



Emotional and Psychological Support in Diabetes Care: The Crucial Role of Nurses in Enhancing Patient Well-Being

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Abstract

Background: Diabetes mellitus is a complicated disease that requires the individual to manage it in their everyday life even after the treatment. Thus, the aspects of patients' physical health are often paid significantly more attention than their emotions and psychological state.

Aim: The purpose of this study is to identify how nurses help diabetic patients in terms of patients' necessary psychosocial support and what measures are taken to enhance psychological attitudes of the patients and their ability to control the disease.

Methods: The following studies were reviewed only in the course of literature: The following nursing interventions, communication methods, and support systems, which are involved in handling of emotional issues of diabetic patients were reviewed from literature. Papers comparing outcome of patients where nurses had offered them emotional/psychological support were reviewed in order to determine the impact of these interventions.

Results: A number of supportive engaged nursing actions that greatly enhance mental health were pointed out at a review level, including effective listening skills, early detection of mental illness, insight, stress reduction methods, positive profile, and peer support respectively.

Conclusion: An important contribution to the investigation of the emotional and psychological part of the treatment is made by the nurses taking care of diabetic patients. Commonly, nurses assist in facilitating better management of the condition, through support and provision of strategies, thus improving the quality of life of the patients.

Keywords: Diabetes, depression, psychological intervention, nursing, diabetes, patients, stress.

Received: 07 October 2023 **Revised:** 22 November 2023 **Accepted:** 06 December 2023

Introduction

Diabetes is a long-term chronic health ailment that needs long-term ongoing disease management both in terms of prevention and in overseeing general health. Apart from anatomic aspects of diabetes including glycaemia regulation, compliance with prescribed medicines and other behavioral changes the emotional and psychological burden of the disease are equally important. Living with diabetes is often a challenging task since a patient has to deal with continual blood glucose measurement, medication administration and adherence to dietary changes that frequently may cause stress, frustration, and emotional exhaustion. Furthermore, if high blood pressure increases the likelihood of developing complications or being a victim of a severe chronic disease, it causes psychological pressure. Since nurses

are mostly involved with patients' care, they play a crucial role of ensuring clients emotional and psychological requirements are met. With the active use of such kinds of nursing interventions as empathy, patient information, and different therapeutic approaches, nurses ease the emotional load patients with DM have to experience and promote better disease management. This paper examines the crucial intervention done by nurses to emotionally and psychologically stabilize diabetic patients. In this paper, it will examine how nurses educate and support patients to cope with the psychological aspects related to the disease so as to also improve the patients' status and quality of life. [1,2]

Managing diabetes: the Nurse's Role

Based on the analysis of the use of relief supplies and the literature review of chronic care models, this paper found that nurses are pivotal and perform various functions in the care of diabetes. They are in a direct line to engage the patient through health and from the onset of the disease to the treatment regimens. Nurses are an audience who educate the patients on blood glucose levels, hyperglycemia, hypoglycemia, cardiovascular disease, neuropathy, and renal complications. As teacher-like professionals, nurses delegate the core responsibilities and duties of the condition to assist patients to actively manage their ailments and follow through their recommended treatments. [3] The other role is that of patient educators and members of the interprofessional team with clients empowered to offer holistic care. They collaborate with physicians, dietitians and other members of interdisciplinary care team to design, develop specific treatment plans that correspond to the patient's preferences, abilities, and culture. Front-line workers, including nurses, can educate the patient on the diseases' meaning and promote their understanding of problems limiting their access to healthcare services or their inability to comprehend the medical information that is being given to them. There is another important sign in monitoring and early intervention should be performed by a nurse. ESSENTIALS OF PATIENT CARE NURSES often monitor the physical and psychological well-being of patients, looking for indicators that a patient's diabetes is poorly managed or that the patient has developed complications of diabetes. For instance, they may conduct normal annual check ups for instance foot ulcers, eye complications or any other complications that needs be attended. That is, timely addressing these concerns, nurses contribute in early recognizing of complications, which can have positive impact on patient's quality of life as well as to minimize the costs of health care delivery. [4,5] For that matter, it would be relevant to involve nurses in enforcing the modifications in the lifestyle that are significant in chronic diabetes care. These are useful tips on what patients are to eat, how they are to maintain their diets, or even on how to manage stress in order to facilitate the best patient outcomes possible. The same is also true for patient's self-monitoring through technological tools, like continuous glucose monitors or mobile health applications that record and inform progress in real time. [6] while the actual management of diabetes is a very technical affair for the nurse, they also manage the psychological impacts of living with a chronic disease. A lot of patients suffer from anxiety, depression, or loneliness because of the disease, and the nurses help them to solve their psychological problems, explain to the patient what will happen next. This helps in working for the supreme beneficial interests of patients where patients are not only stick to the management of diabetes but also to their mental and emotional health. In this context, passion, professionalism, and empathy always pay off, and nurses truly change people's lives with diabetes. [7]

Patient Education: One major responsibility for the nurses of this country is as follows:

Since teaching is a major component of diabetes care, patient education is one of the most important roles of nurses. It is widely used to enable patients to adopt the responsibilities concerning their condition with the knowledge and practices. Nurses are educators by profession, translating medical advice into what patients can understand. The tasks of this role include explaining all general information about diabetes such as causes, types, symptoms, as well as long-term effects that result from the illness to make the patient understand and embrace the need for adherence to self-care practices. [8,9] One of the most essential aspects of patient education is to enable a person on how to take blood glucose tests correctly. Some of the content areas include how to check blood glucose levels, how to interpret the results and symptoms of hyperglycemia or hypoglycemia. Furthermore, they offer tips concerning the use of insulin syringes, pens or pumps and respond to the everyday inquiries regarding doses, their time of application and storage.

Because nurses make a point of explaining the dos and don'ts while carrying out demonstrations, patients are likely to have confidence in their capability to administer the treatments on their own.[10,11]

Nutrition and physical activity remain key aspects in management of diabetes and the nurse has the important responsibility of teaching patients about these aspects. They offer dietary counseling, develop an eating program and work with clients to eat healthy meals appropriate to their health condition, culture, and lifestyle. They also pay much attention to the physical activity and help patients make correct choices of the exercises according to their age, physical condition, and diseases. Nurses break down these concepts into small baby steps, which makes lifestyle changes doable and therefore sustainable among patients.[12,13] Apart from the aspects relating to a patient's body, the nurses also handle the psychological results and impacts of diabetes. They describe effects of stress on blood glucose levels to patients And provide suggestions of stressful conditions for example recommendations of how to deal with stress like relaxation or meditation. Also, they allow the patients to have something to say and to be afraid of so that the treatment process helps to reduce their anxiety and stick to the regime. Education should not only be directed to the patient, but also to his family members or other caregivers involved in the care of the patient. Such individuals are engaged by the nurses, for them to be able to understand how they can help, and when complications are likely to occur. In promoting the care environment, nurses contribute positively to the effectiveness of management of diabetes. Therefore, in a picturesque sentiment, patient education is not an undertaking but a paradigm of each comprehensive nursing care in diabetes. The nurse educates the patient, encourages optimal communication and adopts patient centred care approaches so that the person with the condition can live a healthier and more satisfying life despite the condition. This educational endeavor therefore ultimately leads to improved health and a decreased health care cost.[14,15]

Screening and Control of Blood Glucose.

Blood glucose monitoring and management is arguably one of the most core roles that any nurse caring for patients with diabetes must perform. It constitutes the key strategy of achieving a proper glycemic control, avoiding complications, and patient's welfare in general. A number of patients with diabetes are inadequately knowledgeable about self-monitoring, target range, or the meaning of a deviation from it; nurses remain vital in teaching patients these aspects.[16] Patients may require help on how to use blood glucose monitoring devices as well as be clear on the results as displayed in glucometer or continuous glucose monitoring machines. This education entails ensuring that patients, clients, or anyone interested understand how to undertake the finger-stick test, how to calibrate the device that measures the blood glucose level and how to record our results in a logbook or via an application. Nurses too concern themselves with when to take glucose, like before eat, after exercise, or when they develop a certain disease. However, nurses also participate in the appraisal of patterns in values of glucose, as well as the provision of support based on these values. They work closely with the healthcare team to fine tune, dosages of insulin or oral hypoglycemic agents based on the patient's glucose pattern and patient requirements. Especially, patients require insulin, it is the responsibility of the nurses to help them in setting the proper unit of insulin to be taken depending on the amount of carbohydrate taken, the level of activity of the patient, and stress . One of the most crucial parts of the control of the blood glucose levels is the identification and actions taken towards increased or decreased level of the blood sugar. Patients are taught about causes, sign, and corrective actions regarding these ailments by the nurses. For instance, they help patients regulate the management of low blood sugar levels by using quick sources of sugar such as glucose tablets or fruit juice, or when to call their physicians. Also, they recommend ways in which hyperglycemia can be controlled through taking enough water, reviewing the doses of the drugs, or going to the doctor.[16,17,18]

Nurses also support technology employed in glucose management such as CGMs and Insulin pumps these being convenient and providing real time data. They help patients in newcomers to these devices setting up and using them while helping address the common challenges. Nurses make use of technology to enhance diabetes care with the positive outcome of attaining better glycemic control hence the quality of life. [19,20] Last but not the least; maintenance of blood glucose levels includes more of an active approach to ward off the complications. Patients are taught by nurses about future complications related to diabetes like heart disease, nerve damage, and damage to the eye; and that patients should try to keep

their blood sugar levels steady as much as possible in order to avoid such complications. Nurses can track the process, identify the problem areas and modify the approach, thanks to follow ups and check points. Thus, managing nurses are compulsory to recognize patients with diabetes for blood glucose management and to give patients the instruments, information, and encouragement they need to control their blood glucose levels effectively. The improvement that they do to patients does not only enhance their daily living with diabetes, but greatly enhances their long-term well-being too.

Lifestyle Interventions: The campaigning role of a nurse as change agents

Cognitive Lifestyle interventions comprise one of the foundations of diabetes care, and nurses take an active part in promoting these changes. Through encouraging the changes of good practices safe health and enhancing patient self-efficiency, nurses have a noble role in glycemic outcomes and complications avoidance. Instead of just offering the treatment, they are focused on leading patients towards improved decisions in their lives. There are numerous life style changes with one of them being encouraging the clients to take balanced diet. Diabetes patients undergo continued teaching on the effects of specific foods on blood sugar level, and the implication of each. They help patients plan on how they should take their meals, the proportions they should take and the right composition of meals – carbohydrates, proteins and fats among others. Nurses also take into account cultural and socio-economic background of their patients, patient's preferences and thus make it easier for patients to follow these dietary recommendations in the long run. [21,22] Another important aspect of the lifestyle modification interventions is, therefore, physical activity. Hospitals, nursing, and other healthcare practitioners empower patient to engage in some kind of physical activity, as this is beneficial in the sense that it assist in improving the sensitization of insulin in the body, that in turn assists in the regulation of glucose in the body system. Its services include the recommendation of appropriate exercises, including walking, swimming, or lifting weights because of their age, condition, or health problems. Also, the concerns of the nurses are effective, and they report on strategies to avoid obstacles, including underway time or concern about hypoglycemia during the exercise.[23,24]

In addition to food and activity, nurses focus on the other aspects which are important in the life of people with diabetes: stress and sleep. One way stress affects patients is through changes in the patient's blood glucose levels which is why nurses counsel patient on methods used to manage stress such as mindfulness, deep breathing and relaxation techniques. Likewise, they teach the patient about sleep and the general quality and time that is healthy for metabolic functioning. [25]

Providing advice on how to have a better night's sleep

As pointed out again and again, nurses offer lifestyle alterations, which call for the reduction or elimination of some vices like smoking and taking alcohol. They inform patients on the effects of these behaviors on glycemic control and development of complication in diabetes. Holding material for change to quit smoking, reduce alcohol intake or any other unhealthy habits, Nurses assist patients in making better decisions. It also partakes In the encouragement, as well as the sponsoring of patients, throughout their course to healthier living standards. It is always difficult to make a change; transitional changes are never easy, especially if they mean a shift in a patient's habits.[26,27] But Here, nurses encourage patients, congratulate them for progress made no matter how small and then help them work through the times they slip. They practice motivational interviewing strategies to assess patient's readiness to modify their behaviour, to address conflict, and establish realistic goals and plans. To sum up, being not only the caregivers but also promoters of life-style modifications, which determine diabetes Mellitus outcomes more than 90% of the time, the nurses should pay much attention to social media. They also educate their clients and give them full support to enable them make better decisions that will change their lives and reduce the impacts of diabetes on their lives in the future.[27,28]

Current studies refers to Multidisciplinary Diabetes Management Teams, and the participants of these studies are nurses.

Diabetes care teams are usually comprised of multiple disciplines and competent and committed nurses are central to diabetes care teams. Diabetes is a chronic disease which management involves various health care workers that include physicians, dietician, pharmacist and psychologist. Within this partnership model, the nurses themselves are the key facilitators and therein coordinating not only their care plans but also all individualized patient-centred care. However, due to their ability to empathize with a patient and their knowledge in clinical positions, they should remain invaluable hires for such a team.[29] And as patient advocates, nurses are in a position to start educating patient once they have been diagnosed and need to face the challenges of diabetes. They facilitate meaning making from text that can otherwise be complex and technical, a practice that empowers patients with understanding of their illness and management from the clinical team. Nurses also evaluate patient's willingness to adhere to care plans to understand things like cultural beliefs and practices financial, and literacy levels. In sharing this information with the team, the nurses make it possible for care to be taken in regard to patient circumstances and hence improved compliance and outcomes. To that, nurses are not only involved as representatives for the patient, but also as analysts of the patient's condition. The patients receive continual monitoring and carry out self-monitoring, which consists in blood glucose monitoring, foot examinations, and signs of complications such as neuropathy or cardiovascular diseases. These assessments give information that can help the team during decision making. For example, if a nurse sees for some time that a patient's blood sugar level is too high, they might suggest changes to the patient's medication dosage or type of diet. This is a good measure which acts proactively to avoid such effects and keep the situation of the patient under check.[30,31]

They also act as the primary educators of patients as members of the delivery of the healthcare systems' care teams. Although dietitians work on nutritional consultation, and physicians perform medical solutions, nurses incorporate this data into a coordinated and workable strategy for the patient. They inform people how to control their blood sugar, when and how to take insulin, or the right diet to adopt. When answering questions or when offering emotional support, therefore, nurses can fill the gap between the patient and the rest of the entire health care team. Also, they perform the role of mediators between the patient and the other members of the health team. For instance, if a patient complains of hardship in implementing a certain diet because of cultural or family practice, the nurse will pass this information to the dietitian who will change his/her recommendations. In the same way the nurses also work with other health practitioners in handling the psychological issues of diabetes like anxiety, depression and or Burnout. This is perhaps one of the most suitable approaches to deal with the challenges which are likely to affect the health status of patients by covering almost all the components likely to be affected all at once. [32,33]

The work of the nurse In the context of an MDT; expands beyond the task of direct patient care and management to a more advocacy component and broader system efforts. They can attend case conferences, help to formulate care plans, and lobby political changes that improve diabetes treatment. Working in patient care setting, nurses bring their practical experience and observations of patients in contributing to the goals and strategies the team is implementing. Therefore, the nurse is a crucial member of the disease interdisciplinary management team for patients with diabetes through clinical experience, focused on the patient and organizational abilities to bring together all the necessary disciplines. They can fill the gaps diagnosed between patients and other healthcare professionals to deliver integrated, individualized care that is productive. By doing so the nurses not only advance quality and advocacy for those with diabetes but also contribute to the quality and functioning of those healthcare systems required to manage such a demanding disease.[34,35]

Self-management strategies to enable patients with diabetes to cope with their complications

Nursing care interventions as regards the complications of diabetes are essential given the fact that these complications influence the quality of life, and the prognosis of patients with diabetes. Diabetes related complications include both short term ones like hypoglycemia and Ketoacidosis and the long term ones like peripheral neuropathy, retinopathy, nephropathy, cardiovascular diseases among others. It's

therefore the responsibility of nurses to diagnose, treat and educate patients on the same so as to prevent them from worsening or reducing the overall wellbeing of the patient. An Important part of the nurses' daily work is to explain the patients how they can prevent experiencing any of the complicating factors associated with diabetes. For example, they instruct patients to check for signs that may indicate peripheral neuropathy, which is nerve damage that might present as tingling or numbness towards the tips of the hands and feet among others, and conduct regular foot examinations to avoid development of ulcers, or other infections. They too stress the need for routine eye check-ups to diagnosing diabetes related eye complications without the development of vision loss. Awareness enables the patients to attend to their health complications early enough, before they become complications that cannot be reversed. Besides early diagnosis, they help patients live better with these complications. Patients who have cardiovascular issues, nurses offer advice about particular dietary changes, the plan of physical activity, and the use of cholesterol or anti-hypertensive drugs. They also give patients information on how to maintaining blood pressure and cholesterol, both of which are vital in preventing heart attacks or any form of stroke. In the same respect, the nurses advice the patients especially those with diabetic nephropathy on dietary prescription on restrictions such as in sodium and protein intake to reduce pressure on the kidneys. They also have an important responsibility in managing acute complications, for example hypoglycemia, DKA. They also teach patients how to react to hypoglycemia including signs like trembling, dizziness, and sweating. Because patients need to learn how to use other types of related medical equipment and supplies – for example, glucagon, Glucotrol and even glucose tablets. Concerning DKA, patients are educated on the use of ketone monitoring during an illness and strict adherence to oral fluids intake in order to avoid extreme levels of dehydration. In both arrangements, patient knowledge concerning the circumstances under which they ought to seek for health assistance from health professionals is improved since nurses educate them on the possibilities of managing such severe conditions by themselves.[36,37]

Another important element for patient care is the provision of intercessional psychological support in order to cope with diabetic medical outcomes. A lot of patients undergoing management of diabetes complications complain of frustration, fear or depression from time to time. A nurse then listens and narrows down the patient's concerns and his or her fears, and if needed, help the patient get an appointment with a mental health provider or get him or her join support groups. But, through this single-result strategy, the patients are encouraged to be strong thus promoting good self-management by improving on their psychological well-being. They also help patients get equipment and other tools within this context as far as complication management is concerned. For instance, they familiarize patients with better technologies such as CGMs, Insulin pumps and smart mobile applications that monitor and instantly provide feedback in regards to health indicators. They can help to make type 2 diabetes easier to manage or help patients achieve better glycemic control to avoid deterioration. They also protect patient care by checking on costs that may hinder the use of appropriate medication and other key products by championing for affordable costs .Therefore, nurses remain indispensable in helping the patients to cope with diabetes complication. They include patient teaching, identification of acute and chronic problems, psychosocial support, and speaking for the patient to increase patient's health and well-being. Supporting people with diabetes and other comorbidities, nurses advocate for effective self-management thus improving patient's quality of life regarding their disease.[38,39]

Nurses' Contribution to Expediting Compliant Patients

An important aspect about the treatment of diabetes that ratified by the nurses is the prescription compliance because it is the main determinant of blood sugar levels and the possible complications. Patient self compliance is normally difficult in many diabetic patients depending on the type of medication, dosage, side effects, prices and forgetting. Because of their role, nurses are well placed to help patients to deal with such challenges and adhere to medication regimens as planned. In other words, if nurses guide and encourage patients with diabetes intake of proper medication, they can be sure of improved patient's health status. First of all, nurses play the role of explaining the necessity of taking tablets or other medications according to prescribed prescriptions. They talk about the mechanism of action of every medication; why it is required; what may happen if one misses the dosage. For instance in teaching about insulin, the nurses

explain how insulin works in managing BGLs and warn about implications of missing doses, which include hyperglycemia or diabetic ketoacidosis. [40] to be specific, the social and spiritual aspect of diabetic clients forms a core aspect of diabetes management, and the nurses remain the main caregiver in this respect. By using compassion, promptly identifying any mental issues that may be present and promoting self and other related healthy coping strategies, nurses assist patients who develop the emotional side of diabetes. In serving the psychological needs of the patients, the nurses help them to become better persons as they get a chance to control their illness and lead better healthier lives. Closeness in the form of support also found to be helpful in patients' mental wellbeing as well as their future adjustment to type II diabetes.[41]

Conclusion

quality emotional and psychological support are critical aspects of care for diabetes and nurses are key to this aspect of care. Interventions for the perceived emotional and psychological burdens presented by diabetic patients lessen stress, anxiety, and loneliness as factors detrimental to disease management by the nurses. How, for example, by expressing understanding and concern, recognizing early signs of such emotions, and promoting responsibility for developing and maintaining positive well-being and coping skills the patient is supported by the nurse to take personal responsibility for managing diabetes. In addition, they help to introduce the patients to the support groups as well as work hand in hand with other health practitioners to meet the emotional needs of patients. Finally, closure, affiliation, and role performance necessities that are provided by nurses are essential in helping diabetic patients achieve better health because they optimize compliance with disease states and increase their quality of life.

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الدعم العاطفي والنفسي في رعاية مرضى السكري: الدور الحيوي للممرضات في تعزيز رفاهية المرضى

الملخص

الخلفية: مرض السكري هو مرض معقد يتطلب من الفرد أن يديره في حياته اليومية حتى بعد العلاج. ولذلك، يتم في الغالب إيلاء اهتمام أكبر لجوانب الصحة البدنية للمرضى مقارنة بحالتهم النفسية والعاطفية.

الهدف: تهدف هذه الدراسة إلى التعرف على كيفية مساعدة الممرضات لمرضى السكري فيما يتعلق بالدعم النفسي والاجتماعي اللازم للمرضى وما هي الإجراءات المتخذة لتعزيز المواقف النفسية للمرضى وقدرتهم على التحكم في المرض.

الطرق: تم مراجعة الدراسات التالية في سياق الأدبيات: تم استعراض التدخلات التمريضية التالية، وطرق التواصل، وأنظمة الدعم التي تشارك في التعامل مع القضايا العاطفية لمرضى السكري من الأدبيات. كما تم استعراض الأوراق التي تقارن نتائج المرضى الذين قدمت لهم الممرضات الدعم النفسي/العاطفي بهدف تحديد تأثير هذه التدخلات.

النتائج: تم الإشارة إلى العديد من الإجراءات التمريضية الداعمة التي تعزز الصحة النفسية بشكل كبير على مستوى المراجعة، بما في ذلك مهارات الاستماع الفعال، والكشف المبكر عن الأمراض النفسية، والرؤية العميقة، وطرق تقليل التوتر، وملف إيجابي، والدعم من الأقران على التوالي.

الاستنتاج: تقدم الممرضات اللواتي يعتنين بمرضى السكري مساهمة هامة في التحقيق في الجانب العاطفي والنفسي للعلاج. عادةً ما تساعد الممرضات في تسهيل إدارة أفضل للحالة، من خلال الدعم وتوفير الاستراتيجيات، مما يحسن جودة حياة المرضى.

الكلمات المفتاحية: السكري، الاكتئاب، التدخل النفسي، التمريض، مرضى السكري، التوتر.