A Prospective Study - Awareness among Diabetic Patients

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Abstract: Morbidity and mortality due diabetes in all over world is alarming. We submit a study done over 3 months in the tertiary care hospital in southern part of Tamilnadu

Aim Of The Study: The aim of the study is to check the knowledge of the patients prove that educating will improve the outcome.

Material And Methods: This is a prospective observational study in a tertiary medical care hospital, in southern part of Tamil Nadu, south India, during September 2016 with in 50 patients all are presented with diabetes, on regular treatment (type 1 and type 2 on insulin)

Results: Many patients aware of their disease and management. Majority of them know when to adjust the dose of insulin and our aim is to provide 100 percent knowledge

Conclusion: Only by repeated, regular, IEC (information, education and communications) is the need of the hour

Keywords: diabetes, insulin, hypoglycemia, hyperglycemia

I. Introduction

One of the cause of admission of diabetic patients to hospital are missing a meal or missing the shot of insulin for all type 1 and type 2 pts on self administering insulin. We want to check the awareness level in community on their knowledge about their diabetic status, in patients attending diabetic out patient facility in a Tertiary care medical college hospital in southern part of Tamilnadu.

II. Material And Methods

Diabetic patients attending the medical out patient department of Govt Theni Medical College Theni were provided with a set of questionnaire and the knowledge regarding diabetic disease, their disease status, dietary regulations, medication usage, its adverse effects and their awareness were assessed. 50 out patients were randomly selected and provided the questionnaire and their knowledge was assessed.

III. Results

42% (21) of patients had knowledge of type of diabetes which they suffer. 76% (38) had awareness about the injection for diabetes is insulin. 54% (27) were aware regarding optimal level of glycemic status (preprandial 110 mg, post prandial 140 mg). 84% had awareness of insulin administration 30 min before meals. 88% (44) were aware of hypoglycemic symptoms. 46% (23) were aware regarding insulin medication storage so that its efficacy preserved. 76% (38) had knowledge about site of insulin administration. 48% (24) that type of fruits to be taken by diabetic patient. 54% (27) are of complications of untreated diabetes. 70% (35) diabetic patients had knowledge of foot care.
IV. Discussions

In our study awareness regarding the type of diabetes is poor and most of them don’t know the type in which they are suffering. Most of the patients in our study know the knowledge about injection site of insulin administration. But they don’t know the correct method of subcutaneous administration and the timing of insulin injection also not satisfactory. Most of them know insulin has to be given 30 min before food but most of them not taking in the correct duration before meals. Few patients taking insulin after meals and just before meals. The reason might be they have the fear of hypoglycemia.

The knowledge regarding the target glycemic level also not much satisfying. 54% people only know the cut off target value of diabetes. The cut off values for diagnosis of diabetes and good glycemic control has to be taught and informed to public and patients via Health Education. If they know about the cut off values only means they might not end up in very high and dangerous very low level of blood sugar.

The most important aspect of our study is to introduce the knowledge and to create awareness about dangerous hypoglycemia.

54% of diabetic patients only know the complications of untreated diabetes. Some of them know about coronary artery disease as a complication of diabetes. Most of them unaware that cerebro vascular disease as a complication of diabetes (stroke) we should give adequate health education through IEC activities regarding the aspects of complications of diabetes including microvascular and macrovascular complications like retinopathy, nephropathy, neuropathy, coronary artery disease, cerebro vascular disease and peripheral vascular diseases. Salt restriction is one of the most important role in preventing the development of onset of albuminuria.

Analgesic abuse also one of the additive factors in development of nephropathy in a known diabetic patients. So adequate health education steps needed to prevent the emerging analgesic induced nephropathy complications. Untreated diabetes is first of the major cause of chronic kidney disease and End stage renal disease is one of the most important morbidity related factor. We should give adequate knowledge and to create awareness regarding Chronic kidney disease and untreated diabetes.

Foot care is the most important aspect in diabetes management. Increasing rates of amputation are mainly due to inadequate blood sugar control and neuropathy. Vasculopathy related and improper foot care approaches.

In our study 70% patients aware that foot care is also to be followed in the management of diabetes, and they don’t know the techniques in foot care. Proper knowledge and foot care techniques to be taught to all diabetic patients and public to prevent the drastic and dreaded amputation as a complication of untreated diabetes.

General physicians must educate their patients about the negative impact of diabetes on their lives due to its potential consequences and morbidities associated with it.
Our study has revealed lack of knowledge and inadequate management practices among diabetic patients of rural areas of Theni District, especially in patients attending primary healthcare setups. The results emphasize that prompt actions must be taken to increase the level of awareness among rural subjects. Hence, educating the masses about diabetes should be the major task of healthcare authorities.

Therefore, there is a need to improve the knowledge and awareness about diabetes in the rural as well as in urban areas.

This emphasizes the need for increasing diabetes awareness activities in the form of mass media campaigns, public lectures and door to door campaigns on a massive scale in both urban and rural India.

It is likely that the results of the study represent only the ‘tip of the iceberg’. Furthermore, management techniques and knowledge of this silent and deadly pathological condition should be spread to rural population through seminars and media, which would eventually mould their life in a better condition.

There are some limitations in using a questionnaire such as this for assessing knowledge of a disease in the community: open-ended questions often depend on the verbal ability and recall memory while some closed questions can be guessed by the respondent.

In conclusion,

This study done on a large representative sample of Theni district in southern Tamilnadu reflects the knowledge and awareness about diabetes in rural area. This emphasizes the need for increasing diabetes awareness activities in the form of mass media campaigns, public lectures and door to door campaigns on a massive scale in both urban and rural India.

However, for large population based studies such as this, use of a questionnaire is perhaps the only feasible method to obtain such data.

Moreover, the fact that it was conducted on a large representative sample of Theni district and this study teach the healthcare professionals to spread the knowledge, adequate control and effective management of diabetes in preventing the complications.

References

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