

## A STUDY TO EVALUATE THE EFFECTIVENESS OF VIDEO ASSISTED TEACHING ON SELF CARE MANAGEMENT OF DIABETES MELLITUS AMONG DIABETIC CLIENTS ATTENDING THE DIABETIC OPD AT NIZAMS INSTITUTE OF MEDICAL SCIENCES AT HYDERABAD ANDHRA PRADESH, INDIA.

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### ABSTRACT:

Diabetes Mellitus (DM), commonly referred to as diabetes, is a group of metabolic diseases in which there are high blood sugar levels over a prolonged period. Symptoms of high blood sugar include frequent urination, increased thirst, and increased hunger. If left untreated, diabetes can cause many complications. Serious long-term complications include cardiovascular disease, stroke, chronic kidney failure, foot ulcers, and damage to the eyes. The study was conducted in Nizams Institute of medical sciences, Panjagutta, Hyderabad, Telangana. This setting was chosen on the basis of the investigators feasibility, in terms of availability of adequate sample and co-operation extended by the medical superintendent and the diabetic clients. As for as occupation of the diabetic plans was concern majority i.e. 120 (60%) were unemployed/Homemakers followed by 70(35%) were Government employees and only 10(5%) were labourers on daily wages, none were self-employed.

**KEY WORDS:** Diabetes mellitus, Nizams Institute of Medical Sciences (NIMS), Hyderabad.

### INTRODUCTION:

Diabetes is a disorder characterized by hyper glycaemia or elevated blood glucose (blood sugar). Our bodies function best at a certain level of sugar in the bloodstream. If the amount of sugar in our blood runs too high or too low, then we typically feel bad. Diabetes is the name of the condition where the blood sugar level consistently runs too high. Diabetes is the most common endocrine disorder. Sixteen million Americans have diabetes, yet many are not aware of it. African-Americans, Hispanics, and Native Americans have a higher rate of developing diabetes during their lifetime. Diabetes has potential long term complications that can affect the kidneys, eyes, heart, blood vessels, and nerves. A number of pages on this website are devoted to the prevention and treatment of the complications of diabetes. Diabetes Mellitus (DM), commonly referred to as diabetes, is a group of metabolic diseases in which there are high blood sugar levels over a prolonged period. Symptoms of high blood sugar include frequent urination, increased thirst, and increased hunger. If left untreated, diabetes can cause many complications. Diabetes is due to either the pancreas not producing enough insulin or the cells of the body not responding properly to the insulin produced. Prevention and treatment involve a healthy diet, physical exercise, maintaining a normal body weight, and avoiding use of tobacco. Control of blood pressure and maintaining proper foot care are important for people with the disease.

**NEED OF THE STUDY**

Diabetes affects 246 million people worldwide and is expected to affect some 380 million by 2025. Each year another 7 million people develop diabetes. Each year 3.8 million deaths are linked directly to diabetes related causes including cardiovascular disease made worse by diabetes related lipid disorders and hypertension. Every 10 seconds a person dies from diabetes related causes. Every 10 seconds two people develop diabetes India has the largest diabetes population in the world with an estimated 41 million people amounting to 6% of the adult population. Type 1 diabetes, which predominately affects youth, is rising alarmingly worldwide at a rate of 3 % per year. In recent years Indians have witnessed a rapidly exploding epidemic of diabetes. Indeed India today leads the world with its largest number to diabetic people in any given country WHO estimates that there are 32 million people with diabetes in India in 2000, which is projected to rise to 80 million by the year 2030. Increase in prevalence is rapid in urban areas from 2% in 1970 s to 12% in 2000 and in rural areas also it is now beginning to increase.

**OBJECTIVES:**

1. To assess the pre -test level of knowledge, attitude and practice on self care management of diabetes mellitus among diabetic clients
2. To develop Video Assisted Teaching on self care management of diabetes mellitus.

**RESEARCH VARIABLES:**

1. Independent Variable:  
Video Teaching Programme on Self-care Management of diabetes mellitus.
2. Dependent Variable:  
Knowledge, attitude and practice regarding Diabetes and its management.

**ASSUMPTIONS:**

The study assumed that,

The diabetic patients may have inadequate knowledge regarding self care management of diabetes mellitus.

Patients with DM may develop complications in case of irregular treatment or poor awareness.

Video-Assisted Teaching will enhance the knowledge, attitude and practice of patients with diabetes mellitus.

**DELIMITATIONS:**

The study is delimited to

The clients who are attending the diabetic outpatient department at NIZAM'S Institute Of Medical Sciences, Panjagutta, Hyderabad and the age between 20 year and above. Data collection period is 6month The sample size is limited to 200 samples.☐

**RESEARCH APPROACH:**

Quantitative –Experimental Approach

**RESEARCH SETTING:**

The study was conducted in Nizams Institute of medical sciences, Panjagutta, Hyderabad, Telangana.

**RESEARCH DESIGN**

Quasi Experimental design

**POPULATION**

The population for the present study was diabetic clients who were attending NIMS Hospital, millennium block outpatient department

**TARGET POPULATION:**

Diabetic clients, between the age group of 20 to 50 years and above.

**ACCESSIBLE POPULATION:**

Diabetic clients attending NIMS, millennium block outpatient department.

**SAMPLING TECHNIQUE:** Non probability convenient sampling technique.

**SAMPLE SIZE:** 200

**Sampling Criteria:****A) Inclusion criteria:**

Diabetic clients attending NIMS Hospital, millennium block outpatient department.?

Diabetic clients who were willing to participate in this study.?

Diabetic clients of any level of education?

Diabetic clients between the age group of 20 to 50 years and above.?

**B) Exclusion criteria:**

Diabetic clients, who were not willing to participate in this study.

Diabetic clients, who were not attending NIMS Hospital, millennium block outpatient department.

**ANALYSIS AND INTERPRETATION OF DATA**

This chapter deals with analysis and interpretation of data collected from 200 diabetic clients through structured questionnaire. The data are tabulated, analyzed and interpreted by using descriptive and inferential statistics.

The analysis and interpretation of data presented under the following sections

Section- I Distribution of demographic variables.

Section-II Description about knowledge attitudes and practices on self-care management of diabetes mellitus among diabetic clients.

**Section- I**

Distribution of demographic variables.

**Table -1 Distribution of demographic variable of diabetic clients**

(N=200)

S.No	Demographic Variable	Frequency	Percentage
1.	Age of diabetic clients		
	a) 20 - 29 years	77	39%
	b) 30 – 39 years	60	30%
	c) 40 – 49 years	31	15%
	d) 50 years and above	32	16%
2.	Gender		
	a) Male	82	41%
	b) Female	118	59%
3.	Marital Status		
	a) Married	104	52%
	b) Unmarried	23	11%
	c) Widow/Widower/Divorced	73	37%
4.	Religion		
	a) Hindu	117	59%
	b) Muslim	52	26%
	c) Christian	31	15%
5.	Education		
	a) Illiterate	63	31%
	b) Primary school	34	17%
	c) High school	38	19%
	d) Higher secondary	47	24%
	e) Graduate and above	18	09%
6.	Occupation		
	a) Govt. Employee	70	35%
	b) Unemployed/Home maker	120	60%
7.	Total family income per month		
	a) Below Rs. 5000	50	25%
	b) Rs. 5001 to Rs. 10000	77	38%

	c) Rs. 10001 to Rs. 15000	41	21%
	d) Rs. 15000 and above	32	16%
8.	Duration of illness		
	a) < 5 years	43	22%
	b) 11 – 10 years	57	28%
	c) > 15 years	72	36%
		28	14%
9.	Family history of DM		
	a) Parents	80	40%
	b) Siblings	43	21%
	c) Grand parents	9	5%
	d) None	68	34%
10	Source of income		
	a) Mass media	63	31%
	b) Health personal	90	45%
	c) Friends/Family member	10	5%
	d) None	37	19%
11.	Are you taking treatment		
	a) Yes	163	82%
	b) No	37	18%
12.	What drugs are you taking for DM		
	a) Yes	157	79%
	b) No	43	21%
13	Are you following dietary modification?		
	a) Yes	91	45%
	b) No	109	55%
14.	Do you have any other disease?		
	a) Yes	35	17%
	b) No	165	83%

## Section – II

Table 2: Distribution of pre test and post test knowledge scores of diabetic clients regarding self care management of diabetes

(N=200)

S.No	Knowledge	Mean	S.D	't' Value
1	Pre test	17.45	4.42	78.7
2	Post test	33.15	3.84	

Significant at 0.05 level

S.No	Attitude	Mean	S.D	't' Value
1	Pre test	2.27	0.46	23.62
2	Post test	3.57	0.59	

Significant at 0.05 level

S.No	Practice	Mean	S.D	't' Value
1	Pre test	4.15	1.06	34.09
2	Post test	9.00	1.76	

Significant at 0.05 level

**Conclusions:**

It was found that there is a significant difference between pretest and posttest level of knowledge, attitude and practice regarding self-care management of diabetes mellitus, also it was found that there is a significant correlation between posttest level of knowledge, attitude and practice regarding self-care management of diabetes mellitus.

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