Fifty Years of Compassionate Care and Harmonious Collaboration of the Korean Diabetes Association: The 50th Anniversary of Korean Diabetes Association

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The Korean Diabetes Association (KDA) was founded on October 4th, 1968 to promote national diabetes care through multi-disciplinary activities in practice, research, and education with about 30 members including 12 frontiers. In Korea, identification of patients with diabetes dates back to the 1950s after the Korean War. At that time, diabetes was a rare disease, and it could not be easily found even in a tertiary hospital in Korea. The first community-based epidemiologic study was conducted in a rural area in South-West of Korea in 1971 (Okku-gun, Jeollabuk-do) and found that the prevalence of diabetes was 0.91% in Koreans with 10 years of age and above confirmed as positive by both criteria at 1 and 2 hours after 50-g glucose tolerance test (≥160 and ≥110 mg/dL, respectively) in Korean adults (≥30 years of age) with glycosuria [1]. At present, the prevalence of diabetes in 2013 to 2014 has increased to 13.7% in Korean adults (≥30 years of age) based on fasting plasma glucose (≥126 mg/dL), current taking of anti-diabetic medication(s), history of previous diabetes, or glycosylated hemoglobin ≥6.5% [2]. Economic and social developments in Korea have significantly affected the lifestyles including daily activities and intakes of calories and food composition, and this complexly changes the non-communicable diseases, such as diabetes, based on the genetic predisposition [3].

A brief history and achievements of the KDA are summarized in Table 1. As the prevalence of diabetes in Korea increased, the KDA has achieved much in its first 50 years since 1968, and members of KDA have been increasing (Fig. 1) [2,4].

As of October 2018, KDA has a membership of 3,585 including 2,245 physicians, 571 nurses, 473 dietitians, 101 pharmacists, 38 social workers, and so forth. The KDA is accredited as one of the 186 member societies of the Korean Academy Medical Sciences and has 18 committees in 2018. We, on behalf of members of the 50th anniversary committees, are proud of our dedicated members who are passionate about advancing the profession on comprehensive diabetes care we share. And, from October 10th to 11th, 2018, the KDA celebrated its 50th anniversary during the 2018 International Congress of Diabetes and Metabolism (http://icdm2018.diabetes.or.kr/).

Successful diabetes care requires an organized, systematic approach, and the involvement of a coordinated team of dedicated health care professionals to improve quality of care and supporting patients' self-management, and finally diabetes-related outcomes [5]. To support these objectives, the KDA has been actively engaged in diverse fields, such as academic activities and publication of official journal, clinical and basic research, training of health professionals, and patients advocacy and education. The heart of KDA mission called “Happiness beyond diabetes” is ensuring that we implement more effective
Table 1. History and achievement of the Korean Diabetes Association

| Year | Achievement |
|------|-------------|
| 1968 | Establishment of KDA (The first president: Dr. Eung Jin Kim) |
| 1970 | 1st Scientific session held in Seoul, Korea  
Publicaiton of *List of food exchange book* |
| 1972 | Publication of *Journal of Korean Diabetes Association*  
Joined as International Diabetes Federation member country |
| 1981 | 1st Korea-Japan Diabetes Symposium held in Korea |
| 1985 | 1st Spring Congress of the KDA is held |
| 1986 | 1st Sulwon Research Grant and KDA research grant is established |
| 1988 | Publication of *Diabetes food substitution table practical guideline* |
| 1990 | Publication of *Diabetes practice guideline* (1st edition)  
Publication of *Diabetic glossary* (1st edition)  
1st Seminar for Diabetes Educators is held |
| 1991 | Medical award for outstanding members is established |
| 1992 | Publication of *Textbook of diabetes* (1st edition) |
| 1993 | IDF-WPR held in Seoul  
1st Course of study for diabetes educators is held  
1st Diabetes Research Summer Workshop is held |
| 1998 | Publication of *Guideline for insulin treatment* |
| 1998 | KDA homepage is opened  
Diabetes Bus is started |
| 1999 | Publication of *Textbook of diabetes* (2nd Edition) |
| 2000 | 1st Diabetes Educator Certification (205 educators) is achieved |
| 2000 | 1st Diabetes Educators’ Workshop is held  
Staged Diabetes Management education is started |
| 2004 | 1st Diabetes 2030 Camp is held |
| 2004–2005 | Launching of *the Korea-Cambodia Twin project*  
Publication of *Textbook of diabetes* (3rd edition) |
| 2006 | *Journal of Korean Diabetes Association* registered by the National Research Foundation of Korea |
| 2008 | Journal name revision: *Journal of Korean Diabetes Association changed to Korean Diabetes Journal (KDJ)* |
| 2010–2011 | KDJ registered in PubMed Central  
*Young Diabetologist Forum* started  
Launching of the EGDM (Essential Guideline to Diabetes Management) program  
8th IDF-WPR held in Busan  
Journal name revision: *Korean Diabetes Journal changed to Diabetes & Metabolism Journal*  
1st ICDM-Annual international conference is held  
Announcement of *Diabetes fact sheet in Korea 2012* |
| 2012–2013 | *Diabetes & Metabolism Journal* listed in SCOPUS |
| 2013–2014 | Announcement of *Diabetes fact sheet in Korea 2013*  
5th AASD meeting held in Seoul  
1st Korea-Japan diabetes forum held in Jeju |
| 2015–2016 | Announcement of *Diabetes fact sheet in Korea 2015*  
Publication of *Diabetes treatment guideline* (5th edition)  
Announcement of *Diabetes fact sheet in Korea 2016* |
| 2017 | *Diabetes & Metabolism Journal* indexed in Science Citation Index Expanded |

KDA, Korean Diabetes Association; IDF-WPR, International Diabetes Federation-West Pacific Region; ICDM, International Congress of Diabetes & Metabolism; AASD, Asian Association for the Study of Diabetes.
health care delivery systems for patients with diabetes throughout multi-disciplinary evidence-based care to improve the health outcomes and quality of diabetes self-management and education.

Since the establishment, KDA holds a nationwide annual meeting. This academic meeting had changed into two scientific sessions annually in spring and autumn from 1985 to 2010. However, following the increasing demand for active academic activities and communications with international health care professionals and researchers in various fields of diabetes, KDA changed one of its biannual academic meetings into the “International Congress of Diabetes & Metabolism” since 2011. It grew to a huge academic meeting with many nationally and internationally recognized diabetes experts (cumulated numbers of attendee from 2011 to 2018 are 9,910). With 50 years of experience, especially with that gained from the 8th International Diabetes Federation-West Pacific Region (IDF-WPR) Congress which was held successfully in Busan in 2010 and from the past 8 years of successful international academic meeting, the IDF congress 2019 will be held in Busan. Professor Nam Han Cho was elected as the first Asian president of IDF in 2015. In addition, owing to the consensus on the difference between Asian and Western populations in the genetic and environmental aspects of diabetes, Korean and Japanese researchers established Korean-Japan symposium for active academic communications on their research outcomes in 1981. Korean and Japanese researchers traveled back and forth every other year to exchange knowledge and experience until 2011. Since 2013, this scientific gathering is named as “Korea-Japan Diabetes Forum”.

For an academic association to prosper for a long time, the foundation and the growth of its own academic journal is pivotal. On March 1st, 1972, the first issue of “The Journal of Korean Diabetes” was published by the KDA. This landmark achievement was made possible due to the efforts of many members of KDA who longed for having their own journal to share their precious research with other researchers in the field of diabetes research. The yellow cover of the journal depicts pancreatic islets in the pancreas. This journal was the cornerstone for diabetes research in 50 years of KDA history as well as the progenitor of “Korean Diabetes Journal” in 2006 and finally changed to “Diabetes Metabolism Journal” in 2011. The “Korean Diabetes Journal” had been indexed in PubMed Central, and “Diabetes Metabolism Journal” was indexed in the Science Citation Index Expanded in 2017, and the impact factor as of 2017 is 3.673 [6].

The support for and to develop research is the mainstay of the role of an academic association. From 1985, KDA has established a research grant, called “Sulwon Award” in order to encourage the enthusiastic researchers and their academic achievements. Sulwon is a nom de plume for Professor Eung Jin Kim, who is one of the most celebrated diabetologists among the founders of the KDA and initiated this research grant by a huge donation. Every year, candidates are nominated, and one researcher is selected as the recipient of this honorable and prestigious award. In 2007, the KDA collaborated with Health Insurance Review and Assessment Service to study the basic statistics of diabetes in Korea, and they published “Diabetes in Korea 2007” [7]. And then the effort to collect the nation-representative data on the current status of diabetes in Korea has been succeeded with several government agencies collecting national health insurance data or the Kore-

Fig. 1. The changes in the number of members of Korean Diabetes Association and prevalence of diabetes in Korea. Adapted from Kim [4]. KNHANES, the Korean National Health and Nutrition Examination Survey.
Suggesting guidelines for diabetes management is critical to quality improvement and standardization of care. Therefore, the earliest project since the foundation of the KDA was to establish standardized guidelines. In 1990, the KDA published the first edition of "Treatment guideline for diabetes," and it had been updated to the 5th edition in 2015 following major changes in the evidence and relevant insurance policies [9]. The KDA also published its first edition of "Textbook of diabetes" in 1992 to provide medical students, residents, specialists, and other public healthcare professionals with a reliable educational resource. The textbook was being revised according to the recent updates, and the 5th edition was published in 2017.

In addition, as the incidence of diabetes in Korea exhibited a rapid growth, the KDA also established a series of educational programs for primary care physicians. Therefore, KDA adopted the "Staged Diabetes Management Program" from the International Diabetes Center in the United States in 1999. The program has been revised and updated constantly, and it evolved as the "Essential Guideline to Diabetes Management" since 2010. To date, approximately 6,000 physicians participated in this educational program.

With respect to patient advocacy, KDAs efforts to improve early diagnosis of diabetes and self-management of diabetes have been conducted with a long story. "Diabetes Bus" was a project, that ran between the years of 1998 to 2004, to visit the underserved areas of Korea and provide Korean people with free glucose monitoring and consultations. More than 15,000 individuals benefited from this project. "Blue Socks Campaign" and "So-tong (means communicable even in small pain)" refer to the screening of diabetic peripheral neuropathy. The KDA launched a diabetes camp called "2030 Camp" for underserved areas of Korea and provide Korean people with free glucose monitoring and consultations. More than 15,000 individuals benefited from this project. "Blue Socks Campaign" and "So-tong (means communicable even in small pain)" refer to the screening of diabetic peripheral neuropathy.

The KDA is 50 years old this year and the future of KDA is bright. They used to say that the years do not flow but build up. KDA has accumulated 50 years as a community of academics, a community of vitality, a community of friendship and social relationship, fully authentic and complete, not with just reading or listening. By this time, at the age of 50, we define the accumulation of those years without hesitation of a second, as "The hope of curing diabetes, a half century of challenge." Of course, it is humbly defined as a 50-year-old "Jicheonmyung (know the providence of heaven)."

The hopes and challenges of these 50 years will continue to accumulate to become 100 years old in 2068, and will continue to build up to the distant future of KDA. To be successful, the KDA must focus on the patients care, build a connected community, deliver transformative experiences, and measure the impact of the choices made. To prepare for the future, the KDA is redefining what it means to be 'professionalism' and how do we strengthen the 'association' of multi-disciplinary care of diabetes. Taking a closer look at the history of our own precious association, we should intend to understand the needs of patients with diabetes and those who are devoted in the care and research for better diabetes care, more deeply and practically and develop the capability to respond to their expectations more quickly. And when we are relevant, we continue to grow. That is the best way to secure our "KDA's success" for the next 50 years.

CONFLICTS OF INTEREST

No potential conflict of interest relevant to this article was reported.

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REFERENCES

1. Kim KS, Choi CH, Lee DY, Kim EJ. Epidemiological study on diabetes mellitus among rural Korean. J Korean Diabetes Assoc 1972;1:17-24.
2. Won JC, Lee JH, Kim JH, Kang ES, Won KC5, Kim DJ, Lee MK. Diabetes fact sheet in Korea, 2016: an appraisal of current status. Diabetes Metab J 2018;42:415-24.
3. Cho NH. The epidemiology of diabetes in Korea: from the economics to genetics. Korean Diabetes J 2010;34:10-5.
4. Kim DJ. The epidemiology of diabetes in Korea. Diabetes Metab J 2011;35:303-8.
5. TRIAD Study Group. Health systems, patients factors, and quality of care for diabetes: a synthesis of findings from the TRIAD study. Diabetes Care 2010;33:940-7.
6. Won KC. A short but long journey with you. Diabetes Metab J 2018;42:1-2.
7. Task Force Team for Basic Statistical Study of Korean Diabetes Mellitus of Korean Diabetes Association, Park lEB, Kim J, Kim DJ, Chung CH, Oh JY, Park SW, Lee J, Choi KM, Min KW, Park JH, Son HS, Ahn CW, Kim H, Lee S, Lee IB, Choi I, Baik SH. Diabetes epidemics in Korea: reappraise nationwide survey of diabetes “diabetes in Korea 2007”. Diabetes Metab J 2013;37:233-9.
8. Kim CS, Ko SH, Kwon HS, Kim NH, Kim JH, Lim S, Choi SH, Song KH, Won JC, Kim DJ, Cha BY; Taskforce Team of Diabetes Fact Sheet of the Korean Diabetes Association. Prevalence, awareness, and management of obesity in Korea: data from the Korea national health and nutrition examination survey (1998-2011). Diabetes Metab J 2014;38:35-43.
9. Ko SH, Hur KY, Rhee SY, Kim NH, Moon MK, Park SO, Lee BW, Kim HJ, Choi KM, Kim JH; Committee of Clinical Practice Guideline of Korean Diabetes Association. Antihyperglycemic agent therapy for adult patients with type 2 diabetes mellitus 2017: a position statement of the Korean Diabetes Association. Diabetes Metab J 2017;41:337-48.
10. Yoo HJ. History of diabetes mellitus. Seoul: Dae Gwang Publishing; 1987. Chapter 13, Camps for children with diabetes; p125-6.