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Bridging the gaps:
Doing research in the real world



Poster 03

What are the tools and gadgets that healthcare professionals use to facilitate insulin initiation in patients with type 2 diabetes?Lee PY¹, Lee YK², Akmal S², Ng CJ²¹Universiti Putra Malaysia, Serdang, Malaysia²University of Malaya, Kuala Lumpur, Malaysia

Background: One of the main reasons for the delay in insulin initiation in type 2 diabetes is patients' misconception about insulin therapy, its benefits and side effects. To overcome this barrier, healthcare professionals (HCP) often use different tools to educate patients during consultations.

Objectives: This study aimed to explore the range of tools and gadgets used by HCP in Malaysia to facilitate insulin initiation amongst patients with type 2 diabetes.

Methods: In depth interviews and focus group discussions were conducted in Klang Valley and Seremban in 2010-11. HCP consisting of general practitioners (n=13), medical officers (n=8), diabetes nurses (n=3), government policy makers (n=4), family medicine specialists (n=8) and endocrinologists (n=2) were interviewed. A topic guide was used to guide the interviews, which were transcribed verbatim and analysed using Nvivo9 software using a grounded theory approach.

Results: HCPs used flip charts, diagrams, brochures and posters to explain the patho-physiology, disease progression and complications of diabetes to patients. HbA1c records were felt to be important as they served as evidence of poor diabetes control and helped to reinforce the need for insulin to patients. Decision maps were used to help patients make decision about starting insulin. Some HCP suggested using models of diabetic complication to instill fear to the patients. Showing patients the injection pens and needles and demonstrating the injections on dummies were found to be helpful in dispelling myths and barriers of insulin therapy. A simplified process of insulin injection would help patients to understand the process better. The insulin chart and glucometer were important tools for regular monitoring and self-titration especially at the early phase of insulin initiation.

Conclusion: There are various tools and gadgets to facilitate insulin initiation and HCPs should fully utilize these tools and gadgets in their clinical practice.

Poster 04

Insulin myths: healthcare professionals' views of patients' perceptions towards insulin therapyLee YK¹, Lee PY², Akmal S¹, Ng CJ¹¹University of Malaya, Kuala Lumpur, Malaysia²Universiti Putra Malaysia, Serdang, Malaysia

Background: Nationwide surveys have shown that the prevalence of diabetes in Malaysia has almost doubled in the past ten years; yet diabetes control remains poor and insulin therapy is underutilized. Patients' negative perceptions about insulin are one of the reasons why they refuse to initiate insulin despite being advised to do so.

Objectives: To explore the healthcare professionals' views on the perceptions of patients with type 2 diabetes towards insulin therapy.

Methods: In depth interviews and focus group discussions were conducted in Klang Valley and Seremban in 2010-11. Healthcare professionals consisting of general practitioners (n=11), medical officers (n=8), diabetes nurses (n=3), government policy makers (n=1), family medicine specialists (n=1) and endocrinologists (n=2) were interviewed. A topic guide was used to guide the interviews. The interviews were transcribed verbatim and analysed using Nvivo9 software using a grounded theory approach.

Results: Patients perceived insulin as a "poison" and believed that insulin causes many side effects like sexual dysfunction, organ damage and viewed insulin as a precursor of dialysis. Patients also perceived insulin as a "drug" that is addictive and irreversible once started. Misperceptions about insulin injections include overestimating the complexity of the process, fearing new technology and perceiving the injections as being invasive. Patients viewed insulin as indicating that the disease is severe and terminal. It was seen as a "last resort", "end of life" and leading to death. To the patient, initiating insulin was also viewed as a failure in diabetes control and a punishment for failing. There was a sense of stigma attached to insulin and patients perceived that insulin therapy would cause a drastic change in lifestyle.

Conclusion: In conclusion, there are many myths about insulin which have to be addressed by healthcare professionals when helping patients to make decisions about starting insulin.