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The Hypo-RESOLVE Project: Reducing the Burden of Hypoglycaemia -Implications for Practice

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Short biography

I am a medical specialist and professor of Medicine/diabetology at the Maastricht university medical centre and at the Radboud university medical centre, both in the Netherlands. My research focuses on clinical diabetology with a particular interest in iatrogenic hypoglycemia and impaired awareness of hypoglycemia and its relation to adverse clinical outcomes in people with type 1 and (insulin-requiring) type 2 diabetes. I am coordinator of the Hypo-RESOLVE research consortium, which is committed to further our understanding of hypoglycaemia. I am also associate editor for *Diabetologia* and secretary for the *International Hypoglycemia Study Group*, an EASD study group.

Summary of the address

This year, we celebrate 100 years of insulin therapy for people with diabetes. However, although therapeutic insulin has been and still is lifesaving for many people with diabetes, it has a 'darker side', which is hypoglycaemia. There has been little change in the day-to-day, real-world burden of iatrogenic hypoglycaemia in people with diabetes despite numerous advances in insulin design and delivery, glucose monitoring techniques and the level of (structured) education. Hypoglycaemia remains a major barrier to achieving optimal glucose control, reduces quality of life, and is associated with increased risks of cardiovascular events, cognitive decline and death. Many issues regarding hypoglycaemia are still to be resolved, including the mechanism(s) underlying its potential cardiovascular consequences, the impact of hypoglycaemia and its fear on the well-being of people with diabetes and their families, the health-economic consequences of hypoglycaemia, and the clinical and psychological impact of hypoglycaemia detected by continuous glucose monitoring systems. The Hypoglycaemia REdefining SOLutions for better liVEs (Hypo-RESOLVE) project, which started in 2018, will address these issues using a comprehensive multilevel approach. The outcomes of Hypo-RESOLVE will inform the wider diabetes community, including people with diabetes, healthcare professionals, and researchers, and will provide the evidence needed to solidify and/or refine the current 3-level classification of hypoglycaemia, as proposed by the International Hypoglycaemia Study Group in 2017. As such, Hypo-RESOLVE will significantly advance our understanding of hypoglycaemia in diabetes, so as to alleviate its burden and improve the lives of people with diabetes.