

**THE EFFECTS OF HEALTH EDUCATION ON ADHERENCE  
TO THERAPEUTIC REGIMEN AND RISK OF OCCURENCE  
OF COMPLICATIONS AMONG DIABETIC PATIENTS  
IN GENERAL TRIAS, CAVITE**

**THESIS**

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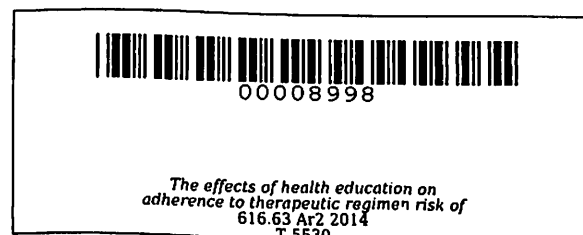
**Indang, Cavite**

**April 2014**

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THERAPEUTIC REGIMEN AND RISK OF OCCURENCE OF  
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GENERAL TRIAS, CAVITE**

Undergraduate Thesis  
Submitted to the Faculty  
of College of Nursing  
Cavite State University  
Indang, Cavite

In partial fulfillment  
of the requirements for the degree  
Bachelor of Science in Nursing



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April 2014

## **ABSTRACT**

**ARDON, CAROLYN C., DAYTO, APRIL L., DULCE, ALLAIN S. The Effects of Health Education on Adherence to Therapeutic Regimen and Risk of Occurrence of Complications Among Diabetic Patients in General Trias, Cavite.** Undergraduate Thesis. Bachelor of Science in Nursing. Cavite State University. April 2014. Adviser: Prof. Nenita B. Panaligan, RN, MAN.

This study was inspired by phenomenon observed with the rising prevalence of diabetes in the Philippines in relationship to the hearsay lack of knowledge noted among Filipinos regarding diabetes and its management. This study utilized a quasi – experimental research design aimed to increase awareness and knowledge among diabetic patients to prevent any further or serious complications that, later on, may lead to death.

Specifically, this study intended to determine: the profile of diabetic individuals within the General Trias area; psychosocial factors leading to adherence to therapeutic regimen among the diabetic patients; level of risk of occurrence of complications in diabetic patients before and after receiving health education whether there is a significant difference that can be observed in the level of knowledge of diabetic patients regarding diabetes – related topics before and after being exposed to health education; if there is a significant difference that can be noted in the level of adherence of diabetic patients in terms of blood pressure, blood glucose, blood cholesterol and urine albumin before and after exposure to health education; and if there is a significant difference in the level of risk of occurrence of diabetic patients in terms of blood pressure, blood glucose, blood cholesterol and urine albumin before and after exposure to health education.

The study set to conduct data gathering among diabetic patients within two pre-selected barangays within the area of General Trias, Cavite: Barangay Santa Clara

and Barangay Navarro. Only 60 participants who expressed their willingness to continue the study by completing the questionnaire and signing a waiver of consent were considered under the Treatment and Control Group.

The Treatment Group received visual aided pamphlets depicting the content of the topics that were discussed while the Control group only participated in weekly monitoring of blood glucose level and blood pressure. In addition, the Treatment Group took part in Pre-and Post health education examinations to test their level of knowledge before and after exposure to health education

At the end of the study, the researchers gathered the last necessary data from a total of 33 participants due to personal reasons given by those participants who could not participate. Data about their age, sex, civil status, level of education, employment status, presence of financial concerns, duration of illness, alleviation of symptoms (both hypoglycaemia and hyperglycemia), amount of advice given by the physician, level of stress, personal health beliefs as well as social support were obtained.

In terms of psychosocial factors that affect therapeutic adherence in the diabetic individuals, it was determined that most patients had: autonomy in managing their diabetes as well as preventing complications, an idea of the impact of diabetes in their lives, learned to compromise to deal with their diabetes, and an idea of the possible results of mismanagement of their diabetes. It showed that most participants had enough people living in their household to help them manage diabetes.

The results of the study show there is significant difference in the level of knowledge in the treatment group before and after exposure to health education, with a level of significance value of .000 observed in all topics discussed, which was manifested in the difference of the scores noted in the Pre-and Post-health education examinations given to the clients throughout the course of the study.

There was also a significant difference in the level of adherence in terms of blood pressure among the treatment group while no significant difference was noted among the control group. The level of significance noted among the treatment group was .011, which deemed that the provision of health education made a significant difference in influencing change in diabetic patient's blood pressure.

There was also a significant difference in the level of adherence in terms of blood glucose levels among the treatment group while no significant difference was noted in the control group. The level of significance among the treatment group was .009, which determined that providing health education had a significant difference in influencing change in diabetic individuals' blood glucose levels. However, there was no significant difference in the level of adherence in terms of blood cholesterol nor urine albumin levels among either the treatment or control groups.

At the end of the study, the level of risk of occurrence of complications among the control group in terms of: blood pressure was low (diastolic) and moderate (systolic); blood glucose levels was moderate; blood cholesterol was moderate; and urine albumin was moderate. With regards to the treatment group, the levels of risk of occurrence of complications in terms of blood pressure, blood glucose, blood cholesterol and urine albumin were moderate, moderate, low, and high, respectively.

Based on these findings, the researchers found it necessary to recommend that more efforts be placed among nursing professionals to aid in promoting health education for patients. Most especially, the researchers encourage the various government and non – government organizations, such as the Department of Health and World Health Organization, to place more efforts in creating programs which utilize health education to advance health promotion and management of chronic diseases, such as diabetes.

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An undergraduate thesis submitted to the faculty of the College of Nursing, Cavite State University, Indang, Cavite in partial fulfilment of the requirements for the degree of Bachelor of Science in Nursing with Contribution No. SP CON 2014 –17. Prepared under the supervision of Nenita B. Panaligan, RN, MAN.

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## **INTRODUCTION**

According to experts, diabetes is a non – communicable disease which is slowly increasing in prevalence throughout the Philippines. In comparison with studies done from 1998 to 2007, the occurrence of diabetes mellitus had increased five – fold, with an initial finding of 3.9% of Filipinos with diabetes to 20.6% by 2007 (Ward, 2010). It is projected that 380 million people worldwide will develop diabetes, with most of the population coming from southeastern Asian countries, including the Philippines (Simbulan, 2008). According to the Department of Health's latest data, diabetes ranks as the eight leading cause of mortality in the Philippines with an incidence of 15,123 per 100,000 population and is increasing at a rate of 18.5 percent per year (DOH, 2010).

While there is no foolproof explanation for the increase in the incidence of diabetes in the Philippines, much evidence points at the scarce understanding of Filipinos regarding this disease as well as its complications (Ward, 2010). Because of