

# **A REVIEW ON THE KNOWLEDGE OF DIABETES MANAGEMENT AND CONTROL AMONG DIABETIC PATIENTS ATTENDING FEDERAL POLYTECHNIC CLINIC,KAURA – NAMODA, NORTH WEST, NIGERIA**

**An Article Review by Mr.Belloliman, Nigeria**  
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## **SOURCE**

Abdullahi Mohammed Lawal, 2014, 'Knowledge of diabetes management and control among diabetic patients attending Federal polytechnic clinic, Kaura – Namoda, North west, Nigeria,' South American Journal of Public Health, January, vol. 2, Issue – 1, 2014,ISSN: 2309 – 6470, Pp. 95 -102, viewed15February 2014, <http://www.ijph.in/aboutus.asp>

## **KEYWORDS**

Diabetes, Patients, Federal polytechnic clinic, Insulin, Kaura – Namoda, Diabetes management.

## **INTRODUCTION**

This review critically reviews the article 'Knowledge of diabetes management and control among diabetic patients attending Federal polytechnic clinic, Kaura – Namoda, North west, Nigeria in the journal South American Journal of Public Health.

Diabetes mellitus or simply diabetes may be defined as the deficiency or diminished effectiveness of insulin. Patients with excessive blood glucose (hyperglucosuria) will actually experience what is called polyuria (frequent urination), thirsty (polydipsia) and hungry (polyphagia).

Diabetes mellitus is of three types as follows:

*TYPE 1: KNOWN AS INSULIN – dependent diabetes.* The type 1 diabetes appeared before the age of forty years. It has been noted that approximately 10% of all the diabetes cases are type 1.

### *TYPE 2: INSULIN RESISTANCE*

This type of diabetes is due to inadequate release of insulin by the body for the proper function or as a result of an inability of the body to react to insulin. 90 percent of all diabetes cases are type 2. The symptoms of the diabetes may be controlled by loss of weight, intake of healthy diet, physical activity and monitoring blood glucose levels. On the other hand, overweight, physical inactivity and intake of unhealthy foods contribute positively to the risk of type 2 development. The older the person the greater the risk of developing type 2 diabetes.

### *3. GESTATIONAL DIABETES*

The gestational diabetes is mainly affecting women during pregnancy. Its diagnosis is made during pregnancy. This type of diabetes may be under control through exercise and diet.

## **LITERATURE REVIEW**

Globally, diabetes mellitus has been noted as one of the most prevalent and serious non communicable disease (2001). Report from CDC (1998) stated that 15.7 million people were diabetes victims in united state of America, 10.3 million diagnosed and 5.4 million nowhere to found. Presently, India is leading the country with over 32 million diabetic patients and the number is projected to increase to 79.4 million in 2030(8). In India and Sri Lanka surveys indicated that diabetes now affects a staggering 10- 16% of the urban population and 5-8% of the rural population (9-11). Some studies conducted in India revealed that poor attitude towards the disease and poor health literacy among the general public contributed massively to very poor treatment (15, 16). In Scotland study was carried out which suggested the relevant roles of health professional in making the diabetic patients to understand the fluctuations of their blood glucose, in addition of appropriate self- care action(19).

*DIABETES SELF- CARE ACTIVITIES:* Self care activities simply implies behaviours that includes following plan of diet, desist intake of high fat foods, redouble efforts on exercise, monitoring self glucose and foot care(40). All adults, diabetic patients inclusive have been recommended to engage in regular physical activity (NIH, 46).

*COMPLIANCE OF SELF – CARE ACTIVITIES:* diabetic patients are hopefully expected to follow the designed complex set of behavioural actions in order to put the diabetes under control daily. Some of the actions required to care for include the behaviour of lifestyle, proper utilization of diet plan, physical activity and good use of medication (i.e. insulin or oral hypoglycaemic agent).

*BARRIERS TO DIABETES:* studies revealed that in developing countries the diabetes care barriers categories into socio- demographic and cultural barriers (i.e. non- access to drugs, high

price, poor distribution of staff between urban and rural areas etc. The clinical endocrinologist of the American association expresses the usefulness of diabetic patients to become active and knowledgeable participants in their care (35). Similarly, WHO also recognized the significance of patients knowing to manage their diabetes. (36) In diabetes, self-care patient is expected to make several dietary and lifestyle modifications under health care staff supervision.

## **ARTICLE SUMMARY**

The article was aiming to examine the level of knowledge of diabetes management and control measures among diabetic patients attending Federal polytechnic, clinic, Kaura –Namoda. To achieve the purpose of the article, data were collected from forty eight randomly selected diabetic patients through the use of tested questionnaire by the trained staff of the clinic. The article stated the conclusion after due process of data analysis as almost all the study participants knew what the diabetes is all about. Despite this development, huge gaps were noted within the diabetic patients for not knowing the causes, prevention, control, self monitoring as well as self care measures. The information provided by the article assisted in providing some useful and vital recommendations that if implemented accordingly may definitely guide and promote the health of not only the diabetic patients of Federal polytechnic clinic, but even those who are careful with themselves and regularly visiting the clinic for medical check up. Some of the recommendations include:

Introduction of counselling unit for diabetic patients visiting the clinic only. Creation of outreach service for the benefits of diabetic patients living in the schools, civil service centres as well as rural communities up to date monitoring of blood glucose level of the victims.

## **ARTICLE STRUCTURE**

As usual, even this article described what the author did in the research study. The article lacks an abstract, but has introduction which was clearly stated for understanding of the reader. Four keywords, general and specific objectives were well briefed in the article. The article's paragraphs were not so complex and therefore the information in all of the paragraphs was simple and understandable. Each section of the article contained very useful and necessary information provided in the research study. For instance, these sections are related to the introduction and objectives of the study, methodology, data collection and data analysis techniques stated accordingly.

Toward the end of the article, findings, discussion, recommendations as well as conclusion were mentioned systematically. The recommendations provided are very crucial and useful in educating and sensitizing the diabetic patients visiting the clinic. Both issues of counselling unit and outreach service to schools, civil service canters and rural communities of the benefits of diabetic patients are welcome development. The conclusion of the article was not encouraging due to lack of some vital information provided by the research study, this may lead to weak

decision making by the authority of the clinic. In the article, the references were cited in the text and similarly cited also in the section of the introduction. This article was HMLT with many links that assisted in getting access to the information. The article has no link to author, journal, citations, subjects and references and these provide a setback to the reader to enable him have an opportunity to evaluate the article effectively.

## **ARTICLE CRITIQUE**

### *AUTHORITY:*

The Journal used is known as the South American Journal of Public Health, which was the publication of the America Public Health Association, an objective unbiased public organization. The Journal was traced on the scholarly Academic Search Premier through EBSCOhost, which is a highly credible research database.

The credibility of the author of the article was not an issue of doubt. The research study of the article has been conducted under closed monitoring and supervision. The credibility of the author was successfully become into reality due to series of approaches. Firstly, the research study of the article was part of his PhD program. Secondly, the article was successfully passed through peer review. Thirdly, the article was part of the academic work at the School of Public Health, Texila American University, Guyana.

### *ACCURACY:*

It has been realized that the source of the information used in the research study of the article was originated from the current research projects. All the information gathered in the research study of the article got a series of backing up as well as supported by comprehensive, recent reference list cited in- text to support both the introduction and the research study. There are other factors that seriously contributed to the article's accuracy, such as strict editorial as well as refereeing processes. The links of the article to other expert sources (e.g. the journal) similarly contributed to the article's accuracy.

### *CURRENCY:*

The South American Journal of Public Health was the one used in the research study of the article. The article was on page 95 of 102 of the South American Journal of Public Health.

From the observation made so far, it has been noted that the South American Journal of Public Health was published in the first month of the year 2014. But the article after all the necessary

consideration was finally permitted for publication in December, 2013. The information in the research study of the article was current and the references cited in the body of the article have been carefully noted, were up to date, ranging from 2004 to 2007 respectively. So, at this juncture, the article is hereby declared as current.

*RELEVANCE:*

The content of the article was so relevant to the title, which is Knowledge of Diabetes Management and Control Measures among the Diabetic Patients attending Federal polytechnic clinic, Kaura – Namoda, North West of Nigeria. In an academic context the South American Journal of Public Health was having higher credibility being an academic Journal found in an academic database.

The Journal came on board in order to inform the researchers and students not to entertain or advertise. It was relevant to researchers and students, especially those who are currently discussion on diabetes. Therefore, as the content of the article was carefully studied, it was concluded that the article is relevant to its title, researchers and students who are working in the field of diabetes.

*OBJECTIVITY:*

From the point of view, the article of Knowledge of diabetes management and control measures among the diabetic patients attending Federal polytechnic clinic, Kaura – Namoda, Northwest of Nigeria, has a gap to be bridged or cement accordingly. Firstly, the article missed some vital features for its general objectivity. The article did not content review of literature and the ‘word’ methodology was used as subheading instead of methods.

Despite of all these, the information the article provided was objectively formulated as well as supported by recent research base and referenced accordingly. The information of the article was clearly defined the study subjects of the study, i.e. forty – eight of diabetic patients who attended a Federal polytechnic clinic, Kaura – Namoda.

*STABILITY:*

The article source was the South American Journal of Public Health, which an academic Journal was found in the academic database of Texila American University, Guyana. The information provided above qualified the article as a stable resource for study and further researches either by researchers or students working in the field.

*ANALYSIS OF GRAPH/IMAGE/TABLE:*

Table 1, revealed that the participants defined diabetes as sugar disease were 81.2%, liver disease 11.5%, heart disease 2.1%, bone disease 0% and 6.3% for those who do not know. On the other hand, table 2 was talking about the causes of diabetes and shown the following: poison 77%, eating a lot of starchy food 52%, insulin deficiency 14.6%, heredity 10.4%, eating a lot of protein food 8.3% and 8.3% do not know. For self care measures/ control, table 3 shown that reducing intake of starchy food 87.5%, checking pharmacy 75%, Using herbal drugs 54.1%, Consistent drug therapy 29.2%, Regular exercise 8.3%, Healthy and eating Plan 4.2%.. Table 4 and 5, shown that majority of study participants were not aware with test strip for urine testing of glucose, but were knowledgeable about the kind of food diabetic patients are supposed to eat.

*RECENT ADVANCES RELATED TO THE TOPIC:*

Accelerating Wound Closure in Patients with Diabetes: American Diabetes Association – funded study (2012), reported the both type 1 and type 2 of diabetes are associated with complications of delayed wound healing. In a situation where wounds are not treated for so long can cause infections, amputations and death.

Diabetes May Originate in the Intestines: American Diabetes Association – funded researchers (2012), conducted a study at Washington University in St. Louis that revealed the vital role of the digestive system in developing diabetes.

**CONCLUSION:**

This review has successfully summarized as well as reviewed the Abdullahi Mohammed Lawal's article, Knowledge of diabetes management and control measures among diabetic patients attending Federal polytechnic clinic, Kaura – Namoda, Northwest of Nigeria. The content and structure of the article were analysed and critiqued. The article has contributed to the literature in terms of its values and enlightens the diabetic patients attending Federal polytechnic clinic, Kaura – Namoda.

*SUGGESTIONS:*

1. The authority of the clinic should co- ordinate the formation of the diabetes association in Kaura – Namoda
2. The clinic should ensure that all the necessary facilities required for diagnosis of diabetes are available

3. The clinic should ensure that all the health care providers stationed at diabetes section are trained and disciplined.
4. A specific day or week should be declared as diabetes's day or week quarterly or annually by the authority of the clinic.
5. The State Government should support the patients in terms of free drugs etc.
6. The State Government should organize a sensitisation workshop on diabetes quarterly or annually.
7. The State Government should declare a specific day annually as diabetes's day and conduct free diabetes diagnosis, especially for civil servants.
8. Adults should visit any health facility for a medical check – up annually, especially those who aged above forty years.
9. Diabetic patients should strictly comply on directives/ advices given to them by the health personnel
10. The clinic should ensure proper diabetes data management for good decision – making.

## ARTICLE

Abdullahi Mohammed Lawal (2014) Knowledge of diabetes management and control measures among diabetic patients attending Federal polytechnic clinic, Kaura- Namoda, Northwest of Nigeria. *South American Journal of Public Health, volume-2, Issue- 1, 2014, ISSN: 2309- 6470, 95-102. Retrieved from <http://www.ijph.in/aboutus.asp>.*

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