

Pakistan Endocrine Society

Newsletter

www.pakendosociety.org

October to December 2025

PROCEEDINGS FROM



**ANNUAL CONFERENCE
OF PAKISTAN ENDOCRINE SOCIETY**

**“From Hormones to Health:
Inspiring Hope Through Science”**

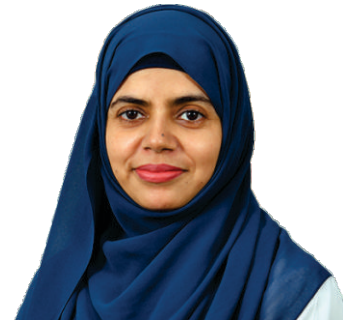
17th - 19th OCT 2025 | PC Hotel, Karachi

Newsletter Theme

**Diabetes &
Well-Being**



From the Immediate Past President's Desk



Dr. Aisha Sheikh

We remember our brethren in Palestine in our prayers, hoping for freedom, lasting peace, and tranquility. Wishing everyone a blessed Ramadan filled with compassion, reflection, and spiritual renewal.

President's Tenure 2024–2025: Two Years of Vision, Innovation, and International Collaboration

Dear colleagues,

Assalam O Alaikum

As I conclude my two-year tenure (2024–2025) as President of the Pakistan Endocrine Society, I do so with deep gratitude to Allah (SWT) and a profound sense of fulfillment. Alhamdulillah! These past two years have been a meaningful journey of growth, learning, and shared purpose. Together, we have worked to strengthen endocrinology across Pakistan while also expanding our academic presence on the global stage.

A key milestone of this tenure was strengthening our engagement with the International Diabetes Federation by becoming a full member and actively participating in both the IDF Biennial Meeting and the IDF-MENA Regional Meeting. This connection has enhanced our global visibility and enabled valuable academic exchange.

Building on this momentum, PES remained actively involved in regional and global scientific collaboration. We participated in the SAFES Biennial Meeting, conducted PES–SAFES

Ramadan webinars, and hosted SAFES scientific sessions at our annual meeting. We also had active participation in BESCO, joint scientific sessions and EDEC forums, and academic engagement through SAFES Women in Endocrine Clinics. Our ongoing interaction with American Association of Clinical Endocrinology MENA region continued to strengthen regional academic exchange. Our partnerships further expanded through collaboration with SOF and AOCE, positioning PES as an increasingly active regional academic contributor. We also maintained strong academic engagement with the International Society of Endocrinology and the Society for Endocrinology through their continued endorsement and participation in our annual scientific meetings, further reinforcing the international standing of our academic programs.

At the national level, our focus remained firmly on collaboration, healthcare professional education, and public engagement. The nationwide “Demystifying Puberty and Pubertal Disorders” initiative, conducted in partnership with SPED-P, brought together clinicians across provinces through an extensive webinar series followed by a full-day symposium. Our collabo-

ration with SOGP continued through SERENDIP workshops addressing hyperglycemia in pregnancy, while joint academic work with PSSLD focused on the growing burden of steatotic liver disease. We also strengthened interdisciplinary engagement through the Cardiometabolic Forum.

Public and professional awareness remained central to our mission. We conducted nationwide Diabetes Distress workshops, vibrant PCOS Awareness Month activities, and the Diabetes and Ramadan campaign to support safe fasting practices. These initiatives were complemented by regular Facebook Live sessions for public education, continuing medical education programs and webinars for HCPs, full-day thematic symposia, midsummer academic meetings, and our annual scientific meetings. We also upgraded the PES website to enhance member engagement and expand access to educational resources. Alongside this, we remained highly active in expanding our reach across various social media platforms, using them as dynamic channels to disseminate endocrine awareness material, patient education resources, and public health messages to a wider national audience.

A particularly proud academic milestone was the launch of the Journal of the Pakistan Endocrine Society (JPES), along with the development of our evidence-based guideline on the management of pituitary adenomas for low- and middle-income countries in collaboration with PASNO — an important contribution toward context-relevant endocrine care. The quarterly newsletter of PES brings you regular updates on our academic initiatives, collaborations, and activities across Pakistan and beyond. We also published endocrine testing protocols tailored specifically to the clinical needs and resource availability within the Pakistan.

Alongside these academic and collaborative achievements, we also focused on long-term impact through targeted national health initiatives. The CHAMPS program for childhood obesity prevention represents an important

step toward addressing the rising burden of metabolic disease in young populations. Similarly, the SMILE program for Type 1 Diabetes was developed to support education, empowerment, and improved care pathways for individuals living with this lifelong condition. Both initiatives reflect our commitment to prevention, patient-centered care, and the health of future generations.

We continued to invest in professional capacity building through online certificate courses on “Thyroid disorders” and the “Diabetes Education for Every Physician program (D.E.E.P) designed for clinicians across Pakistan, helping to strengthen clinical practice through practical, evidence-based learning.

Endocrine fellows in training also benefited from exciting academic competitions, including EndoHub (clinical case discussions) and EndOlympics (endocrine quiz competitions), with winners supported to attend AACE-MENA, ISE and IDF meetings. In addition, PES research grants and elective/travel grants for endocrine fellows in training continued to support academic growth and international exposure.

None of these accomplishments would have been possible without the dedication and sincerity of our cabinet members, executive committee, scientific executives, collaborators, corporate members and PES administrative team. I am deeply thankful to every member whose commitment, time, and passion have helped strengthen the Society and expand its impact.

As we look ahead, I remain confident that PES will continue to grow as a dynamic, collaborative, and globally engaged endocrine society — committed to excellence in education, research, and patient awareness.

Kind regards,

Dr Aisha Sheikh
Immediate-Past President,
Pakistan Endocrine Society

From the Editor's Desk

Dr. Saima Askari



November Focus: Diabetes and Well-Being in the Workplace

Dear Colleagues,

Assalam o Alaikum

November is recognized globally as Diabetes Awareness Month — a valuable opportunity to look beyond numbers and focus on the overall well-being of people living with diabetes. This year, the International Diabetes Federation (IDF) highlights the theme: “Diabetes and Well-Being in the Workplace.”

For many adults, the workplace is where a significant portion of life unfolds. Balancing meetings, shifts, deadlines, and physical demands alongside glucose monitoring, medication timing, and meal planning can be challenging. Workplace stress, irregular breaks, physically demanding tasks, or limited privacy for self-care can all affect both glycaemic control and emotional health.

As healthcare professionals, we play an important role in helping patients navigate these challenges. Simple, practical steps can make a meaningful difference:

- Ask about work routines – Understanding schedules, shift patterns, and job demands helps tailor treatment plans.
- Plan medication timing – Adjusting insulin or oral therapies around work hours, meals, and activity levels supports safer glucose control.
- Discuss hypoglycaemia prevention at work – Encourage carrying fast-acting carbohydrates and wearing medical identification when appropriate.
- Address diabetes distress and burnout – Work-related pressures can add to the emotional burden of diabetes; brief check-ins can open the door to support.
- Encourage supportive environments – Patients may benefit from small workplace accommodations, such as regular breaks, access to water, or a private space for monitoring.

Well-being and metabolic control are closely linked. When individuals feel supported and confident managing diabetes in their daily environments, self-care behaviors improve — and so do long-term health outcomes.

This November, let's use our clinical encounters to reinforce that **living well with diabetes includes feeling safe, supported, and capable — at work and beyond.**

Warm Regards,

Dr. Saima Askari
Editor, PES Newsletter

Endocrine Board Review Course PESCON 2025

The Endocrine Board Review Course was successfully conducted on 16th October 2025 at the Pearl Continental Hotel, Karachi, under the banner of the Pakistan Endocrine Society's 23rd Annual Conference.

The course was attended by 39 endocrine fellows from across Pakistan, who remained attentive and engaged throughout the intensive full-day program (9 a.m. – 5 p.m.), covering all major and high-yield topics essential for the 2nd fellowship examination.

The sessions were led by an esteemed faculty including Prof. Emerita Tasnim Ahsan, Prof. Qamar Masood, Prof. Khadija Nuzhat Humayun, Prof. Mussarat Riaz, Dr. Aisha Sheikh, Dr. Joanna Quinton (UK), Dr. Shaista Shoukat, Dr. Zakir Alavi, and Dr. Urooj Lal Rehman.

The program was meticulously coordinated by Dr. Zareen Kiran (EBR Director) and Dr. Fatima Zahra (EBR Co-Director) under the guidance of Dr. Aisha Sheikh (President PES), Dr. Ali Asghar (Organizing Chair), and Dr. Sarwar Malik (Scientific Chair).



Pre-Conference Workshop

Diabetes Awareness for Health Care Allied Professionals

A successful pre-conference workshop titled “Diabetes Awareness for Health Care Allied Professionals” was held on 17th October 2025 at the Jinnah Postgraduate Medical Centre (JPMC), Karachi, under the banner of the Pakistan Endocrine Society’s 23rd Annual Conference (PESCON 2025).

The workshop was directed by Dr. Rukhshanda Jabeen and was well attended by nurses, paramedics, and physiotherapists. Participants showed great interest and remained attentive and engaged throughout the sessions. They expressed their appreciation and shared positive feedback, emphasizing the need for more such awareness programs in the future.



23rd PESCON 2025
ANNUAL CONFERENCE OF PAKISTAN ENDOCRINE SOCIETY
"From Hormones to Health: Inspiring Hope Through Science"
17th - 19th OCT 2025

Diabetes Awareness Workshop For Allied Health Care Professionals

Empowering Allied Health Professional in Diabetes Care

17 OCT | 09:30 AM – 11:30 AM | NAJMUDDIN AUDITORIUM, JPMC

WORKSHOP DIRECTOR Prof. Dr. Rukhshanda Jabeen

TOPIC	SPEAKER
Introduction and overview of Diabetes	Prof. Dr. Rukhshanda Jabeen
Diabetes Nutrition Management (A guide to nutrition for Diabetes Care)	Ms. Zara Khan
Diabetes Management (Types of Medicine/Insulin administration)	Dr. Wasifa Ajaz
Physical therapy for Diabetes	Dr. Wajista
Management of Hypoglycemia	Dr. Paras Imran
Role of Allied HCP in management of Diabetes Emergencies	Dr. Erum Sohail

SCAN QR FOR CONFERENCE REGISTRATION

CONTACT US

- admin@pakendsociety.org
- pescan2025@gmail.com
- pakendsociety.org
- endoassociationofpakistanofficial
- +92 300 4866744

EVENT MANAGEMENT BY **Orbit**

Uniting National and International Expertise in Endocrinology

PESCON 2025

The Pakistan Endocrine Society successfully hosted PESCON 2025 (17-19 Oct at PC Hotel, KHI), marking another milestone in advancing endocrine education and collaboration in Pakistan. The conference brought together a distinguished gathering of national and international faculty, creating a vibrant platform for knowledge exchange and professional engagement. The comprehensive scientific program featured high-impact sessions on diabetes, obesity, thyroid disorders, adrenal and pituitary diseases, reproductive endocrinology, bone health, and emerging metabolic therapies, reflecting the evolving landscape of endocrine practice.

The presence of esteemed international speakers alongside leading Pakistani endocrinologists enriched the academic discussions and provided valuable global perspectives. Interactive plenary lectures, focused symposia, case-based discussions, free paper presentations, and poster sessions ensured active participation across all levels of expertise. The conference witnessed an impressive turnout of consultants, physicians, trainees, and researchers from across the country, underscoring the growing strength and unity of the endocrine community.



A key highlight of PESCON 2025 was the active involvement of young endocrinologists and researchers, who presented innovative research and challenging clinical cases. The well-structured scientific agenda, collaborative sessions, and industry symposia further enhanced the academic experience. Delegates appreciated the opportunity to engage directly with experts, discuss evolving guidelines, and explore advances in diabetes and metabolic care.

The feedback received was overwhelmingly positive, with participants commending the high scientific standards, diverse faculty representation, seamless organization, and practical relevance of the sessions. PESCON 2025 not only strengthened national collaboration but also reinforced international academic partnerships, reaffirming the Pakistan Endocrine Society's commitment to excellence in endocrine care and education.



Lifetime Achievement Award

PESCON 2025

During PESCON 2025, the **Lifetime Achievement Award** was proudly conferred upon **Dr. Ibrar Ahmed** in recognition of his outstanding contributions to the field of endocrinology.

This prestigious honor acknowledges his decades of dedicated service, academic excellence, clinical leadership, and unwavering commitment to advancing endocrine care in Pakistan. His mentorship, research contributions, and efforts in strengthening professional education have left a lasting impact on the endocrinology community.

The Pakistan Endocrine Society expresses its heartfelt congratulations and deep appreciation to Dr. Ibrar Ahmed for his remarkable achievements and lifelong dedication to the specialty.



Pakistan Endocrine Society

Election 2025

The Pakistan Endocrine Society (PES) Elections 2025 were successfully concluded on Sunday, 14 December 2025, marking another important milestone in the Society's democratic journey.

The elections were conducted electronically from 08:00 AM to 10:00 PM under the supervision of an independent Election Commission. The process was completed smoothly, transparently, and efficiently, reflecting the Society's strong commitment to integrity and governance.

An outstanding 90% voter turnout was recorded — a powerful testament to the deep engagement, unity, and trust of our Executive Members in the Society's democratic process.

We extend our sincere appreciation to the Election Commissioners — Dr. Rauf Niazi, Dr. M. Sohail Anjum, and Dr. Suleman Elahi (Peshawar) — for their immense dedication, sincerity, and hard work in ensuring a fair and transparent election process.

Following thorough verification and manual reconciliation of all valid ballots, the Election Commission has officially announced the results.

Contested Positions (Elected with Clear Majority)

President-Elect:
Dr. Umar Yousaf Raja

Vice President (Khyber Pakhtunkhwa):
Dr. Tahir Ghaffar Khattak

Unopposed & Elected Uncontested Positions

General Secretary: **Dr. M. Naeem Khan Durrani**

Finance Secretary: **Dr. Faisal Masood Qureshi**

Joint Secretary: **Dr. Sarwar Malik**

Publication Secretary: **Dr. Musarrat Riaz**

Vice President (Balochistan): **Dr. Suresh Kumar**

Vice President (Punjab): **Dr. Uneeba Syed**

Vice President (Sindh): **Dr. Sumerah Batool**

We congratulate all elected office bearers and look forward to their leadership in advancing the mission, academic excellence, and professional development goals of the Pakistan Endocrine Society.

Together, we continue to strengthen our Society and uphold the highest standards of endocrinology practice and collaboration across Pakistan.

PES Cabinet 2026-27

Handover Ceremony

On 11 January 2026, the Pakistan Endocrine Society (PES) Cabinet Handover Ceremony was successfully held in Karachi, marking the beginning of a new chapter in the Society's journey.

We extend a warm and heartfelt welcome to the PES Board of Management 2026–27. As the new leadership takes charge, we look forward to continued progress, innovation, and strengthening of endocrine care across Pakistan.

Your support and active cooperation will be instrumental in enhancing PES's academic portfolio, expanding professional initiatives, and advancing high-quality endocrine care nationwide.

On this occasion, sincere gratitude is extended to the outgoing cabinet for their dedication and tireless efforts over the past two years. Their commitment has contributed significantly to the growth and visibility of the Society.

Finally, we thank all PES members for their unwavering support — particularly those who actively participated in various PES committees and contributed meaningfully to the Society's initiatives and academic impact.

Together, we continue to build a stronger, more dynamic Pakistan Endocrine Society.



Pakistan Endocrine Society

New Cabinet 2026-2027



Dr. Ali Asghar
President

MRCP(UK), FACE(USA),
FRCP(Edin), FRCP(London)
Consultant Endocrinologist
Liaquat National Hospital, Karachi



Dr. Umar Yousaf Raja
President Elect

MBBS, MRCP (UK), MRCP (Diab & Endo),
FRCP (London),FACE (USA),
AFHEA (UK), CCT (Diab & Endo)
Consultant Endocrinologist &
Head of Endocrine Department
Shifa International Hospitals Ltd., Islamabad



Dr. M. Naeem Khan
General Secretary

MBBS, FCPS Medicine
Aga Khan University Hospital Karachi,
Fellowship in Diabetes Endocrinology and
Metabolism Aga Khan University Hospital Karachi,
FCPS Diabetes Endocrinology & Metabolism
Aga Khan Hospital Karachi (AKUH).
Consultant Endocrinologist Aga Khan Hospital and
Liaquat National Hospital Karachi
Associate Professor
Aria Institute of Health Sciences Quetta.



Dr. Faisal M. Qureshi
Finance Secretary

FRCP UK,FACE US
Consultant Endocrinologist
Al Khaliq Hospital, Multan



Dr. Sarwar Malik
Joint Secretary

MBBS, FCPS (Medicine), FCPS (Endocrinology)
Fellow, Diabetes, Endocrinology & Metabolism
The Aga Khan University Hospital, Karachi
MSPH (Health Services Academy)
FACE (USA) | CHPE (SZABMU)
Head, Department of Endocrinology,
Capital Hospital (CDA), Islamabad



Dr. Musarrat Riaz
Publication Secretary

FCPS (Medicine),
FCPS (Endocrinology)
Director
National Institute of Diabetes
and Endocrinology
Dow University of health
Sciences, Karachi



Dr. Suresh Kumar
VP Balochistan

FCPS (Medicine), FCPS (Endocrinology)
Consultant Physician/ Endocrinologist
Associate Professor Medicine
Bolan Medical College/
Sandeman Provincial Hospital,



Dr. Uneeba Syed
VP Punjab

FRCP (Glasgow), FCPS (Endocrine),
FCPS (Medicine), CRCP, CMT
Assistant Professor of
Endocrinology
Allama Iqbal Medical College/
Jinnah Hospital, Lahore



Dr. Sumera Batool
VP Sindh

FCPS (Medicine), FCPS (Endocrinology)
Assistant Professor &
Consultant Endocrinologist
Aga Khan University Hospital, Karachi



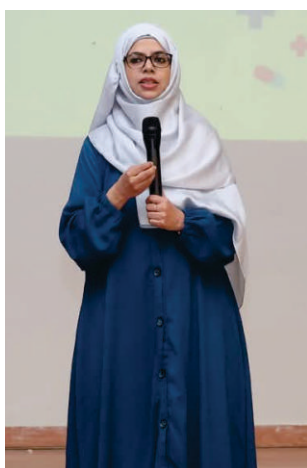
Dr. Tahir G. Khattak
VP KPK

FCPS (Medicine),
FCPS (Diabetes & Endocrinology), MRCP.
Associate Professor
Khyber Girls Medical College, Peshawar.
Consultant Endocrinologist
Hayatabad Medical complex, Peshawar.

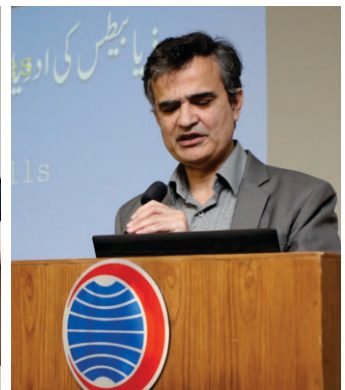
Diabetes and Well-Being: Promoting holistic care and healthier lives across Pakistan

World Diabetes Day

In celebration of World Diabetes Day, the Pakistan Endocrine Society launched a nationwide awareness campaign centered on this year's theme, "Diabetes and Well-Being." The initiative highlighted not only glycemic control but also the emotional, psychological, and social aspects of living with diabetes. Awareness walks, educational seminars, screening camps, and community engagement activities were organized across multiple cities in Pakistan, with active participation from endocrinologists, healthcare professionals, trainees, and volunteers.



The campaign emphasized the importance of lifestyle modification, mental well-being, regular monitoring, and supportive care systems to improve quality of life for people living with diabetes. Through these coordinated efforts, PES reinforced its commitment to holistic diabetes care and public health advocacy nationwide.



SERENDIP Workshop on Hyperglycemia in Pregnancy

A Successful WDD Event



SERENDIP
SAFES and SOGP Recommendations
Nationwide Dissemination – Pakistan
Hyperglycemia in Pregnancy

PES-CME Symposium, Hyderabad

Dr. Aisha Sheikh
President, Pakistan Endocrine Society
Consultant Endocrinologist, Al-Razi Institute
Lecturer & Tutor, University of South Wales, UK

Dr. Roshan Ara Qazi
Professor at India Medical College
Assistant Chairperson of UGC/NET Department,
LUMHS, Jamshoro. F. UGC/NET Department,
Representative of the Society of Obstetrics &
Gynaecology Pakistan.

Dr. Sarwat Anjum
MBBS, FPCS (Family Medicine), FPCS (Endocrinology),
SDE Endocrinology, Diabetes and Metabolism, CME
Consultant Endocrine Specialist
Member of Pakistan Endocrine Society
Assistant Professor of Clinical Endocrinology

Dr. Abrar Ali
FPCS (Medicine), FPCS
(Diabetes & Endocrinology) Fellowship
Diabetes, Endocrinology and Metabolism
Senior Lecturer in Endocrinology, Institute
of Anatomy, Sciences, Executive Member
Pakistan Endocrine Society (President
Distriktargat & Endocrinological IMC
& Aga Khan Hyderabad)

Dr. Muhammad Saleem
MBBS, FPCS (Medicine), FPCS (Diabetes & Endocrinology)
Fellowship Diabetes, Endocrinology & Metabolism (MDC)
Member American College of Endocrinology
Scientific Executive Member Pakistan Endocrine Society
Consultant Endocrinologist Aga Khan Hospital Hyderabad
& IMC Hospital, Assistant Professor & Incharge of
Endocrine Department,
LUMHS, Jamshoro.

Dr. Nusrat Nisar
MBBS, MChD (OBSTYN), FPCS (OBSTYN)
Professor of OBSTYN - LUMHS Jamshoro.

Dr. Shazia Rani
MBBS, FPCS (OBSTYN), MChD
Professor & HOD UNIT-2, OBSTYN LUMHS

Dr. Muhammad Saleem
MBBS, FPCS (Medicine), FPCS (Diabetes & Endocrinology)
Fellowship Diabetes, Endocrinology & Metabolism (MDC)
Member American College of Endocrinology
Scientific Executive Member Pakistan Endocrine Society
Consultant Endocrinologist Aga Khan Hospital Hyderabad
& IMC Hospital, Assistant Professor & Incharge of
Endocrine Department,
LUMHS, Jamshoro.

Dr. Abrar Ali
FPCS (Medicine), FPCS (Diabetes & Endocrinology)
Fellowship Diabetes, Endocrinology and Metabolism (MDC)
Member The Endocrinology Society of America,
Scientific Executive Member Pakistan Endocrine Society
Consultant Endocrinologist & Endocrinologist IMC &
Aga Khan Hyderabad

Learning Objectives:

- Hyperglycemia Insights:** Understand the key concepts of hyperglycemia in pregnancy for better maternal and fetal health.
- Group Collaboration:** Collaborate with groups to devise strategies for managing hyperglycemia during pregnancy.
- Critical Thinking:** Enhance critical thinking skills by analyzing practical cases and developing solutions.

1st November, 2025 | 11:00 AM to 2:00 PM | Hashim Medical City Hospital, Hyderabad

This educational session is sponsored by an unrestricted educational grant from **Getz**

As part of the World Diabetes Day (WDD) activities, PES successfully conducted the SERENDIP Hyperglycemia in Pregnancy Workshop on 1st November in Hyderabad. The workshop was highly interactive, engaging, and well appreciated by all attendees.

SERENDIP, in collaboration with the SOGP, aims to ensure nationwide dissemination of SAFES and SOGP recommendations and guidelines on Hyperglycemia in Pregnancy. The program focuses on conducting structured, highly interactive workshops across Pakistan to enhance awareness, standardize clinical practices, and improve maternal and fetal outcomes.

The enthusiastic participation and positive feedback from attendees reflect the growing commitment of healthcare professionals toward improving care in gestational diabetes and hyperglycemia during pregnancy.



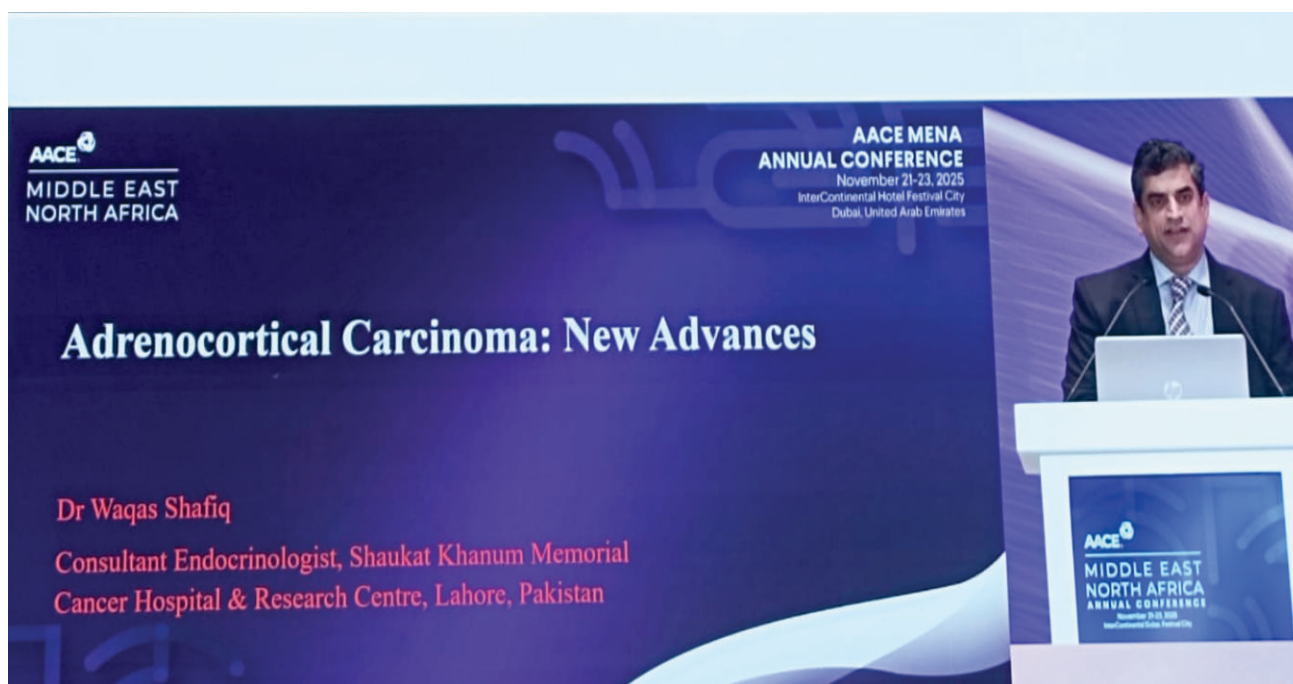
PES representation at

AACE MENA 2025, Dubai

Contributing to global endocrine dialogue and academic excellence

The Pakistan Endocrine Society actively participated in the American Association of Clinical Endocrinology Middle East & North Africa (AACE MENA) Conference, held from 21–23 November 2025 at the Inter Continental Dubai Festival City in Dubai. PES representatives delivered scientific lectures and contributed to academic discussions, showcasing Pakistan's expertise in endocrinology on an international platform.

The conference provided an excellent opportunity for knowledge exchange, regional collaboration, and strengthening professional ties across the MENA region.



Pakistan Endocrine Society participation at

BESCON 2025, Dhaka

Scientific exchange, SAFES collaboration, and regional leadership

The Pakistan Endocrine Society actively participated in BESCON 2025, held in Dhaka from 6–7 November 2025. During the conference, PES delivered three scientific talks within the SAFES and SOF sessions, contributing to key discussions on contemporary endocrine practice in South Asia. The PES delegates engaged in vibrant academic exchange, strengthening regional collaboration and showcasing Pakistan's growing contribution to endocrinology. Highlights from the conference are attached.

Moreover, a dedicated session was held for the SAFES change over ceremony, marking a significant moment of regional cooperation and leadership transition among participating endocrine societies. The ceremony reflected unity, shared vision, and continued commitment toward advancing endocrine care across South Asia.



Diabetes and Mental Well-Being : A Bidirectional Clinical Challenge

Background

- Diabetes affects hundreds of millions globally, including working-age adults.
- Mental health is crucial in diabetes care — poor mental well-being worsens glycemic control.
- Bidirectional link: diabetes can cause stress, anxiety, and depression; mental health issues can worsen diabetes outcomes.(1–4)
- Worsening glycemic control and increased HbA1c.(5)
- Reduced quality of life and higher risk of complications.(6)
- Potential for vicious cycle: stress → poor control → more stress.(5,7)

Common Psychological Challenges

- Diabetes distress: Emotional burden specific to daily management tasks — monitoring, medications, fear of complications.(5)
- Depression: Affects 12–19% of people with type 2 diabetes.(6)
- Anxiety: Seen in 14–28% of people with diabetes.(6)
- Impact: Reduces self-care, adherence, HRQoL, and increases complication risk.(6)

Factors Affecting Mental Well-Being

- Daily self-care complexity: Multiple glucose checks, carb counting, insulin dosing.(1,2)
- **Fear of complications:** Neuropathy, vision loss, cardiovascular disease.(1)
- **Stigma and social judgment:** Misconceptions about diabetes lifestyle choices.(3)
- **Socioeconomic stressors:** Cost of care, access to resources.(6)
- **Limited mental health integration in care:** Lack of systematic screening and support.(7)

Consequences of Poor Mental Well-Being

- Poor self-management (missed meds, skipped monitoring).(1,5)

Screening and Early Identification

Use validated tools:

- PHQ-9 (Depression)
- DDS (Diabetes Distress) (6)
- Early detection allows timely interventions.
- Especially important in low-resource settings, where depression often goes undiagnosed.(6)

Interventions and Support: Psychological interventions:

- Cognitive-behavioral therapy (CBT)
- Mindfulness-based therapy (5)

Lifestyle strategies:

- Physical activity improves mood & glycemic control. (5,10)
- Balanced diet and sleep optimization. (5,10)

Self-efficacy building:

- Confidence in self-management reduces distress and improves outcomes.(11)

Peer and group support:

- Diabetes education and social support networks buffer stress.(5)

Integrated Care and Technology

- Integrated care models: Collaborate endocrinologists, primary care, mental health professionals.(8,9)

Digital health tools:

- Tele-counselling
- Stress-management apps
- Self-monitoring support platforms (8)

Potential: Broaden access to mental health resources, especially in underserved populations.(8)

Key Takeaways

- Mental well-being is central to diabetes management.
- Screening and early intervention prevent worsening emotional and physical outcomes.
- Lifestyle modifications, psychological therapy, and digital tools are effective support strategies.
- Holistic care = better glycemic control + improved quality of life.

References

1. Mangoulia P, Milionis C, Vlachou E, Ilias I. The interrelationship between diabetes mellitus and emotional well-being: Current concepts and future prospects. *In Healthcare* 2024 Jul 22 (Vol. 12, No. 14, p. 1457). MDPI.
2. Robinson DJ, Hanson K, Jain AB, Kichler JC, Mehta G, Melamed OC, et al. Diabetes and mental health. *Canadian Journal of Diabetes*. 2023 Jun 1;47(4):308-44.
3. Hussain A. Recognising the impact of diabetes on mental health. *Diabetes Research and Clinical Practice*. 2023 Dec 1;206.
4. Hoogendoorn CJ, Shapira A, Roy JF, Kane NS, Gonzalez JS. Diabetes distress and quality of life in adults with diabetes. *In Behavioral Diabetes: Social Ecological Perspectives for Pediatric and Adult Populations* 2020 Jan 17 (pp. 303-328). Cham: Springer International Publishing.
5. Zu W, Zhang S, Du L, Huang X, Nie W, Wang L. The effectiveness of psychological interventions on diabetes distress and glycemic level in adults with type 2 diabetes: a systematic review and meta-analysis. *BMC psychiatry*. 2024 Oct 8;24(1):660
6. Alwhaibi M. Depression, anxiety, and health-related quality of life in adults with type 2 diabetes. *Journal of Clinical Medicine*. 2024 Oct 10;13(20):6028.
7. Watanabe M, Reynolds EL, Banerjee M, Charles M, Mizokami-Stout K, Albright D, et al. Bidirectional associations between mental health disorders and chronic diabetic complications in individuals with type 1 or type 2 diabetes. *Diabetes care*. 2024 Sep 1;47(9):1638-46.
8. Racey M, Whitmore C, Alliston P, Cafazzo JA, Crawford A, Castle D, et al. Technology-supported integrated care innovations to support diabetes and mental health care: scoping review. *JMIR diabetes*. 2023 May 9;8(1):e44652.
9. Tuudah E, Foye U, Donetto S, Simpson A. Non-pharmacological integrated interventions for adults targeting type 2 diabetes and mental health comorbidity: a mixed-methods systematic review. *International Journal of Integrated Care*. 2022 Jun 29;22(2):27.
10. Ulambayar B, Ghanem AS, Tóth Á, Nagy AC. Impact of Physical Activity and Dietary Habits on Mental Well-Being in Patients with Diabetes Mellitus. *Nutrients*. 2025 Mar 16;17(6):1042.
11. Ataya J, Soqia J, Albani N, Tahhan NK, Alfawal M, Elmolla O, et al. The role of self-efficacy in managing type 2 diabetes and emotional well-being: a cross sectional study. *BMC Public Health*. 2024 Dec 18;24(1):3471.

Diabetes and Well-Being in the Workplace

Diabetes mellitus affects hundreds of millions of adults worldwide, with many of those individuals in the prime of their working lives. Managing diabetes is not confined to clinics or homes — it is a 24-hour responsibility that often intersects with the demands, expectations, and structures of the workplace. While advances in treatment and technology have improved clinical outcomes, the day-to-day well-being of employees living with diabetes at work remains an under-examined yet crucial element of overall health. A supportive work environment not only fosters better diabetes management but also enhances productivity, job satisfaction, and long-term career engagement.

Diabetes in the Workforce

The rising prevalence of diabetes among working-age adults underscores the importance of workplace considerations in diabetes care. The modern work environment — characterized by long hours, sedentary tasks, shift work, job stressors, and limited flexibility — can significantly influence metabolic health and diabetes outcomes. A report examining the impact of typical 9-to-5 work routines found that sedentary habits, stress, missed meals, and erratic schedules contribute to impaired glucose regulation and may elevate the risk of type 2 diabetes among employees. (1)

Alongside metabolic concerns, employees living with diabetes often face unique challenges when trying to manage their condition while meeting job requirements. Balancing glucose monitoring, dietary needs, medication schedules, and insulin administration with workplace tasks is demanding. Without appropriate support, employees may delay necessary self-care to avoid potential workplace repercussions.

Stigma, Discrimination, and Emotional Well-Being at Work Beyond physical management, the psychosocial environment of work significantly impacts the well-being of individuals with diabetes. A recent International Diabetes Federation (IDF) global study showed that around 40% of employees living with diabetes reported facing negative treatment at work due to their condition. Many felt stigmatized, isolated, or misunderstood by coworkers and supervisors. (2)

In certain regions, these negative experiences are even more pronounced. In Pakistan, 68% of employees with diabetes reported discrimination or bias in the workplace,

and 58% had considered leaving their job due to how they were treated because of their health condition. Many reported being denied short breaks or time off for glucose monitoring or insulin administration, which increased stress and made daily management more challenging. (3) These findings highlight the profound intersection between workplace culture and chronic disease well-being.

Workplace stigma also affects career progression. Employees reported missing out on training or advancement opportunities because of how their condition was perceived by supervisors or peers. Fear of disclosure further compounds this stress: many choose not to share their diagnosis at work, worried about being treated differently or passed over for promotions. (3)

Such psychosocial pressures can lead to diabetes distress, a specific emotional burden associated with managing diabetes, which has been linked to poorer self-management and suboptimal glycemic outcomes. Supportive workplace environments can help mitigate this distress by fostering acceptance and reducing barriers to self-care.

Barriers to Diabetes Self-Management in the Work Context

Several practical barriers complicate diabetes management at work:

Time constraints and lack of regular breaks: Charging through meetings or tight deadlines may leave little time for blood glucose checks or insulin injections.

Lack of privacy: Some employees feel uncomfortable performing medical tasks, such as insulin administration, in open or unsupportive environments. (3)

Inadequate workplace policies: Many organizations have not yet formalized support systems or accommodations for chronic conditions like diabetes.

Physical stressors: Jobs requiring prolonged standing, heavy physical labor, or irregular shifts may disrupt meal timing and glucose stability.

Misunderstanding from peers: A lack of awareness about diabetes can contribute to insensitive comments, behaviors, or subtle exclusion, which undermine employee confidence.

These barriers can lead employees to make compromises for work — such as intentionally running higher glucose levels to avoid hypoglycemia — which might protect them in the short term but carry long-term risks.

Building a Supportive Workplace Culture

A growing body of evidence indicates that workplace interventions that prioritize well-being can improve diabetes management and employee satisfaction. The U.S. Centers for Disease Control and Prevention (CDC) highlights that employers can play an essential role in supporting employees with diabetes by promoting diabetes prevention programs and creating supportive work conditions. Workplace strategies can reduce absenteeism, presenteeism (working while sick), on-the-job injuries, and long-term healthcare costs. (4)

Key Organizational Strategies

Flexible Schedules and Break Policies Allowing employees regular breaks for glucose monitoring and insulin administration helps reduce stress and supports self-management. Providing flexibility also empowers workers to attend medical appointments without undue pressure.

Education and Awareness Programs Diabetes education sessions for employees and management can improve understanding of diabetes and reduce stigma. Awareness training helps coworkers recognize the needs of individuals with diabetes and fosters empathy and support.

Formal Workplace Policies Establishing clear policies for chronic health conditions, including accommodations for self-care and medication administration, helps normalize diabetes management and encourages disclosure without fear of discrimination.

Healthy Food and Activity Options Access to healthy meal choices, nutrition information, on-site exercise facilities, or incentives for physical activity can benefit employees at risk for diabetes and those managing the condition.

Supportive Leadership and Culture Leadership that communicates openly about health and wellness creates a culture where employees feel safe discussing health concerns and seeking necessary adjustments. (5)

Diabetes Prevention and Wellness Programs at Work

Worksite wellness programs have demonstrated positive effects on health behaviors and metabolic outcomes. Lifestyle interventions that emphasize nutrition, physical activity, and weight management can significantly reduce the risk of developing type 2 diabetes among at-risk employees. National programs, such as the CDC's National Diabetes Prevention Program, have shown that structured lifestyle changes can reduce the risk of progressing to diabetes by up to 58%. (4)

Employers can support participation by offering flexible schedules, covering program costs, or providing on-site classes. In addition, diabetes self-management education

and support (DSMES) services have been shown to improve glycemic control and quality of life, leading to lower healthcare costs and fewer complications. Integrating such resources into workplace benefits can reinforce both health and productivity.

The Business Case for Supporting Well-Being

Investing in workplace well-being programs for employees with diabetes is not solely an ethical imperative — it is also strategically beneficial. Diabetes and prediabetes carry significant direct and indirect costs for employers and insurers alike. Effective workplace wellness programs can reduce medical costs, improve productivity, and decrease absenteeism. (4) Organizations that support healthy lifestyles and disease management cultivate a more engaged, resilient workforce.

Conclusion

Diabetes and well-being in the workplace are deeply interconnected. Employees with diabetes face unique challenges that extend beyond clinical management into psychosocial and environmental realms. Stigma, lack of support, and practical barriers can compromise diabetes outcomes and workplace success. However, evidence demonstrates that workplace policies and wellness programs that embrace flexibility, education, and inclusivity can support better health and well-being. For employers, building diabetes-friendly work environments is both compassionate and cost-effective — ultimately fostering a healthier, more productive workforce.

References

1. CDC: Employers and Insurers | Diabetes | CDC. Atlanta, GA; 2024. Available from: <https://www.cdc.gov/diabetes/hcp/employers/index.html> (CDC)
2. IDF: Negative workplace treatment affects 40% of employees living with diabetes. Brussels: International Diabetes Federation; 2025. Available from: <https://idf.org/news/negative-workplace-treatment/> (International Diabetes Federation)
3. Dawn News: 68% of employees with diabetes face workplace bias in Pakistan. Karachi; Nov 12, 2025. Available from: <https://www.dawn.com/news/1954554> (Dawn)
4. CDC: Information for Employers and Insurers | National Diabetes Prevention Program. Atlanta, GA; 2024. Available from: <https://www.cdc.gov/diabetes-prevention/employers-insurers/index.html> (CDC)
5. Report Reveals Widespread Misunderstanding of Diabetes in the Workplace. Workplace Wellbeing Professional; 2025. Available from: <https://workplacewellbeing.pro/news/report-reveals-widespread-misunderstanding-of-diabetes-in-the-workplace> (workplacewellbeing.pro)

Tirzepatide for Obesity Treatment & Diabetes Prevention – SURMOUNT-1 (3-Year Outcomes)¹

Background

- Obesity is a chronic disease and a major risk factor for type 2 diabetes.
- Earlier analysis showed tirzepatide reduces body weight over 72 weeks.
- Current analysis evaluates 3-year safety, sustained weight loss, and diabetes prevention in adults with obesity + prediabetes.

Methods

- Phase 3, double-blind, randomized, controlled trial with 2,539 participants (1,032 with prediabetes).
- Randomized 1:1:1:1 to tirzepatide 5 mg, 10 mg, 15 mg, or placebo once weekly for 176 weeks.
- 17-week off-treatment follow-up.

Key secondary endpoints:

Percent change in body weight at 176 weeks
Onset of type 2 diabetes during 176-week and 193-week periods

Results

Weight reduction at 176 weeks:

- 5 mg: -12.3%
- 10 mg: -18.7%
- 15 mg: -19.7%
- Placebo: -1.3% (P<0.001 for all doses vs placebo)

Diabetes progression:

- Tirzepatide: 1.3% developed T2D
- Placebo: 13.3% developed T2D (HR 0.07; 95% CI 0.0–0.1; P<0.001)
- After 17 weeks off treatment: Tirzepatide 2.4%, Placebo 13.7% (HR 0.12; 95% CI 0.1–0.2; P<0.001)

Safety:

- Most common adverse events: gastrointestinal, mild-to-moderate, mainly during first 20 weeks dose escalation
- No new long-term safety signals identified

Conclusions

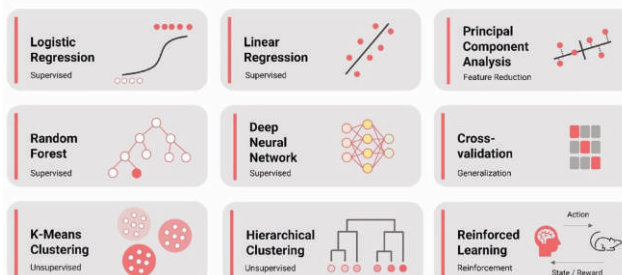
- Tirzepatide provides substantial, sustained weight reduction over 3 years in adults with obesity + prediabetes.
- Markedly reduces risk of progression to type 2 diabetes compared with placebo.
- Safety profile consistent with earlier reports; mainly GI events.

Artificial Intelligence to Diagnose Complications of Diabetes.²

Background

- AI enables computers and machines to simulate human intelligence and solve complex problems.
- In diabetes, AI is increasingly applied to diagnose complications and support care.

Commonly used Algorithms for AI



Applications

- Pharmacoadherence: Monitoring and predicting patient adherence to therapy.
- Hypoglycemia detection: Early recognition and prevention of low glucose events.
- Diabetic eye disease: Screening and diagnosis of retinopathy using imaging data.
- Diabetic kidney disease: Predictive modeling for progression risk and early detection.
- Diabetic neuropathy & foot ulcers: Detection, monitoring, and risk stratification.
- Heart failure in diabetes: AI-driven prediction and management strategies.

Advantages

- Handles large, complex datasets from multiple sources.
- Integrates diverse data types to produce patient-specific insights.
- Improves accuracy and efficiency of diagnosis and risk prediction.

Future Outlook

- AI is the foundation of emerging medical technologies.
- Expected to transform diabetes care and the early diagnosis of complications.

Gut Microbiome and Diabetes – Current Evidence³

Background

- Diabetes mellitus is a major global health problem, with rising incidence worldwide, particularly among youth and children.
- Type 1 (T1DM) and Type 2 (T2DM) have distinct causes, pathophysiology, presentation, and treatment.
- Lifestyle, diet, environment, and healthcare access all influence diabetes risk.

Role of Gut Microbiome

- The gut microbiome may influence the initiation, progression, and severity of diabetes.
- Intestinal microbes and their fermentation products impact:

Host metabolism

- Immune system regulation
- Nutrient digestion and absorption
- Gut barrier integrity and protection against pathogens

Findings

- Diabetes is associated with changes in specific bacterial populations at various taxonomic levels.
- Microbiome shifts are influenced by geography, age, diet, and antidiabetic medications.
- Evidence exists for both T1DM and T2DM, though the causal relationship remains unclear.

Future Directions

- Research should employ advanced methodologies to study a broader range of gut microorganisms.
- Potential application of probiotics to restore beneficial bacteria could offer novel adjunctive therapies for diabetes.
- Understanding microbiome interactions could lead to personalized interventions targeting metabolism and immunity.

References:

1. Jastreboff AM, le Roux CW, Stefanski A, Aronne LJ, Halpern B, Wharton S, et al. Tirzepatide for obesity treatment and diabetes prevention. *New England Journal of Medicine*. 2025 Mar 6;392(10):958-71.
2. Ayers AT, Ho CN, Kerr D, Cichosz SL, Mathioudakis N, Wang M, et al. Artificial Intelligence to Diagnose Complications of Diabetes. *Journal of Diabetes Science and Technology*. 2025 Jan;19(1):246-64.
3. Fliegerová KO, Mahayri TM, Sechovcová H, Mekadim C, Mrázek J, Jarošíková R, et al. Diabetes and gut microbiome. *Frontiers in microbiology*. 2025 Jan 7;15:1451054.



Announcement
FIRST

12TH MID-SUMMER ENDOCRINE UPDATES

"ADVANCING ENDOCRINE CARE: BRIDGING SCIENCE AND PRACTICE"

JULY 3-5, 2026- PEARL CONTINENTAL HOTEL, BHURBAN

Salient Features:

- World's renowned national & International faculty
- State of the art lectures
- Interactive Question & Answer Sessions
- Pharma / industry exhibition




➤ Organizing Chair
Dr Tahir Ghaffar Khattak


➤ President
Dr Ali Asghar

➤ Scientific Chair
Dr Yaqoob Khan

 Haroon Micheal
+00 92 3004856744

 admin@pakendosociety.org

 www.pakendosociety.org

 Conference Secretariat
Department of Endocrinology,
Shifa International Hospital, Islamabad

Address for Correspondence

National Coordinator, Pakistan Endocrine Society
5C khayaban-e-Rizwan Phase 7 DHA, Karachi

Ph: +92 300 485 6744, Email: admin@pakendosociety.org, www.pakendosociety.org

To become member of Pakistan Endocrine Society, visit the website and apply

Newsletter Editor: **Dr. Saima Askari**

Layout and Design: **Atif Jamal**