



Service Priorities and Programmes Electronic Presentations

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Submitting author: Dr Hon Ho SZE

Post title: Associate Consultant, Queen Mary Hospital, HKWC

Insulin therapy, no longer the nightmare to me: Pre-Insulin Class

*SZE HH, Chau C, YEUNG KK, SIU KY, LEE LL, HO C, KWONG A, KO W, TSUI W
Department of Family Medicine and Primary Healthcare*

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Introduction

The increasing prevalence of Type 2 Diabetes Mellitus (DM) and DM -related conditions place a strain on the healthcare budget. Appropriate and timely treatment can improve glycaemic control as well as reduce the risk of complications. Many DM patients refuse insulin therapy even when they clinically require this treatment modality. However, some eventually accepted insulin after persuasion. There is increased interest in conducting task orientated patient education for commencement insulin therapy running in group setting. This group education uses adult educational theory and saves time. It is crucial to explore patients' concerns and beliefs about diabetes and insulin which assist physicians in delivering patient-centered care.

Objectives

-To increase skills, knowledge and acceptance, for using insulin therapy in diabetes self-management, resulting in intensification of glycaemic control in patients with newly diagnosed or existing diabetes. -To explore DM patients' initial barriers to u

Methodology

Pre-insulin classes have been implemented since 2014 and 2015 at Risk Assessment and Management Program (RAMP) Central & Western district clinic and RAMP Southern District clinic respectively. The class contents include talk and demonstration. The talk is about indication and side effects of insulin therapy, instruments involved, home blood sugar monitoring, and management during sick and travel days. Each participant filled in the same questionnaire at the beginning and after the class. The pre – and post- data on the knowledge, skills and acceptance were collected and analyzed.

Result

We have recruited 125 patients. Majority of attendees (71.2%) were aged between 21-70 years old (89/125). 73.6% of attendees were primary and early secondary school education level (92/ 125). Completed questionnaires were successfully collected from 125 patients. The following results were obtained comparing the pre and post condition: 1. There was 4.6 folds increase in acquired knowledge and skill about insulin therapy (from 9.6% [12/125] to 53.6% [67/125]). 2. There was more than 50% reduction in the fear of insulin therapy (inacceptable/ fear of insulin therapy

from 35.2% [44/125] to 16% [20/125]) 3. There was more than 50% increase in the willingness of using insulin therapy (from 42.4% [53/125] to 65.6% [82/125]).

Concerning the DM patients' initial barriers and reasons for accepting it afterwards: The following are top 4 reasons for declining insulin therapy. 1. Thought insulin injection procedures are complicated (46%, 57/124). 2. Scare of hurt during injection (31%, 38/124). 3. Scare of unwanted side effect of insulin therapy (15%, 18/124). 4. Lack of home support (9%, 11/124). The reasons for accepting the therapy: 1. They understood that they could easily acquire the skills of insulin therapy under supervision. 2. They knew there was an injection pen instead of traditional needle. The painful level is minimal even less than finger pricking. 3. They understood that they are not alone. DM nurse with primary care doctor will follow up and guide them. The pre-insulin class was found to be a useful mean to raise the knowledge, acceptance and willingness of insulin therapy in DM patients with no or little knowledge about insulin therapy. Patients' concerns and beliefs about diabetes and insulin were also explored that physicians should address them by modifying their misconceptions towards insulin therapy. In addition, continuous educations as well as practical and emotional support from others were found to be valuable for insulin acceptance.