Profile

Linong Ji: fighting to turn the tide against diabetes in China

When Linong Ji went to the USA to train as a research fellow in the early 1990s, food in his native China was still rationed as the country struggled with the fallout of a severe economic slowdown. The prevalence of diabetes in China at the time was estimated to be 1%. By the time Ji returned in 1997, years of economic boom had increased wealth and profoundly changed the lifestyle of many Chinese. The prevalence of diabetes then was estimated to be around 3%. Now, the prevalence of diabetes in Chinese adults is estimated at about 10% and rising, with a prevalence of prediabetes of over 15%, and as Co-Director of the Peking University Diabetes Center and Director of the Department of Endocrinology and Metabolism at Peking University People’s Hospital in Beijing, Ji has witnessed the toll this disease is taking on society.

Improving the prevention and management of diabetes is something of an all-consumption passion for Ji: he’s also Vice President of the International Diabetes Federation (IDF), a member of WHO’s Expert Committee on the Diagnosis and Classification of Diabetes, and a member of Herbalife Nutrition Institute’s Nutrition Advisory Board, among many other roles. Needless to say, his schedule is hectic. I met him after he landed in London from a long flight, but the only time he sounded remotely tired was when he talked about the rising tide of patients with diabetes in China. “We are overwhelmed”, he says. “My clinic sees around 600 patients a day, most with diabetes.” And Ji spoke in stark terms about the increasing burden of diabetic kidney disease in China. “The wealth that we’ve accumulated over the past 30 years will be wasted in the drains of our dialysis machines.”

Born in the northeastern province of Hebei, Ji grew up among a family of doctors. “My father is an internist in the military hospital, my uncle is a cardiologist, my aunt practised traditional Chinese medicine, and my mother is a head nurse”, he says. But Ji was always more interested in physics, “fascinated by the stars and the universe”, than he was in medicine. “My clinic sees around 600 patients a day, most with diabetes.” And Ji spoke in stark terms about the consequences of failure to bring diabetes under control. “We will be the kingdom of dialysis”, he says, referring to the increasing burden of diabetic kidney disease in China. “The wealth that we’ve accumulated over the past 30 years will be wasted in the drains of our dialysis machines.”

Although he has conducted numerous studies examining the more scientific or medical aspects of the disease, Ji’s primary focus is translating research into reality”, says Zhang Puhong, Head of the Diabetes Research Program at The George Institute for Global Health at Peking University Health Science Center. Much of Ji’s work has focused on building an accurate picture of how patients with diabetes are being treated and managed, and his findings have often been shocking. In one of many collaborative studies with the IDF, Ji says it was hard to find a patient with type 1 diabetes in China who had lived with their disease for 30 years or more. “The life expectancy in the UK, USA, and Europe for someone with type 1 diabetes approaches that of the healthy population, but in China that’s not the case”, he says. “That’s not just a medical issue but a social issue. Society needs to pay more attention to patients with type 1 disease; their lives should not be determined by where they were born.” His research has also shown that only 30–40% of patients with diabetes had diagnosed disease, “and the control of their glucose and other cardiovascular factors are really poor”, he notes.

Things will get worse before they get better, Ji predicts. “Since there’s no national level or systematic approach to preventing diabetes, the prevalence will continue to rise”, he says. The government is paying more attention to the need to promote healthier lifestyles, but in a country the size of China “there is no template we can follow”, says Ji; “China has to think about how to do this itself”. However, he notes, “in terms of managing diagnosed diabetes, there are very good examples, like the UK and US, and that is to implement standard care”. Part of the solution will be to build capacity in the primary care system to manage patients with type 1 and type 2 diabetes in the community, he explains. “We’re now working with the government to build such capacity”, he says, and he has overseen the creation of over 60 national centres of excellence to help train the multidisciplinary teams needed to tackle the problem. “China can learn from the past experiences of other countries”, he says. “We must learn, or the future will be very grim.”

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