KNOWLEDGE ASSESSMENT OF DIABETIC PATIENTS ABOUT THEIR DISEASE : A prospective study

S.Ouerdeni,I. Slim, A. Maaroufi-Beizig, M. Kacem-Njah, K. Ach, M. Chadli-Chaieb, L. Chaieb.
Endocrinology departement , Farhat Hached University hospital , Sousse, Tunisia

Introduction

Therapeutic education of diabetic patients is an integral part of management care of the disease and a permanent way to empower patients and to promote their self-care. The purpose of this study is to evaluate the knowledge of diabetic patients about their disease.

Patients and methods

This prospective study has been conducted during 9 months and included 312 patients with type 2 diabetes mellitus (T2DM) diagnosed at least 3 months ago. All patients were followed in third care consultation without history of structured education program. Clinical and biological data in addition to an Individual Knowledge Scale (SKILLD) (1). A value above 50% reflects a good level of knowledge.

Results

The mean age was 54 year-old and 61% of patients were females. The average of T2DM history was of 11 years with a mean glycated hemoglobin (HbA1c) of 9.35 ± 1.85 %. Symptoms of hypoglycaemia were known by 58% of patients, but its immediate management was only known by 41% of patients. Education on lifestyle rules revealed poor knowledge in 67% of our patients. HbA1c target was unkown in 82% of patients. The average score on SKILLD was at 37 ± 26%. A score > 50% was observed in 32.4% of patients. SKILLD value was positively correlated with education level (r = 0.661; p<0.001), and negatively correlated with duration of diabetes and HBA1c (r =-0.384; p<0.001; r = -0.497;p<0.001; respectively). Patients with low SKILLD scores had significantly higher HbA1C (9.78 % vs. 8. 45%, p< 0.001) and higher age (54,07 year-old vs. 40,55 year-old, p<0.0 01) compared to patients with high SKILLD score.

Conclusions

Our study shows knowledge lack about diabetes . This may reflects the difficulty of education during consultation probably because time limitation. Diabetes knowledge increased with higher level education and younger ages, while the elderly and individuals with low level of education had insufficient knowledge on diabetes (2).We insist through these results on the need of a complementary structured and multidisciplinary therapeutic education.

References

1)A Validation Study of the Spoken Knowledge in Low Literacy in Diabetes Scale (SKILLD). Journal of General internal Medecine .February 2012.
2) Nuray Guler,Sidika Ogus:The spoken knowledge of low literacy in patients with diabetes.Diabetes research and clinical practice,mai 2011.