



A QUALITATIVE STUDY ON THE INFORMATION RELATED TO DIABETES MANAGEMENT AMONG PATIENTS WITH TYPE 2 DIABETES MELLITUS (NMRR-19-862-46635)



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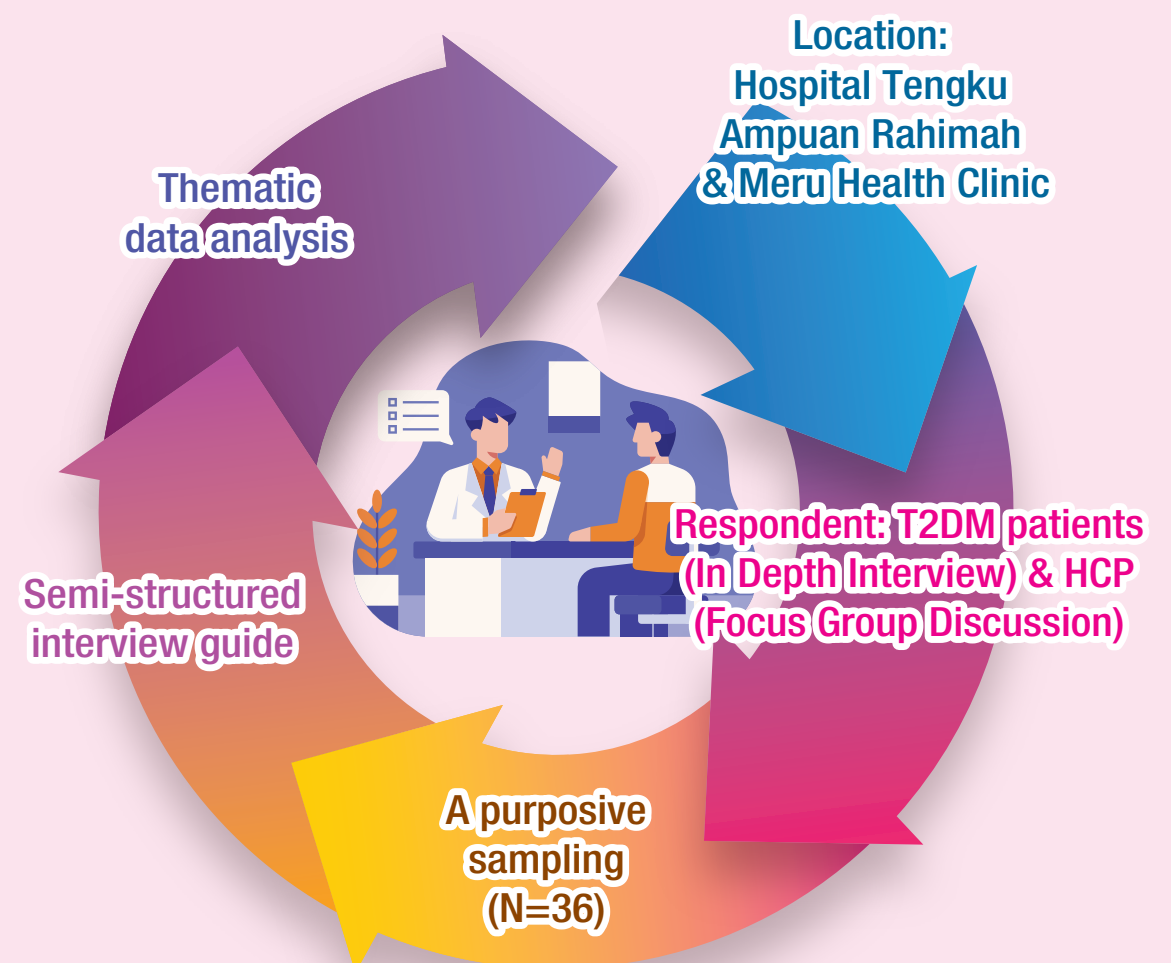
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INTRODUCTION

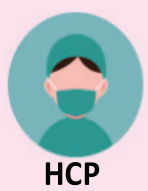
- ▶ Ineffective diabetes care is partly related to insufficient diabetes education, which must be strengthened and tackled to improve self-care management amongst Type 2 Diabetes Mellitus (T2DM) patients.
- ▶ A solid understanding of diabetes knowledge enables patients to make informed decisions about how to manage their diabetes.
- ▶ The healthcare provider (HCP) has sought to provide a wide range of services including health promotion, illness prevention, curative, and rehabilitative treatment.
- ▶ However, there are still gaps in knowledge that prevent patients from making lifestyle modifications.
- ▶ This study explored the knowledge and information received by T2DM patients in controlling their diabetes.

METHOD



RESULT

SOURCES



HCP

- The doctors and nurses, they taught us how to control sugar, and how the level should not be more than 10 or 7. (Patient 1)
- We mainly give counselling, we have a service called MTAC (Medication Therapy Adherence Clinic) for patients with Type 2 Diabetes. (HCP 1)



Social Media

- Sometimes I go through Google and Youtube to see what the medications for diabetes are. (Patient 2)
- ...especially on healthy things, now a lot can be seen on Facebook. (HCP 2)



Family Member

- Because my mother was diabetic. She was an above-knee amputee for ten years. Before she passed away, she lived with me... I know what is the difficulties (Patient 3)
- Usually...I mean, I ask my daughters. (Patient 3)



Community (i.e. Friends)

- I just mix around with people to get information. (Patient 3)
- I get to know the symptoms. I asked my surau friends, friends from the mosque, they told me I have diabetes. (Patient 4)

TYPES



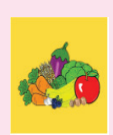
Medicine

- The way to take medicine, usually I attend seminars and all. They will tell. For example, for medicine after a meal, the duration of 4 hours, 2 hours, 1 hour, 10 minutes. (Patient 5)
- ...on how to inject insulin, and how to consume their medicine, more to that.. (HCP 3)



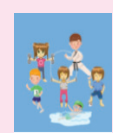
SMBG

- SMBG we explain to them, when to do SMBG, what is the importance of SMBG, what does it reflect. (HCP 4)



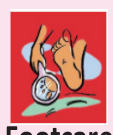
Food

- They told me to control oily food, not to take fried food also to take extra vegetables, less rice, and more fruits for the fruits, don't take the sweet ones. (Patient 6)
- On food quantity, we refer to those given by dietitians. (HCP 5)



Physical Activity

- Doctor told me to brisk walk. Doctor said to spend at least 30 minutes/day. (Patient 4)
- For those who are working, they don't have time to exercise, they can do aerobic at night or use the office chair...(HCP 6)
- ...during non-working day, we encourage to walk or jog according to their capability for at least 150minutes a week. (HCP 6)



Footcare

- The nurse advised me, check my foot...check eyes...then the nurse said, we can know from the eye veins. If ruptured or bleeding, meaning it is worsening. (Patient 4)

RISING ISSUES

Information Deficiency

- I'm also concerned about... the quantity of medication because it could affect kidney. (Patient 3)
- ...for medication intake, (I need to know) how to take the medicine if sometimes I forgot, delayed, or missed the medicine. (Patient 7)
- We don't have the education (about suitable food) for the diabetics, like wheat flour, potato... We don't know. (Patient 8)

Possible Causes

- One is they are ignorant... There are things like money, work, family, that is important so they take this matter lightly. They less accept and care (HCP 7)
- Maybe we are guilty or maybe from the prevention and complication done out there, the problems we don't know (HCP 7)
- To have the savings for brochures for 1 year is a bit difficult...health clinic's budget is not the same as in hospital.. I think that is one of them that I feel that cannot be fully utilize to provide the best for the patient (HCP 8)

CONCLUSION

- ▶ The main sources of information were HCPs and media.
- ▶ Although patients received required information on every aspect of diabetes management, some information deficit among patients were mentioned associated with medication and dietary. HCPs also suggested on the possible causes that resulted into the issues.
- ▶ Several approaches might be essential to improve the information delivery process by taking into account the effective communication channels and patients' information needs.

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