

The Voice of the Editor-in-Chief



Dear Colleagues,

So expected summer holidays are now inevitably coming to an end. Returning to work means new challenges and permanent searching for optimal forms of diagnostics and treatment of diabetes aimed first of all at the reduction of vascular complications of diabetes and, as a consequence, improved quality of life of the patients. Diabetic patients are hospitalized 3-fold more frequently compared with people without carbohydrate metabolism disturbances and the risk of mortality is 3–4-fold higher than in remaining population. Chronic hyperglycaemia seems to be a key factor leading to the development and progression of vascular complications of diabetes, besides the impact of genetic predisposition and broadly defined environmental factors such as poor diet, low physical activity and obesity. In type 1 diabetes hyperglycaemia results from absolute insulin deficiency, whereas in type 2 diabetes it is a consequence of a number of processes leading to decreased peripheral tissue sensitivity to insulin (mainly muscles and adipose tissue) i.e. insulin resistance and/or dysfunction of pancreatic beta cells causing impaired insulin secretion. Available studies show close association between severity

and duration of blood glucose elevation and the risk of chronic vascular complications of diabetes. These associations have been proven both in type 1 and type 2 diabetes. Despite recent advances in medicine, introduction of new hypoglycaemic drugs and the fact that more than 3.500 years have passed since the earliest known record of diabetes in Egyptian papyrus dated back to around 1550 B.C., the development of late complications of diabetes, which significantly deteriorate patients' quality of life, still remains the most important problem in contemporary diabetology and diabetes itself remains an incurable disease.

A new issue of *Clinical Diabetology* discusses these topics, both the aspect of vascular complications and available diagnostics and treatment. I hope that this issue of our Journal will support our readers in everyday practice and help them in making clinical decisions. It should be remembered that medicine still remains an art that frequently does not know easy ways and completely anticipated solutions and that the management of diabetes, like the treatment of other human diseases, should be related to maximum benefits for patients and lead to increase in their quality of life.

Editor-in-Chief

A handwritten signature in black ink, appearing to read 'J. Gumprecht', written in a cursive style.

Prof. Janusz Gumprecht

