

Diabetes mellitus : Psychological, social and spiritual aspect

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ABSTRACT

Diabetes is often a dangerous disease that kills a person slowly once diagnosed. It may occur at any age stage of life either in childhood or adulthood. The condition of the abnormal blood sugar level not only deteriorates physiological functioning of an individual, the psychological, social and spiritual aspect gets equally affected. The perseverance of the study was to address the psychological, social and spiritual aspect of the people with diabetes and its related causes. Once the condition gets worsened not only the physiological symptoms get uncontrollable, the person gets overwhelmed with psychological symptoms like depression, anxiety, stress resulting in person's poor mental health. Lack of social support makes detached from the society which may lead to isolation and loneliness. It has been also observed that person with diabetes also show superstitious behavior due to the wrongful belief and myths regarding diabetes and its treatment. Therefore it's not only the physiological aspect of the diabetic patient to be taken care of rather psychological, social and the spiritual aspect need to address equally.

Key Words : Diabetes mellitus, Psychological aspect, Social aspect, Spiritual aspect.

INTRODUCTION

Diabetes mellitus (DM) or diabetes is a condition when there is an abnormality in the blood sugar level. The condition either may be due to increases a condition called hyperglycemia or decrease level of blood glucose level in the body. The above abnormality may occur due to less production of insulin by pancreases or when the body requires more insulin than the normal levels (Godhk and Godhkar, 2003). Physiological symptoms among people with diabetes include increased thirst, frequent urination, diabetic ketoacidosis, increased hunger, non ketotic hyperosmolar coma, or death. Heart disease, foot ulcers, stroke, chronic damage to the eyes and kidney failure (WHO, 2013). Depression and anxiety are also an important area of concern among people with diabetes (Penckofer, Ferrans, Velsor-Friedrich, and Savoy, 2007). The person with diabetes experience lack of social interaction, isolation, detachment (Tang, 2008). As far as the spiritual aspect among people with diabetes is concerned, that include wrong beliefs, myths regarding diabetes (Lager, 2006).

Skinner (2000) examined that social support from friends and family acts as strong predictor for the betterment of the people living with diabetes. The findings of the study also revealed that

support from the family and friends helps in the better well-being of the patients with diabetes. Furthermore, the research also revealed a linkage between social support and dietary behavior of the people with diabetes which in turn helps in managing the diabetes.

Pidhainy-Lan (2015) found a profound effect on the psychological health of the individual. The findings of the study revealed that the person with diabetes is at higher risk of having depression. It has also been found that the increased risk of depression will lead to poor cognitive dysfunctions. The interpersonal relationship also gets effects among the person with diabetes which may lead to poor social relationship.

Lee and Newberg (2005) explored that religious beliefs plays a very significant role in the persons suffering from diabetes especially women. Religious coping methods along with social support were proved to be very effective in acceptance of diabetes and self-care. Applying religiosity and religious coping strategies with other psychosocial help strategies offers an effective and approach to deal with diabetes.

The study conducted by Langer (2006) stated that the religious faith plays a key role in dealing with diabetes especially in women population. The results showed that in spite of a strict diet plan given to the sample. The women population believed that religious faith could help in dealing with diabetes.

Lin and Korff (2008) explored that there was a slightly higher risk of psychological disorders like mood and anxiety disorders with people with diabetic patients when compared to the people without diabetes irrespective of the region. The linkage between the disorders did not differ significantly across demographic areas. Interestingly, it has also been seen that Alcohol-use ailments were uncommon among diabetic persons. The study also revealed that exist a profound occurrence of major depression among persons living diabetes when compared to general population.

Mosaku, Kolawole, Mume, and Ikem (2008) conducted the study to assess the comparison between psychological issues and the quality of life among people living with diabetes, asthma and healthy individual. The studies revealed that the level of depression among diabetic patients were more prevalent when compared with asthmatics and healthy individuals. As far as the level of anxiety level was concerned it was more prevalent among people with asthma compared to diabetic individuals. The findings of the research also unveiled that depression, anxiety, and fasting blood glucose level also plays a contributing factor in deteriorating the ailment which in turn lowers the quality of life for people living with diabetes.

Tang, Brown, Funnell, and Anderson (2008) explored a close relationship between social support and interpersonal relationship among people with diabetes. The findings of the study revealed that social support plays a vital role in improving and managing quality of life among diabetic persons. Furthermore, social support proves to an important aspect that markedly influences health-related consequences and behaviors of person with diabetes.

Kilbourne, Cummings, and Levine (2009) explored significantly higher rate of depression in people with diabetic patients as compared to non-diabetic people. The outcomes of the study revealed that religious aspect plays a significant role in combating the level of depression among diabetic persons from low socio-economic status. The impact of religiosity was analyzed on different parameters like religious attendance, prayers, religious reading, and religious beliefs which act as a protective shield against depressive symptoms. The study also showed that religious faith increases psychological resilience among those handling the chronic level stress of diabetes.

Chew, Shariff-Ghazali, and Fernandez (2014) examined the psychological aspects of people living with diabetes. The study focused on the various psychological domains like emotional effects

on health, and also the relation between emotion and other psychological aspects such as cognition, self-efficacy, behavior and self-regulation. The study also showed a close link between diabetic patients and the psychological symptoms of anxiety, depression and stress resulting in poor physical health.

Ducat, Philipson and Anderson (2014) discovered that people with diabetes are at increased risk for psychological distress like anxiety, depression, and eating disorders. Long term mental health comorbidities may lead to higher risk of other complications like stroke, cognitive decline, amputations, deteriorated quality of life and even early death.

Patterson and Moxham (2016) discovered a close association between diabetes and mental illness. The findings of the study explored that people with diabetes people exhibited higher pervasiveness of psychological distress when compared to general population. It has also been found that people with diabetes have comorbidity with mental and behavioral issue when compared to alcohol, drug issues, mood (affective) disorders and anxiety problems. Interestingly, people with psychotic illness are at thrice risk of having diabetes when compared to general population. Furthermore, the findings of the study also unveiled that diabetes is progressively being predicted as a hazardous factor for mental health concerns.

Conclusion :

Diabetes being a physiological disease due to hormonal imbalance of the body not only disturbs the physiological balance of the body rather its effects can be easily seen in the other three aspects like psychological aspect, the social aspect, and spiritual aspect of the patient with diabetes as well and all them interconnected to each other. Imbalance in any of these aspects affects the whole life of the individual. Due to the lack of knowledge & negligence of the care takers, the people living with diabetes exhibit poor mental health. It has been also that the people with diabetes exhibits high level of depression & anxiety. The disease and its ill causes effect on the individuals well-being. The lack of social support may also lead to isolation and detachment from the society in them. People with diabetes also showed superstitious behavior in managing the disease due to which the condition gets deteriorated. Therefore, it may concluded that to achieve optimal diabetes care, all the three aspects like psychological aspects, social and spiritual aspects of the people living with diabetes must be addressed equally.

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