

**Assessment of Home Care  
Knowledge, Attitude, & Practices  
Toward Adult Patients with Diabetes Mellitus**

Thesis

Submitted in partial fulfillment for the  
Master Degree in Community Health Nursing

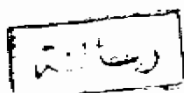
By

*Nahla Ahmed Abd El-Aziz Easawy*

(B. Sc. Nursing)

Demonstrator in

High Institute of Nursing, Ain Shams University



Supervised by

Dr.

*Nawal Mahmoud Soliman*

Assist. Professor of Community Health Nursing

High Institute of Nursing, Ain Shams University

Dr.

*Mohammed Mahmoud Kotb*

Lecturer of Community Medicine

Faculty of Medicine, Ain Shams University



High Institute of Nursing

Faculty of Medicine

Ain Shams University

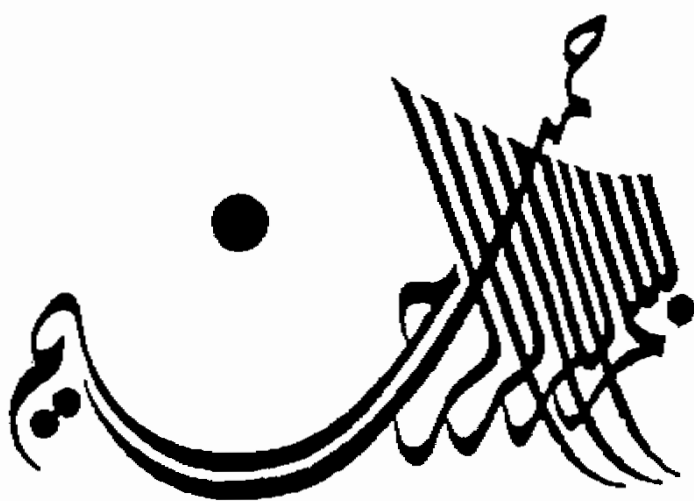
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قَالُوا

سُبْحَانَكَ لَا عِلْمَ لَنَا إِلَّا بِمَا غَلَمْتَنَا  
إِنَّكَ أَنْتَ الْعَلِيمُ الْحَكِيمُ

صَدَقَ اللَّهُ الْعَلِيمُ

الآيَةُ (٢٢) سُورَةُ الْبَقَرَةِ



## Acknowledgement

First and for most, I feel always indebted to God, The Most Kind and Most Merciful.

I would like to express my deep thanks to all those who contributed by giving me their experience, time, effort, and encouragement to accomplish this work.

My deepest thanks and sincere appreciation to Dr. Nawal Soliman, Assist. Professor of Community Health Nursing, High Institute of Nursing for her unlimited help and valuable guidance.

My sincere gratitude and appreciation goes to Dr. Mohamed Kotb, Lecturer of Community and Occupational Medicine, Faculty of Medicine, Ain-Shams University, for his fruitful criticism and continuous encouragement.

I would like to express my gratitude to the patients for their cooperation during this study.

Lastly, and not least, my special gratitude goes to my husband, parents and brothers, for their tolerance and sustained moral support.

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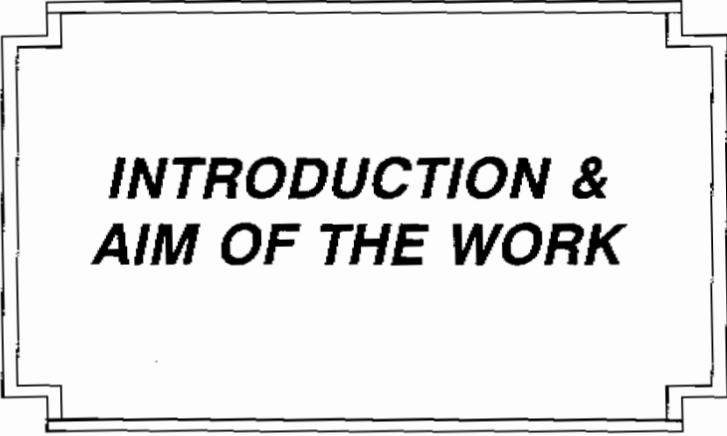
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***INTRODUCTION &  
AIM OF THE WORK***

## INTRODUCTION

Diabetes is a universal health problem affecting human societies at all stages of development, [WHO, 1980]. The disease may appear at any time but 80% of cases occur after the age of 50 years, [MacLeod, 1981]. It is a serious health problem through out the world as it ranks as the 3<sup>rd</sup> greatest cause of death, [Mantik, 1983].

In Egypt, diabetes mellitus has a relatively high incidence among chronically ill patients, [WHO, 1985].

Arab, et al., [1987], reported that incidence of diabetes mellitus among Egyptian population 4,18%. The social and cultural factors affect the way in which people deal with illness, [El Hawashy et al., 1990]. There are now over six million person with known as diabetes mellitus and its likely that for every known case of diabetes another remains undiagnosed, [Cassmyer et al., 1991].

A complex pattern of self care behavior including blood testing, urine testing, injection of an appropriate dose of insulin, adherence, to a prescribed diet, regular exercise and foot care is essential to maintain satisfactory blood glucose control, [Peveler et al., 1993].

**Aim of the study:**

The Aim of this study is to assess home care knowledge attitude and practices towards adults patients with diabetes mellitus



***REVIEW OF  
LITERATURE***

## **General Concepts of Diabetes Mellitus**

Early Greek physician described it as "Melting down" or wasting disease because one of its early characteristics before the days of treatment was a severe and continual loss of weight in the middle age, [Gunn, 1981]. And added that it is a complicated disorder can affect in one way or another every part on the human body.

Diabetes has been known since antiquity "Honeyedurine" appeared in ancient sanskrit literature and the Egyptian papyrus of ebers dating from 1550 BC contains dietary remedies for those passing abundant urine, [Mohamed, 1987].

### **Definition of diabetes mellitus:**

WHO, [1992], defined diabetes mellitus as a state of chronic hyperglycemia which may result from many environmental and genetic factors.

Diabetes mellitus is a chronic illness with a components of hormonal imbalance and alteration in blood vessels and nerves, [Luckman, 1990]. Diabetes mellitus is a complex group of disorders that have in common a disturbance in the oxidation and utilizations of glucose that is secondary to malfunction of the Beta cells of the pancreas, [Dewit, 1992]. Diabetes mellitus is a chronic heterogeneous disorder characterized by elevated blood glucose levels, [Dudek, 1993].

## **Prevalence and incidence:**

In Egypt several studies have been carried out to determine the prevalence of diabetes mellitus, [Ayad, 1971]. Found that the incidence of diabetes is 2,5% in urban areas and 1,5% in rural areas.

Beland, [1975], also indicated that the incidence of diabetes mellitus is higher in urban areas than rural areas.

Annual Medical Statistical Report, [1981], revealed that the total number of adults patients who are admitted in the Cairo University Hospitals was 46062 of those 605 were diabetic constituting 1,3%. The prevalence of diabetes mellitus in Egypt 2.5% of the total population, [WHO, 1985].

Arab et al., [1987], carried out a study in different egyptian geographical sectors, the total prevalence of diabetes was 4.18% The essential feature revealed by comparison of different geographical areas was the higher prevalence of diabetes at the urban communities, Damanhour 9.2% and Alexandria 5% compared to 2.6% in rural agricultural areas and 0.8% in desert communities.

Gaafer et al., [1991], found that incidence of diabetes mellitus in Delta region was 2.6%. The disease was more common among females and the maximum incidence in the autumn and early winter, [Cassmeyer et al., 1991].

Olefsky et al., [1992], added that the prevalence of diabetes mellitus depends on ethnic group constituents, age, economic condition and other