

Briefing for the Citizen Participation and Public Petitions Committee on petition PE1920: [Calling on the Scottish Parliament to urge the Scottish Government to provide more thorough follow-up care for women with diabetes](#), lodged by Laura Hastings.

### Brief overview of issues raised by the petition

The petitioner is calling for the Scottish Government to take action to ensure women with diabetes in Scotland receive more thorough care. Specifically, they are asking for more education and research, and that issues faced by women with diabetes are included as part of the routine diabetes review.

### Diabetes in Scotland

- Diabetes is a metabolic disease characterised by elevated blood sugar levels. Over time it can lead to serious damage to the heart, blood vessels, eyes, kidneys, and nerves.
  - Type 1 diabetes is an autoimmune condition in which the body cannot produce insulin. People with Type 1 diabetes have to take insulin to keep their blood sugar levels within safe limits.
  - Approximately 9 in every 10 people with diagnosed diabetes have Type 2 diabetes. Type 2 diabetes can be managed through medication, exercise, and diet. Insulin won't be needed in most cases.
- The proportion of the Scottish population registered as having diabetes has increased steadily over time: from around 2% in 2001 to almost 6% in 2018 (source: [Scottish Diabetes Survey](#)). This increased prevalence is likely to be

due to increases in risk factors (such as obesity prevalence), as well as other factors such as earlier diagnosis and better survival of people with diabetes.

- About 44% of those with diabetes in Scotland are female.

## Health risks for women with diabetes

Women with diabetes have elevated risks for certain health conditions.

- Major depressive disorder (MDD): Women with diabetes have over 2.5 times the risk of MDD diagnosis compared with non-diabetic women. (In men the risk is 1.9 times compared with that for non-diabetics). Source: [British Medical Journal](#).
- Coronary heart disease (CHD): Women with diabetes have a 50% higher risk of fatal CHD than men with diabetes. Source: [British Medical Journal](#).
- Heart failure: Women with diabetes have 2.2 times the risk compared with women without diabetes. (In men the risk for those with diabetes is less than twice that for non-diabetics). Source: [UK Biobank study](#).

Other health conditions affecting women with diabetes:

- [Sexual dysfunction](#): The link between diabetes and sexual dysfunction has not been as well studied in women as in men. For women there are stronger links to psychological explanations, rather than physiological ones, and particularly with coexisting depression.
- [Menstrual health](#): Poor diabetes management can delay puberty. Menstruation can affect blood sugar levels.
- [Body image](#): Diabetes has been linked with disordered eating and negative body image, particularly in young adults.

## Diabetes healthcare

On the NHS, people with diagnosed diabetes should receive regular reviews, including the following '[processes of care](#)':

- blood test (for blood sugar and cholesterol)
- weight (for BMI)
- blood pressure
- smoking status
- eye screening (by optician)

- urine test (for albumin and creatinine)
- foot check.

People taking insulin to manage their condition (all Type 1 and some Type 2 diabetics) will receive these checks during hospital clinic appointments.

People with Type 2 diabetes who do not take insulin will receive these checks at least annually at their GP practice.

On reviewing the results of these tests, a diabetes specialist will advise the patient if any changes to their medication or other self-management are required.

Diabetes UK argues that [emotional support](#) should also be an essential part of routine diabetes care.

## Scottish Government Action

### Diabetes Improvement Plan

The Scottish Government published the [Diabetes Improvement Plan: Commitments – 2021 to 2026](#) in February 2021. In the plan the Scottish Government committed to a programme of work to improve diabetes care and outcomes. The implementation of the plan is overseen by the [Scottish Diabetes Group](#).

Of particular relevance to this petition are the following priorities in the plan:

- **Priority 3: Person-centred care.** “People living with diabetes are enabled and empowered to safely and effectively self-manage their condition by accessing consistent, high quality education and by creating mutually agreed individualised care plans.”
- **Priority 4: Equity of access.** “To reduce the impact of deprivation, ethnicity and other factors which can disadvantage diabetes care and outcomes for people.”

Apart from issues relating to diabetes in pregnancy, the plan does not note that women with diabetes may have different health risks compared with men.

## Women's Health Plan

In August 2021 the Scottish Government published the [Women's Health Plan: A plan for 2021-2024](#). The implementation of the plan is overseen by the [Women's Health Group](#).

Women's diabetes is considered in this plan in relation to gestational diabetes (diabetes that develops during pregnancy) and heart health. The plan acknowledges that diabetes is an important risk factor for cardiovascular disease (CVD) for women, and that women are less likely to have appropriate management of their diabetes than men.

Relevant agreed actions arising from the Women's Health Plan:

- Improved information and public awareness of heart disease symptoms and risks for women.
- Improved awareness and education among healthcare professionals of presentation and management of heart disease in women.

## Key organisations and relevant links

Scottish Government [Diabetes Improvement Plan 2021 - 2026](#)

[Scottish Diabetes Group](#) (oversees the implementation of the Diabetes Improvement Plan)

Scottish Government [Women's Health Plan 2021 - 2024](#)

[Women's Health Group](#) (oversees the implementation of the Women's Health Plan)

[Diabetes Scotland](#) (charity)

[Type 2 diabetes in adults: management](#) (NICE guideline NG28)

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The purpose of this briefing is to provide a brief overview of issues raised by the petition. SPICe research specialists are not able to discuss the content of petition briefings with petitioners or

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