

WORLD DIABETES DAY 2025

'Towards a Sex- and Gender-Sensitive Strategy in Diabetes: understanding Women's Health across the Life Course'



EUROPEAN PARLIAMENT, BRUSSELS

NOVEMBER 13, 2025



PROGRAMME

On the occasion of World Diabetes Day 2025, IDF Europe organised an event at the European Parliament (EP), co-hosted by **MEP Paulo do Nascimento Cabral (EPP, Portugal)** and **MEP Sirpa Pietikäinen (EPP, Finland)**.

The "Towards a Sex- and Gender-Sensitive Strategy in Diabetes: Understanding Women's Health Across the Life Course" event also featured contributions from **MEP Billy Kelleher (Renew, Ireland)** as a speaker, and included a special video address from **President Roberta Metsola (EPP, Malta)**. Additional European Parliament representation included **MEP Romana Jerković (S&D, Croatia)**, who showed her support by joining the event and congratulating the Diabetes Advocate Award winner.

The event aimed to put women's health at the forefront of the political agenda by using diabetes as a case study to highlight the challenges women face and the persistent gaps in research and access to sex- and gender-sensitive care. By bringing together policymakers and diabetes stakeholders, it provided a platform to advance a shared understanding of these gaps and to outline the steps needed to embed sex- and gender-sensitive approaches in diabetes care, research and policy.



SPEAKERS



Sabine Dupont
IDF Europe Director
Moderator

Introduction



Adrianna Maciejczyk
Diabetes Advocate



MEP Roberta Metsola
European Parliament President
(EPP, Malta)



MEP Paulo Do
Nascimento Cabral
(EPP, Portugal)

Keynotes



Dawn Adams
Diabetes Advocate
and Midwife



Dr Martina Rothenbühler
Scientific Program Manager
Diabetes Center Berne

Panel



Adrianna Maciejczyk
Diabetes Advocate



MEP Billy Kelleher
(Renew, Ireland)



MEP Sirpa
Pietikäinen
(EPP, Finland)



Milka Sokolović
EPHA Director-
General

Advocate Award



Davor Skeledžija
Diabetes Advocate



Marcello Grusso
President, Italian National
Association of Athletes with
Diabetes



MEP Romana
Jerković
(S&D, Croatia)

Closing Remarks



MEP Sirpa
Pietikäinen
(EPP, Finland)



WELCOME AND LIVING WITH T1D AS A WOMAN

Type 1 diabetes (T1D) advocate, Adrianna Maciejczyk, welcomed speakers and participants to IDF Europe's World Diabetes Event. She also introduced a **special video message from EP President, Roberta Metsola (EPP, Malta)**, in which President Metsola underscored the importance of integrating more female perspectives into discussions on diabetes. **She highlighted the need for stronger prevention, greater innovation and a more sex- and gender-sensitive approach**, noting the European Parliament's ongoing work to improve diabetes prevention, management, and research in Europe. She concluded with a powerful call to action:



“**Together, we can make diabetes a disease of the past, so let's get to work.**”

Adrianna Maciejczyk introduced herself as a women's health advocate and founder of Diabetes for Girls, and reflected on her personal journey with T1D, with which she was diagnosed at age 17. She explained that **the lack of gender-sensitive information she received throughout her care was a key motivator for her to create Diabetes for Girls, a safe online space for women to discuss menstruation, pregnancy, sexual health, menopause and emotional well-being.**

She reminded the audience that **women with diabetes face distinct and often overlooked challenges, including higher cardiovascular risk, earlier menopause, increased prevalence of eating disorders and depression and inadequate guidance during pregnancy.** These systemic shortcomings rooted in women's underrepresentation in research and clinical trials are a key factor behind her calling for gender-sensitive diabetes care to become standard practice.



Gender disparities in diabetes outcomes were a key focus of MEP Paulo do Nascimento Cabral's welcoming address. He drew attention to the fact that **women often seek medical help later than men and face a 30% higher risk of cardiovascular mortality.** He further stressed the need for collective responsibility and action to reduce these unacceptable inequalities by addressing the impact of diabetes on women during key life stages such as puberty, pregnancy and menopause.

He affirmed that the EP had both the mandate and responsibility to close gender-related health gaps through evidence-based, gender-sensitive policy. Ending his speech, he expressed his support for continuing the dialogue on how best to advance equitable diabetes care.



UNDERSTANDING HORMONES – WOMEN’S HEALTH AND DIABETES ACROSS THE LIFE COURSE



Dawn Adams
Diabetes Advocate
and Midwife



Dawn Adams, a midwife and T1D advocate, **outlined how hormonal changes across women’s life stages have a strong impact on diabetes management and outcomes.** She explained how **fluctuating levels of oestrogen and progesterone affect insulin sensitivity** from puberty onwards, contributing to glucose variability, delayed puberty, irregular menstrual cycles and higher rates of conditions such as polycystic ovary syndrome (PCOS) and endometriosis. She highlighted the persistent gaps in research on these interactions, noting that **women using the same diabetes technologies as men still experience worse glycaemic outcomes due solely to hormonal differences.** Adams described the complexity of pregnancy while living with diabetes. This includes for example increased risks of congenital anomalies, pregnancy loss, pre-term birth and pre-eclampsia. **She called on healthcare professionals (HCPs) and healthcare systems to provide tailored care and clinical attention during pregnancy as well as to support women during the the postpartum period and early months.**

She went on to explore the impact of declining oestrogen levels from perimenopause onwards on women’s risks of cardiovascular disease (CVD), dementia, osteoporosis, fractures and hearing loss. These risks are markedly higher in women living with diabetes compared to those without diabetes. She also underscored **the lack of recognition and adequate care for menopausal women with diabetes and highlighted the urgent need for better education on hormone health.**

Adams **called on EU policymakers to prioritise funding into sex-specific diabetes research, earlier identification of high-risk women and systematic follow-up** after conditions such as pre-eclampsia. She concluded by **urging policymakers to make greater investment in education and upskilling for HCPs and people living with diabetes (PwD),** arguing that addressing sex-specific needs would improve women’s health, strengthen the workforce and benefit society as a whole.

CLOSING THE GAP – TACKLING SEX AND GENDER BIAS IN DIABETES RESEARCH AND TECHNOLOGY



Dr Martina Rothenbühler
Scientific Program Manager
Diabetes Center Berne

Martina Rothenbühler focused on the persistent gender data gap in diabetes research and technology. She noted that **although half of all PwD are women, they remain significantly underrepresented in every stage of medical research,** from animal studies, where male mice dominated, to algorithm training, early-phase trials and pivotal clinical studies. She explained that **this male-centric approach stems from long-standing misconceptions that sex does not matter** or that including women, especially those who could become pregnant, is too complex or unethical.

Rothenbühler also explained that **failing to collect sex-specific data creates serious risks, as treatments often interact differently in male and female bodies;** identifying these differences requires adequate representation and proper subgroup analyses. Drawing on evidence from both research and real-world data, **she showed how women’s glycaemic patterns and insulin needs fluctuate across menstrual cycles. Despite this, current automated insulin delivery algorithms, trained mostly on male data, are unable to adapt to these hormonal shifts, forcing women to use manual workarounds.**

She also emphasised the **lack of binding EU guidelines requiring sex-specific analysis,** contrasting this with FDA requirements. Rothenbühler **concluded by calling for clinical studies and technologies that better reflect real-world populations,** women, gender-diverse people, older adults, younger people, and those with varying levels of health literacy. She also **urged policymakers and industry to collect sex-related data, assess treatment interactions, adapt eligibility criteria and systematically involve people with lived experience in research and development to ensure equitable and effective diabetes care.**





PANEL DISCUSSION



During the panel discussion, **Adrianna** stressed that **major knowledge gaps persist because HCPs lack sex-specific data and training**, while many women are never told that being female could affect their risks or glucose patterns. **She highlighted the value of community spaces where women can share experiences, gain information and feel empowered, noting that those with better knowledge manage their condition more effectively.** She added that siloed healthcare systems, where specialists do not communicate, remains a key barrier and called for better professional education and more integrated care.



MEP Pietikäinen, co-chair of MEPs for Women's Health interest group and SANT opinion shadow rapporteur on Gender Inequalities in Health INI Report, emphasised the fact that **diabetes clearly demonstrates why sex matters in health.** She explained the gaps by underlining the fact that "we do not know what we do not know." She explained that this was why the **FEMM Committee was preparing a report calling for a comprehensive Women's Health Strategy, supported by legislative changes, research requirements and stronger data collection.**

She **called for more inclusive stem-cell research and for clinical trials for both pharmaceutical products and medical devices** to be tested proportionally to the size of their target populations – for example, in older women, pregnant people and those affected by chronic diseases.

She further noted that **women's symptoms are frequently misdiagnosed as psychosomatic due to a lack of training, arguing that compulsory reforms in medical education are essential.** MEP Pietikäinen also **called for the set up of women's health centres and of an EU reference network to advance research, clinical practice and knowledge exchange, with diabetes, CVD and dementia as priority study areas for sex-specific insights.**



MEP Kelleher, the rapporteur for FEMM in the Gender inequalities in health, specifically as regards gender-specific conditions report, reflected on the barriers to accessing healthcare long faced by women and how socio-economic factors worsen these challenges. He **noted that clinical trials had historically been biased towards men, which weakened the evidence base for medicines used by the wider population.** He also underlined that underrepresentation extended beyond participants to the clinicians conducting trials, which limited advocacy and understanding. Drawing on examples such as the historic misdiagnosis of coronary disease in women, he argued that **ingrained assumptions continue to distort care and data collection.** He also stressed the **need to update the Clinical Trials Regulation to strengthen obligations for sex-balanced study populations** and highlighted ongoing work in the EP, including an upcoming discussion on chronic inequalities in women's health. His last point covered the need for improved clinician education and more inclusive research practices.



Milka Sokolović, the Director General for the European Public Health Alliance (EPHA), emphasised the fact that diabetes is not gender neutral and that **poorer outcomes for women stem not only from biology but also from bias, invisibility and systemic design flaws.** She noted that **hormonal transitions across women's lives significantly affect insulin sensitivity and treatment needs and yet that clinical guidelines, technologies and research protocols still fail to account for these realities,** echoing her own scientific experience where female animals were excluded from basic research for being "too complicated." She argued that **this pattern extended across all non-communicable diseases and called for a shift from gender-aware rhetoric to gender-intelligent systems that integrated both sex- and gender-based differences,** including social determinants such as care roles, poverty and access barriers.

She outlined EPHA's recent work, including support for the Women's Health Manifesto and **called for a dedicated EU Women's Health Strategy with funding, monitoring, sex- and gender-sensitive research requirements, improved medical education, stronger pharmacovigilance guidance and better inclusion of women in clinical trials and technology design.** She stressed that these were concrete, urgent measures, citing stark disparities in delayed diagnosis, cardiovascular mortality, and mental health outcomes for women living with diabetes. She concluded that **the EU had all the instruments needed, if it had the political courage to use them, and urged policymakers to ensure that every future health policy should be assessed for its impact on women, calling on men to actively share responsibility in driving change.**



IDF EUROPE DIABETES ADVOCATE AWARD

The event was also an opportunity for IDF Europe to celebrate the diabetes community through its **Diabetes Advocate Award**. Supported by **Eli Lilly**, the award **recognises individuals who drive change and contribute to improving the lives of PwD**. Ludovica Florenzano presented this year's co-winners, **Davor Skeledžija** and **Marcello Grussu**.

Marcello Grussu, in a video message, **stressed the importance of accessible care, reliable information, the protection of rights, and equal opportunities for PwD** while also highlighting the **valuable role of sport in improving health outcomes**.



Davor Skeledžija, meanwhile, **highlighted recent advocacy successes in Croatia. Newly diagnosed PwD now have immediate access to modern basal insulin, while children face no co-payment for insulin pumps, and all eligible PwD receive sensors free of charge.** These achievements reflect the power of advocacy to remove barriers, advance care and inspire broader change in diabetes management.

MEP Romana Jerković was invited to the floor to congratulate her fellow Croatian and Diabetes Advocate Award winner, Davor Skeledžija, expressing her pride in his achievements and noting that the recognition was well deserved. **She highlighted how Davor Skeledžija's work provides inspiration across Croatia and Europe, emphasising the vital role of patient advocates in driving improvements in diabetes care** and motivating continued progress.



CLOSING REMARKS

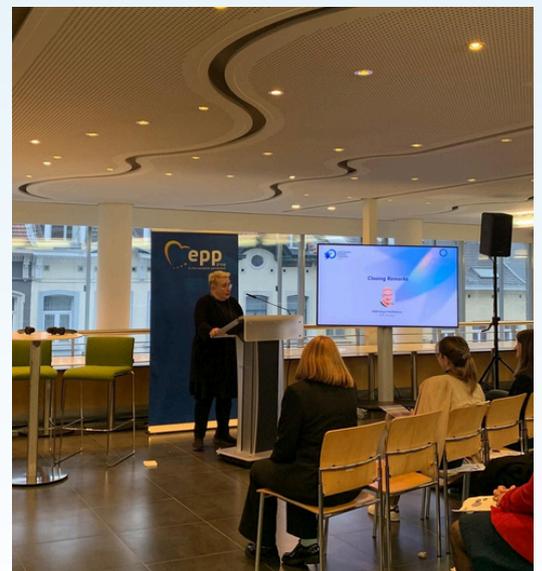
MEP Sirpa Pietikäinen concluded the event with an inspiring address, emphasising the power of collective action:



“We can change the world if we want. We just need to ask ourselves every day: If not me, who? If not now, when? If we work together, across borders and sectors, we can make the change. You and people like you inspire me every day.”



Her words serve as a reminder of the **importance of continued collaboration** between policymakers, HCPs, patient organisations and civil society **to advance diabetes care, promote gender-sensitive health policies, and ensure that no one is left behind.**





IDF Europe wishes to thank all the speakers and attendees who joined this event for World Diabetes Day 2025.

We would also like to thank our corporate partners and sponsors for their support in making this event a reality.

We look forward to continue collaborating with our community as we drive forward these essential conversations to improve the lives of women and all people living with diabetes across Europe.

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