Health Needs and Problems for Diabetic Neuropathy

Thesis

Submitted in Partial Fulfillment of the Requirement of the Master Degree

In Nursing Science Community Health Nursing

Ву

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List of Contents

Subject		Page No.
List of Table	es	i
List of Figur	res	iv
List of Abbr	eviations	v
Abstract	•••••	vi
	n	
Part I:	diabetes mellitus	4
Part II:	Diabetic neuropathy	18
	alth need and problems for I	
	nmunity Health Nursing Rol	_
Subjects and	d Methods	73
Results	•••••	81
Discussion	•••••	102
Conclusiona	andRecommendations	114
Summary	•••••	117
Appendices	•••••	•••••
	• • • • • • • • • • • • • • • • • • • •	
	mary	

List of Tables

Table No.	Title	Page No.
Table (1):	Distribution of clients with neuropathy according to their Demographic Characteristics	Socio
Table (2):	Distribution of clients with neuropathy according to their Past and Medical History	l Present
Table (3):	Distribution of clients with diabetic neuropathyU according to their present and symptoms of peripheral diabetic neuropathy	t signs
Table (4):	Distribution of Clients with Diabetic Neuropathy According To Their Prese and Symptoms of Autonomic Diabetic Neuropathy	,
Table (5):	Distribution ofclients with diabetic net according to their Correct and I knowledge about diabetes mellitus	Incorrect
Table (6):	Distribution ofclients with diabetic net according to their Correct and I knowledge about diabetic neuropathy	Incorrect
Table (7):	Distribution ofclients with diabetic new according to their Correct and I knowledge about types of diabetic new	Incorrect
Table (8):): Distribution of clients with neuropathy according to their assessment	physical

List of Tables (Cont...)

Table No.	Title	Page No.
Table (9):	Distribution of Clients with Neuropathy according to their Abnor Physical Assessment	
Table (10):	Distribution of Clients with Neuropathy According To Their New Assessment	urological
Table (11):	Relation between socio-demographic characteristics of the studied sample a life style related to diabetic neropathy	
Table (12):	Relation between clients with diabetic neropathyknowldge related to diabetic neuropathy and their life style	c
Table (13):	Relation between clients with diabetic neropathyknowldge related to diabetic neuropathy and their foot care practic	c
Table (14):	Relation between clients with neuropathy related to diabetic neuropathy and their Foot care practice	pathy life

List of Figures

Figure No.	Title	Page No
<u>Review of L</u>	<u>iterature</u>	
Figure (1):	long term complications of diabetes	14
Figure (2):	Normal and damaged nerves of oneuropathy	
Figure (3):	Nervecomponents of diabetic neuropathy.	22
Figure (4):	Neuropathy ulceration	25
Figure (5):	Peripheral neuropathy	26
Figure (6):	Autonomic neuropathy	28
Figure (7):	Clinical and subclinical features of autonomic neuropathy	
Figure (8):pro	oximal neuropathy	
Figure (9) : Fo	ocal neuropathy	37
Figure (10): 1	Etiologies of diffuse diabetic neuropath	38
Figure (11): 1	Diabetes Food Pyramid	.53
Figure(12): 5	Steps of nursing process as Applied by Community	v Nurse61

<u>Results</u>

Figure (13):	Distribution of client with diabetic neuropathy according to their Total score level of knowledge related to diabetic neuropathy	91
Figure (14):	Distribution of clients with Diabetic Neuropathy related to their Positive and Negative Life Style Score level	92
Figure (15):	Distribution of Clients with Diabetic Neuropathy according to their Foot Care Assessment Score Level.	93
Figure (16):	Distribution of clients with diabetic neuropathy according to total scores level neurological examination scales.	. 97

List of Abbreviations

DN : Diabetic Neuropathy

HHS : Hyperosmolar hyperglycemic syndrome

T1DM: Type 1 diabetes mellitus

T2DM: Type 2 diabetes mellitus

IDF : International Diabetes Federation

PVD : Peripheral vascular disease

WHO : World Health Organization

ED : Erectile Dysfunction

DPN : Diabetic Poly neuropathy

BMI :Body Mass Index

CTS : Carpal tunnel syndrome

CAN : Cardiovascular Autonomic Neuropathy

Abstract

Diabetic Neuropathy (DN) is a common neurological complication in patients with diabetes mellitus (DM) which affects their quality of life. Research Design:a descriptive analytic study. The aimof the study is to assess Health Needs and Problems for Diabetic Neuropathy Setting This study was conducted at diabetic clinic outpatient Ain Shams University hospital. SamplingA purposive sample includes (162) client suffering from diabetic neuropathy were chosen randomly Tools three tools were used for data collection, first: An interview Questionnaire including three parts; socio demographic, Medical history, and knowledge related to diabetes and diabetic neuropathy. Second Healthy practices assessment sheet for client's' with diabetic neuropathy. *Third* A neurological examination scale s. **Results** Describes that 93.2% respectively had unsatisfactory knowledge related diabetes mellitus and health need and problems for diabetic neuropathy. Reveals that 82.7% of the studied sample had duration of diabetes of more than 10 years period Illustrates that 87.7%, 75.9%, 50.6 %, 73.5%, respectively reported negative life style regarding practicing exercise, rest and sleep pattern, medication compliance and follow up. With a total score level of (67.9%) representing negative life style. Positive Nutritional habits had (54.9). Shows that the study sample had normal blood pressure were (58.6%) while 66.7% had abnormal random blood sugar .as for BMI (87.6 %) were abnormal weight and 52% had normal foot appearances Conclusion There was highly statistically significant between client with diabetic neuropathy knowledge and their life style. Diabetic DN is a considerable complication of DM. The related risk factors were old age, prolonged and poorly controlled DM and associated medical disorders. Recommendations: Screening programs for early detection, diagnosis treatment and prevention of diabetic complication

Key words: Diabetes mellitus, Diabetic Neuropathy, Health needs and problems

Introduction

Diabetes is a group of metabolic diseases characterized by hyperglycemia resulting from defects in insulin secretion, insulin action, or both. The chronic hyperglycemia of diabetes is associated with long-term damage, dysfunction, and failure of different organs, especially the eyes, kidneys, nerves, heart, and blood vessels. (American Diabetes Association, 2014).

Diabetic neuropathy is a heterogeneous group of disorders with extremely complex path physiology and affects both somatic and autonomic components of the nervous system. Neuropathy is the most common chronic complication of diabetes mellitus. Metabolic disruptions in the peripheral nervous system, including altered protein kinase C activity, and increased polyol pathway activity in neurons and Schwann cells resulting from hyperglycemia plays a key role in the development of diabetic neuropathy. (Singh, etal, 2014)

Diabetic neuropathy is a common complication of diabetes. It usually progresses gradually and involves small and large sensory fibers. The symptoms, such as loss of ability to sense pain, loss of temperature sensation, and developing neuropathic pain, follow a "glove and stocking" distribution, beginning in the lower limbs, first affecting the toes, and then

Progressing upward. The primary cause of diabetic neuropathy is thought to be hyperglycemia. (Wan, etal,2014)

Community health nurses' roles include meeting the chronic needs of patients with diabetic neuropathy, as well as engaging in healthcare which helps reduce the risks associated with their condition. This means they will engage with diabetic neuropathy patients to manage emergencies, help them control and manage symptoms, prevent longer-term effects, reduce the risk factors in their lives such as obesity and smoking, and educate them in a way that will encourage independence and self-management (*Judith, etal*, 2014).

Justification of the problem:

Egypt is in the world's top 10 in terms of the highest number of people with diabetes (7.5million) in 2013 and this number is expected to increase to 13.1million by 2035. It is estimated for Egypt to spend between 486 and 892 million dollars on diabetes care ((*International Diabetes Federation report*, 2013). Prevalence of diabetic peripheral neuropathy in the United Arab Emirates (UAE) is about 35%, Saudi Arabia (38%), Bahrain (37%), Egypt (20%), and United Kingdom (29%). (*AlKaabi,etal,2014*)

Aim of the study

The aim of the study is to assess health needs and problems for diabetic neuropathy through the following:

- 1. Identify knowledge of the diabetic neuropathy patients related to diabetes.
- 2. Recognize practices of diabetic neuropathy.
- 3. Assessing client health status related to nervous system status of diabetic of diabetic neuropathy.
- 4. Assessing client health need and health problem according to Diabetic neuropathy.

Research questions:

- 1. What is the knowledge of diabetic patients about diabetic neuropathy?
- 2. What are the factors that affect diabetic patients with neuropathy nervous system?
- 3. How does the diabetic patients' practice affect diabetic neuropathy?
- 4. is there relation between health need and health problem for Diabetic neuropathy knowledge and practices