

Diabetes Prevention Knowledge Survey

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Abstract:

The article presents the results of assessing the level of awareness of older people about the socially significant disease diabetes mellitus. Pharmacies and grocery stores were monitored for the availability of food intended for patients with diabetes.

Keywords: prevention, diabetes mellitus, socially significant disease.

Relevance. The concept of socially significant diseases includes a number of diseases that carry the greatest threat to the well-being of the country's population. Socially significant diseases cause enormous damage to society, associated with the loss of temporary and permanent disability, the need for huge costs for the treatment and rehabilitation of such patients. The social significance of these diseases requires effective prevention. According to the Decree of the Government of the Republic of Uzbekistan dated December 1, 2004 N 715, the list of socially significant diseases includes such a disease as diabetes mellitus. Diabetes mellitus is a serious medical and social problem, the significance of which is due to its high prevalence, the continuing trend towards an increase in the number of patients, high disability and mortality of patients as a result of the development of complications, as well as the need to create a system of specialized care for patients. Currently, about 250 million people in the world suffer from this disease [1]. Given the rate of spread of this disease, the experts of the World Diabetes Federation predict that the number of patients with diabetes by 2030 will reach 552 million people, i.e. every 10 inhabitants of the planet will get sick. All of the above indicates the relevance and need for an in-depth study of this problem.

Type 2 diabetes mellitus (non-insulin-dependent diabetes) is a metabolic disease characterized by chronic hyperglycemia, which develops as a result of a violation of the interaction of insulin with tissue cells (WHO, 1999).

Type 2 diabetes accounts for 85-90% of all types of diabetes mellitus and most often develops in people over 40 years of age. The disease progresses slowly.

The risk factors for type 2 diabetes are: "traditional" nutrition, namely, the presence of refined carbohydrates in food (sweets, chocolate, waffles, pastries, etc.) and a very low content of fresh plant foods (vegetables, fruits, cereals); excess body weight; ethnicity; sedentary lifestyle; heredity and others. Important in the prevention of diabetes mellitus is the awareness of the population with risk factors, and as a result, minimizing their impact on the development of the disease.

The purpose of the study : to assess the level of awareness of older people about the disease diabetes mellitus.

Material and methods. To achieve this goal, we have developed a questionnaire that includes a number of questions about the causes, symptoms, as well as complications and consequences of this disease. The survey involved 114 people aged 45 to 83 years. When evaluating the results, the

survey participants were divided into two age subgroups: the first group included respondents aged 45-65 years, the second - 65 years and older.

results

According to the results of the survey, it was found that most of both groups do not know the exact concept of "socially significant disease". The predominant part of the surveyed I and II subgroups believe that socially significant diseases include tuberculosis (70.25% and 53.7%, respectively) and diabetes mellitus (52.5% and 80.3%). Almost the same number of respondents indicated hepatitis B and C (35.2% and 33.75%) and malaria (22.5% and 20.2%). 25% of respondents of subgroup I surveyed incorrectly attributed cholera to socially significant diseases, while only 7% of respondents of subgroup II chose this answer option as one of the correct ones. The results also differed in the choice of the disease "myocardial infarction" - 50.5% of the respondents in group I and 33.7% - in group II. Such results are quite understandable: the majority of those surveyed by us understand socially significant diseases not only as diseases, the occurrence and (or) spread of which largely depends on socioeconomic conditions, but also various diseases, such as malaria, cholera, myocardial infarction, which are common or especially dangerous.

All survey participants are familiar with the disease diabetes mellitus. Half of the respondents (47.5% and 60.3%) have never been told that they are predisposed to this disease.

When answering the question about the possible causes of diabetes mellitus in humans, most of the respondents of subgroup I (62.5%) found it difficult to answer and name them, while 67.5% of respondents of subgroup II indicated the most significant reasons. Obesity, stress, excess sugar in food, poor ecology and others were named among them.

Most of the respondents (80.25% and 90.7% in the first and second groups, respectively) were able to name the signs of diabetes. Among them, the most common responses were dry mouth, thirst, increased blood sugar levels.

It was found that some of the respondents (about 50% of subgroup II and about 8% of subgroup I) confuse the concept of the cause, symptom and complication of the disease. We attribute this to the fact that before filling out the questionnaires there were no explanatory conversations that could help to distinguish between these concepts. In addition, this is evidence that the respondents, mainly in subgroup II, do not have a clear understanding of the disease and its consequences, which makes it necessary to prevent diabetes in the form of educational conversations with the elderly.

According to the results of the study, most of the respondents indicated that they try to eat as little sweets as possible - 42.5% in subgroup I and 67.5% in subgroup II. The rest either do not limit themselves in sweets, or found it difficult to give an unambiguous answer.

Similar results in both subgroups were obtained when answering the question "do you monitor your blood sugar level": 30.8% monitor it constantly, 40.4% do not, and about 30% chose the answer "I rarely check". At the same time, 42.5% of respondents in subgroup I check their sugar levels in a medical institution, 29.6% have their own glucometer, and 30% do not measure their sugar levels. In subgroup II, the results of the survey showed other values: 39.6%: 20.8%: 39.6%, which is a direct indicator of less concern about health among the elderly, the reason for which may be the lack of information about this disease, lack of interest in their health, decreased mobility due to age or other reasons.

It was found that among the representatives of subgroup I, the percentage of people who use alcohol and / or tobacco products is quite large (59%). There are 20% of such persons in the II subgroup.

30% of the surveyed subgroups I and II have relatives of patients with diabetes mellitus.

50% of respondents from both subgroups found it difficult to answer unambiguously the question "Do you think that you can get diabetes?".

More than 2/3 of the respondents in subgroup I and 53.7% of subgroup II are aware of the existence of preventive diets. At the same time, half of the respondents do not limit themselves in food in any way, the other half tries not to eat fatty, sweet foods, or eats everything, but little by little. 60% of all survey participants are aware of the existence of special nutrition for diabetic patients. More than 80% do not use a sugar substitute in their diet.

The predominant part of subgroups I (70.3%) and II (60.8%) do not include in the diet products containing fructose instead of sucrose. % could not answer unambiguously.

When answering the question about the possible consequences and complications of diabetes mellitus, 62.5% of the respondents in the 1st subgroup and 53.2% of the 2nd subgroup indicated a decrease in visual acuity, heart attack, stroke, leg diseases, problems with memory and attention, while the first the place turned out to be diseases of the legs.

As a result of the survey, various data were obtained in subgroups I and II when answering the question about measures to prevent diabetes mellitus carried out by the survey participants themselves. 40% of each group has their blood sugar checked annually. A balanced diet was chosen by 42.5% of people in subgroup I and only 27.7% of subgroup II. The importance of physical activity was emphasized by 27.5% of respondents in subgroup I and 13.3% of subgroup II. 45.4% and 33.8% gave up bad habits. At the same time, 22.5% and 33.2% of the respondents do not carry out any preventive measures.

Along with the survey, we monitored pharmacies and grocery stores for the availability of food products intended for patients with diabetes. This part of the study was supposed to show how accessible this group of products is to the population. As a result of the monitoring, it was found that the range of products for people with diabetes is more represented in pharmacy chains, however, not all pharmacies are engaged in the purchase and sale of these products. In grocery stores, this group of food products, with rare exceptions, is practically not represented. The population can buy them only in large shopping centers. The most common were such items as fructose wafers of various flavors, sugar-free cookies, fructose chocolate, fructose sweets, various syrups, sugar substitutes, bran, halva. The prices for these products are not much higher than the prices for their analogues containing sugar.

Conclusion

Thus, according to the results of the study, we can conclude that almost half of the population at an age "dangerous" for the onset of diabetes mellitus are not familiar with the risk factors for developing this disease and, as a result, with preventive measures. Due to the high social significance of the disease, raising people's awareness of the causes of the development and the first symptoms of diabetes mellitus can lead to the delay of the disease and its early diagnosis, which in turn will reduce the risk of complications.

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