# **Re-thinking type 2 diabetes** in the workplace

Type 2 Diabetes is a global challenge and the number of Canadians living with diabetes is expected to rise over the next decade.<sup>1</sup>

## **Uncontrolled Type 2 Diabetes can lead to complications**

**Uncontrolled diabetes** leads to **increased risk** of developing diabetes-related complications.<sup>3</sup>

Over **40%** of **Canadians** living with Type 2 Diabetes are **not achieving** recommended glycemic targets.<sup>4</sup>



- 30% of strokes

**40%** of heart attacks

**50%** of kidney failure requiring dialysis

**70%** of all non-traumatic lower limb amputations

#### **Cost of uncontrolled Type 2 Diabetes and complications**



Employees with Type 2 Diabetes cost employers about \$1500 annually<sup>5</sup>

**Complications of Type** 2 Diabetes include many top drivers of workplace disability claims, including cardiovascular disease<sup>6</sup> and depression<sup>7</sup>

Employees with Type 2 Diabetes are absent 2-10 more days than those without diabetes7

Disability leaves for people living with diabetes are ~15% longer<sup>5</sup>

Costs of absence from work are two-fold higher for people with diabetesrelated complications<sup>6</sup>

### Benefits of new medications for treatment of diabetes

Some diabetes therapies, such as GLP-1RAs, not only improve blood sugar levels but may also reduce complications to help employees remain productive and healthy, allowing them to focus on work. Benefits include:





Robust reduction in blood Low risk of hypoglycemia sugar<sup>8</sup> which may lead to reduced risk of complications

with limited need for testing<sup>9</sup>



loss<sup>10</sup>

Cardiovascular benefits<sup>11,12</sup>

# What should employers do?



Ensure your benefit plans provide access to innovative medicines for diabetes



**Enable employees to** get support from their healthcare team

For more information, please contact Novo Nordisk Canada Inc. at NNCICustomerCare@novonordisk.com

Abbreviations: GLP-1RA, glucagon-like peptide-1 receptor agonist. 1. Diabetes Canada. 2019. Available at: https://www.diabetes.ca/media-room/press-releases/one-in-three-canadians-is-living-with-diabetes-or-prediabetes,-yet-knowledge-of-risk-and-complicatio. Accessed October 221; 2. Diabetes Canada. Backgrounder: Diabetes in Canada. 2021. Available at: https://www.diabetes.car/DiabetesCanada/Website/media/Advocacy-and-Policy/Backgrounder/2021\_Backgrounder\_Canada\_English\_FINAL\_ MAR.pdf. Accessed on October 11, 2021; 3. IDF Diabetes Atals (9th edition). International Diabetes Federation. 2019. https://diabetesatlas.org/en/resources/. Accessed 12 November 2021; 4. Coons MJ, Open Diab Res Care, 2017;set00316, doi:10.1136/ bmjdrc-2016-000316. 5. Diabetes Canada. Diabetes Federation. 2019. https://diabetesatlas.org/en/resources/. Accessed 12 November 2021; 4. Coons MJ, Open Diab Res Care, 2017;set00316, doi:10.1136/ bmjdrc-2016-000316. 5. Diabetes Canada. Diabetes Federation. 2019. https://diabetesatlas.org/en/resources/. Accessed 12 November 2021; 4. Coons MJ, Open Diab Res Care, 2017;set00316, doi:10.1136/ bmjdrc-2016-000316. 5. Diabetes Canada. Diabetes Federation. 2019. https://diabetesatlas.org/en/resources/. Accessed 12 November 2021; 4. Roy Open Diab Advocacy-and-Policy/Diabetes-360-Recommendations.pdf. Accessed on October 11, 2021; 6. Andersson E, et al. Diabetologia. 2020; 63:2582-2594; 7. Breton MC et al. Diabetes Care. 2013;36(3):740-749; 8. Nauck M et al. Diabetes Care 2016;39:1501-1509; 9. Hinnen, D. Diabetes Spectr. 2017;30(3):202-210; 10. Shah, M et al. Rev Endocr Metab Disord. 2014;15(3):181-187; 11. Iorga RA et al. Exp Ther Med. 2020(3):2396-2400; 12. Giugliano D, et al. Cardiovascular Diabetes. 2021; 20:189