SUMMARY

Diabetic is a chronic and lifelong disease which constitutes significant health and socioeconomic burden not only to the patient and his family members, but also to the health care system. It is noted that majority of the people at risk of diabetes could avoid developing type 2 diabetes and its related complication through lifestyle changes which border more on diabetes self-care. The purpose of this study was to assess the influence of diabetes self-care on glycaemic control among patients with type 2 diabetes mellitus, with the view to improving diabetes care and glycaemic control in diabetic patients attending the Family Medicine Clinic of Federal Medical Centre, Ido-Ekiti.

This hospital based interventional study was carried out over a period of three months. The population comprising type 2 diabetic patients attending the Family Medicine practice of the Federal Medical Centre, Ido-Ekiti. One hundred and twenty diabetic patients that met the inclusion criteria were randomized into the test and control groups. Relevant data were collected using a semi-structured questionnaire adapted from the Michigan diabetes care profile (DCP). The intervention carried out in this study was diabetes self-care (DSC) which was taught to the test participants with the aid of diabetes self-care manual of the American Association of Diabetes Educator (AADE7) [Appendix VII], and which they practiced at home. The test participants were empowered with the provision of blood glucose monitoring devices (glucometer) which they could use at home and were also encouraged to practice other Diabetes Self-Care (DSC) activities at home. Data were collected, grouped and analysed using Statistical Package for Social Sciences (SPSS) for windows software version 17.0.
There was a statistically significant difference in the pre-intervention mean HbA1c (%) of 6.7 ± 1.1 among intervention compared with the post-intervention mean HbA1c (%) was 5.6 ± 1.0 (p < 0.001). The post-intervention findings showed marked improvement in the level of the knowledge and practice of diabetes self-care among the test group compared with the control (p=0.001). This study showed that diabetes self-care practice had a significant effect on the blood glucose level of the test group (p=0.018). The participants with good diabetes self-care activities were five times OR [5.339 (CI 0.644 – 44.261)] more likely to achieve good glycaemic control compared to their counterparts.

This study linked the practice of diabetes self-care (DSC) to a significant improvement in the blood glucose control of the test participants. Hence, Primary Care Physician are encouraged to adopt diabetes self-care as an essential component in their management of diabetics, and also as a means of health promotion to prevent, or delay debilitating complications which may adversely affect the quality of life of the patients.