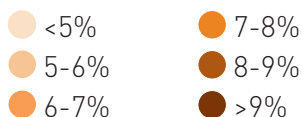
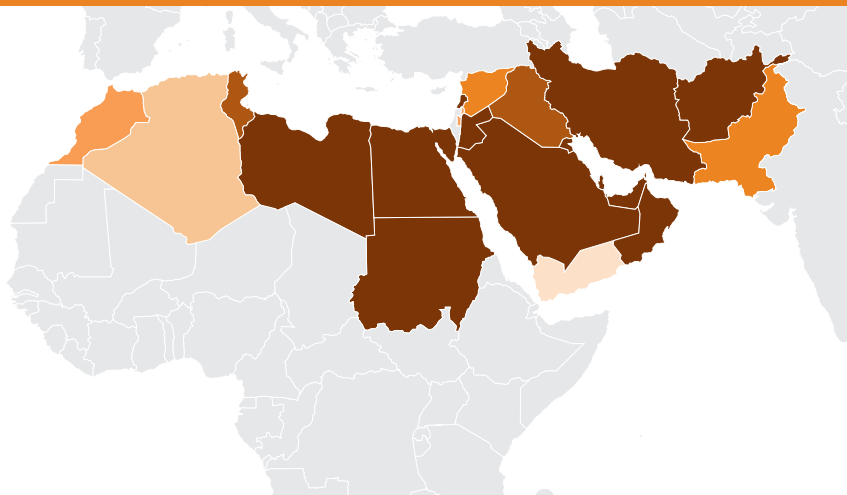


MIDDLE EAST AND NORTH AFRICA

Prevalence (%) estimates* of diabetes (18-99 years), 2017



*Comparative prevalence

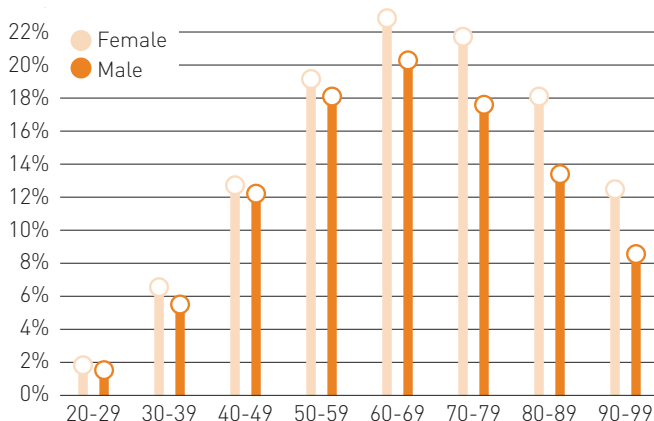


At a glance	2017	2045
Adult population (18-99 years)	435 million	728 million
Diabetes (18-99 years)		
Regional prevalence	9.2%	11.8%
Age-adjusted comparative prevalence	10.5%	10.4%
Number of people with diabetes	40 million	84 million
Number of deaths due to diabetes (20-99 years)	373,557	-
Health expenditure due to diabetes (18-99 years)		
Total health expenditure, USD	20 billion	37 billion
Impaired glucose tolerance (18-99 years)		
Regional prevalence	8%	9.1%
Age-adjusted comparative prevalence	8.6%	8.5%
Number of people with impaired glucose tolerance	35 million	67 million
Type 1 diabetes (0-19 years)		
Number of children with type 1 diabetes	175,800	-
Number of newly diagnosed children each year	19,100	-

Top 5 countries for number of people with diabetes (18-99 years), 2017

1. Egypt	8,491,029
2. Pakistan	7,656,317
3. Islamic Republic of Iran	5,108,254
4. Saudi Arabia	4,004,877
5. Sudan	2,317,054

Prevalence (%) estimates of diabetes by age and sex, 2017



Highlights

- 1 in 11 adults have diabetes.
- Almost 40 million people have diabetes. If we do not act now, this figure will rise (115%) to 86 million by 2045.
- With 9.2%, the region has the second highest prevalence of diabetes among IDF regions.
- 1 in 5 live births are affected by hyperglycaemia in pregnancy.

- Half of the people with diabetes (49%) have not been diagnosed and are at a higher risk of developing harmful and costly complications.
- Diabetes will cause more than 373,000 deaths in 2017.
- USD 20.5 billion will be spent on treating diabetes, but there will be an increase of 81% in the healthcare expenditure due to diabetes by 2045.
- There will be an increase of 92% of people with IGT by 2045.

Corporate sponsors

IDF would like to express its thanks to the following supporters of the eighth edition:



Need more information?

Check www.diabetesatlas.org or scan QR code



Country/territory	Adult population (18-99 years)	Diabetes cases (18-99 years)	Diabetes (18-99) national prevalence (%)	Diabetes age-adjusted (18-99) comparative prevalence (%)	Diabetes related death (18-99 years)	Cost per person with diabetes (USD)	Undiagnosed diabetes cases (18-99 years)	One in X adults has diabetes
Afghanistan*	17,150,814	1,054,460	6.1	9.2	20,960	114.67	733,870	16
Algeria	27,382,234	1,884,559	6.9	6.6	15,935	566.93	1,239,097	15
Bahrain*	1,064,034	169,523	15.9	16.3	591	1,684.76	64,534	6
Egypt	58,439,942	8,491,029	14.5	16.8	84,029	276.24	4,509,523	7
Islamic Republic of Iran	58,642,752	5,108,254	8.7	9.2	40,870	543.07	1,791,527	11
Iraq	20,508,024	1,447,646	7.1	8.5	17,537	577.24	681,118	14
Jordan	4,658,952	416,101	8.9	11.3	3,471	629.57	159,388	11
Kuwait	3,024,558	446,635	14.8	15.5	1,339	1,834.34	75,035	7
Lebanon	4,324,728	631,215	14.6	12.6	7,560	787.33	271,120	7
Libya*	4,212,490	455,805	10.8	10.3	4,122	591.71	195,778	9
Morocco	23,973,832	1,718,795	7.2	7.0	15,112	302.49	738,259	14
State of Palestine	2,650,148	170,228	6.4	10.1	-	-	42,712	16
Oman	3,568,342	370,104	10.4	12.0	1,224	855.46	162,089	10
Pakistan	116,776,556	7,656,317	6.6	8.0	89,285	63.23	4,706,338	15
Qatar*	1,898,244	262,997	13.9	16.3	537	2,677.98	100,117	7
Saudi Arabia	21,981,202	4,004,877	18.2	17.7	15,536	1,524.35	1,576,659	5
Sudan	22,656,178	2,317,054	10.2	15.2	30,344	230.65	995,224	10
Syrian Arab Republic*	10,962,104	719,037	6.6	7.8	8,135	117.96	308,842	15
Tunisia	8,306,842	813,226	9.8	8.5	8,317	459.37	609,920	10
United Arab Emirates	7,798,734	1,198,176	15.4	17.2	2,328	1,678.76	487,658	7
Yemen	15,153,970	535,338	3.5	5.0	6,323	160.66	119,113	28

*Based on extrapolation from similar countries

National/regional prevalence: the actual percentage of each country's/region's adult population that has diabetes. Appropriate for assessing diabetes burden.

Comparative prevalence: calculated by assuming that a country/region has an age profile identical to that of the world population. Appropriate for comparing countries/regions.

Healthcare expenditure for people with diabetes are assumed to be on average two-fold higher than people without diabetes.