T1INTERNATIONAL
Advocating for people with type 1 diabetes around the world

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To the Expert Committee at the World Health Organization regarding the application for **A.18 Insulin, analogue rapid-acting – diabetes mellitus,**

My name is Leira Mendez and I am a type one diabetic of almost four years and an #insulin4all advocate for T1International in the United States. I am writing this because I believe access to insulin is a human right therefore everyone who relies on insulin to treat their diabetes should be able to access it.

As someone who depends on insulin, I recognize the struggle of obtaining access to insulin when I need it most. Insulin is an essential medication that 14% of the United States (7 million Americans) rely on based on a 2022 study by Yale. In that same year, Lown Institute reported that 1.3 million of those Americans are forced to ration their insulin. This lack of access to insulin is putting insulin dependent diabetics at risk of serious health complications, hospitalization, and death. This concerning lack of access lowers diabetics quality of life and adds unnecessary financial and mental burden on people living with diabetes. We should not have to continue to struggle to simply live.

In 2021, I was diagnosed with type one diabetes. It was a terrifying time for me because I did not understand what was happening to me; all I remember was being carried to the car as I struggled to stay awake on my way to the ER. Being the only member of my immediate family with type one diabetes with no prior family history, my family and I were not prepared for the financial and mental struggles diabetes would have on us. I did not have insurance at the time of diagnosis, so my mother had to find $400 to pay for one vial of my insulin on top of more money for the extra costs, syringes, alcohol swabs, blood meter kit; I still vividly remember the distress this had on my mother who was trying her best to pull the money to afford my essentials.

Even after obtaining insurance, my struggle for insulin access did not stop there. During the first two years of my diagnosis, I struggled to receive consistent refills on my insulin. My insurance at the time would only give me one refill a month but I would often run out before the refill date. After attempts to override the refill date through my doctors or pharmacy, and failing to obtain early refills, I would be forced to ration my insulin, treating my diabetes with insulin far below my treatment plan in fear of running out of my prescription. This would also cause me to severely restrict my diet to the point where I would go hungry because I simply did not have enough insulin to spare to manage my diabetes.

Lastly, I was once forced to turn to human insulin as a last resort because I have failed to get my insurance to send me a new refill prescription for my insulin. It was the only thing I could get that did not require a prescription and it only cost me $35. Not familiar with this insulin and how it functions, the insulin proved to be inefficient in treating my diabetes causing me to severely restrict my diet once again and practically experiment with the human insulin in fear that it would cause serious effects on my body if I used it incorrectly. This is the reality of not only my journey as a diabetic but to so many diabetics around the world.

Diabetes is already a very difficult and expensive condition to manage. Diabetics around the world rely on insulin to survive and giving diabetics access to options on insulin will not only give them proper treatment, but higher chances of survival, especially in countries where there are few to no options. Giving rapid-acting insulin access to ***all*** diabetics will be a victory to diabetics who rely on insulin, and a step closer to medical equality for all persons living with chronic illnesses.

Adding rapid-acting insulin to the essential medicines list (EML) would give insulin dependent diabetics treatment options that will suit their personal needs. Fair access to rapid-acting insulin decreases life-threatening behaviors such as, rationing insulin, thus increasing the quality of life to diabetics around the world especially in low-income/developing countries.

Lack of treatment options for insulin dependent diabetics will result in life-threatening complications that will dramatically impact one’s quality of life as well as death. Unequal access to essential medications such as insulin is a violation of one’s right to vital medical care and quality of life.

I am asking that you please add rapid-acting insulins like NovoLog and Humalog, for example.

Insulin is a vital resource to those who depend on it. The lack of access to rapid-acting insulin prevents diabetes from having fair treatment options to manage their diabetes and is denying them of their right to a fair quality of life. Everyone deserves a life free of complications and hospital visits; no diabetic deserves to be put in a situation where it is life or death; no deserves to be forced into a situation where they are forced to ration any medication they rely on to stay alive. Insulin is more than just a medication. It is our lifeline.

Sincerely,
Leira Mendez - Soto
Person living with type 1 diabetes
T1International #insulin4all Advocate in the United States