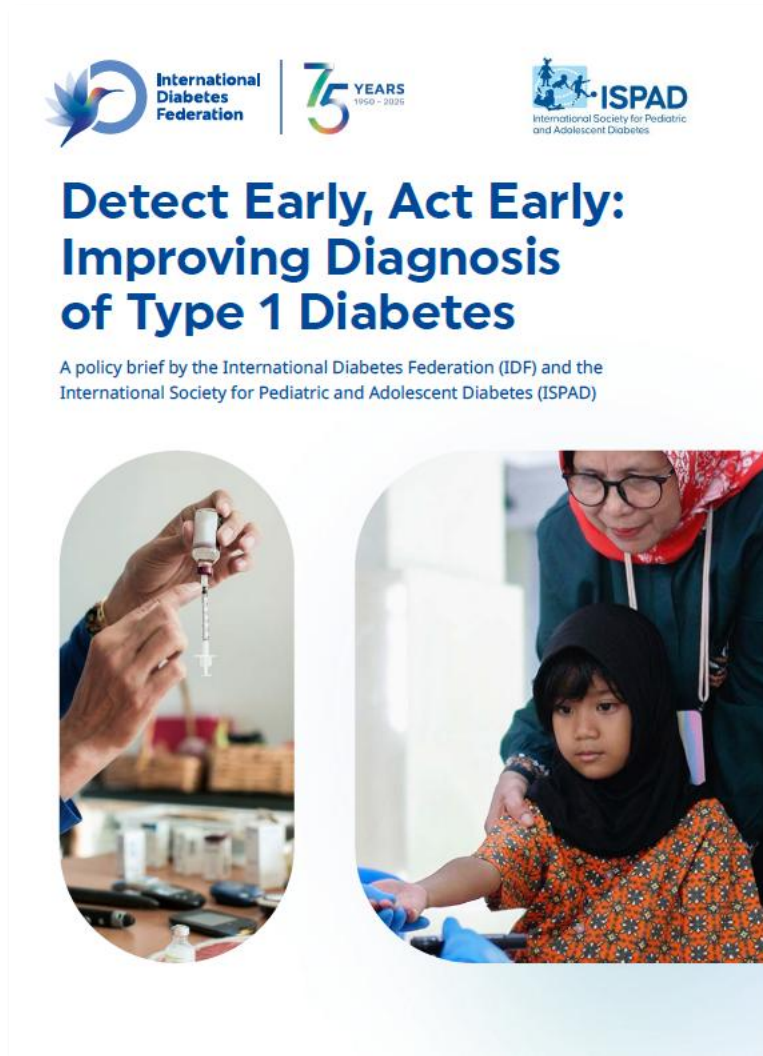


### **PROF JENNIFER COUPER**

Member of the ISPAD early-stage type 1 diabetes working group

*Australia*

# The IDF-ISPAD policy brief



- Highlights the worldwide impact of T1D.
- Underscores the severity of a late T1D diagnosis.
- Showcases the latest techniques to screen and potentially delay T1D progression.
- Provides policy recommendations.
- Shares T1D lived experiences from different regions.



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# Key takeaways from the report

**1.** T1D is a condition caused by an autoimmune response against the insulin-producing cells in the pancreas, which requires lifelong insulin therapy and poses significant health risks if undiagnosed or untreated.



## Key takeaways from the report

**2.** Early symptoms of T1D can resemble those of common illnesses, contributing to misdiagnosis and delayed access to appropriate treatment.



# Key takeaways from the report

**3.** An important percentage of adult-onset T1D is initially misdiagnosed as T2D, which delays the start of insulin therapy and increases the risk of complications.



# Key takeaways from the report

**4.** T1D risk factors include genetic predisposition, and there are associations with environmental exposures (viral infections, early-life nutrition, gut health, psychological stress, etc). There are no actionable approaches to these exposures yet.



# Key takeaways from the report

**5.** Screening for islet autoantibodies enables the early identification of T1D years before symptoms appear, allowing for close monitoring and timely intervention to prevent severe complications at onset.



## Key takeaways from the report

**6.** The global impact of T1D is increasing, with more than 9 million people living with the condition in 2024. Over half of new diagnoses occur in adults aged 20 years or older.



# Key takeaways from the report

**7.** Community-based screening and awareness programmes can support early detection of T1D. However, large-scale universal screening remains costly and unfeasible to implement in low- and middle-income countries.



## Key takeaways from the report

**8.** Recent advances, such as teplizumab (recently approved by the European Commission for stage 2 T1D), have demonstrated the potential to delay the onset of T1D by around two years in the early stage of the condition, representing a major step forward in prevention research.



## Key takeaways from the report

**9.** Improving access to insulin, glucose monitoring technologies and mental health support remains a global priority, particularly in regions where essential medicines and technologies are unaffordable or unavailable.

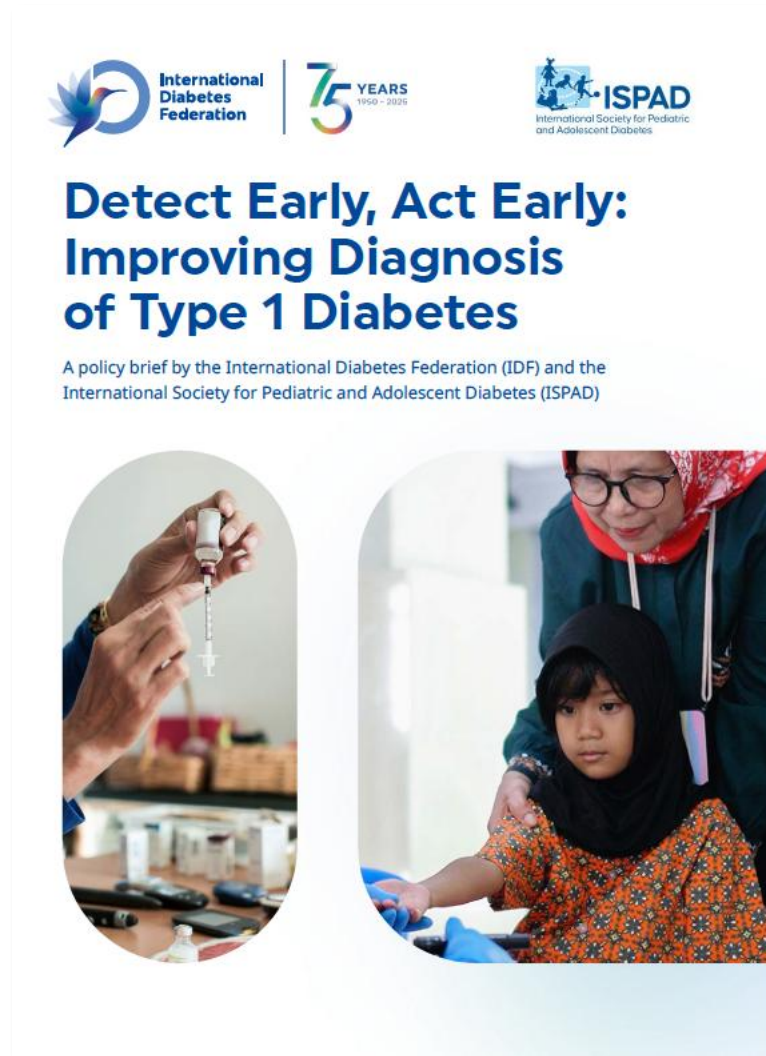


# Key takeaways from the report

**10.** Stronger health policies and partnerships are essential. Governments must integrate T1D diagnosis and care into universal health coverage frameworks, expand public awareness initiatives, and invest in research and innovation.



# Download the policy brief!



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## POLICY RECOMMENDATIONS FROM THE IDF-ISPAD POLICY BRIEF



**MS LUCÍA FEITO ALLONCA**

IDF Blue Circle Voice, Global Health Advocate and Lawyer

*Spain*



**MS NKIRUKA OKORO**

IDF Blue Circle Voice, Biomedical Clinical Research Scientist

*UK*

# Improve access to care, treatment and technologies

- Ensure affordable access to essential diabetes medicines and devices (insulin, glucometers, strips, etc).
- Provide stress management and mental health support for individuals and families.
- Add teplizumab in national essential medicines list of countries with UHC and subsidise CGM for T1D.
- Expand insurance or subsidies to reduce out-of-pocket cost.
- Establish regional centres of excellence for specialised care and healthcare professionals training.



# Strengthen public and professional awareness

- Launch mass media campaigns to raise awareness of T1D symptoms.
- Partner with schools, workplaces and communities to improve T1D awareness and reduce stigma.
- Offer continuous professional training for healthcare workers on T1D and new therapies.



# Reinforce global collaboration and policy integration

- Integrate T1D care into UHC schemes and primary care policies.
- Strengthen global partnerships (e.g., IDF, ISPAD, WHO, UNICEF, etc.) to share knowledge, resources and best practices.
- Enact policies to guarantee access to essential T1D diagnostics, medicines and technologies.



# Invest in research and innovation

- Fund long-term studies on autoimmunity, risk prediction and links between autoimmune conditions.
- Support clinical trials on immune therapies, stem cell-based approaches, and beta-cell preservation.



## Expand early detection and screening

- Establish national and regional early T1D screening programmes for high-risk groups.
- Strengthen digital health systems to track and follow early-stage T1D.
- Expand community-based screening to reach urban and rural populations.





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## LYLA'S LAW CAMPAIGN



**MR JOHN STORY**

Founder and Campaign Lead, Lyla's Law Campaign

*UK*

# Discussion panel and Q&A





# DETECT EARLY, ACT EARLY: IMPROVING DIAGNOSIS OF TYPE 1 DIABETES

## DISCUSSION PANEL AND Q&A



**MS ANITA SABIDI**

IDF Blue Circle Voice

*Indonesia*



**PROF JENNIFER COUPER**

Member of the ISPAD early-stage type 1 diabetes working group

*Australia*



**MS LUCÍA FEITO ALLONCA**

IDF Blue Circle Voice, Global Health Advocate and Lawyer

*Spain*



**MS NKIRUKA OKORO**

IDF Blue Circle Voice, Biomedical Clinical Research Scientist

*UK*



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## CLOSING REMARKS AND THANKS



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IDF Blue Circle Voice, INPACT Coordinator at INNODIA and Head of Scientific Relations at #dedoc°

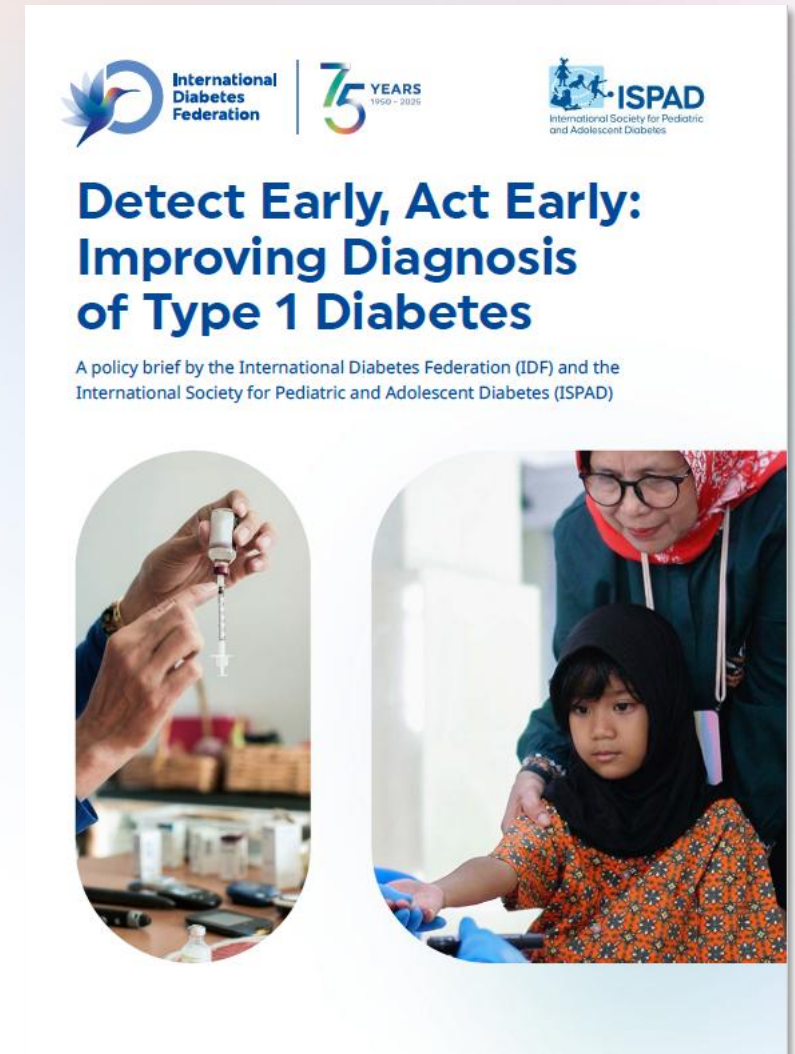
*Argentina/Spain*

## CLOSING REMARKS AND THANKS

- The recording, slides and feedback questionnaire will be sent to all registrants in a few days.
- Please respond to the feedback questionnaire to help us improve future IDF online events.
- Send any questions you may have to [advocacy@idf.org](mailto:advocacy@idf.org).



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the document!***



**Thank you!**

