



HOW PROACTIVE IS THE SPOUSE SUPPORT IN DIABETES CARE?



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BACKGROUND

Diabetes being a chronic life long illness and highly affected by day to day activities and mood swings, with the requirement of frequent hospital visits, adherence to multiple medications, being obedient with diet and lifestyles despite influential environment; spouse support becomes a vital component on short and long term outcomes. A lifelong lifestyle illness requires a loving and affectionate support from life partner.

AIM

We sought to identify how proactive is the support of spouse in determining outcomes in diabetes care.

METHOD

We identified 2 groups of patients who visited our diabetes care centre - Group 'A' makes the recommended physical visits to the doctor accompanied by their spouse and Group 'B' who makes the physical visits without their spouse or responsible caregiver. The psychologist in our diabetes team evaluated the unique characteristics of patients belonging to each of these groups. Patients belonging to Group 'A' and Group 'B' were approached for an open ended interview where questions included various aspects of disease management including timing and dosing of medications, following healthy diet and lifestyle, making timely physical visits to the diabetes care centre and regular monitoring of blood glucose.

RESULTS

Patients in Group 'A' disclosed having friendly reminders from spouse on daily exercise, advises on healthy diet, timely medications, regular self monitoring of blood glucose and hospital visits which resulted in remarkable short term and long term outcomes during the natural history of progression of diabetes. The spouse who accompanies the patient disclose those aspects of treatment the patient deliberately hides or fears such as unhealthy eating habits, sexual dysfunction, indulgence in alcohol, chest discomfort during exercise etc. Patients in Group 'B' confessed that they either failed to recollect the instructions on timing and dosages of medications or advises from dietitian. Non adherence to therapeutic and lifestyle instructions are many a time attributed to forgetfulness, laziness and lack of motivation and stress during hospital visits which can be resolved if spouse accompanies the patient and support them all throughout. Financial planning for the disease management was observed to be much secure among patients who were accompanied by their spouse. (Table: 1)

DISCUSSION

Spouse or loving caretaker who accompany the patient to hospital and support them in day to day diabetes care, will make a remarkable change in short term and long term outcomes in diabetes.

Table: 1

Group A (visits hospital with spouse)	Group B (spouse does not accompany during hospital visits)
Friendly reminders on daily exercise, advises on healthy diet, timely medications, regular self monitoring of blood glucose and hospital visits given by spouse	Failed to recollect the instructions on timing and dosages of medications or advises from dietitian
Spouse discusses various aspects of treatment, the patient deliberately hides or fears and adheres the instructions	Non adherence to therapeutic and lifestyle instructions
Financial planning for the disease management much secure	Forgetful, lazy, less motivated and stressed during hospital visits

REFERENCE

1. Jothydev Kesavadev. Tele-medicine via DTMS® is cost-effective and satisfactory: still why it fails in minority with T2DM? Oral Presentation. International Diabetes Federation, World Diabetes Congress, December 2011

Conflict of Interest Disclosure:

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