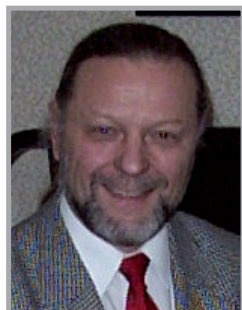


FOREWORD

Diabetes Management: a new journal addressing the management issues of a complex disease



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It is my pleasure, as an associate editor of *Diabetes Management*, to introduce the first issue of this journal. *Diabetes Management* will present findings, analyses and commentaries on the battle with Type 1 and Type 2 diabetes. Articles published in *Diabetes Management* address improvements in current therapeutics and patient compliance, together with perspectives on future prospects. Coverage focuses on the key objective of stabilizing blood glucose levels in individuals with either of the main forms of the disease, gestational diabetes and the associated issues of patient cooperation and education. The journal also reflects the frontiers of current research, such as attempts to recreate pancreatic cells through stem cell technology or islet cell transplantation, the development of preventive measures for Type 1 diabetes and the potential for biomarkers to be used for the detection of diabetes risk. The increasing understanding of the molecular basis of the disease and associated genetics will play an important part in future diabetes management. Today, we understand that prevention of diabetes is a key issue and starting point of diabetes management. *Diabetes Management* discusses the impact of encouraging healthier lifestyles to reduce

the risk of Type 2 diabetes and importance of education in this context, with respect to symptoms. The management of diabetes has wide socioeconomic implications to be tackled.

There are several scientific journals related to diabetes. Nevertheless, it is obvious that there is a place and need for a new one, especially one that deals with the management of diabetes. The number of people with diabetes and prediabetes has dramatically increased in recent times and the number of scientific studies around diabetes and its management has increased drastically. We have all experienced, by the high rejection rate, that the existing diabetes journals cannot currently cope with the volume of studies and papers, and very good papers are increasingly rejected due to space constraints.

Diabetes is a disease that has been known to humans for a very long time. Diabetes was first described in writing in 1550 BC, in an Egyptian medical text, ‘The Ebers Papyrus’, as a condition of passing too much urine. The papyrus was discovered in 1862 by the German Egyptologist, Georg Ebers. In the 1st Century AD, Aretaeus uses the term ‘diabetes’ meaning ‘a siphon’ in Greek to describe the disease as ‘melting down of



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flesh and limbs into urine'. During the 5th and 6th Century AD the sweet, honey-like taste of urine in polyuric patients, which attracted ants and other insects, is reported by Indian physicians such as Sushruta. These Indian descriptions mention two forms of diabetes, one in older, overweight people and the other in thin people who do not survive for long. Thus, diabetes management has a long history. The first description regarding prevention of diabetes was published by Elliot Joslin in his paper 'The prevention of diabetes mellitus' in the *Journal of the American Medical Association* in 1921, where he stated: "...it is proper at the present time to devote not only treatment, but still more ... to prevention" [1]. Despite all this knowledge we have accumulated over time, the incidence and prevalence of diabetes has increased, and today we can say that diabetes is a global epidemic. Only recently has the prevention of diabetes received the proper attention that Dr Joslin called for 90 years ago.

According to global estimates of the International Diabetes Federation Diabetes Atlas, the number of diabetic patients is approximately 285 million, and the projection by 2030 is 440 million, but these are likely to be underestimates. Every 10 s a patient with diabetes dies, and in addition many diabetic people die owing to hyperglycemia without knowing it, since Type 2 diabetes can be asymptomatic for up to 10–15 years. Diabetes deaths are projected to double between 2005 and 2030, and 5% of deaths worldwide can already be attributed to the disease [101]. Effective treatment and, ideally, prevention are therefore vital goals in dealing with this global epidemic.

Diabetes is a disease that affects all the functions of the human body, because high glucose concentration in circulating blood reaches every organ. Thus, any part of the body can become damaged in people with diabetes. This is the glucocentric view of the disease, which is important to understand. We know, however, that many complications related to diabetes have a multifactorial origin (i.e., several other factors besides glucose also play significant roles and need to be taken into account for the effective management of diabetes). Therefore, challenges for diabetes management have

many facets. Another interesting and rather unusual characteristic of diabetes, compared with most other diseases, is its relation to age: diabetes can start at any age from newborn to very elderly individuals. It is obvious that this further complicates the paradigm of diabetes management. There is no single or standard way to manage diabetes; management is as complex as the disease itself.

Due to the multiple complications that may develop as a consequence of diabetes, it is a very costly disease. The economic issues related to diabetes are extremely important and increasing attention should be paid to make the most cost-effective choices in the management of diabetes. Scientific research is needed to identify the 'most cost-effective choices', which will certainly change over time along with advances in our knowledge. Science, in its broadest sense, refers to knowledge systematized in any field, but that usually applies in particular to the organization of an objectively verifiable sensory experience. The search for knowledge in this context is known as 'pure science', to distinguish it from 'applied science', the search for practical applications of scientific knowledge and technology. It is very important to realize that good scientific knowledge forms the basis for any efficient action in public health or clinical medicine. However, knowledge alone is not sufficient to achieve good results in disease prevention, but evidence from applied science is essential. This is one of the ways that *Diabetes Management* will serve its readers.

Diabetes Management provides clinicians and other health workers with the latest findings and opinions on the optimum therapies for reducing the disabling effects of uncontrolled diabetes. Recent research findings and advances in clinical practice in the field are reported and analyzed by international experts. *Diabetes Management* will comprise topical, concise articles bringing together all disciplines of diabetes management. All submitted articles will be subjected to rigorous and constructive peer review by at least three independent referees. The journal will make every effort to ensure rapid publication in this competitive field of research (8–10 weeks from submission

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to acceptance). It should be noted that *Diabetes Management* does not impose any page or submission fees. *Diabetes Management* is published by Future Medicine Ltd (London, UK) renowned for its collection of journals providing healthcare practitioners and research professionals with a unique source of objective, cutting-edge information on exciting trends emerging in light of advances in medicine, healthcare and clinical practice. Authors will benefit from the excellent service from the *Diabetes Management* professional in-house editorial team during the entire publication process. They will accompany authors from submission to publication and inform authors regarding the status of the manuscript, and ensure the highest quality editing and reproduction, a professional and engaging layout and broad visibility of their research.

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■ Website

- 101 International Diabetes Federation
Diabetes Atlas
www.diabetesatlas.org

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