

## RETIRING CHAIRMAN'S FAREWELL MESSAGE

# “As others see us...through a glass darkly”

**John K Wales**  
Chairman, ABCD



**It is indeed a great pleasure to welcome the first issue of the ABCD Newsletter, which we hope you will find both interesting and informative about those topics which affect our work as Diabetologists, as well as about ABCD. Peter Daggett, James Wroe and his team are to be congratulated on their hard work to produce the Newsletter and I hope you will respond to our request for your comments and suggestions for future issues.**

As some of you will remember, ABCD was created at a meeting at the Royal College of Physicians in London in 1997. A number of Diabetologists at the time had become increasingly uneasy at the direction in which the representation of diabetes care in the NHS was being developed. Colleagues who had spent many hours and much energy developing their local diabetic patient care services felt their role was being devalued, taken for granted or just being ignored. Their heavy workload in general medicine did not appear to be acknowledged, compared to those specialities with high-profile, high-technology procedures and with easily measurable, auditable ‘clinical events’ and a high political impact. These views have not changed and remain a constant problem with which Diabetologists have to deal both locally and nationally.

Individual Consultants often feel that their local problems are unique to them. However, whenever Diabetologists met together it was clear that many Consultants were having similar problems across the NHS. There was no forum in which these problems could be discussed. It was clear to the founding members of ABCD that an Association was needed where Diabetologists could meet and feel comfortable in having open and robust discussions with their peers about clinical problems and the difficulties in the delivery of effective care in the NHS. These thoughts led to the creation of ABCD.

We had no infrastructure and relied on the good will of members and a little financial support. Our natural alliances are with the Royal Colleges. All members of the Association are Members or Fellows of one or more of the Royal Colleges and the Colleges represent the views of Consultants and trainees in all the medical specialities. ABCD has recently become a member of the RCP Diabetes and Endocrinology Speciality Committee and we hope that our representations there will be constructive and helpful to all Diabetologists and Trainees.

Our relationship with central Government and its agencies has expanded steadily. The Association has given both written and oral evidence to the Expert Group of the Diabetes NSF, to the Scottish NSF and Technology Board. Our submissions have been greatly strengthened by being able to draw on the comprehensive survey of specialist diabetes services in the NHS organised by Peter Winocour and to which members contributed strongly. We have been asked to nominate experts for the NICE assessments of topics such as long-acting insulins, diabetic patient education and insulin pumps. We have responded to the Government's White Papers on the NHS, stressing the importance of long-term care, as in diabetes, as well as the role of Diabetologists within the NHS. For the past three years we have offered to help Diabetologists, members of the Association or not, who are

applying for Distinction Awards.

The possibility of joint meetings with the British Endocrine Societies has been reviewed regularly. We are keen, however, that any meeting, be it ‘joint’ or ‘back-to-back’, should be clinically orientated. We hope it will be possible to hold a back-to-back meeting with the Thyroid Society in November 2002, with both meetings open to both sets of members and with a joint dinner.

I would like to think that ABCD has maintained cordial relations with drug companies in the diabetes field. As Diabetologists, we are extremely lucky in having a number of senior people in the pharmaceutical industry who are supportive of the aims and aspirations of ABCD and who can see beyond the company horizon to the wider needs of the diabetes community. The Association owes them a debt of gratitude for their help.

The external relationships of the Association will only prosper if we have the respect of those we wish to influence, for the integrity of our views and the clarity with which we represent the views of all our membership. For this we need active members.

On a personal note, I have had the honour of being the Chairman of the Association for the first four years of its existence. However, I have retired in May this year, in part because I will retire from clinical practice at the end of the year and in part because new ideas and plans are always required and I feel ABCD is on the verge of important changes and new activities. With the determination of Richard, Ken, the Executive Committee and members, the Association has now established a foothold in the medical scene. We now need to attract more members, particularly younger Consultants and final year Trainees, to maintain our vitality, to strengthen our ability to give good and sustainable advice on the development of diabetic patient care in the UK, and to embrace objectively those new technologies which will make our patient care more effective. The Diabetes NSF could offer Diabetologists an important role in the future or give us very little. Together, we can make an impact to enhance and improve our ability to lead the improvements in diabetic patient care which are needed. If we are divided or apathetic, we will fail not only ourselves but also our Trainees, who represent the future, and our patients too.

I am sure the new Chairman will take up the challenges which lie ahead and, with the help of the Officers, Executive Committee and members of ABCD, move forward to secure a better future for all Diabetologists, the service and their patients.

### SEND US LETTERS, COMMENTS AND SUGGESTIONS

Please send us your comments on this issue of the *ABCD Newsletter* as well as your suggestions for contents of future issues (initially twice a year). Or send us a *Letter to the Editor* or a contribution to the *Controversy* column.

Information about future meetings of interest to Diabetologists, for possible inclusion in the *Dates for your Diary* section, are also welcome, as are corrections to wrong addresses, notification of changes of address and news of new appointments in diabetology etc.

All communications to the *ABCD Newsletter* should be addressed to the Editor at the publishing address (see front cover).