

## **Information for Services Interested in Providing a Programme for Remission of type 2 diabetes**

Type 2 diabetes is a hateful disease, gradually, silently, damaging vital organs and bodily functions. It is especially serious and shortens life significantly in younger people (under age 70-75). It is almost always in people who are overweight.

We have shown, in research funded by Diabetes UK, that type 2 diabetes is not necessarily permanent [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)33102-1/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)33102-1/fulltext). It can often be reversed into remission (non-diabetic again, taking no anti-diabetes medications) by sustained substantial weight loss.

- With substantial weight loss (over 15 kg) almost 9 out of 10 can achieve a remission (no longer diabetic, non-diabetic HbA1c, taking no drugs for diabetes treatment).
- With weight loss 10-15 kg, still over half can achieve a remission.
- These figures apply to people with type 2 diabetes for up to 6 years. With longer duration, remission is still possible but less likely.
- For smaller people (e.g. body weight under 70kg), lesser weight losses may be successful
- We do not yet know how long a remission of type 2 diabetes will last, but the key is maintaining the weight loss, and possibly losing more weight at a later stage.
- Achieving a remission is the best bet to prevent, or at least delay, the complications of diabetes, but we cannot guarantee that they will be avoided for all patients as other factors may apply (e.g. high blood pressure)

If you are interested in providing a programme aiming to help people achieve remission of type 2 diabetes the following need to be in place:

1. Adequate staffing (dietetic/ practice nurse) allocation for programme delivery (around 6-9 hours per patient per year). To aid competency and confidence we suggest the programme forms a key component of practitioner time as opposed to numerous staff being trained and then only see patients occasionally. Group delivery could also be an option for larger services
2. Funding for:
  - a. Staff training
  - b. Materials
  - c. Initial Phase of Formula diet: options include
    - i. Service pays full cost of product with option to bring in patient payment for ongoing requirements after agreed time point if preferred
    - ii. Part payment by patients with option to bring in full patient payment for ongoing requirements after agreed time point if preferred
    - iii. Full patient payment
  - e. Ongoing requirement for formula diet for **\*rescue plans\*** or one shake/day for weight loss maintenance. Payment options can be agreed as per above.
3. Wider T2D/ obesity strategy (optional)

**Counterweight-Plus**

You can now access the Counterweight-Plus weight-management programme, used successfully in the DiRECT trial to achieve remissions of type 2 diabetes. This is the only programme with solid evidence for success at present. For further information please see attached [Counterweight PLUS Prof Info Dec 2017.pdf](#) OR contact [hazel.ross@counterweight.org](mailto:hazel.ross@counterweight.org) OR [Anna.bell-higgs@Counterweight.org](mailto:Anna.bell-higgs@Counterweight.org)