

## Diabetes is too important to be left to diabetologists alone

Sanjay Kalra,<sup>1</sup> Suresh Sharma<sup>2</sup>

### The Challenge is Great

Diabetes is a pandemic which shows no signs of slowing down. Recent developments, such as the COVID 19 epidemic, have highlighted the role of diabetes specifically uncontrolled diabetes, in defining health outcomes.<sup>1</sup> We have known, for long, the role of glycaemic control in improving long term vascular outcomes. Now, however, we have robust data which demonstrates that a 1% reduction in glycated haemoglobin can reduce probability of getting severe COVID19 by 21%.<sup>2</sup>

A major obstacle to ensuring euglycaemia is lack of education. Lack of awareness, at individual, family and societal level, leads to delayed recognition, diagnosis and management of diabetes.<sup>3</sup> This in turn, creates a situation where control becomes progressively more difficult to achieve, and satisfaction with health care becomes lesser and lesser.

Patient and public education and empowerment is one means of ensuring earlier access to, and acceptance of, available health care services. This, however is easier said than done. Many countries, including South Asian nations, do not have enough doctors to meet the health care needs of their population.<sup>4</sup> This creates a roadblock in the delivery of all medical care. The number of qualified diabetologists and endocrinologists is not enough to ensure good quality diabetes across to all persons living with the syndrome. The Pakistan Endocrine Society, for example, has 70+ members, who are tasked with the responsibility of looking after 20 million countrymen and women living with diabetes [courtesy: Dr. Syed Abbas Raza, Lahore].

### Nursing Holds Up Half of Health Care

Large sized problems call for larger-than-life solutions, and diabetes is no exception. From a pessimistic prism, the hospital-based needs assessment survey, reported by X et al, highlights the dismal levels of diabetes awareness in the public.<sup>5</sup> An optimistic observer, will note the willingness of respondent to learn, and their interest in joining nurse led educational programmes.

.....  
<sup>1</sup>Department of Endocrinology, Bharti Hospital, Karnal, <sup>2</sup>College of Nursing, AIIMS, Jodhpur, India.

**Correspondence:** Sanjay Kalra. Email: brideknl@gmail.com

**DOI:** <https://doi.org/10.47391/JPMA.22-61>

**Table:** Framework for strengthening nurse involvement in diabetes care in South Asia.

#### DEMAND

- Sensitize doctors towards the need for teamwork involving nurses and other professional staff
- Create positions for diabetes nurses in every public and private sector hospital or clinic offering diabetes care
- Begin nurse-led diabetes clinics in locations where doctors are not available

#### SUPPLY

- Include diabetes care in undergraduate and postgraduate nursing curricula
- Start postgraduate educational programmes for nurses in diabetes management
- Introduce legislation to allow specialist nurse to prescribe diabetes-related medication

#### ECOSYSTEM

- Sensitize doctors towards the need for teamwork, involving nurses and other professional staff
- Convince policy makers and politicians about the role of diabetes nursing
- Incentivize nurses, financially and through recognition, to choose diabetes nursing as a fruitful professional path

All activities need to be carried out in conjunction and coordination with each other

This observation is valid not only for Karachi and rest of Pakistan; it has been noted across South Asia, the developing, and the developed world. Nurses make up half the global health care workforce,<sup>6</sup> and shoulder their fair burden of disease management. Trained in communication and empathy, they connect well with patients, and can drive meaningful change in health-related behaviour. It makes sense, therefore, to involve the nursing profession in diabetes education, diabetes prevention and diabetes management.<sup>7</sup> Health care system in many countries facilitate such utilization of qualified staff members. South Asia, though, has lagged behind; diabetes nursing has not achieved the recognition and respect that it deserves. There are positive winds of change, however; A Nurses Upskilling Program in Diabetes Management has begun at institutions like AIIMS Jodhpur, India.

### From Words to Action

How can we convert the impassioned evidence-based plea of Jadoon J et al,<sup>5</sup> into equally determined action on the ground? Leaders in the nursing profession need to take up the mantle, and train interested members in diabetes nursing. Other stakeholders, such as diabetologists and endocrinologists, must support an active role for diabetes nursing and diabetes educators to create a win-win situation for all. Policy makers and politicians should acknowledge and appreciate the

contribution of the noble profession in delivering health care. Employers, including public and private sector organizations should open up well-paid positions for diabetes and endocrine nurses.

The Journal of Pakistan Medical Association (JPMA) has always had an inclusive editorial policy, welcoming contributions from health care professionals of diverse backgrounds. Through this editorial, JPMA calls for a concerted effort, including nurse-led clinics and educational programmes, to help overcome the diabetes epidemic.

## References

1. Kalra S, Mittal S. COVID-19 and diabetes: Covidiabetology. 2020; 70:954-955.
  2. Hayek S, Ben-Shlomo Y, Balicer R, Byrne K, Katz M, Kepten E, et al. Pre-infection glycaemic control and disease severity among patients with type 2 diabetes and COVID-19: A retrospective, cohort study. *Diabetes Obes Metab.* 2021. doi: 10.1111/dom.14393.
  3. Ong SE, Koh JJ, Toh SA, Chia KS, Balabanova D, McKee M, et al. Assessing the influence of health systems on type 2 diabetes mellitus awareness, treatment, adherence, and control: a systematic review. *PLoS one.* 2018; 13:e0195086.
  4. Physicians (per 1,000 people). Available from URL: <https://data.worldbank.org/indicator/SH.MED.PHYS.ZS>. Last accessed on 12 May 2021
  5. Jadoon J, Abdullah A, Qureshi A, Gilani J A, Khan U. Needs assessment survey regarding effectiveness of chronic care in diabetes in a hospital setting. *J Pak Med Assoc* 2022;72:850-854
  6. Grant J, Lines L, Darbyshire P, Parry Y. How do nurse practitioners work in primary health care settings? A scoping review. *Int. J. Nurs. Stud.* 2017; 75:51-7.
  7. Sharma SK, Thakur K, Kant R, Kalra S. Nurse-Led diabetes clinics in Southeast Asia: scope, feasibility, challenges and facilitators. *J Diabetes Metab Disord Control.* 2020; 7:47-51.
-