

## How Diabetes changed my life



My name is Torsten Hoffmann, I work for Siemens Healthineers Lab Diagnostics and I head Pricing & Deal Building for LD in the EMEA region.

I'm 57 years old and this year I will celebrate my 40<sup>th</sup> year in Laboratory Diagnostics. It is my original profession; it is my hobby and it is deeply enrooted in my heart.

At the end of 2018 I was diagnosed with Type 2 Diabetes, primarily diagnosed by myself. I am originally a Med Tech, so it was clear for me what being unbelievably thirsty, sweating a lot and feeling very bad for more than a week could mean. So, I asked a Marketing colleague for a reagent kit and measured my HbA1c (the "long term sugar level", the sugar connected to the red blood colorant, the Hemoglobin) by using our DCA Vantage system, the golden standard of HbA1c measuring. The result was high, much too high at 12.7%. This means my blood sugar had been at an average level above 300 mg/dl for weeks, which is much too high. Blood sugar at this level is poison for the body; it should be below 100.

Today, 13 months later, I am a lucky guy because my diabetes is completely gone. I removed more than 90% of the crystal-sugar and white flour from my food and lost 33-kilogram weight. My HbA1c has been fully normal (< 6%) for 6 months. But this is not the story I want to tell you.



18 months ago



4 weeks ago

## The Story – Diabetes in Gambia

During my treatment at the beginning of 2018, I was invited by my diabetes advisor to visit a fundraiser evening for diabetes patients in [Gambia](#), the smallest country in Africa. I met the founder of this small charity named "[Diabetes-Projekt The Gambia e.V.](#)", Roland Schindler. Before he retired, Roland worked for Roche for most of his life, one of the big four global companies in Lab Diagnostics.

This evening left a deep impression on me, I could not believe that there are countries in the world where diabetic patients are not supported by the healthcare system, which is the case for most diabetics in Gambia. After that evening I became a member of the charity and I decided to help. I took over the sponsorship of a 40 year old man and his family. Because of the lack of diabetes therapy in Gambia, one of his feet had been amputated because of a diabetes related, untreated inflammation and circulatory disorder. This means he is no longer able to work, because in Gambia there is no work for people with a disability.

To support the people with money is one (important) thing, but it is much better is to support them personally. I decided to visit Gambia together with a group of the charity last November.

In my luggage I had a new DCA Vantage instrument and 100 reagents tests to measure HbA1c. The instrument and the reagent were a donation from the German Siemens Diagnostics Sales organization, my deep thank goes to Guido Schuette who approved it. If you are interested in more details, there is a travelogue available online on the diabetes project Gambia homepage in multiple languages.

## My impressions

Most of the Gambians I met were very friendly people by heart, you always felt welcome as a friend.

They do not have a lot, but what they have they are willing to share with you.

Gambia has a population of around 2.3 million people, it is a very poor country with no big industry, no natural resources, no oil and not a lot of tourists because of the bad infrastructure. The average monthly income is below 50 €.

95% of the streets are dirt roads, 9 out of 10 cars you see are discarded ones from Europe. They recycle everything, it is unbelievable. My impression was that 90% of the discarded German Mercedes 190 (manufactured in the 80s) are now used in Gambia, often as private, low cost taxis in a condition you would consider unusable.

Children who have the chance to go to school are happy children. Often they walk more than 20 km daily to go to school and come back home, as there are not really any buses and trains.

## The Healthcare System in Gambia

First forget everything you saw in or know from Europe, US and Asia. Africa is a different universe. More than 50% of people in Africa don't have access to healthcare support! Our group visited the biggest hospital in Banjul, the capital city with a population of around 35,000 in the city and 420,000 in the greater area. This hospital has a diabetes drop-in clinic two days a week. For hundreds of people this is the only chance to get any support for their diabetes. They sit outside a very small building, on the ground, in the sun, and usually must wait between 2 to 6 hours. They wait to get 2 to 3 minutes support and most of the doctors are from Cuba. What the patient is normally given (for the next 4 weeks) is 4-5 syringes, some needles, some insulin (cheap, from India) and nutritional suggestions. They must pay around 3 € for that. What they don't get? Lab tests, additional support, training or therapy. We saw scars the size of a hand because they use the needles as often as possible. You cannot inject aseptically if you only get a few needles every month. Nothing to clean the puncture. And that wasn't different in the "Lab" we visited the next day. All (10 year old) instruments were broken and there is no money to repair them. The only working instrument in this lab was the DCA we provided them as a donation. It was the first time in the last 2 years that they could measure HbA1c. 30% of all patients had results above 14% which means their blood sugar over the last 6 weeks was on average above 400 mg/dl.

## The "Diabetes-Projekt The Gambia e. V."

To supply a type 1 diabetic patient with all necessary medication and food in Gambia for 1 year, is costs approx. 600 € (in Germany, without food, it is on average more than 5,000 €). A sack of rice (50kg) costs 25 € and each strip and syringe must be financed yourself. The Diabetes Project The Gambia charity therefore needs your support to raise almost 40,000 € each year to ensure basic services for the 70 people they support. Every Euro goes to the patients. Travel costs to Gambia are paid from the charity members privately as well as for their hotel, transportation and food.

My next trip to Gambia will be in November 2020 and it would be fantastic if you support diabetes patients in Gambia too. And trust me, it feels spectacular to look into a child's eyes who knows that you helped him to survive.

If you are interested in our work feel free to send me an email, WhatsApp, or give me a call. If you would like to donate, this [link](#) brings you to the right place.

Pictures say more than thousand words



The core team (I am the guy with the cap in the back row)



Broken instrument? Bad – Service? No money! – Needs replacement



The very old DCA still works!



A stroll through town



Our car for two weeks



In front of Banjul's biggest shopping mall



People work hard in Gambia



They use what we wasted years before



Visiting a school



Happy to be in school



Playground is the always the street



Visit of the biggest public Hospital in Banjul



The Emergency Unit



DCA Vantage – Golden Standard for HbA1c – Donor of the German Sales Organization





First time they could measure HbA1c since more than a year



“Classic” Blood Glucose measurements gets replaced more and more by



the new biosensors like this one – 2 weeks ongoing Glucose measurements



World Diabetes Day Nov. 14<sup>th</sup> 2019

Children's are our all future









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Every support is needed and very welcome

