Nursing Care of Hopelessness Analysis in a Patient with Type 2 Diabetes Mellitus: A Case Study

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Abstract

Objective: To analyze nursing care of hopelessness influenced by type 2 Diabetes Mellitus.

Methods: All data included in the final analysis was collected from a patient with type 2 Diabetes Mellitus in 12 days. The analysis in hopelessness intervention is later found to be related to the progress in physical problems, such as unstable blood glucose level and impaired skin integrity.

Results: Hopelessness in the client with type 2 Diabetes Mellitus may occur as a result of lifestyle changes, chronic illness status, and medication therapy. The hopelessness can affect the blood glucose level and the duration of wound healing. Therefore, type 2 Diabetes Mellitus with hopelessness problems may require an extended hospital stay with intensive nursing care included.

Conclusion: The present study found that the psychosocial problems of hopelessness may induce unstable blood glucose levels and impaired skin integrity problems as a result of complications of type 2 Diabetes Mellitus.

Keywords: hopelessness, unstable blood glucose level, urban health, DM-2 complication

Introduction

Stress is an unconscious response to external or internal demands. In the urban community, the stressor takes different forms such as lifestyle changes, complex activity, and population growth 1. Disturbance of mental condition activates the hypothalami pituitary adrenal (HPA) axis and causes changes in the immune system, which can lead to insulin resistance and the development of Diabetes Mellitus (DM) type 2 2.

National Basic Health Research (2013) show that in Indonesia, the prevalence of DM-2 in urban area (3.3 %) is higher than in the rural place (1.5 %)3. DM-2 should be controlled by routine exercise, prescribed diet, routine blood sugar testing, adherence to oral medications and stress management. However, this therapy can put the patient with DM-2 in stressful condition because the daily lifestyle changes 4.

Psychosocial and physical problems have reciprocal impacts in patients with DM-2. Stress can lead to DM-2 and DM-2 can make another stress. Therefore, it is necessary to address nursing intervention in psychosocial aspects: i.e. hopelessness in the patient with DM-2. This paper will discuss, analyse, and compare a case of patient with DM-2 with other studies associated with DM-2 and psychosocial problems that occur.

Methods

Data of 12 days nursing process was analysed in this study. The development of controlled blood glucose levels is seen through daily blood glucose curve. Also, determining of wound stage after wound care and evaluation of signs and symptoms of hopelessness 5,6,7.

Results and Discussion

Hopelessness may lead to unstable of blood glucose and physical problems as a result of complications of DM-2. Additionally, it affects the psychosocial situation. Therefore, it is important for nurses to concern about hopelessness condition in DM-2 to prevent of unstable of blood glucose level. It is congruent with study of suicide risk at DM by Pompili, 2009 shows that medication therapy, diet, and lifestyle changes can lead to hopelessness condition 8.
Since manifestation and therapy of these diseases requires strengthening the motivation of diet changes, the treatment should be undertaken for life, and physical activities should be done. It can lead patients to be more concerned about life with DM and increase the adherence of the medication therapy.

Nurses use strategies for creating and scheduling activity in patients with DM-2 to improve attention and meaning of life in participating to the treatment itself. Proven it also enhances the meaning of life and better appreciate the schedule that had been developed to achieve the expectations of the capabilities that will grow along with the stable state of the blood glucose condition, and avoid a chronic complication.

Figure 1. Daily Blood Glucose Curve in Patient DM-2 with Hopelessness in 12 Days.

<table>
<thead>
<tr>
<th>Day</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>GDS</td>
<td>400</td>
<td>350</td>
<td>300</td>
<td>250</td>
<td>200</td>
<td>150</td>
<td>100</td>
<td>25</td>
<td>20</td>
<td>15</td>
<td>10</td>
<td>5</td>
</tr>
</tbody>
</table>

Conclusions
People in urban communities are likely to suffer from DM-2. It is due to lifestyle factors affect diet, physical activity, and stress. This affects the development of insulin resistance which leads the blood glucose to be uncontrolled. If this condition continues then, complications will arise and influence the treatment adherence, diet, and activity. One of its complications is the length of the wound healing process due to disruption of blood circulation to peripheral blood vessels. Thus patients with DM-2 need to change their lifestyle and obedient taking medication. This can affect the condition of patients with DM-2 to make sense of life and can lead to hopelessness.

References