

To whom it may concern,

I am writing to support the incorporation of rapid-acting insulin analogs such as Humalog, NovoRapid, insulin aspart, and insulin glusine. As a person living with type one diabetes, a diabetes educator, a mental health provider, and a Latin American advocate for the diabetes community, I strongly believe these medications need to be a part of the WHO Essential Medicine List.

Here are the reasons why I believe this needs to be supported:

**Mental health care and reduction of mental health complications regarding life with diabetes:**

According to the Centers for Disease Control and Prevention (2023), people living with diabetes (PLWDs) are 2 to 3 times more likely to have depression, and only 25% of this population receives proper diagnosis and treatment. In addition, Harris and Carrillo (2021) confirm that it is estimated that up to 40% of PLWDs have Eating Disorders, which will have a direct impact on glucose and diabetes management. Doctor William Polonsky (2023) wrote that 84% of PWDs believe that their condition will negatively affect their mental health, 35% of caregivers have mild anxiety, and 56.7% have mild depression. Also, the risk of suicidal behavior is higher in people with type 1 diabetes, with up to 7% of deaths in young adults being a result of suicide (Barnard-Kelly, 2022). Even the stigma related to diabetes results in an issue since the more stigma a person perceives, the poorer their blood glucose control will be (Liu, N. F., Brown, A. S., Folias, A. E., Younge, M. F., Guzman, S. J., Close, K. L., & Wood, R. (2017).

With access to rapid-acting analogs and long-acting and ultra-long-acting insulin, people living with diabetes can have a more flexible life regarding day-to-day activities such as studying, training, sleeping, going to school, working, mothering, and so much more. This is quality of life and it is important to highlight that this is more than access to insulin to stay alive, it is directed related to being able to feel safe in our body, to being able to decide when one wants to eat, or go practice a sport, stay up late or sleep in, is basically looking to have a life as similar to the one of people not living with diabetes.

The use of human insulin makes the prior much more complex as doses and meal times are much more rigid, having to use vials and take care of them all the time, make it difficult for individuals to be able to have freedom in their daily decisions, which in the end can translate into distress, eating disorders, burnout, and much more.

With access to insulin analogues, being able to correct hyperglycemia provides the individual of well being, peace of mind in a highly uncomfortable and dangerous situation; and the proven reduction of hypoglycemic episodes (*"Short acting insulin on postprandial glucose and hypoglycemia in type 1 diabetes mellitus: a systematic review and meta analysis"*) also translates into an improvement of safety in people living with diabetes as well as their caregivers and this is a definite part of mental health.

The burden of type one diabetes on mental health is something I witness every day in my practice, having children feeling left out in school breaks, teens worrying about afternoon outings due to meal times and parents extremely concerned about their children's stress. This is not portrayed in clinical studies, but it does not mean is not a reality, one that with the help of rapid-acting insulin analogs can be significantly improved for the better, as it can help reduce mental health complications related to daily diabetes management.

**Equity:**

Being a latinamerican woman, living with diabetes, my entire life I have seen how rapid-acting insulin analogs, have been available and provided by state in different parts of the world. As a member of the diabetes community time and time again all you read and listen is the freedom, comfort and security they bring.

Although it has been proven that costs are higher when it comes to rapid-acting insulin analogs rather than human insulin, I urge to take into account that with by adding rapid-acting insulin analogs to the EML this can help negotiations within healthcare systems world wide in order to provide more equitable and competitive prices.

I respectfully ask the WHO committee to consider the fact, that quality of life and wellbeing are equally important as HBA1c results, that adding rapid-acting insulin analogs to the EML helps to bidge the gap in access to treatment and technology worldwide and more importantly, it aids to bring safety in a condition that often times makes people living with diabetes fell insecure in their own skin.

Thank you very much for your time and work towards the wellbeing of people living with diabetes worlwide.

