



P-043 - DIABETES SELF-CARE DID NOT HAVE AN EFFECT ON QUALITY OF LIFE IN PEOPLE WITH TYPE 2 DIABETES FOLLOWED IN PRIMARY HEALTH CARE

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Resumen

Introduction and objectives: Studies have associated diabetes with negative impacts on health-related quality of life (HRQoL). Several validated instruments are available to measure HRQoL in people with type 2 diabetes (PwT2D). The objectives of this study were to assess the knowledge of PwT2D followed in primary health care (PHC) about self-care in diabetes and its relationship with quality of life (QoL), and to compare clinical and laboratory parameters with the scores in different domains of the self-care and QoL questionnaires.

Methods: This descriptive-exploratory study was conducted in PHC in the city of Ferraz de Vasconcelos, São Paulo. The study included 199 PwT2D who met the following inclusion criteria: aged over 40 years, with a diabetes diagnosis (least two years), and currently using oral antidiabetic agents and/or insulin. Participants were required to complete two questionnaires: Summary of Diabetes Self-Care Activities Questionnaire (SDSCA) and Diabetes Quality of Life Measure (DQOL-Brazil). Laboratory test results were recovered from participants' medical records.

Results: Clinical and laboratory data of participants, presented as mean and standard deviation, were age 63.1 ± 10.4 years, T2DM duration 10.2 ± 8.8 years, glycated hemoglobin (A_{1c}) $8.2 \pm 2.1\%$, LDL cholesterol 107.3 ± 36.6 mg/dL, HDL cholesterol 51.3 ± 17.2 mg/dL, triglycerides 175.6 ± 111.6 mg/dL, and estimated glomerular filtration rate 96.7 ± 8.7 mL/min/1.73 m². Total scores for the SDSCA and the DQOL-Brazil were 45.8 ± 16.5 and 93.6 ± 10.5 points, respectively. Cronbach's alpha coefficient, used to assess the internal consistency of the questionnaires, was 0.61 for SDSCA (moderate correlation) and 0.8 for DQOL-Brazil (strong correlation). The Pearson correlation coefficient revealed a weak correlation between the total SDSCA score and T2DM duration (0.172, $p = 0.019$), with no correlation observed with A_{1c} levels (-0.042 , $p = 0.548$). A similar pattern was observed for the total DQOL-Brazil score and T2DM duration (0.284, $p = 0.0001$), and A_{1c} levels (-0.088 , $p = 0.213$). Correlation analysis for each domain of SDSCA and DQOL-Brazil was also weak for both T2DM duration and A_{1c} levels. Moreover, correlation analysis between each domain of SDSCA and DQOL-Brazil showed no correlation, even when participants were divided into groups with $A_{1c} \leq 7.5\%$ and $A_{1c} > 7.5\%$.

Conclusions: Questionnaires used in this study did not identify a significant impact of self-care diabetes on QoL in PwT2D followed in PHC.