



FACTORS AFFECTING DRUG AND DIET COMPLIANCE AMONG DIABETIC PATIENTS

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Abstract:

The aim of the research is to identify the factors affecting drug and diet compliance among diabetic patients at githunguri health center. It is a qualitative research, the researcher will use descriptive cross sectional design. The study will be done in diabetic clinic at githunguri health center. Participants of the research will be those diagnosed with diabetes above 18 years of age and above.

The study will use convenience sampling method, data collection method will be interview guide as a tool. Consent will be obtained from the research participants before interview. The respondents will have the right not to participate or withdraw from the study. Anonymity and confidentiality will be granted by the participants avoiding giving their personal identity and only allowing access of the research content to authorize personnel only.

Diabetes Federation (IDF) estimate that this figure is likely to rise to 592 million by year 2035 (IDF Atlas 2013). This rise in diabetes is associated with demographic of social changes such as globalization, urbanization, aging population and adoption of unhealthy lifestyle such as consumption of unhealthy diets and physical inactivity.

In the United States diabetes is the leading cause of non-traumatic amputation, blindness in working age adults and end stage renal disease (CDC, 2008). Half of all people have diabetes and are older than 65 years of age are hospitalized each year with severe and life threatening complications often contributes to the increased rates of hospitalization. Costs related to diabetes are estimated to be almost 174 billion annually including direct medical care expenses and indirect cost attributable to disability and premature death (ADA, 2008).

If the patient is unable to read the information and instructions on the label it should be explained to the pa-



tient and his understanding of the instruction must be assessed and list of food should be given to them to facilitate dietary and drug compliance.

The client will be informed on preparation of food and the places where they can get food items according to the regime communicated by the nutritionist. patient's knowledge about their disease and treatment is not always adequate. Some patients lack understanding of the role their therapies play in the treatment of DM. (ponnusankaret all 2004)

Publication of speakers:

1. American Diabetes Association, ADA 2009. diabetes mellitus is a group of metabolic disease characterized by increased levels of glucose in the blood (hyperglycemia) resulting from defect in insulin secretion, insulin action or both.
2. International diabetes Federation IDF, Estimate global burden of diabetes to be 592 million by the year 2035.
3. CDC 2008, in United States diabetes is the leading cause of non-traumatic amputation, blindness in working age adult and end stage renal disease.
4. Knoweler wc et al 1995 preventing non-insulin dependent diabetes.
5. Kenya national strategic for the prevention and control of non-communicable diseases.2015-2020, majority of patients referred for specialized care are diabetes patients.
6. Bubin 2005, compliance for oral medication for type 2 diabetes mellitus ranges from 65%-85%.

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