

Diabetes and Psychiatric Nursing

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There is a 'diabetes epidemic' underway with a worldwide predicted figure of 370 million by the year 2030. Much of this increase will occur in developing countries and in people in their most productive years. Deaths attributed to diabetes is scary (4 million persons per year). DM is the sixth leading cause of death above 60 years, and seventh across all age groups in developed countries.

Diabetes and psychiatry

There is a positive relation between diabetes and psychiatric illness that is shown throughout history. Sir Henry Maudsley commented "Diabetes is a disease which often shows itself in families in which insanity prevails" (The Pathology of the Mind, 1899).

There are numerous reports of type 2 diabetes mellitus, in psychiatric patients and numerous reports of patients with diabetes developing psychiatric disorders.

It remains unclear, however, whether there is an intrinsic relationship between abnormal glucose metabolism and particular psychiatric disorders or is it the other way around.

Mortality among diabetic persons with psychotic disorders

Individuals suffering with diabetes and individuals with serious mental are more likely than the general population to die prematurely.

The combination of more than one of those high risk disorders (diabetes and mental illness or drug abuse) increases the mortality rate for the individual and take it to a total different level that the individual suffering with such a combination is living in a real danger zone and the slightest mistake is fatal especially that one of the most common symptoms of mental illness is self-negligence.

The new direction

Up to recent times diabetes and psychiatric disorders have been treated in deferent and separate centers showing that there is a strange disregard to the fact of the existence of a great relation between both sides and that sometimes lead to late diagnoses of the occurrence of the secondary disorder.

The new direction is to have Joint liaison psychiatry-diabetes clinic that can deal with both sides of the equation.

Diabetes and psychiatric nursing

Psychiatric nurses must have a full understanding of the coexistence and the relation between diabetes and psychiatric disorders and they must combine between the knowledge of psychiatric nursing and a diabetes educator.

Psychiatric nurses should introduce Testing of blood glucose levels regularly to their nursing care plans for patients with relevant psychotic disorders and relevant antipsychotic medications.

Education for patient and family

Psychiatric nurses must target the patient and family and education giving care for the following:

- What is diabetes
- Types of diabetes
- Symptoms of diabetes
- Diabetes complications
- Hypoglycemia
- Hypoglycemia symptoms
- Drug abuse Reduce ability manage diabetes and blood glucose levels due to altered perception.
- Stay hydrated at all times
- Always carry fast acting (quickly absorbed) glucose
- Test your blood glucose levels regularly
- Stick to your normal diabetes routine as much as possible
- The correct way of use and disposal of sharps related to diabetes
- Wound and skin integrity and care
- Choose a safe environment as possible
- Carry something with you explaining that you have diabetes
- Make sure some of the people with you are aware you have diabetes and know what to do in an emergency.

Conclusion

Diabetes and psychiatric disorders go hand in hand and have a complete circular relation that makes it real hard to define that relation and put it in a clear perspective that break things down in to clear roles for nursing and nurses working with patients having both sides of that equation needs to upgrade the level of performance and be able to defuse both sides in to one care plan and that needs a full understanding of both sides.

The new direction may be the Joint liaison psychiatry-diabetes clinics and nurses need to be fully aware of that direction for them to prevail in the coming world of nursing [1-3].

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