



p319 Poster Display

Education and integrated care - Diabetes education: Management

01-Dec-2015 13:00 00:00

Title: 0481-P

Diabetes self-management education program in Kuwait: Implementation, challenges, and outcomes

Co-authors

A. Al-Adsani¹, S. Khouzam¹, M. Rasheed¹, T. Al-Qassab¹.

¹Al-Sabah Hospital, Medicine- Diabetes Unit, Kuwait, Kuwait.

Background

Diabetes self-management education (DSME) is considered by the International Diabetes Federation as the cornerstone of diabetes management, to facilitate the knowledge, skills, and ability necessary for diabetes self-care. Despite the high prevalence of diabetes in Kuwait, structured diabetes education programs and educators are unavailable.

Aim

This study aimed to examine the feasibility of conducting DSME by a clinician-led team in a hospital-based diabetes clinic, to identify the challenges, and to assess the impact of the education sessions on clinical, emotional wellbeing, knowledge and attitude, and self-care behavioral outcomes.

Method

96 individuals with diabetes were invited to attend a 4-session group education program. The program consisted of four 2-hour sessions at 4-week intervals. The team consisted of one clinician, one nurse, and one dietitian. The curriculum was based on the IDF International curriculum for diabetes health professional education, the IDF teaching modules, and the ADA diabetes education goals. The education sessions were based on self-care goal setting and problem-solving skills. The program outcomes included clinical outcomes, diabetes knowledge and attitude, diabetes-related distress, self-care behaviors, and preventive care practices, using validated measurement tools (PAID questionnaire, Diabetes knowledge questionnaire, and Diabetes Attitude Scale-3).

Results

Out of 96 patients who were scheduled for the DSME sessions, 24 (25%) patients attended the education sessions (50% men; 71% had Type 2 DM; median age 45.5 years), and only 12 (12.5%) patients completed the four sessions. About 60% of the patients achieved at least two-thirds of their set goals. Significant improvements were obtained in HbA1c levels (9.97 to 8.82%, -1.15%, $P=0.006$) and self-care behaviors. No significant changes were noted in BMI, lipid levels, PAID scores, diabetes knowledge and attitude scores.

Discussion

Implementation of a group self-management education program was feasible in a hospital-based diabetes clinic in Kuwait, with favorable outcomes in HbA1c levels and self-care behavior practices. Non-attendance and attrition from the education sessions were the main challenges. Healthcare policy makers in Kuwait should recognize the crucial role of DSME in the management of people with diabetes, and the need for educators and psychosocial specialists as members of the diabetes care team to enable the patients to self-manage their disease and enhance their quality of life.
