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Abstract:-

Diabetes mellitus and its complications have proven to be parts of the major public health problems in India and it has called for the need to carry out research works on how to minimize these problems. The main purpose of this statistical reports to support to produce information about prevention of diabetes mellitus complications among adults and the aim is to produce a guide for the public use. Systematic literature review was used to analyse the data.

A STATISTICALLY REPORTS OF DIABETES AFFECTED PEOPLE IN VILLUPURAM DISTRICT THROUGH AGE WISE



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Keywords:

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INTRODUCTION:

Diabetes is a metabolic disease that is diagnosed on the basis of sustained high concentration of glucose in the blood, According to the World Health Organization (WHO). Diabetes occurs when the pancreas does not produce enough insulin, or when the body cannot effectively use the insulin it produces. Type 1 diabetes results from autoimmune mediated destruction of the beta cells of the pancreas (Alberti and Zimmet, 1998). Insulin is vital for individuals with type 1 diabetes to avoid ketoacidosis, coma, and death. Type 2 diabetes is characterized by resistance to the action of insulin and disorder of insulin secretion, either of which may be the predominated feature (Alberti and Zimmet, 1998). Individual with this type of diabetes do not need insulin to survive. Type 2 diabetes, which is the most common type, is often a result of excess body weight and physical inactivity in genetically predisposed individuals (Poulsen et. al., 1999). Diabetes can increase the risk of health-related problems including blindness, kidney damage, nerve damage, amputation of lower limbs and cardio vascular disease (DeCoster, 2001). The rate of diabetes patients with complication is increasing on a daily basis admission is made either due to diabetes or diabetes complications such as stroke, hypertension, amputation, nephropathy, retinopathy, cardiovascular, importance, skin lesions. (Chaturvedi, 2007).

The current studies shows male patients are affected highly when compared to female patients.

AIM

To study of one year intervention program based on motivational interviewing on glycaemic control and competence of management in patients diagnosed with type 1 or type 2 diabetes after attending a group education program.

METHODS

This method describes how and under what conditions the empirical data underlying this publication have been produced. Empirical data were gathered procedurally over a period of one year.

DATA SOURCES AND SEARCHES

We searched in the following electronic databases: MEDLINE (1952 to 2007), EMBASE (1980 to 2007), (1982 to 2007), and Web of sciences (-2007).

STUDY SELECTION

Our protocol was implemented with reference to the QUOROM guidelines (Moher et. al., 1999). Studies qualified for inclusion were randomized trials because this study design generally supports high validity in testing the effectiveness of health technologies (Richter and Berger, 2000). All studies included tested the effect of self-care behavior interventions and involved adult patients (over 18 years of age) diagnosed with type 2 diabetes/non-insulin-dependent diabetes.

DATA COLLECTION

Data were collected during focus group interviews between August 2012 and April 2013. The interactive and synergistic nature of focus group interviews allowed us to explore patient's experiences with diabetes in a spontaneous and emotional way. Focus group interviews allowed access to a wide variety of ideas, views and experiences on self-management among patients with diabetes and insight into how a consensus was reached (or not) on issues relating to everyday life with diabetes (Lisbeth Kirstine Rosenbek Minet, 2010).

RESULTS

The statically reports shows that male patient have high risk factors when compared to females, here we collected data more than 650 people in government and private hospital in and around villupuram district and compare to this two data there are more number of male patients affects by diabetes these is the preliminary work, further studies have been carried out to risk complications and prevent of diabetes.

Villupuram District Diabetes Affected Patient Data 01-11-2013/31-11-2013 To 01-01-2014/11-02-2014

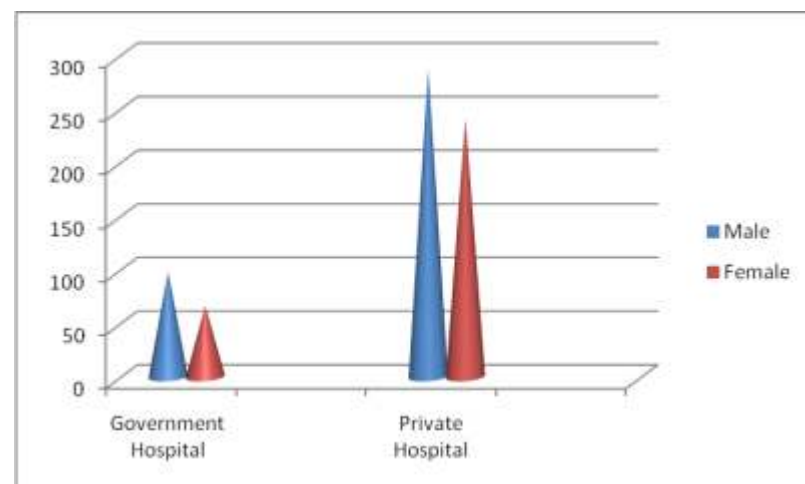
Table. 1. Government Hospital Data on (01-11-2013/31-11-2013)

Age	Sex	Total No Of Patient	Age	Sex	Total No Of Patient
01-25	Male	0	01-25	Female	01
25-50	Male	31	25-50	Female	23
50-75	Male	54	50-75	Female	37
75-100	Male	13	75-100	Female	05
		98			66

Table. 2. Private Hospital Data on (01-01-2014/11-02-2014)

Age	Sex	Total No Of Patient	Age	Sex	Total No Of Patient
01-025	Male	008	01-025	Female	008
25-050	Male	116	25-050	Female	085
50-075	Male	150	50-075	Female	142
75-100	Male	014	75-100	Female	006
		288			241

Fig. 1. The cone picture it shows the high percentage of Male and Female



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