

Major Health Issue

Diabetes

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Module Code: LCHS4004

Module Name: Introduction to Public Health

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Introduction

In this report it will definitely be diabetes disease. Diabetes is enough when the body cannot produce insulin or cannot use it as well as it needs to. This causes the blood sugar level to rise. Over time, it causes serious health problems such as vision loss, kidney or heart disease.

There are a few main types of diabetes, type 1 diabetes, type 2 diabetes and gestational diabetes. Type 1 diabetes is an autoimmune disease, this reaction disables the body from producing insulin, the diagnosis usually occurs in children, adolescents and young adults. Type 2 diabetes This type of diabetes is the most common, in which the body cannot produce enough insulin to maintain normal blood sugar levels. Gestational diabetes appears in pregnant women even though they never had diabetes, it usually disappears after the baby is born.

In the UK, 4.7 million people are living with diabetes. This number has been growing notably due to the increasing rate of people with type 2 diabetes. It is estimated that approximately 1 million people live with type 2 diabetes and do not know why they have not been diagnosed. It is predicted that by 2030 this number of affected people will grow to 5.5 million. The drastic increase in diabetes is due to the rising rate of obesity, which is the biggest risk factor for developing the disease. But there are also other risk factors such as family history, age, and ethnicity (Afro-Caribbean, Black African, South Asian ancestry) that have a higher chance of developing type 2 diabetes.

About 422 million people worldwide have diabetes, many of them living in low- and middle-income countries. In the world, 1.5 million deaths are caused by diabetes and these two numbers have increased in recent years.

Thus, throughout the report, measures of available health, the main determinants/risk factors of the disease and the consequences of the disease on public health in the short and long term in a health or social care environment will be addressed.

Public health measures available

Diabetes is a non-infectious disease, type 2 is related to lifestyle, such as high cholesterol and obesity, which is the main modifiable risk factor for type 2 diabetes. be postponed by changing attitude towards lifestyle, as type 1 diabetes is not lifestyle-related and cannot be prevented.

Ways to prevent and manage diabetes with lifestyle changes:

Beware of being overweight. Being overweight can cause the insulin produced by the body to not work properly and this increases the risk of having abnormal blood sugar levels. Losing weight is a challenge, but there are weight management programs (NHS diabetes prevention programs for healthier health), nutritionists and other support.

A healthy diet is also very important. Although there is no specific diet for people at high risk of developing type 2 diabetes. According to the American Heart Association, a good diet that includes fruits, vegetables, whole grains, skinless poultry, fish, legumes, vegetable oils, and seeds without salt helps prevent disease.

Being more physically active also helps prevent type 2 diabetes. The government advises adults to exercise for 150 minutes a week and gradually increase the time and intensity as the body adapts to the new routine. Exercise for diabetes has many benefits, such as helping you lose weight, keep your blood sugar normal, help control blood pressure, improve cholesterol, give you more energy, sleep better, and improve your mood. Physical exercise, in some cases, helps people with type 2 diabetes go into remission.

Smoking is associated with many diseases, one of which is diabetes, it is associated with the risk of developing type 2 diabetes. be found on the NHS website.

Excessive alcohol consumption negatively influences health and is also associated with type 2 diabetes, so it is very important to drink in moderation. The recommendation is to be aware and consume a small amount of alcoholic beverages on the day of departure.

The key determinants/risk factors of the chosen disease.

Risk factors that cause existing disease are modifiable and non-modifiable. In the case of genetics, gender, ethnicity and age, it cannot be controlled, which is why it is called a non-modifiable risk factor. People with type 1 diabetes already have a genetic propensity for an autoimmune response, so it's not possible to control these factors. In type 2 diabetes there is an ethnic factor, people of African-American descent are at greater risk of developing diabetes and cannot control these factors.

The non-modifiable risk factors that increase the risk of developing prediabetes and type 2 diabetes are:

Family history increases the risk of developing diabetes. These risks are inherited from our parents and close relatives. It is important to inform the doctor of the family history to know the chances of developing the disease.

Another factor is ethnicity or race, Native Americans, African Americans, African Americans and South Asians are more likely to develop diabetes.

Age is also another important risk factor for developing prediabetes and type 2 diabetes. Typically, the disease appears in adulthood around the age of 40, but lately it has been diagnosed in adolescents and children and type 2 diabetes.

Gestational diabetes usually appears during pregnancy and disappears after delivery, women who develop diabetes during pregnancy are more likely to develop it later in life.

Modifiable risk factors that increase your risk of developing prediabetes and type 2 diabetes and that may help prevent them are:

People who are overweight or obese increase the chances of developing diabetes. The risk decreases as a person loses weight.

Lack of physical activity is also a risk factor for developing type 2 diabetes. Regular physical activity allows the body to efficiently use its own insulin.

Discharge without treatment is also associated with diabetes complications. It is important to understand the disease and manage it.

High cholesterol levels increase the risk of type 2 diabetes.

Smoking also increases the risk of developing diabetes. There are many resources that can help you stop doing this.

A poor diet is one of the most important modifiable risk factors. That's why it's important to eat healthy foods to avoid sugary drinks and refined carbohydrates, among others.

Alcohol abuse limits the ability of the pancreas to produce insulin in the required amount. It also damages the liver by producing more sugar and is detrimental to the diet, so it's important to drink it in moderation.

Stress is unfortunately part of our daily lives, the way to deal with it varies from person to person. Learning to take care of mental health is very important for a healthy life. Stress is not a problem with diabetes, but it is also a problem with many other diseases.

Research shows that sleeping too much or too little increases the risk of A1C in people with type 2 diabetes. So if you have trouble sleeping, get help, as getting enough sleep is important for your health.

These modifiable risk factors can help prevent diabetes and improve quality of life.

Short-term public health consequences of the disease in a health or social care setting

In the short term, diabetes presents complications, this happens when the amount of glucose in the blood becomes too low or too high for the body to function. That's why they need to be treated quickly.

As a short-term consequence, the most common complications of diabetes are:

In hypoglycemia, the blood glucose level reaches very low levels. Sugar is the body's main source of energy, as a response to low sugar levels the symptoms are tiredness, weakness, tremors, anxiety and the development of heart disease. It is very important to take the medicine regularly to prevent the blood glucose from getting too low. In the severe case of hypoglycemia, people seem to be in a clutch and have difficulty carrying out some activities.

Hyperglycemia different from hypoglycemia and technical name we use when the glucose level in the glass is too high. In the short term, the complications that we can observe are the following: frequent urination, a lot of pain, blurred vision, tiredness and headaches. It is important for the patient to closely monitor the blood sugar level to prevent the development of more serious complications.

Hyperosmolar hyperglycemia (HHS) can occur in people with type 2 diabetes who have very high blood glucose levels. Symptoms caused are nausea, dehydration, confusion and even coma if the glucose is too high at the level of approximately 40 mmol/l. However, it is important to seek medical attention as HHS can be very serious.

Ketoacidosis usually happens when the body has little insulin and can affect people with type 1 diabetes, when they undergo a surgical procedure to remove the pancreas and in type 2 diabetes when insulin production is reduced. This condition can cause vomiting, dehydration and can lead to coma.

Long-term public health consequences of the disease in a health or social care setting

In the long term, these are the complications that diabetes can develop gradually and cause serious harm if not treated and controlled.

Certain people with diabetes develop an eye disease called diabetic retinopathy, which affects the scission and, if left untreated, can lead to vision loss.

Diabetic foot problems are critical and, as a consequence, can lead to loss of the leg. This is due to nerve damage and the rise in blood sugar can impair circulation and slow wound healing.

Heart attacks and strokes caused by high blood sugar over a period of time damage blood vessels.

Diabetes can also cause nephropathy (kidney problems). They are caused by high blood sugar levels. The damage done to the kidneys over a period makes it difficult for them to expel fluids.

High blood sugar can cause nerve damage in some people with diabetes. This hampers communication between the brain and all parts of the body, which in turn affects how we hear, look and move.

Diabetes can also cause sexual problems in both men and women. In women, high blood sugar levels can damage blood vessels and affect nerves, causing them to lose sensation. In the case of men, the blood that reaches the sexual organ is in small quantity and hinders the erection.

Gum disease and other oral problems.

Diabetes also causes economic impacts, such as loss of work, cost of treatment, hospitalization, among others. But the main cost is insulin amounts, which are increasingly prescribed with the increase in people with diabetes.

Conclusion

In short, diabetes is a non-infectious disease with modifiable and non-modifiable factors that have been increasing dramatically over the years. In recent years, the number of diagnoses in children has increased.

Without proper support, people diagnosed with diabetes can develop serious complications. Every week, because of complications from diabetes, 184 more amputations, 770 strokes and 590 heart attacks. These new statistics are troubling because type 2 diabetes is more complicated because it includes risk factors such as age, family history, lifestyle and obesity.

Early diagnosis helps prevent serious complications in people with diabetes. According to Chris Askew OBE *“Diabetes is serious, and every diagnosis is life changing. It is an unrelenting condition, and the fear of serious complications is a lifelong reality for millions of people across the UK.”*

To prevent the situation from getting worse, a set of preventive measures was created for the disease, such as improvements in lifestyle, practice of physical activity, among others.

Additionally, for over 80 years, millions of research projects have been developed and funded and have helped change the lives of millions of people with the disease. According to Professor Roy Taylor, *“Vision loss can be prevented if retinopathy is detected early and treated. Easier and more affordable screening methods allow us to do just that. With the support of Diabetes UK, we are seeing the impact of this work on the lives of people with diabetes around the world.”*

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