



International
Federation on
Ageing

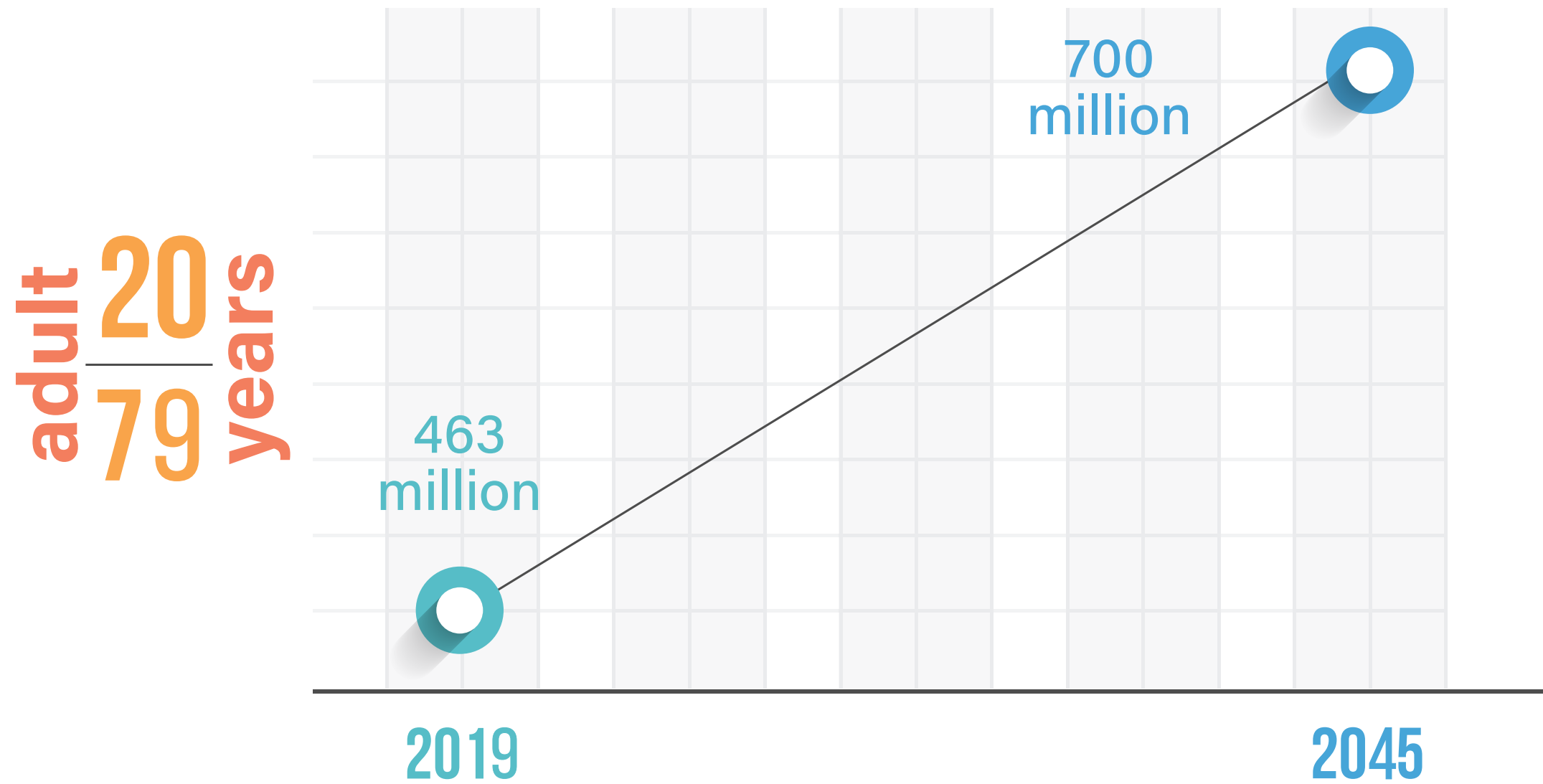
EVIDENCE TO ACTION

Findings from the “Leaving No Patient Behind” study

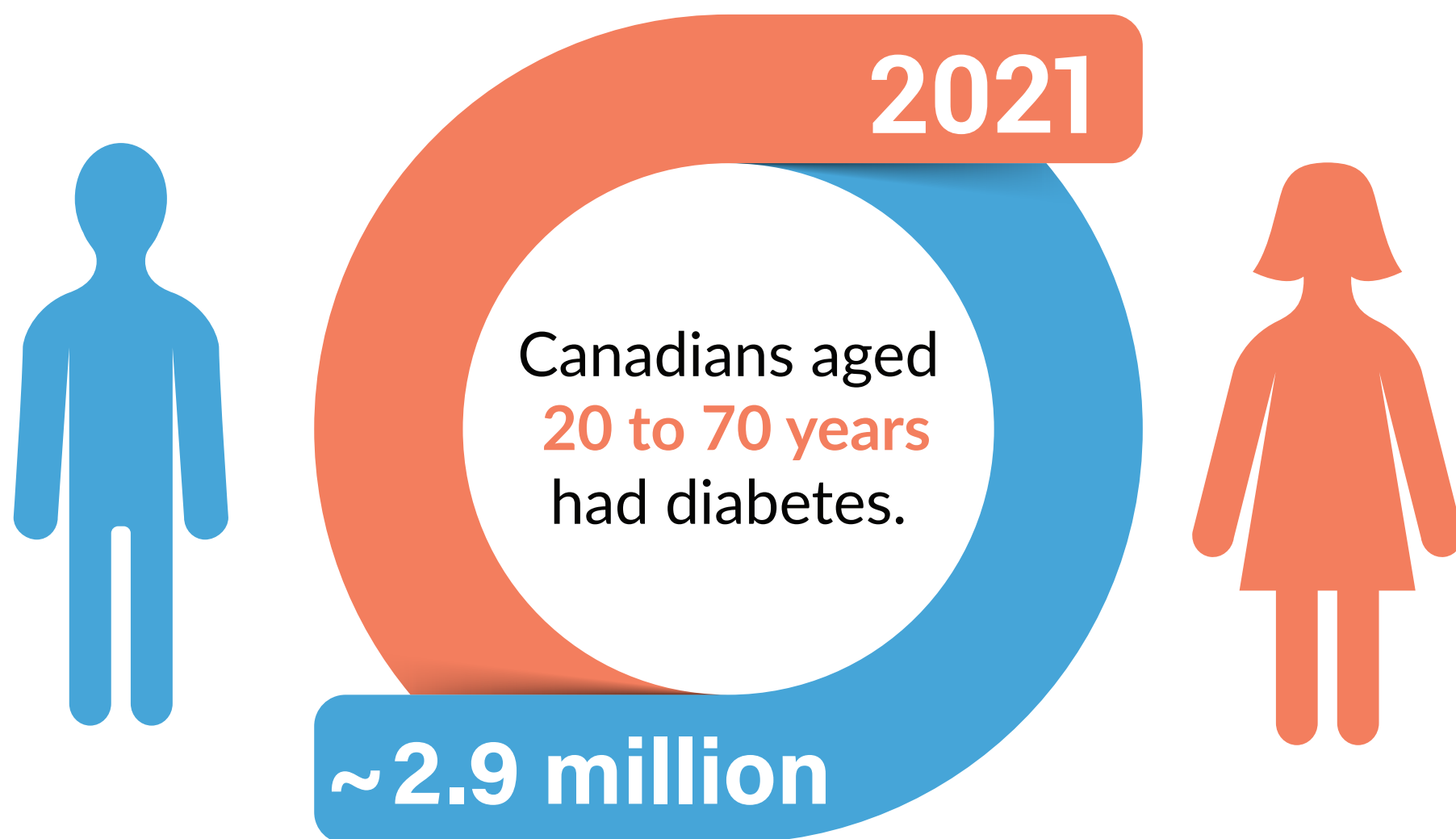
Presented by

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Problem Statement



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People with diabetes are **25 times** more likely to experience vision loss with an estimated **500,000 Canadians** already living with diabetes-related eye damage.

Overview of Project

AIM

To improve Canadian patient education and awareness of diabetic eye diseases so they can make informed decisions on treatments with their physician.

Objectives

To improve patient awareness and knowledge of the management and treatments for eye conditions associated with diabetes across six countries.

To identify elements of good practice around the development, dissemination, and uptake of patient educational materials for those living with diabetic eye diseases (DEDs).

Engage with vision-related patient organisations on advocacy efforts to influence policy.

Countries Included in Study

Australia
France
Germany
Italy
Spain
UK



Canadian Context

Why is it important to improve the knowledge and awareness of treatment options for DEDs in Canada?

Overview of Findings

- Adequacy/comprehensiveness of patient information
 - Are the various stages of DEDs covered?
 - Is it reflective of the available treatment options?
 - In what contexts are the different treatment methods employed?
- Multiple media and channels of dissemination
- Well-defined audience
- Sources of patient educational materials

Findings: 1. Comprehensiveness

Germany

- Patient education materials do not contain specific information on treatment options for DEDs.

France

- More information on DR than there is on DME.

UK

- PEMs are adequate and comprehensive.

Findings: 2. Channels of Dissemination

Australia

- PEMs are disseminated through multiple tools and channels
 - Free guides (emails)
 - Hard copy
 - Online fact sheets

Spain

- PEMS are distributed using
 - Infographics
 - Videos

Findings: 3. Audience

Australia, France, Germany, Italy, Spain, and UK

- Had PEMs targeted to the patients.

France and Spain

- Some materials are directed towards the public.

Findings: 4. Sources of Patient Educational Information

Australia and Germany:

- Patient advocacy organizations, professional bodies (medical and scientific societies).

France:

- Patient advocacy organizations, government, independent medical and scientific knowledge publishing company.

Italy:

- Medical society, government.

Spain:

- Non-profit, government, scientific organizations.

UK:

- Government, charity organizations.

Challenges and Gaps

- Incomprehensive educational materials
- Inadequate channels of dissemination.
- Lack of targeted materials for at-risk populations on DED.

Conclusion

- Diabetes and diabetic eye diseases contribute to severe socioeconomic burden on individuals, communities, and the nation's health system.
- To maintain vision and prevent progressive vision loss, it is therefore important to improve Canadian patient knowledge on effective treatment options for diabetes related vision complications.

The background features a series of concentric circles. The outermost ring is a solid green color. Inside it is a light gray ring. The next ring inward is a dark blue circle containing a repeating pattern of the letters 'Jif' and 'fNj' in a stylized, white, serif font. The 'Jif' letters are larger and more prominent, while the 'fNj' letters are smaller and interspersed between them. In the center of this dark blue circle is a large, solid white circle. The text 'Thank you!' is centered within this white circle.

Thank you!