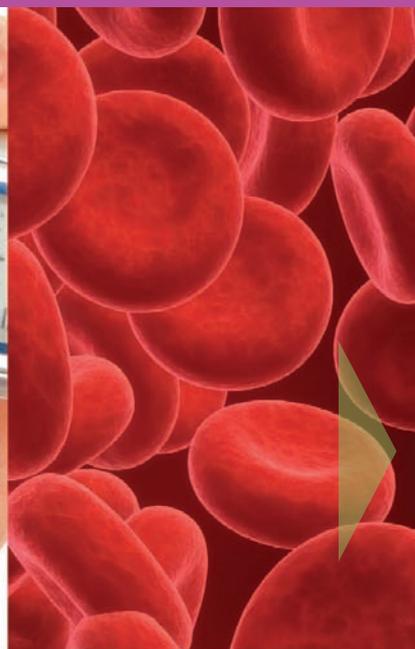


Working together to find a cure for Diabetes

ANNUAL
REVIEW

2017



Diabetes Research &
Wellness Foundation

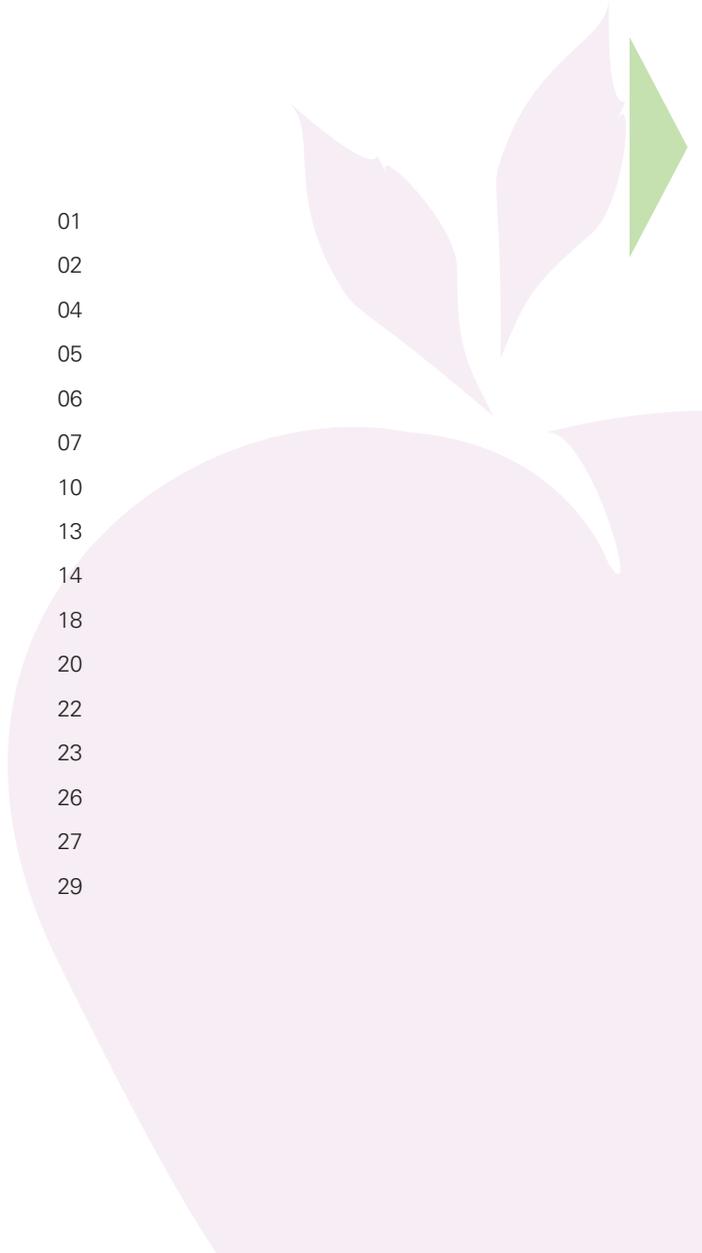


The DRWF team show off the Quality in Care Awards'

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Message from the DRWF Chairman and Chief Executive



DRWF was first founded in 1993 to represent the diabetes patient community in the United States of America. DRWF UK was subsequently incorporated in 1998 and further groups established in France, Sweden and Finland, with a recently incorporated group in Norway. Whilst there is no legal connection between any of the groups, we have an overlap in board members to ensure a consistency of mission and to enable information sharing for awareness raising and research funding purposes.

All active groups are funding what we call 'fast-track research' which we believe will lead to benefits for people with diabetes in the shortest time frame. Our long-term multi-year funding commitments, such as Fellowships and Institutional awards, aim to find a cure for those who have battled this disease for many years. We have engaged Research Advisory Boards which enables us to draw on multi-disciplinary expertise to ensure that we're funding the best possible research in line with our research strategy.

Diabetes, and its associated health conditions, requires collective solution finding and working collaboratively with other DRWF groups around the world strengthens our financial commitment, builds capacity, and ultimately increases the potential for the work we fund to bear fruit.

DRWF was set up by parents of children with type 1 diabetes, diabetes healthcare professionals and friends and family of people with diabetes, so we know first-hand the challenges and burdens that this debilitating and increasingly prevalent condition brings not only to the person diagnosed, but to the network of people around them.

In the UK, the NHS is spending about 10% of its annual budget on treating diabetes and its associated complications. That is a mind boggling £10 billion a year or £1 million an hour and much of this cost is attributed to treating complications that can often be prevented.

Our strapline of **'staying well until a cure is found...'** underpins our research funding and delivery of our information and educational events. Whilst we're funding in many cases "one of a kind" research in the UK and around the world, we are also providing authoritative, relevant and clinically evidenced patient information with the aim of supporting a pro-active approach to good self-management, which has been shown to reduce the risk of associated complications.

We were delighted in 2017 to receive not only a 'highly commended' Quality in Care Diabetes award in the 'empowering people with diabetes in self-management' category, but to scoop the Judges Special Award from all categories for an educational programme that demonstrated real impact for beneficiaries. It is important to us to know that we are delivering real value to the people we support and this award gave us a real boost, at a time when the charity, and particularly fundraising, landscape is ever more challenging.

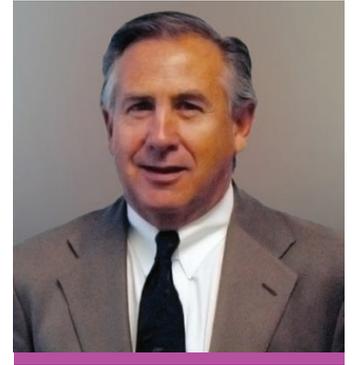
I would like to thank our supporters for their continued commitment to our work. We exist largely on voluntary income and so individual donations and community fundraising initiatives play a crucial part in our income generation. It's sometimes hard to envisage how making a donation today can reap benefits for people with diabetes in the future particularly as research can take many years to come to fruition. But we are intent on maximizing potential and endeavour to support work that will provide clinical benefit in the shortest timeframe. We have certainly seen success in this respect from our commitment to supporting islet transplant and research at the Churchill Hospital, Oxford and within the UK Islet Transplant Consortium. More information can be found on this and all of our research funding commitments on our website www.drwf.org.uk/funded-research

The prevalence of both Type 1 and Type 2 diabetes continues to increase at an alarming rate and this makes us more determined than ever to make our work count!

We are investing in a brighter future for people living with all forms of diabetes and have our supporters to thank for making this possible.

W. Michael Gretschel
Chairman

Sarah Tutton
Chief Executive



W. Michael Gretschel



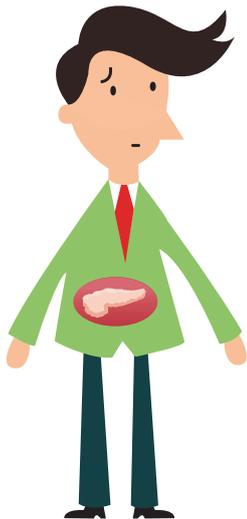
Sarah Tutton

The impact of diabetes

Diabetes is a chronic, progressive disease that can have a debilitating impact on almost every aspect of life.

Type 1 diabetes cannot be prevented. It occurs when the pancreas doesn't produce any insulin and is considered to be an auto-immune response in the body.

Type 2 diabetes is considered to be largely related to lifestyle factors. It can be prevented, or at least its onset delayed, in many cases by changing diet and exercise habits.



The scale of the problem



Latest figures indicate (2018 update) that around 3.7 million people in the UK have diabetes and it is thought that around a further 1 million adults have T2 but are yet to be diagnosed.



Diabetes is a global issue with more than 425 million people living with the condition around the world. This is expected to reach 629 million by 2045.



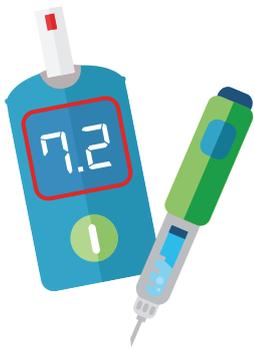
Diabetes, its care and treatment, is reported to cost the NHS almost 10% of its annual budget which is approximately £10 billion.

It is thought that around 80% of these costs is attributed to treating the complications of diabetes - many of which can be avoided.

Self-management is the cornerstone of diabetes care and to be effective, requires strong partnerships with health care providers and support networks.

We provide the information and tools to encourage and support a proactive approach to self-care.

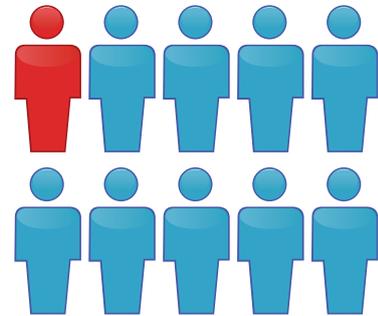
There are 2 main types of diabetes



Type 1

cannot be prevented

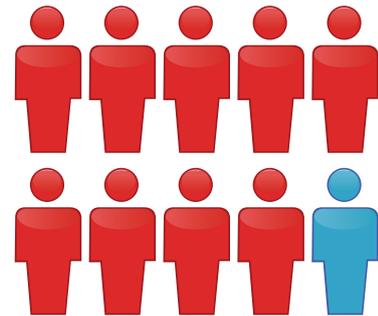
- Type 1 diabetes accounts for around 10% of those diagnosed with diabetes in the UK



Type 2

can be prevented

- Type 2 diabetes accounts for around 90% of all those diagnosed with diabetes in the UK



Nearly 2 in every 3 adults in the UK are overweight or obese

Both Type 1 and Type 2 diabetes are associated with serious health complications, with an increased risk of cardiovascular disease, kidney disease, eye disease, nerve damage, amputation, poor oral health and sleep apnoea. People with Type 2 diabetes can sometimes go undiagnosed for many years whilst long term damage is being done because of the condition. It has been proven over time that good self-management can significantly reduce the risk of these complications.

Amazing diabetes awareness and fundraising in memory of Aidan



Football match and fundraising in memory of Aidan, who died from complications related to type 1 diabetes, raises £15,000.

Friends and family of Aidan Sutherland celebrated his life by holding a memorial football match.

Aidan was a keen footballer and fan of Raith Rovers, and the match was played at their Stark's Park ground - where a crowd of 1,100 packed the stands to show their support.

Aidan, of Kirkcaldy, Fife, had type 1 diabetes and died just two days after his 20th birthday on 3rd July 2017, due to complications of a hyperglycaemic episode (high blood sugar levels).

While Aidan's family and friends were aware of how to treat the symptoms of hypoglycaemia (low blood sugar levels) they did not recognise the symptoms of hyperglycaemia (high blood sugar levels).

To raise awareness of the dangers of this complication of diabetes Aidan's family chose to support DRWF and have organised a number of fundraising events.

So far around **£15,000** has been donated to DRWF as a result of the amazing fundraising activities that have taken place.

The memorial match for Aidan was contested between Kirkcaldy YM and Steadings AFC and the sides featured many of Aidan's friends and team mates.

Well-known former professional footballers also took part, as the match featured a guest appearance by former Scotland international Colin Cameron, who also played for Raith Rovers, Heart of Midlothian and Wolverhampton Wanderers.

Also involved was Darren Dods, a friend of Aidan's family, who played for Hibernian, St Johnstone, Inverness Caledonian Thistle, Dundee United and Falkirk.

Darren said: *"I was honoured to be asked to play in Aidan's memorial match and enjoyed playing with Aidan's team mates. It was really good to see the amazing turnout and the effort all the family and friends had put in on the day to raise awareness of diabetes."*

In the match day programme Aidan's father John Sutherland said: *"Aidan wouldn't let type 1 diabetes halt his progress in life or shatter his dreams. Aidan knew to keep strong. As a family, we feel an immense sense of pride for our boy, knowing that it was not solely his upbringing that could create such a special being. He had the best life possible, surrounded by joy and love, we will all live on with his spirit giving us the strength to go into the future."*

At the memorial match, as team captains Ben Graham and Connor McManus lead their teams out, Connor displayed the Steadings' team shirt with a newly introduced club crest "AS5", in memory of Aidan. The Steadings team honoured Aidan by retiring his number 5 shirt.

In addition to Raith, Aidan also supported Portsmouth FC and DRWF presented a photograph of Aidan signed by the squad of the League One side.

John said: *"Aidan would be in awe by the gesture made from his Pompey heroes."*

DRWF Community Fundraiser Karen Scott said: *"DRWF is based on Hayling Island, near Portsmouth. Aidan supported our local Portsmouth Football Club and we are honoured to be the charity chosen by his family for this event."*

In addition to the memorial football match Aidan's friends and family have taken part in a number of fundraising activities to raise awareness about diabetes including a Queensferry Crossing Experience, walk and charity raffle.

John said: *"(Aidan's mother) Lin and I are really proud of the diabetes awareness that was highlighted throughout the fundraising."*

"Thanks all for your tremendous efforts. We really appreciate it!"



Following the match Aidan's friend and team mate, Craig Lowrie, Honorary Captain for the cup presentation, received the trophy from Aidan's father, John

Memorial match photos courtesy of DC Thomson Ltd

Trustees

DRWF was born from a very personal connection with type 1 diabetes. Having two children diagnosed with the condition made for a commitment and dedication to the cause from Mike Gretschel and his business partner, John Alahouzos, that has never wavered and remains true to its original desire - to find a cure for diabetes.

The DRWF group was established in 1993 in the U.S. and in 1998, DRWF was incorporated and registered as a charity in the UK. Over the last 19 years we have become a recognised provider of awareness, educational support programmes and leading funder of diabetes research. The DRWF Board of Trustees are an engaged and committed group of individuals who bring a significant level of expertise to the governance of the charity in the fields of law, business strategy & management, international fundraising, psychology, healthcare and education.

Michael Gretschel

Co-Founder Chairman of the Board

Volunteer fundraiser for diabetes research for over 30 years. Mike has a very personal interest in diabetes, with two children having Type 1. In 1993, Mike – along with others – founded the Diabetes Research & Wellness Foundation (DRWF). Since then, the DRWF International Network of charities has grown to include the Diabetes Research & Wellness Foundation (DRWF) in the UK; Association pour la recherche sur la diabete (A-rd) in France; Diabetes Wellness Network Sverige (DWNS) in Sweden and a new group just starting out in Finland. All groups work autonomously, but with the same objective, and work collaboratively on international awareness and research funding campaigns. Collectively, the groups have committed more than £55 million in awareness, education and research funding since inception.



John Alahouzos

Co-Founder Volunteer fundraiser for diabetes research since 1978

John Alahouzos is a marketing executive by profession and a volunteer for 'The Diabetes Cure' by choice. For almost 38 years he has worked alongside his friend Mike Gretschel to raise funds and awareness for the need to cure diabetes. After many years of volunteer fundraising for the Juvenile Diabetes Research Fund in the US, John, Mike and their wives founded the Diabetes Research & Wellness Foundation (DRWF) in 1993. John is the Chairman of the Board of Trustees of the Diabetes Research & Wellness Foundation in the US and serves as a trustee on the board of the Diabetes Research & Wellness Foundation in the UK, as well as their affiliates in France, Sweden, and Finland.



Jeffrey Harab

Bachelor of Arts, Juris Doctor. Attorney-at-Law, 1979

Jeff has been a member of the Board of Trustees of the Diabetes Research & Wellness Foundation (DRWF) since 2001. He is also a board member of the Association pour la recherche sur le diabete (A-rd) and is an alternate board member for Insamlingsstiftelsen Diabetes Wellness Network Sverige (DWNS). Each of these groups, along with DRWF in the UK, form part of the International Diabetes Wellness Network, and collaborate on global diabetes awareness campaigns, educational programmes and research funding initiatives.



Valerie Hussey

Retired Nurse, Musgrove Park Hospital, Taunton

Val has been a member of the Board of Trustees of DRWF since 1999. She is also an alternate board member for Insamlingsstiftelsen Diabetes Wellness Network Sverige (DWNS). Having worked as a nurse within the NHS for many years, Val has a keen interest in ensuring that people with long-term conditions have the resources available to them to self-manage their condition as effectively as possible. She is a keen supporter of the charity's educational event programme.



Rae-Marie Lawson

Retired Psychotherapist MA.Dip; CertEd., Warsaw College, West Midlands

Rae was diagnosed with Type 1 diabetes more than 30 yrs ago and experienced a debilitating lack of hypo awareness which impacted on all aspects of her life. She received two islet cell transplants at the Oxford Centre for Diabetes, Endocrinology & Metabolism (OCDEM) in 2010 which houses the DRWF Human Islet Isolation Facility and has been insulin injection free since then.



DRWF support the Royal Free Hospital to give young people with type 1 diabetes a platform to explore their feelings about the condition.



A novel creative approach to help children and parents better understand and talk about their treatment has been funded by UK-based charity Diabetes Research & Wellness Foundation.

DRWF gave a small educational award to the Royal Free Hospital Children’s School (RFHCS), a community Special School for pupils aged 5 to 16, for the patient centred multi-disciplinary approach to diabetes education using puppet making and film skills to help with learning.

DRWF Chief Executive Sarah Tutton said: *“We were really pleased to support this innovative project which helps young people to explore their diabetes diagnosis and management. The film will allow the work to support other young people, and their parents, in talking about type 1 diabetes and what it means to live with a long-term condition. It helps to dispel some myths and share some important messages in a fun, creative way.”*

The grant funded four sessions of learning puppet and film making skills for young people, which resulted in a short film to be used as an educational tool for other young children newly diagnosed with type 1 diabetes.

Following the sessions there was a great improvement in both the children and their parents’ knowledge and confidence discussing type 1 diabetes. The project had other benefits as well, as the social aspect of the activities encouraged a strong bond to form between parents and children, which can be hard to achieve in a clinical setting.

Steve Green, Deputy Headteacher and Examinations Officer at the Royal Free Hospital Children’s School, said: *“Parents and children were rearranging their schedules to ensure they attended as many sessions as possible and happily shared experiences.”*

“Children were explaining insulin pump functions to each other and parents were discussing the importance of control using conventional means as a prerequisite before being offered a pump.”

“The film is being shown at the Royal Free Hospital to children newly diagnosed with diabetes as an educational tool and ‘mythbuster’. The film was a delight to make and all parents and children were thrilled with the outcome and thoroughly enjoyed taking part.”

Steve and his colleague Victoria Dublon will be presenting the video and a poster about the project at the British Society for Paediatric Endocrinology and Diabetes Annual Conference in Newcastle from 22nd - 24th November.

Around 14% of the school’s children have a long-term medical condition, with 200 young people diagnosed with type 1 diabetes across the Royal Free Trust, which includes Chase Farm, Barnet and Royal Free Hospitals.

An estimated 125,000 UK children miss more than 14 school days per year meaning most hospitals have an education provision.

The RFHCS offers high quality education for all children who are inpatients at the Royal Free Hospital. It also provides a limited number of places for children who are not inpatients but who are receiving support from medical or mental health services and may benefit from attending the school on a daily basis.

The school operates within a multidisciplinary framework; working closely with a range of professionals including consultant doctors, mental health professionals, physiotherapists, speech therapists and other agencies.

Watch the film: <https://www.youtube.com/watch?v=z8EJ7OoOQ9M>



Editorial Advisory Board

Dr Sarah Brewer

GP, Health Journalist and Specialist in Nutritional Medicine

Dr Sarah Brewer MSc (Nutr Med), MA (Cantab), MB, BChir, RNutr, MBANT qualified from Cambridge University with degrees in Natural Sciences, Medicine and Surgery. After working in general practice, she gained a master's degree in nutritional medicine from the University of Surrey. As well as being a licensed doctor, Sarah is now also a Registered Nutritionist, a Registered Nutritional Therapist and an award winning health writer. Sarah is the author of over 50 popular self-help books, including *Overcoming Diabetes* (Duncan Baird) and *Natural Approaches to Diabetes* (Piatkus). Her latest books are *Live Longer Look Younger*, and *Eat Well, Stay Well*, published by Connections. Sarah is the editor of *YourWellness* magazine www.yourwellness.com. Follow her occasional nutritional Tweets at www.twitter.com/DrSarahB.



Dr Deborah Broadbent MRCOphth, Ophthalmologist / Director of Liverpool Diabetes Eye Centre

Deborah Broadbent MB ChB (Liverpool) DRCOG (London) DO (London) MRCOphth graduated from Liverpool University in 1976 and has been working as an ophthalmologist since 1978. In conjunction with colleagues she set up the Liverpool Diabetic Eye Study in 1991 and in 1996 she became the full-time Director of the Liverpool Diabetes Eye Centre.

Over the past 20 years she has developed an expertise in the epidemiology, diagnosis and management of diabetic eye disease. She has presented original papers and been an invited speaker at both national and international meetings. In September 2002 she was appointed as the Lead in Workforce, Training and Education to the English National Screening Programme for Diabetic Retinopathy, and has worked with Skills for Health, NHSU, the National Open College Network and City and Guilds to develop National Occupational Standards in retinopathy screening and a suite of mandatory national qualifications awarded by City and Guilds for all personnel involved in the identification of sight threatening diabetic retinopathy across the UK. She was appointed as Honorary Associate Clinical Professor with Warwick University, advising on the Masters in Diabetic Retinopathy programme, in 2010, and as Honorary Senior Lecturer in the Department of Eye and Vision Science at the University of Liverpool in 2013.

She acts as a peer reviewer for ophthalmic and diabetes journals and is the Section Editor for Retinopathy in *Diabetes Digest*. She is also on the Advisory Board for the Diabetes Research and Wellness Foundation and is a trustee for The Eye Fund, a charity providing counselling support for people coming to terms with untreatable visual impairment. She continues to be actively involved in research into the epidemiology of diabetic retinopathy, screening for diabetic retinopathy and new therapies.



Andrea Cameron

Head of the School of Social and Health Sciences, Abertay University

Andrea has worked in Health Care since 1982. After qualifying as a nurse she specialised in Coronary Care Nursing before becoming a Nurse Teacher. She then moved to teaching Sports Science, but remains a registered nurse and qualified exercise instructor. She has undertaken doctoral studies examining the information given to patients with Diabetes by health professionals in the primary care sector and has published in the area of volunteering and employment skills. Andrea has also run for Scotland at international veteran events, and has been a contributor for DWRF since 2004.



Professor Edzard Ernst

Professor in Complementary Medicine, Exeter

Professor Edzard Ernst is Chair in Complementary Medicine and Director of Complementary Medicine at Peninsula Medical School in Exeter. His expertise lies in acupuncture, autogenic training, herbalism, homeopathy, massage and spinal manipulation. He has published more than 1,000 articles in peer reviewed medical literature, 500 original research papers and has written, or been editor, of more than 40 books. Edzard is Editor-in-Chief and founder of two medical journals, and sits on the editorial board for 20 other journals, including DRWF's *Diabetes Wellness News*.



Azmina Govindji

Registered Dietitian and TV Nutritionist

Azmina is a registered dietitian, consultant nutritionist, broadcaster and best-selling author. She is director of Azmina Nutrition www.azminanutritions.com and shares daily tips at <http://on.fb.me/AzNutrition>. Azmina has written 15 books including the Gi Plan with Nina Puddefoot and The Diabetes Weight Loss Diet with Antony Worrall Thompson. She was Chief Dietitian to Diabetes UK from 1987-1995 and is currently a media spokesperson for the British Dietetic Association.



Gwen Hall

DSN, Community Diabetes Services Portsmouth, Primary Care Team

Gwen Hall, Independent Diabetes Specialist Nurse, trained as a Mental Health Nurse in Scotland and, having moved to England, completed her general training in Surrey. She worked for many years as a Practice Nurse/Nurse Practitioner, Practice Nurse Trainer and Diabetes Facilitator. Latterly she became a Diabetes Specialist Nurse in Primary Care and this year took up a post with the award winning Community Diabetes Team in Portsmouth.

Gwen is Associate Editor-in-Chief of *Diabetes & Primary Care* and on the editorial board of the *Journal of Diabetes Nursing* and *Diabetes Digest*. She has regularly published articles in these and other journals. In 2005 Gwen was elected Vice-Chairman of the Primary Care Diabetes Society. She was responsible for updating Mary MacKinnon's book *Providing Diabetes Care in General Practice* and was awarded the Mary MacKinnon lecture at Diabetes UK's Annual Professional Conference in 2008. She continues to lecture widely on diabetes nationally. She is an Associate Clinical Teacher for the University of Warwick and a past Visiting Fellow of the University of Surrey.



Emma Howard

Community Diabetes Lead Podiatrist, Oxford Health NHS Foundation Trust

Emma qualified with a BSc Hons Podiatry from the University of Brighton in 1997 and began working as a community podiatrist for the NHS in Shropshire. During this time she completed the Society of Chiropractors and Podiatrist Diabetic Foot Module and began working in acute diabetic foot clinics in Telford and Shrewsbury. After nearly 10 years she moved to work at Knowsley PCT on Merseyside as a Diabetes Team Leader in a community trust.

In 2009 she accepted a position for Oxford Health NHS Foundation Trust where she works as a Community Diabetes Lead Podiatrist. She specialises in the care of the diabetic foot and high risk wound care. The clinics run across community settings and within OCDEM (Oxford Centre for Diabetes, Endocrinology and Metabolism).

She has worked with DRWF since 2007 developing the foot care advice leaflet and has attended the Walking holidays and Wellness Weekends to give presentations and informal advice on foot care in diabetes.



Dr Alison Kirk

Lecturer in Physical Activity for Health, University of Strathclyde, Glasgow

Alison was appointed in January 2009 as a Lecturer in Physical activity for Health at Strathclyde University, Glasgow. She completed a BSc in Physiology and Sports Science at the University of Glasgow (1998) before undertaking a PhD through the same university (completed 2003). She was then appointed as Lecturer at Dundee University before moving to Strathclyde University. Alison currently teaches on the BSc Sport and Physical Activity degree course. She teaches various aspects of physical activity and health and clinical exercise science.

Alison's specialist research area is in behaviour change of physical activity and sedentary behaviour with emphasis towards prevention and management of chronic disease. She has particular focus towards diabetes but with past and current funded research in breast and colon cancer, respiratory and cardiovascular disease. Alison has a drive towards implementation of research findings and knowledge exchange within community and clinical practice and has worked with a number of community and clinical groups on related projects and guidelines.



Dr Alastair Leckie**MBChB DRCOG MRCP FFOM, Consultant in Occupational Medicine, OHSAS**

Alastair is a consultant in occupational medicine and director of OHSAS, an NHS based service provider for occupational health. He graduated from Edinburgh University in 1986 and initially trained and worked as a general practitioner. He trained in occupational medicine at the Institute of Occupational Medicine before moving into his current role. Alastair is involved in postgraduate training for GPs, specialist trainees, and occupational health colleagues. He is an honorary senior clinical lecturer at the University of Glasgow. He frequently sees people in his clinic with diabetes to advise them and their employer regarding any work issues or work based assistance that may be required. Alastair is currently President of the Society of Occupational Medicine.

**Henrietta Mulnier****RGN MSc PhD, Lecturer in Diabetes Nursing/DSN, King's College London and Guy's & St Thomas' Trust**

Henrietta Mulnier RGN MSc PhD is a Lecturer in Diabetes Nursing at the Florence Nightingale School of Nursing and Midwifery, King's College London. She also works clinically as an Honorary Diabetes Specialist Nurse at St Thomas' Hospital London. She has been nursing for nearly 30 years; specialising in diabetes since 1995. Having completed a Doctorate in 2008 her current focus is on research to benefit patient care for those with diabetes. Henri has published widely and is a reviewer for several journals. She is a member of the current National Institute for Health and Clinical Excellence Guidance Development Group for type 1 diabetes and is also on the editorial board for Diabetes & Primary Care.

**Dr Mayank Patel****Consultant Physician in Diabetes, University Hospital Southampton NHS Foundation Trust**

Dr Mayank Patel has worked as a Consultant Physician in Diabetes and Acute Medicine at University Hospital Southampton since 2008. Since starting as a Consultant, he has overhauled and developed the trusts adult inpatient diabetes service and worked with commissioners to bring new adult multidisciplinary insulin pump and diabetic foot services to the trust. He co-developed 'DiAppbetes', the smartphone application to help healthcare professionals manage inpatients with diabetes. He also contributes to medical undergraduate and postgraduate diabetes training, as well as regularly delivering diabetes education to patients, public and other healthcare professionals in primary and secondary care.

**Professor Philip Preshaw****Specialist in Periodontics, University of Newcastle**

Philip Preshaw is Professor of Periodontology and Consultant in Restorative Dentistry at Newcastle University, UK. He received his Dental Degree from the University of Newcastle in 1991 and his PhD in 1997. He is a registered specialist in Periodontics and is a Fellow of the Royal College of Surgeons of Edinburgh. His main research interests are investigations of the pathogenesis of periodontal disease, and links between diabetes and periodontal disease. Professor Preshaw lectures frequently, and has numerous publications in peer-reviewed scientific journals. He has been awarded a UK NIHR National Clinician Scientist Fellowship, a Distinguished Scientist Award from the International Association of Dental Research, and a King James IV Professorship from the Royal College of Surgeons of Edinburgh for his contributions to research.



Awareness, Information & Support

Diabetes continues to escalate globally with around 425 million people currently affected by the condition. This equates to 1 in 11 adults. Around 90% of those diagnosed have type 2 diabetes and it is estimated that 1 in 2 adults are yet to be diagnosed. Over 1 million children and adolescents have type 1. It is estimated that by 2040 1 in 10 adults will be affected, increasing to around 642 million people. Further, 1 in 6 births is affected by hyperglycaemia in pregnancy and every 6 seconds, a person dies from diabetes.

In the UK, there are more than 3.8 million people diagnosed with diabetes and it is estimated that there are around a further 500,000 adults with type 2 diabetes, who don't yet know it. The treatment of diabetes in the UK costs the NHS around 10% of its annual spend, this is around £10 billion per year of which around 80% is spent on treating associated complications, many of which can be avoided.

All people with diabetes, aged 12 years and over, should receive each of the nine NICE recommended care processes annually. It is also recommended, on diagnosis, that they attend a structured education programme. However, it is reported that fewer people with Type 1 than with Type 2 and other diabetes receive their annual checks. NICE recommends treatment targets for HbA1c (glucose control), blood pressure and cholesterol with the aim of reducing all diabetes related complications and over the last four years improvements have been seen in the combined 3 treatment target achievement in both Type 1, Type 2 and other diabetes.

Diabetes structured education aims to provide people with diabetes with the knowledge and confidence to self-manage a long-term condition effectively. The offer of structured education has improved over the last three years. However, the rates of attendance are still very low and disparate across the country. Self-management is central to diabetes care. Yet, it is reported that four in ten people with diabetes experience emotional or psychological problems, such as depression, anxiety and diabetes distress, all of which can impact the ability and motivation to self-manage effectively. This leads to poorer health outcomes, reduced quality of life and increased healthcare costs. Being able to access appropriate psychological support is an integral part of self-management and a core service component in the NHS Right Care pathway for diabetes. However, recent reports suggest that more than three quarters of people with diabetes were not offered emotional or psychological support when they needed it.

Supported self-management through the Diabetes Wellness Network underpins all of the information and educational events that DRWF offers throughout the year. During the year, we continued to raise awareness via multi-media channels with consistent messaging to differentiate between type 1 and type 2 diabetes, helping people to understand that whilst type 1 diabetes cannot be prevented, much can be done to prevent or delay the onset of type 2.

We distributed more than 362,000 direct mail campaigns in 2017 containing awareness information and calls to action. With a positive response from 15.5% of those mailed, we know that at least 55,500 people across the country read the information contained within the campaign. We know from years of experience that it is likely that many more opened and read the information, but chose not to make direct contact with us at that time. Historically, we have seen numbers of people respond to communications that have been distributed many months before, even years, as they have held onto the information provided for future reference. The volume of direct mail distributed in 2017 reduced significantly from the previous year due to a 4-month abstinence period, however the average response rate (across all campaigns) increased by 4.5%.

Our Diabetes Awareness Necklace is distributed free of charge to people with diabetes and healthcare professionals for onward distribution. These necklaces provide emergency identification for those with diabetes should they be unable to alert the emergency services to their condition. They carry the wording 'I have diabetes, please test my blood before treating me'. They are distributed along with medical check-up cards that are used to record tests and results to inform self-management strategies. Around 8241 necklaces were distributed during the year to diabetes and related health care professionals and those living with diabetes. This represents a 91% increase on the numbers distributed in 2017. Requests are now coming via the charity's website, DM programmes and social media channels, particularly Face Book.

"I am always scared that if I have a hypo, people won't know what it is, and won't know what to do. This necklace is fab!"

N Kachhela



We publish a series of diabetes information leaflets that carry NHS England Information Standard accreditation. These resources are available free of charge. They can be downloaded from our website as pdf or audio files, or requested as printed copies. HCPs also request these leaflets in bulk to distribute within their clinics and surgeries. More than 41,715 leaflets were distributed during 2017. This is around 5% lower than the volume distributed in 2016. However, there were more than 6743 downloads of this information from our website over 6 months of the year. This volume represents a 10% reduction on the previous full year. We were unable to pull volumes for the full 12 months of 2017 as we transitioned between the use of Google Analytics and a bespoke dashboard system for measuring specific KPIs but we suspect that volumes would have been very similar to 2017.

More than 130,740 copies of our monthly newsletter, Diabetes Wellness News, were distributed to subscribers and regular givers in our Partners for the Cure programme during the year. This is a 5% decrease on the previous year with the majority of this reduction due to 'deceased' notifications. The newsletter is circulated to paying subscribers and on a complimentary basis to healthcare providers. It is available in large print, audio format or alternative, on request. Overall, the paying subscribers to the DWN reduced by 6% in the year. Healthcare professionals receive the newsletter each month and they share the information with their patient communities, therefore it is difficult to accurately predict the true readership of the newsletter. The number of healthcare professionals on our HCP database during the year reduced by 3% on 2017 (118), leaving 4118 contacts at year end.



The newsletter carries NHS England Information Standard accreditation that demonstrates that the information provided is relevant, clinically evidenced and up-to-date, and that a robust production process, including peer and lay review, is performed on each publication. We were successfully audited on these processes to maintain accreditation in 2017. This also extends to the provision of health and social care information within the 'Understanding Diabetes' and 'Living with Diabetes' section of our website www.drwf.org.uk

"The quarterly diary provided with my monthly Diabetes Wellness News is so useful. It's the first one that I've found with space enough to record my blood sugar levels and test results properly"
G Scarett

Diabetes Wellness educational events

We have been running an annual programme of Diabetes Wellness events since 2001. We work with diabetes, and related, healthcare professionals to facilitate workshops that provide relevant, up-to-date, evidence based information covering all aspects of diabetes and related health. Delegates choose the sessions and talks that they attend meaning that they create their own agenda for the day, improving engagement and supporting better outcomes. These events bring together a wealth of information and expertise under one roof.

The event programme is devised and delivered by experts and offers rotating workshops that focus on the day-to-day management of diabetes and also prevention and management of associated complications. An exhibition hall provides a central hub which is zoned by theme covering health, technology, social networking and community support to ensure that delegates are provided with a holistic range of support with lots of sign-posting to other service providers so that they can access support in a way that best suits their needs.

We know that managing diabetes is challenging and so effective coping strategies are crucial to support optimal health. These coping strategies are important not just to people living with diabetes but their family, friends and carers. Peer support plays an important part in emotional wellbeing and this in turn can have an obvious impact on the ability to self-manage effectively. For this reason, we feel it is important to include family, friends and carers in workshops and discussions which facilitates discussion around managing diabetes, perceptions and expectations, in an environment where everyone has experienced or is experiencing something similar. These events are relaxed and welcoming in approach. They are inclusive and provide for diverse needs. They also provide an amazing opportunity to spend time with a whole host of health care professionals asking the questions that really matter to the individual in an unhurried way.

National guidelines recommend that people living with diabetes should be offered structured diabetes education that involves a range of activities to increase knowledge and skills around self-management. Our Wellness events are complimentary of the structured education courses on offer via the NHS, and are supportive of the ongoing need to refresh and gain new knowledge throughout the lifetime of a long-term chronic condition. We see a high volume of people that come back year on year for this reason, as well as newly diagnosed who have been recommended to attend by their own healthcare professional. In 2017, we held 3 events across the country accommodating more than 240 delegates.

The charity's CEO was invited to present at the Diabetes UK Annual Professional Conference in March 2017 on the subject of 'Diabetes Wellness Events – empowering people with diabetes in self-management'.



Quality in Care Award, Diabetes

We worked with Barnard Health Research Ltd to conduct a study into the benefits of support events in a more formalized and robust way in terms of impact on facilitators and associations with improved diabetes outcomes in line with NICE guidelines that focus on provision of evidence based practical advice, the importance of education and diabetes related information including dietary advice, managing cardiovascular risk, managing blood glucose levels and identifying and managing long-term complications. Our view being, that providing an environment where the factors important to optimal diabetes outcomes are addressed in a relaxed, friendly and supportive way will result in increased awareness, improved knowledge and understanding about diabetes, improved self-efficacy and improved wellbeing. We used validated models such as the WHO-5 wellbeing index, the diabetes self-efficacy scale and the diabetes distress scale alongside questions specific to the event.

Using the knowledge we gained from this evaluation study, we submitted an application to the Quality in Care Diabetes Awards 2017, in the category of 'empowering people with diabetes to self-manage effectively'. We were duly shortlisted and received a high commendation in this category. The highlight of the awards ceremony, was winning the Judges Special Award from all entries received (76), regardless of category, for a project that the judges felt deserved national recognition and a platform to be shared with the wider diabetes community.



Judges said: "DRWF has put together a brilliant education support programme with excellent outcomes. The events are clearly user focused, providing an opportunity for peer support and re-engaging those users who have missed out on a structured education. The programme offers huge value to future users and has great potential to reach other areas of the UK."

ABSTRACT

Aim: To evaluate the short and longer-term impact of the DRWF Diabetes Wellness Day South on improving health behaviours and reducing diabetes-related burden for participants.

Methods: Questionnaires were administered to all registered delegates assessing psychosocial aspects of living with diabetes and the impact of the event on knowledge of diabetes. Measures included the WHO-5, the Diabetes distress scale, the diabetes self-efficacy scale and bespoke questions assessing impact of sessions on diabetes knowledge from the day.

Results: 93 completed questions were returned representing a 38.3% response rate overall. Of these, 25.8% participants were living with T1 diabetes, 69.9% with T2 diabetes and 4 reported 'other'. All participants' data: mean age 63 years (range 26-86 yrs), mean diabetes duration 16 years (range 2 months - 58 yrs), 64.9% female. The most common treatment regimen was oral therapies 29% or multiple daily injections of insulin 26% with 41 of respondents reporting having diabetes related complications (43.6%) and approximately 59 (62.8%) having co-morbidities. Attendance for structured education was mixed with around 30% of adults with type 1 diabetes and almost half of adults with type 2 diabetes reporting not having attended a structured education course. Lack of understanding of basic targets remains concerning, particularly around weight, cholesterol and foot health risk score for people with type 1 diabetes and blood glucose targets, BMI and weight, blood pressure and cholesterol for adults with type 2 diabetes. There was a lack of confidence around exercise (n=44, 50%), diet (n=24, 27%) and reacting appropriately to 'out of range' blood glucose readings (n=24, 27%). By one and three months, post-event attendance, confidence had improved considerably in all areas. Prevalence of diabetes distress was low overall.

Conclusion: Similar to last year, participants reported that their attendance at the DRWF wellness events had a positive impact on their diabetes self-management, confidence and psychosocial functioning.



Diabetes Professional Care 2017 – DRWF was invited to participate in #DPC2017 – a professional conference for diabetes and related healthcare professionals. We were invited to be the registration sponsor, which gave DRWF fantastic exposure right at the entrance of the event and stand place alongside the Diabetes Village. The volume of healthcare professionals attending the event in its 2nd year, had increased significantly to more than 3000 across the two-day programme. We met with many existing contacts and were able to reach out to industry and healthcare professionals to promote the

charity's Patient Information resources and educational event programme. A good relationship has been forged with the event organisers who have subsequently gone on to regularly engage with us both in support of fundraising efforts and in making introductions, which they believe will support the charity in its work. Additionally, we participated in the Chaining of sessions within the workshop stream and had a small handful of speakers allocated across the conference programme. Professor Barnard, member of the DRWF Research Advisory Board and Director of Barnard Health Research Ltd., provided insight into the evaluation work that was conducted on the DRWF Wellness Event programme; DRWF Research Manager, Dr Eleanor Kennedy was invited to speak on Emerging Diabetes Technology; DRWF funded researcher Dr Shivani Misra, gave an update on her research into misdiagnosis of diabetes in ethnic groups.

Gifts in Kind

Gifts in Kind are non-cash donations made to the charity, such as medical supplies, which the charity is then able to redistribute to other organisations who may benefit, where these medicines may not otherwise have been available or are in short supply. In 2017, we received one donation of type 2 diabetes and related health medicines with a wholesale value of approximately £1,046,470 (\$1.307m). These medicines were gifted onwards to our programme partner, Dominican Republic Instituto Dominicana de Accion (IDAC) and subsequently enabled the treatment of diabetes and diabetic nephropathy in 1181 adults (485 aged 20-59 yrs and 696 aged 60+). The availability of these medicines enabled the continuation of treatment (90 days) which may otherwise not have been possible and provided for ongoing, follow-up treatment.

The administration and distribution costs of these medicines were approximately £12,279 (\$15,580) meaning that we were able to magnify the benefit of this cost, given the value of the original donation by 83.



A Few Kind Words...

"I believe what you are doing is going to save many lives now and for decades to come."

Michael Todd

"Two years ago I developed severe problems with my feet, which I did not know were connected with my diabetes. I learned this at the event."

Anonymous return on DWDS survey

"We find that the leaflets are great to use in our new diabetes pack and the patients find them useful."

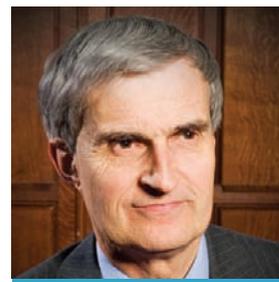
K Rigg - HCP

Research Advisory Board

Our Research Advisory Board comprises experts in a wide variety of research disciplines to ensure that all applications are assessed knowledgeably and fairly. As a member of the Association of Medical Research Charities we are committed to maintaining a rigorous peer review process for the assessment of research applications, for which the Advisory Board are responsible. This process ensures that only the highest quality research at the best institutions receives DRWF funding. When we are awarding a DRWF Fellowship, we are also intent on rewarding determined and committed individuals who have a proven track record in diabetes research and can display an intention to continue working in the field. It is our hope that a DRWF Fellowship can serve as a significant and fruitful step in the career of a bright, young and ambitious researcher.

Chairman - Professor David R Matthews, MA, DPhil, BM, BCh, FRCP

Professor of Diabetes Medicine, University of Oxford. Medical Tutor and Vice Principal at Harris Manchester College, Oxford. Emeritus founding chairman of the Oxford Centre for Diabetes, Endocrinology and Metabolism. David's interests include mathematical modelling of insulin resistance, homeostatic model assessment of beta-cell function and insulin resistance. He is the author of the HOMA model; has a long-standing interest in new therapeutic agents for type 2 diabetes, and was a co-investigator of the UKPDS. A founding trustee of the Oxford Health Alliance, he was the first Executive Director of the Global Alliance for Chronic Disease; a world-wide association of six research councils collaborating in the fight against Chronic Disease. He is Co-Director of the UK Diabetes Research Network; has over 230 publications and is on the editorial boards of several professional journals.



Dr Rob Andrews

Rob Andrews is an associate Professor of Diabetes and Endocrinology at the University of Exeter and an Honorary Consultant Physician at Musgrove Park Hospital Taunton.

At the University he leads a group that researches the role that exercise and diet can play in the prevention and management of Diabetes. Ongoing studies include the long term effects of diet and exercise interventions in patients with newly diagnosed Type 2 Diabetes (ACTID follow up); the role that sedentary time has in the metabolic characteristics of patients with Type 2 diabetes (STAMP 2); how exercise can affect beta cell function in Type 1 diabetes (EXTOD). He is also leading a project that aims to develop and pilot an education programme for patients with Type 1 Diabetes and health care professionals to guide insulin and carbohydrate adjustment for safe and effective exercise.

At Musgrove park hospital as well as doing regular Diabetes and Endocrine clinics he runs specialist adult, adolescent and paediatric sports clinics to give advice to sports men, women and children who have Type 1 diabetes.



Professor Kath Barnard

Health Psychologist / Visiting Professor, Bournemouth University.

Professor Katharine Barnard, Chartered Health Psychologist, specializes in the psychosocial impact and management of diabetes. She has a longstanding research interest in the psychosocial issues associated with diabetes and its management. Through this research, a greater understanding has been gained of the factors that contribute to therapy choices and quality of life; and the impact that diabetes and its' treatment has on both the individuals with the condition and their family members.

The effect of diabetes, both medically and psychologically in terms of everyday coping, psychosocial impact, functional health status and psychological burden, is a multifaceted and complex area and Professor Barnard's research to date has made significant advances in unravelling some of these complexities. Professor Barnard has published extensively, is often invited to speak both nationally and internationally and leads cutting edge postgraduate training.

Professor Barnard's currently leading on psychosocial aspects within several multi-centre RCTs evaluating diabetes technologies such as closed-loop, insulin pump therapy and bolus calculators. She is the PI of the INSPIRE study into psych aspects of artificial pancreas devices; the UK psychological lead on global diabetes attitudes wishes and needs research; Principal Investigator in a programme of research to minimise alcohol associated risks for young adults with T1DM; is engaged in ongoing research in co-morbid depression and diabetes; health technology assessment; and patient-professional communication to support enhanced self-management and motivation. Professor Barnard is a recent Chair of the Diabetes UK Annual Professional Conference, Expert Advisor to NICE, Associate Lecturer at a number of UK universities and sits on the editorial boards of several journals and funding bodies.



Professor Peter Jones

Peter Jones is Professor of Endocrine Biology in the Diabetes Research Group at the Guy's campus of King's College London. Peter obtained his PhD at the National Institute for Medical Research (London) studying peptide hormones in the central nervous system. He started working on beta-cell function in diabetes as a postdoctoral fellow at Queen Elizabeth College in 1984. He was awarded an R.D. Lawrence Fellowship by the British Diabetic Association, followed by a Medical Research Council Senior Research Fellowship, after which he took up an academic position as Lecturer in Physiology at King's. He was awarded the British Diabetic Association R.D. Lawrence Lecture for 1997 and the Diabetes UK Dorothy Hodgkin Lecture for 2015 in recognition of his work on beta-cell function. His research interests remain with the beta-cell, with current focus on cell-cell interactions within islets of Langerhans, strategies for improving islet transplantation therapy for Type 1 diabetes and novel therapeutic targets for Type 2 diabetes.



Dr. Ian Salt PhD

Senior Lecturer at the Institute of Cardiovascular & Medical Sciences, University of Glasgow
Ian graduated as a biochemist at the University of Bristol prior to gaining his PhD in beta-cell biochemistry from the University of Dundee in 1997. He held fellowships from the British Heart Foundation and Diabetes UK before taking up his current academic post at the University of Glasgow. Ian is currently a senior lecturer in the Institute of Cardiovascular and Medical Sciences at the University of Glasgow. His principal research interests are the molecular mechanisms that link diabetes, insulin resistance and the risk of developing cardiovascular disease.



Professor Anna Gloyn DPhil

Anna's research is focused on using naturally occurring mutations in humans as tools to identify critical regulatory pathways and insights into normal physiology. Her early post-doctoral research led to the identification a new genetic aetiology for permanent and transient neonatal diabetes due to KCNJ11 mutations and resulted in one of the first examples of the determination of the molecular genetic aetiology leading to improved treatment options for patients. Current research work focuses on the translation of association signals for T2 diabetes and glycaemic traits into molecular, cellular and physiological mechanisms and clinically useful tools. Anna is a member of several international consortia, including DIAGRAM (Diabetes Genetics Replication and Meta-analysis), MAGIC (Meta-analysis of Glucose and Insulin traits Consortium) and the Genetics of Type 2 Diabetes (GoT2D).



Professor Luigi Gnudi

Professor Luigi Gnudi of Diabetes & Metabolic Medicine, King's College London School of Medicine, Cardiovascular Division, Waterloo Campus, London, UK obtained his MD with Honours from the University of Parma (Italy) in 1988. He subsequently joined the residency programme in Diabetes and Endocrinology at the University of Padua Medical School - Italy (1989-1993). During 1992-1995 he worked as a postdoctoral fellow with Prof Barbara B Kahn at Beth Israel Hospital, Harvard Medical School in Boston. In 1999 he obtained a PhD in Endocrinological Sciences from the University of Milan and in 2005 he became a Fellow of both the Royal College of Physicians and the American Society of Nephrology.

In 1997 Luigi Gnudi was appointed Senior Lecturer in the Unit for Metabolic Medicine within the Cardiovascular Division of King's College London School of Medicine, and in 2011, was promoted to Professor of Diabetes & Metabolic Medicine. He has been Head of the Unit for Metabolic Medicine since 2010. He is an Honorary Consultant Physician in Diabetes, Endocrinology and Metabolic Medicine at Guy's and St. Thomas' Hospital NHS Foundation Trust in London.

He is an active researcher, clinician, and teacher with major research interests in the study of diabetic nephropathy and diabetic vascular complications in man. He has published more than 70 original papers, books and monographs and meeting proceedings on these topics.



Professor Angela Shore

Professor Angela Shore is the inaugural Vice-Dean Research for the University of Exeter Medical School, and was previously Interim Vice-Dean Research for the Peninsula College of Medicine and Dentistry since 2009. She is the Scientific Director of the NIHR Exeter Clinical Research Facility for Experimental Medicine and Associate Director for Experimental Medicine for the UKCRN diabetes research network.

Professor Shore graduated in Physiology from the University of Newcastle and was awarded her PhD for an investigation of the vascular mechanisms underlying fluid homeostasis in patients with Liver Disease. Following postdoctoral positions at the University of London where she expanded her research into the vascular aspects of hypertension, Professor Shore moved to the Postgraduate Medical School Exeter in 1987 to establish the clinical microvascular research unit funded by the Wellcome Trust. Currently Professor Shore's work which is funded by the British Heart Foundation, Diabetes UK, European Union IMI JU and NIHR investigates novel approaches to the identification of early vascular complications and patient stratification for cardiovascular risk.

She was appointed Professor of Cardiovascular Science in 2000.



Professor James Shaw

James Shaw is Professor of Regenerative Medicine for Diabetes at Newcastle University and Honorary Physician at the Newcastle Diabetes Centre and Freeman Hospital.

Following PhD completion as an MRC fellow with Kevin Docherty exploring gene and cell replacement therapy for diabetes, a Glaxo-Smith-Kline Senior Fellowship enabled him to move to Newcastle and join the world-acclaimed diabetes team there. In addition to setting up a translational research laboratory he has established a regional insulin pump service, is a member of the Newcastle pancreas transplant team and clinical lead for islet transplantation.

He is Chief Investigator for the multicentre Diabetes UK-funded HypoCOMPASS RCT comparing optimised insulin analogue with pump therapy and conventional with continuous glucose monitoring in type 1 diabetes complicated by impaired awareness of hypoglycaemia. He led the successful United Kingdom Islet Transplant Consortium bid for dedicated NHS funding of this intervention as an established clinical procedure in 2008. This has underpinned a further multicentre Diabetes UK grant to prospectively evaluate biomedical / psychosocial outcomes in all UK islet recipients; and most recently participation in an international RCT evaluating the potential of a novel anti-inflammatory agent to maximise engrafted islet mass post-transplantation.

His laboratory group is exploring mechanisms underlying loss of beta-cell mass and function in diabetes in addition to further innovations in islet transplantation. Potentially reversible beta-cell dedifferentiation as a common mechanism underlying beta-cell dysfunction in type 1, type 2 and cystic fibrosis-related diabetes in addition to post-transplantation is becoming a major focus, facilitated by recent Strategic Research Centre funding from the CF Trust. Progress has been considerably accelerated by inauguration of the Newcastle University Islet Isolation and Innovation Hub providing dedicated access to clinical grade research islet preparations.



Dr Mark Evans

Mark Evans is a University Lecturer in the Institute of Metabolic Science and Department of Medicine, University of Cambridge and an Honorary Consultant Physician in Medicine and diabetes at the Addenbrookes teaching hospital in Cambridge (Cambridge University Hospitals NHS FT).

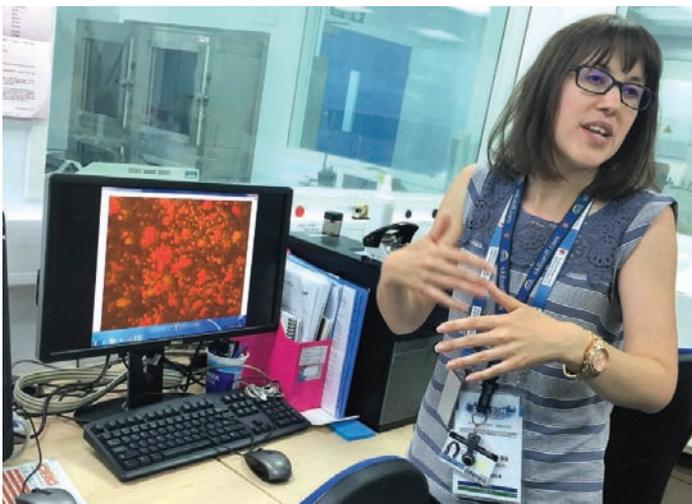
He qualified in Medicine at St Bartholomew's Hospital in 1988 and then subsequently worked and trained as a junior doctor at a number of hospitals in London and South East. He completed an MD at University of London and then spent 3 years at Yale University in USA (1999 to 2002) in the laboratory of Professor Robert Sherwin before returning to his current UK post in 2002.

His particular interests are in type 1 diabetes, structured education, devices and technology including insulin pumps, continuous glucose monitors and automated insulin delivery, hypoglycaemia and brain nutrient sensing.





IPITA 2017
INTERNATIONAL PANCREAS AND ISLET
TRANSPLANT ASSOCIATION
16th International Congress
20-23 June Oxford, UK



Research Funding Programme



We provide research grants to researchers whose work we consider to offer the best hope and most expedient path to improved understanding of T1 and T2 diabetes; new and improved treatments and management strategies and ultimately a cure. Awards are offered as a 3-year Clinical and Non-Clinical Fellowship and 1 year Pump Priming project awards. Institutional awards are available on a multi-year basis. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is provided on a 2-3 year basis dependent upon results.

We are a member of the Association of Medical Research Charities (AMRC) and as such support the use of a rigorous peer review procedure in the allocation of our research funding. Our Research Advisory Board (RAB) is a multi-disciplinary panel of clinicians and scientists who assess applications for funding. Our processes are audited every 5 years by AMRC, the last time being 2015, when once again, we successfully passed this independent evaluation.

"The commitment to strong peer review practice demonstrates the high standards of quality and scientific rigour adopted by DRWF both as an organisation and reflected in the dedication and commitment of every single team member."

Professor Katharine Barnard, member of the DRWF Research Advisory Board

Islet Cell Research & Transplant

DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and the US. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility. In 2015, we secured funding from a major donor via New Philanthropy Capital to cover 2 of these contracts, the Laboratory Manager and the Post-Doc researcher for 3 years (2018) and 2 years (2017) respectively, for a specific proposal *'Improving human islet provision for clinical and research use within the UK by optimisation of human islet yield, islet function and islet survival'*.

This project continues to deliver world-leading outcomes in terms of post-transplant resolution of life-threatening hypoglycaemia, and in terms of research productivity and translational impact. The provision of high quality human islets for clinical and research uses is a unique and invaluable resource and has resulted in numerous high impact publications and novel discoveries that will impact patients with type 1 and type 2 diabetes across the world.

The Oxford Islet Transplant team continues to be highly regarded in the islet transplant community, and DRWF funding has greatly enhanced this. They have been asked to help establish new islet isolation centres in several countries, including Mexico and India. Oxford had the privilege of hosting the very successful International Pancreas and Islet Transplantation Association (IPITA) International Congress in June 2017, the first time this honour has been bestowed on a UK centre. DRWF was a key partner in this Congress. Professor Paul Johnson continues as Chair of the UK Islet Transplant Steering Group and continues to be a key opinion leader in the field. He is also active in diabetes patient forums.



The team publishes their research findings regularly and present their work at the major diabetes and transplantation meetings. Key achievements at 2017 year end for this project:

- Provision of human islets for 8-10 clinical islet transplants in the UK per year – Target: 8-10 clinical islet TX pa Actual: 10 islet transplants were performed using islets isolated in Oxford (Nov 16 – Oct 17). In addition, 4 further transplants were performed in Oxford using shipped-in islets
- Islet provision resulting in resolution of hypoglycaemia unawareness in >90% of patients following clinical islet transplant – Target: >90% hypo resolution Actual: 8/9 patients having hypo awareness resolution post-transplant in Oxford, 5 patients have achieved this using Oxford islets in other centres
- Islet yields of >250,000 islet equivalents from at least 1 in 2 pancreases processed (comparable with international best outcomes) – Target: Islet yields >250,000 and >200,000 Actual: 14/42 have produced a yield of >250,000. As we now have transplant islet yields of 200,000, we have produced >200,000 yield in 18/42 preparations
- Distribution of 25 human islet preps per year for research across the UK – Target: 25 human islet preps pa for research. Actual: 30 human islet preps distributed for research in last 12 months

Novel research continues into optimising islet culture, including co-culture with mesenchymal stem cell media, development of physiological islet scaffolds, and design of a novel islet culture.

The Oxford team is working to address the current challenges presented in terms of availability of organs for transplant; improving islet isolation techniques in order to increase the number of insulin producing cells isolated from donor organs to improve function and survival of cells post-transplant.

Whilst there are clearly many challenges to the wider availability of human-to-human islet cell transplants which are being addressed in the UK and around the world, we have continued to fund work based in the US via an unrestricted grant to DRWF Inc. This grant is supporting work which is spear-headed by Professor Bernard Hering, of the Schultz Diabetes Institute Minnesota, a leading expert in the xeno-transplant field, who seeks to find an alternative, sustainable supply of islet cells for human transplant. This work has gained much ground since its original success was published in Nature magazine in 2006 and edges closer to FDA approval of clinical trial.

The islets for these studies are provided by the non-profit organisation Spring Point Project (SPP). Spring Point's primary aim has been to be the pre-eminent source of medical grade porcine tissue utilised to cure diseases—with a primary commitment to cure diabetes.

To this end, SPP operates the Diabetes Research and Wellness Islet Resource Facility, which was made possible due to substantial financial support of the DRWF International Network of organisations. The SPP team has unique experience producing "medical grade" pigs and viable pig materials under the current Good Manufacturing Practices (cGMP) required by the U.S. Food and Drug Administration (FDA). The "medical grade" tissues from Spring Point's pigs are a key resource for the development of suitable, viable materials for a variety of medical applications including islet cell replacement therapies to reverse diabetes in the clinic.

Working with industry and academic partners the SPP team has now established the capability to produce isolated islet cells with the consistency and scale required to enable clinical trials. The team is currently producing millions of islets a month which are being used for research in the US and around the world. In 2017, the SPP team produced over 32 million islets. Research and development on final islet replacement products remains to be done before clinical trials, but with the critical supply of islets in place, they are now on the fast track to begin.

In 2017, SPP started the renovation of part of the Diabetes Research and Wellness Islet Resource Facility to establish an on-site cellular manufacturing facility. This new manufacturing space, complete with its state of the art cleanrooms and controls, will be used to produce the cGMP quality islet replacement products to be used in future clinical studies. SPP recently discussed these plans with the FDA resulting in confidence that, once established, the islets produced in the cellular manufacturing facility will indeed be readily acceptable for clinical studies.

DRWF funded Clinical Fellow (2012) wins award

Date: 07 December 2017

A diabetes researcher has been awarded European Young Researcher of the Year in recognition for her diabetes study into how type 1, type 2 diabetes and genetic forms vary across different ethnics groups.

Dr Shivani Misra received the award at the International Diabetes Federation (IDF) 2017 Congress, held in Abu Dhabi, UAE, on 4-8 December 2017. The MY DIABETES study was funded by the Diabetes Research & Wellness Foundation and supported by the National Institute for Health Research.



NHS
National Institute for
Health Research

2017 Research Grant Awards

Pump Priming Awards – A total of 33 applications were received with 6 awards being made totalling **£115,083**



Institution: University of Exeter Medical School

Recipient: Dr Elisa De Franco

Project: New insights into development and function of human beta-cells by gene discovery in early-onset diabetes

Amount: £20,000



Summary: We need to understand more about how the insulin-producing beta-cell works. One good way to do this is to study patients who get diabetes because they do not make insulin as a result of a single spelling mistake in one word of their whole library of books of genetic information (monogenic diabetes). These patients are likely to develop diabetes when young.

We will look for the genetic cause of diabetes in patients diagnosed between 6-12 months using two recently available tools:

- 1) a test which allows us to select patients likely to have monogenic diabetes, this is called a genetic risk score;
- 2) whole-genome-sequencing which allows us to analyse the entire human DNA to identify the critical spelling mistakes in the genetic information.

Using these tools we will identify the likely cause of diabetes in these children and confirm it in other patients. As we have already excluded the known causes of monogenic diabetes, this will be a new finding which will help us to understand the beta-cell better.

Institution: King's College London

Recipient: Dr James Bowe

Project: A role for hypothalamic hormones in the islet adaptation to pregnancy

Amount: £17,782



Summary: During healthy pregnancy insulin sensitivity in the mother decreases and the insulin-secreting beta-cells in the islets of Langerhans release more insulin and increase in number to maintain normal blood glucose levels. Gestational diabetes mellitus (GDM) is a form of diabetes that occurs specifically during pregnancy and occurs when the maternal islets are unable to sufficiently compensate for the increased insulin resistance, though the mechanisms involved are currently poorly understood.

Corticotropin releasing hormone (CRH) and growth hormone releasing hormone (GHRH) are two hormones that are primarily released from the hypothalamic area of the brain. They are responsible for controlling stress responses and growth respectively. Both hormones also have beneficial effects on the beta-cells, though the physiological reason for this is unknown. Levels of CRH and GHRH in the blood are low under most circumstances, but increase greatly during pregnancy due to release from the placenta. Thus, this project will investigate whether CRH and/or GHRH regulate beta-cell adaptation to pregnancy, and whether insufficient CRH or GHRH is linked to GDM.

Institution: King's College London

Recipient: Dr Paul Caton

Project: Increasing beta-cell mass in type 2 diabetes: Does reduced NAD supply result in loss of beta-cell identity in T2D?

Amount: £20,000



Summary: Type 2 diabetes develops in part due to low levels of insulin release from pancreas. Previous work has shown that this can happen in type 2 diabetes because the insulin producing beta-cells change into different cell types, resulting in lower insulin secretion. This means that if we can learn how to stop beta-cells changing into other cells, or convert changed cells back to beta-cells, this could lead to the development of new drugs to treat or prevent type 2 diabetes.

This study will build on our previous work to investigate whether a particular factor, called NAD, plays an important role in stopping insulin producing cells converting into other cells. If successful, new approaches which boost levels of NAD could be used as drugs to treat or prevent type 2 diabetes.

Institution: University of Exeter Medical School

Recipient: Dr Kashyap Patel

Project: Defining heterogeneity of clinically diagnosed adult-onset type 1 diabetes using genetic and islet autoantibodies

Amount: £18,581



Summary: Half of all type 1 diabetes develops in adulthood. Half of these patients are misdiagnosed and therefore potentially treated incorrectly. This is due to both lack of tools to confirm type 1 diabetes at diagnosis and overlapping features with other subtypes of diabetes (type 2 diabetes and monogenic diabetes, a rare familial diabetes due to mutation in a single gene).

This study will analyse whether the combination of currently used blood tests (islet autoantibodies) and a new DNA-based tool (type 1 diabetes genetic risk score, T1D-GRS) can reduce misdiagnosis. We will measure the efficacy of these tools in 700 people with clinically diagnosed adult-onset type 1 diabetes (age at diagnosis 20-80 years). Genetic tests will be used to identify misdiagnosed monogenic diabetes.

This study will provide a framework for the accurate diagnosis of adult-onset T1D in routine clinical practice. The study will also be the first to provide an estimate of misdiagnosed monogenic diabetes, resulting in patients getting the correct treatment and better care.

Institution: Cardiff University

Recipient: Dr Danijela Tatovic

Project: Bringing immunotherapy for type 1 diabetes into the clinic: new windows into the immune response

Amount: £19,550



Summary: Type 1 diabetes (T1D) is caused when cells of the immune system called T-cells attack and destroy insulin producing cells in the pancreas. Monitoring of these pivotal immune cells is currently highly challenging as we cannot see what is happening in the pancreas. I have developed ways to monitor T-cell activity by studying organs called lymph nodes that act as 'stations' on the transport network that T-cells use to travel around the body. These lymph nodes provide a window into what is happening in the pancreas during disease and allow monitoring of events during clinical trials. The technique I developed involves the use of a very fine needle that is guided using

ultrasound. I now wish to use it to monitor the T-cells responsible for killing to insulin-producing cells using state-of-the-art technologies developed by my collaborators who are world leading experts in T-cells during T1D. This pump priming funding will allow me to establish important new collaborations aimed at monitoring T-cells during immunotherapy trials.

Institution: University of Lincoln

Recipient: Dr Claire Hills

Project: Cx43 mediated regulation of the inflammasome, a therapeutic target in diabetic nephropathy

Amount: £19,170



Summary: Cells lining the surface of the small tubes of the kidney work together to ensure that appropriate function is maintained. However, in the diabetic kidney, these cells become bathed in high levels of sugar and associated stress molecules that affect kidney cell behavior. We have previously demonstrated that high sugar reduces stickiness between kidney cells, an event that impairs the way in which cells talk to each other, and ultimately affects their ability to work efficiently. More importantly, our preliminary studies suggest, that in kidneys of people with diabetic nephropathy, there are altered levels of proteins responsible for transferring information between

both cells and their surrounding environment. In the absence of appropriate data sharing, cells respond inappropriately to incoming danger changes and ultimately kidney function is impaired. Our proposal aims to understand the mechanisms which link inappropriate cell conversation to the damage that occurs in the diabetic kidney. Importantly, in collaboration with our clinical colleagues, we will demonstrate the ability of a new therapeutic to negate these effects.

Income: Expenditure Profile 2017

The information presented here is not the full statutory accounts but a summary of the information which appears in the full accounts for financial year ending 2017. This summary information may not contain sufficient information to allow for a full understanding of the financial affairs of the Diabetes Research & Wellness Foundation (DRWF). The full statutory accounts can be supplied on request or accessed via the Charity Commission website by entering the charity registration number 1070607 in the search box.

Income

Expenditure



<div style="background-color: #0072bc; color: white; padding: 5px; width: 50px; margin: 0 auto;">60.37%</div> <p>Donations & Legacies</p>	<div style="background-color: #e67e22; color: white; padding: 5px; width: 50px; margin: 0 auto;">38.88%</div> <p>Charitable Activities</p>	<div style="background-color: #7ed321; color: white; padding: 5px; width: 50px; margin: 0 auto;">0.75%</div> <p>Other</p>
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<div style="background-color: #0072bc; color: white; padding: 5px; width: 50px; margin: 0 auto;">91.24%</div> <p>Charitable Activities (Awareness, Support, Grants, Gifts in Kind)</p>	<div style="background-color: #e67e22; color: white; padding: 5px; width: 50px; margin: 0 auto;">8.76%</div> <p>Raising Funds</p>
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Highlights from 2017



Becki Oaten- two marathons

Becki Oaten raised more than **£1885** by completing two marathons in two weeks! She took part in the Brighton Marathon and just a fortnight later successfully completed the London Marathon.

In the run-up to her marathon challenge Becki got her fundraising efforts off to a great start by holding a curry and quiz night, raising more than **£510** for DRWF, in addition to arranging further fundraising activities including a dancing evening and cake sales.

Becki added: *"I am very thankful to the charity for giving me their only marathon place for London and honoured to raise money for this charity, which is close to my heart due to my nephew having type 1 diabetes after a long illness."*



Gavin Marsh

Gavin has raised **£496.25** for DRWF by taking part in the Stafford 10k and and Chasewater Christmas Pudding Dash 10k. Just before he turned 40, Gavin said *"I realised I really had to do something about my sugar addiction, as diabetes can become more of a problem from that age."* He was inspired by the blood sugar diet which enabled him to take control of his diet, lose weight and start running.



Jon Elburn - Prudential London Surrey Ride 100

Jon represented DRWF and cycled the 100k route originally used by the London 2012 Olympics, raising **£705**.

Jon said: *"Not only did taking part in this event mean that I got to help raise money for such a good cause, it also gave me a reason to train and stay healthy, which is all part of the message DRWF are promoting so I am proud to be supporting the excellent work that they're doing."*

"Two of my grandparents had diabetes and the condition had a big impact on my grandfather's life, so anything that can be done to help find a cure or to help improve the lives of those managing the condition has to be a good thing."

"Type 2 diabetes is a growing problem, both in the UK and the developing world, but there are several simple things you can do to help prevent it. One of them is exercise - so cycling is a great way to raise money and awareness at the same time."

Highlights from 2017



Goodwood Bucket Collection

DRWF held a very successful bucket collection at Goodwood Racecourse and raised over **£2000**. A group of volunteers and DRWF staff members manned one of the exits of the racecourse as well as the car park area with our red buckets. The punters, who were extremely generous, happily engaged with the bucket collectors and made it a thoroughly enjoyable experience.



Joanne Wynne - Skydiver

Joanne has had T1 diabetes for 38 years and was recently diagnosed with diabetic neuropathy (nerve damage) to her feet, hands and small stomach. Joanne said, *"I have now decided, whilst I still can, to take the plunge and face my fear of heights to do a charity sky dive on behalf of DRWF."* Joanne also said she wanted to give something back as she has benefitted from the care of many Health Care professionals over the years. She went on to raise **£1888** for the charity.



Hayling Billy 5 Run

DRWF as the chosen charity received **£2000** for the 20th Hayling Billy 5 run organised by Victory Athletics Club. The run is based along the route of the old Hayling Billy train line that ran from 1865-1963 to connect Hayling Island to the mainland in Havant, Hampshire. More than 350 runners took part and were presented with a medal featuring an image of the old Hayling Billy steam engine.

Highlights from 2017



Miss AV Martin - Fundraiser

Miss Ann Martin runs a charity stand in Formby, Lancashire to support DRWF in memory of her late sister, Mary Agnes. Mary Agnes who was diagnosed with T1 at the age of 27, had to give up her beloved infant school teaching because of her condition. She had what was known as "brittle diabetes," which meant she never recognised the symptoms of going into a "hypo" (hypoglycaemic episode, or low blood sugar levels). Miss Martin has raised thousands of pounds for DRWF by selling items donated from different parts of the country. She has been a consistent fundraiser and she says, "If I can help people with diabetes with my fundraising then so be it."



Livia Diggle - Great Eastern Run

Livia, who had never run a marathon or raised money for charity before, chose to support DRWF whilst taking part in the Great Eastern Run. Livia raised a total of **£1410**, of which **£705** was raised by herself and the amount was then matched by her employers.

Livia's father was diagnosed with T2 twenty years ago and she has seen his health deteriorate rapidly in the last few years as a result of his condition. She said

"I've chosen a 'hands on' Diabetes charity in the UK that specialises in research into cures as well as raising awareness."



Zumbathon

Clare Gosling, an enthusiastic Zumba instructor who also has T1 diabetes, hosted a two hour charity "Zumbathon". (Zumba is based on the Colombian dance and exercise programme to energetic music.) More than 65 people, many wearing face paint, took part in the event led by four instructors and raised more than **£1,000** on the day. To add to this amount, one of our lifetime members, Lynwood Newman, held a mini Zumbathon near his home in Weymouth and also raised **£160**. However, thanks to Gift Aid and match funding of donations through The Big Give, the grand total raised was **£2,324.25**.



We rely on individual donations to enable our work to continue. We know that researchers are getting ever closer to finding a viable cure but now, more than ever, we need to inject time and money to accomplish the break-through. We hope that the lives of millions of people in the future will be dramatically improved thanks to our work today - and they will have YOU, the supporters of DRWF to thank!

Making a donation

Your generosity can help the dreams of many become a reality. Please consider making a donation today either online or by cheque or credit card by calling **02392 637808**, or by becoming a 'Partner for the Cure' with a regular direct debit contribution.

Please take the time to consider how best you would like to show your support - perhaps you would like to consider the longer-term option of 'leaving a legacy of hope'.

However you choose to contribute, you should be assured that your gift will be put to the best use and that your philanthropy is hugely appreciated, not just by DRWF, but by those people that we aim to ensure are *'Staying well until a cure is found...'*



Volunteering

We need volunteers to join the DRWF family and support our small team of full time staff. The roles are varied and range from; helping us in the office to keep up to date with our administration, helping us to run our national Diabetes Wellness Days around the country, to representing the charity and manning our stall at the many smaller events we attend.

The more volunteers we have to call on the more events we can support and get our message out there! Whether you have a few hours you can spare occasionally or you would like to be more involved as a volunteer representative of the charity we would be delighted to hear from you.

If you really want to float our boat contact us about taking part in our annual dragonboat race, or for other ideas about community fundraising contact **karen.scott@drwf.org.uk** or visit the website!

If you are interested, please do contact us on **023 92 637808** or email **steve.lille@drwf.org.uk**

How to Donate

We don't receive any government funding and rely almost entirely on voluntary income. If you would like to make a donation to support our work you can do so in a variety of ways.

- **Cheque or credit card**
Payable to DRWF and sent to DRWF Building 6000, Langstone Technology Park, Havant PO9 1SA or call **023 92 636136** to give over the phone.
- **Direct debit**
Become a 'Partner for the Cure' by setting up a regular monthly/quarterly/annual donation direct from your bank account. Please call for further details on 023 92 636136 or set up a 'regular donation' **www.drwf.org.uk/donate**
- **Online**
You can also donate online via the DRWF payment gateway - by following the on-screen instructions you can make a secure one-off donation. **www.drwf.org.uk/donate**
- **Donate through Charities Aid Foundation (CAF) or Charity Choice**
Please visit the Charity Choice website **www.charitychoice.co.uk/charities** for further details.

However you choose to support our work, we are extremely grateful. Every penny really does count!

Thank You

2017 Charitable Trusts Received

We are very grateful to the charitable trusts who have so generously invested in the Diabetes Research & Wellness Foundation, facilitating the expansion and continued development of our education and research programmes.

The Osberton Trust

The Thomas C Maconochie Trust

The Tonge Family Trust Fund

The Joan Wyatt Charitable Trust

W Scott Charity Account (via Foundation Scotland)



Legacies received in 2017

Legacies are vital to our charity as they provide the bedrock financial support we rely upon to look ahead and progress effectively. We are grateful to those who made the decision to include a **gift of hope** in their will. This support will help DRWF continue to help people with diabetes and finance ground breaking diabetes research.

Freda Esme Curtis

Sheila Mills

Joan Aileen Thistle

Edith Margaret Telfer

Kathleen Jones

Margaret Elizabeth Bishop

Daphne Gwendoline Hanson

Derick Hall

Martyn Stanley Smith

Violet Driscoll

Valerie Abel

Dennis Clifford Hayes

Kenward John Rockett

Brian Rundle

David Verdun Hopkins

Richard Aubrey Kay

Joan McAlister

Elfriede Lisbeth Wiltschek

Dorothy Clephane

Theresia Maria Tomlinson

Charles Kenneth Trebilcock

Sybil Beatrice Steel

Sheila Joan Whitehead

Margaret Jean Sowter

Muriel Mabel Bavin

June Anne Victoria Harris

Dorothy Evelyn Hallsworth

Philip Arthur Howitt

Marjorie Sarah Lee

Nina Cruickshank

G Colman

Joyce Irene Cross

John Fitz Emmerson Marks

Dennis Clifford Hayes

Mavis Phillips

Ruth Elizabeth Russ

Lilian Letitia Frederica Buchele

Maria Johnson

Andrew Middlemiss

Jack Timms

Gifts given in memory of a loved one

Donations given in memoriam are a valuable and positive way of celebrating a life; a distinctive way to remember another whilst also thinking of a cause close to their heart. Money raised will help fund vital research into diabetes and provide essential support to those living with diabetes daily. In 2017, those who have supported us in the past were remembered in this special way.

Pitratulya	Roydon Fisk	Sheila Mills
Lynda and Carol	William George Fittock	Darren Moss
Jock	Neil Malcolm Ross Forbes	Derek Neale
Aiden	Mavis Foskett	Harry O'Neill
Lori Anastasiu	Irean Gordon	Martin Osborne
Rosalind Bethal	Derek Gosheron	Barbara Partt
Elizabeth Bowden	Clifford (Ted) Grady	Caryl Esta Paterson
Gwendoline Beatrice Bright	Dorothy J Heathcote	Joan Pinney
John Bromley	David John Henderson	Robin Prescott
Anne Bromwich	Caroline High	Rona Catherine Sims
Lynne Buchan	Anne Holden	Joseph Smetter
Julian Buck	Tracey Hopkinson	Michael Teece
Carol Butters	June Keel	G Telford
Gerald Campbell	Edna Lambert	E R Tite
Margaret Clarke	Barrie Lawrence	Derek Keith Unwin
John Patrick Collinge	Mary Lowe	Betty Veitch
Mary Coyne	Mary Agnes Martin	Rosemary Whinney
Victor Damsell	Irene McAloon	Michael Winter
Mr Dunford	Janet Mary Mileham	

Our work is made possible only through our supporters' commitment and generosity for which we say a heartfelt **THANK YOU!**

Plans for future periods



We are ever mindful of the many changes which could potentially impact on our current fundraising methods. We acknowledge the importance of exploring all avenues of income to support our activities and are looking at ways in which to develop our current major donor and legacy campaigns; increase income via grants and trust applications and seek out possible corporate relationships. Our small community fundraising programme is clearly growing with higher income seen from these external activities during the year. There are a number of new methods of approach that we will test in 2018, accepting that these will be more risky as they are uncharted waters for us but will seek professional support where viable to support these efforts.

Brand awareness for DRWF has grown significantly and our reach of a wider and younger audience, particularly via social media channels, has definitely increased. Whilst the majority of our audience has for some time been the more mature person with type 2 diabetes, we are now seeing increasing interest in our information and educational events programme from younger people and parents of children with type 1 diabetes. Winning the Quality in Care Diabetes award for 'empowering people with diabetes in self-management' clearly boosted this profile in 2017 and we hope to maximise on this in 2018.

Keeping our beneficiaries at the heart of all we do, we will endeavour to involve them in the diversification of our activities to ensure that we are aligned in expectation of what is appropriate.

It is ever more apparent that being able to demonstrate the value that our support activities have for beneficiaries, is crucial. The impact evaluation that was concluded on the Diabetes Wellness Event programme in 2017 highlighted this. To that end, Barnard Health Research has been secured to conduct a further evaluation on the provision of information via the DRWF Information Leaflet Series in 2018.

We have been working closely with groups within the International Diabetes Wellness Network, particularly in Sweden and Finland, for the last year or two to develop our network of diabetes and related health experts in support of our peer review processes. This has proven very successful and has given us much wider access to experts for external review processes for all groups. We will continue to share information and expertise in this way going forward as it is a cost effective way of sharing resources with a common goal in mind. With the incorporation of a further group in Norway, our collaborative approach to research funding in Europe and Scandinavia continues to grow.

2018 sees us enter the charity's 20th anniversary year and it would seem fitting that this year should be a spring board for further positive change for DRWF.



Celebrating
20 Years
1998-2018

Through our awareness raising, information provision and educational support programmes, we enable people with Type 1 and Type 2 diabetes to learn more about their condition. We provide the tools to motivate, empower and engage people to take a positive approach to their self-care. Through supported self-management they can reduce the risk of associated complications, improve quality of life and control their diabetes effectively.

Don't let diabetes control you!

We fund some of the best and brightest diabetes researchers in the UK and around the world. We support Fellowships, Open Funding Projects, Institutional grants and Studentships. We fund peer-reviewed work that we believe will help us to understand the causes; find new treatments; provide insight into effective therapies and management strategies and ultimately, find a cure for diabetes.

You help us to achieve these objectives -

THANK YOU!

to find out more...

Diabetes Research & Wellness Foundation,
Building 6000, Langstone Technology Park,
Havant PO9 1SA



www.drwf.org.uk

Registered Charity in England & Wales,
Registration no: 1070607
Company No 03496304
Company Limited by Guarantee

Statistics/ Figures stated correct at FYE 2017

Staying well until
a cure is found



Diabetes Research &
Wellness Foundation