

# CONSEQUENCES OF PSYCHOSOCIAL FACTORS ON THE TREATMENT EFFICIENCY OF DIABETES MELLITUS TYPE 1 AND TYPE 2

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## Background and Aims:

The most common problem in patients with diabetes mellitus (DM) type 1 (DM1) and type 2 (DM2) is lack of compliance. Therefore, glycemic control largely depends on treatment adherence. The factors of improvement of DM patients' treatment efficiency was studied.

## Methods:

Study population (n=60) consists of: comparable groups (CG) with DM1 (n=16), DM2 (n=33) and newly diagnosed DM. Study data consists of demographic data, including: Medication Compliance Scale (MCS), Holmes and Rahe Stress Scale (HRSS), Dysfunctional attitudes Scale (DAS), Toronto Alexithymia Scale (TAS-20), The Depression, Anxiety and Stress Scale (DASS-21) and Chaban Quality of Life Scale (CQLS). Glycemic control was assessed by glycosylated hemoglobin (HbA1c) results. The statistics analysis has been performed using descriptive statistics and Pearson's correlation with SPSS Statistics 22.0.

## Results:

Statistically significant difference was found, according to MCS: in patients with high (HC), middle (MC) and low level of compliance (LC). HC had higher rates according to CQLS on the level (p=0,004) and low rates of the DAS, TAS-20, DASS-21 and HRSS results (p=0,0001). LC had a higher level of HbA1c (M=13 SD:1 vs. MC M=9.83, SD:1.4 vs. HC M=9, SD:1.4). The average values according to MCS: DM1 (M=19), DM2 (M=18) present MC; by HbA1c: DM1 (M=10), DM2 (M=10) have identical indicators. Therefore, no statistically significant difference was found between CG.

## Conclusions:

The level of glycosylated hemoglobin is a sensitive marker of adherence to the treatment of patients with diabetes, regardless of its type.

**Keywords:** treatment adherence, diabetes mellitus, sensitive marker, glycosylated hemoglobin

\* Esmaeilinasab et al., 2016

\*\* Shamsi, Khodaifar, Arzaghi, Sarvghadi, Ghazi, 2014

