Dear Sir

Radio news commentary on the burden of diabetes

I have been involved in diabetes awareness through publication of news commentaries in various radio houses and print media in Nigeria. This is in furtherance of achieving the goal of the World Diabetes Day celebration, which is ‘Diabetes Prevention and Education.’

The following commentary has been aired on local radio stations in Nigeria periodically, and especially on World Diabetes Day. I hope it is of interest to readers, and might stimulate similar positive diabetes publicity elsewhere in Africa.

‘The incidence and prevalence of diabetes mellitus is increasing at an alarming proportion, especially in developing countries. In today’s commentary, Dr Bernard Unadike, Consultant Endocrinologist at the University of Uyo Teaching Hospital, Uyo, takes a look at the disease and ways to reduce the burden associated with it:’

Diabetes mellitus is a disorder that results from the deficiency of a hormone called insulin, which is produced by the human pancreas. It is a disease that is assuming epidemic proportions worldwide. Presently, about 240 million people worldwide are said to be suffering from the disease and this figure is projected to reach about 340 million by the year 2030. Overall, it is estimated that 8–10% of people over 50 years of age worldwide have diabetes, and 40% will die from kidney disease and 60% from cardiovascular causes. In Nigeria, the national prevalence of diabetes is put at about 2.2% and this continues to be on the increase.

Many factors are responsible for this increase. With increasing urbanisation, many people are adopting unhealthy Western lifestyles with reduced physical activity, sedentary lifestyles, and excessive intake of calories. This contributes to obesity which is a risk factor for the development of diabetes.

Diabetes can be classified into four types. In type 1 diabetes, there is an absolute deficiency of insulin. It is common in young individuals, patients require insulin – type 1 diabetes is responsible for 5–10% of cases of diabetes.

Type 2 diabetes is the most common form and accounts for 80–90% of cases. It is associated with obesity, occurs in middle-aged individuals, and patients can usually be managed with oral medications. In other specific types of diabetes, endocrine diseases, drugs and genetic syndromes are responsible for diabetes; while gestational diabetes is diabetes that occurs for the first time in pregnancy.

The symptoms of diabetes include polyuria or passage of excessive urine, polydipsia or exercise thirst, polyphagia or excessive eating and sometimes weight loss. It is a chronic illness and can lead to serious complications if not well managed. This includes kidney failure (for which it is the leading cause), blindness, amputation of limbs, stroke, cardiac disease, and erectile dysfunction. Indeed diabetes has the highest non-communicable disease cause of morbidity and mortality in Africa. Other conditions that can result in death in diabetes include hyperglycaemic and hypoglycaemic emergencies.

Most worrisome is the fact that many people with diabetes do not know that they have the disease. Those that know may not take their medications, and those who take their medications do not control their disease adequately, thereby putting themselves at risk of developing the complications of diabetes.

With the increasing incidence and prevalence of diabetes, efforts must be put in place to address the situation. Adequate public enlightenment campaigns must be mounted in the mass media, to educate people to adopt healthy lifestyles so as to reduce the risk of developing obesity and subsequently diabetes. People should exercise regularly and cut down on intakes of excess calories and fatty foods. An adequate intake of vegetables and fresh fruits should also be encouraged.

Adequate screening facilities and centres must be put in place for the early detection of diabetes, and patients with symptoms should see a doctor for a blood sugar test, and have adequate management if necessary.

Medications for the treatment of diabetes should be made more affordable and easily accessible and patients advised to take their medications and see a doctor regularly for periodic check-ups. All adults above 45 years old should have a blood sugar test with a repeat every 3 years, and more frequently if they have other risk factors like hypertension, obesity, family history of diabetes, or a previous history of big babies in women.

The Government should also address the situation urgently. Adequate budgetary resources should be allocated to the health sector and medications such as insulin and oral hypoglycaemic drugs should be subsidised and included in the National Health Insurance Scheme.

Diagnostics centres should be established for the laboratory management of diabetes, training and retraining organised for health personnel involved in diabetes care, and all emergency centres provided with a glucose testing machine or meter to adequately cater for patients with diabetic emergencies.

With these measures in place, the excessive morbidity and mortality from diabetes may be reduced, and the burden imposed by the disease ameliorated.

The message is rather clear – the incidence and prevalence of diabetes is assuming epidemic proportions, and non-communicable diseases (of which diabetes is one) are with us, and the time to act is now.’

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