

## The Voice of the Editor-in-Chief



### Dear Colleagues,

Traditionally, new clinical guidelines of Diabetes Poland are issued at the beginning of the year. The current guidelines of our Society, similarly to those developed by other Societies, take into account significant changes in the philosophy of treatment of type 2 diabetes and individualization of therapy that goes beyond the glucocentric approach. The key issue determining the choice of an antidiabetic drug has become whether the patient is suffering from cardiovascular or kidney disease or not. The preferred drug for treatment intensification (add-on to metformin) in patients with these diseases should be a GLP-1 analogue or an SGLT2 inhibitor, as these drugs provide many benefits in the field of cardiovascular and kidney protection, in addition to reducing blood glucose *per se*.

I would also like to draw your attention to the topics discussed in this issue of "Clinical Diabetology". Although more than 3,500 years have passed since the first description of the symptoms of diabetes in the Egyptian papyrus dated to around 1550 BC, diabetes is still an incurable disease and insulin therapy is the most effective method of decreasing blood glucose. Insulin is indispensable in the treatment of type 1 diabetes and is necessary in many cases of type 2 diabetes. Almost 100 years have passed since the discovery and first use of insulin. Behind us are years of research aimed at mimicking the body's physiological response to glycemic excursions and optimizing insulin therapy.

Over the last decades, there has been significant progress in devices supporting the treatment of diabetes, such as more and more technically advanced subcutaneous insulin pumps and continuous glucose

monitoring systems that, on the one hand, improve glycemic control, and on the other hand, reduce the risk of hypoglycemic episodes and thus improve the patient's comfort of life. What is even more important, this also translates into a reduction in the risk of development and progression of chronic vascular complications of diabetes, which are still a key clinical problem of modern diabetology. One of such devices, the FreeStyle LIBRE continuous blood glucose monitoring system, was evaluated by a remarkable group of experts in the current edition of "Clinical Diabetology". Worth reading are also two articles providing a theoretical supplement to the discussion on continuous glycemic monitoring systems: a review paper discussing the measurement of glucose in the interstitial fluid and a report from *Diabetes Innovations Day*, a meeting dedicated to diabetes innovations and their use by physicians and patients that was held on 23–24 November 2018 in Poznan. Another important topic is diabetes occurring in pregnant women and its impact on a child as well as the woman herself and her future risk of developing type 2 diabetes. In this aspect, I encourage you to read an original paper assessing the effect of breastfeeding on carbohydrate metabolism among women with a history of gestational diabetes. A constant element in the development of "Clinical Diabetology" is the publication of articles sent by foreign authors. This issue includes a very interesting article that will expand our knowledge about the diagnosis of type 1 diabetes in India.

At the end, I would like to thank you for all the articles sent to us and encourage you to further cooperation. See you in Lublin at the 20<sup>th</sup> Scientific Congress of Diabetes Poland.

Editor-in-Chief

A handwritten signature in black ink, appearing to read "Janusz Gumprecht".

Prof. Janusz Gumprecht

