Type II Diabetes

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"Around 38 million people are diagnosed with diabetes every day, and 90-95% out of the 38 million have type II diabetes" (Centers for Disease Control and Prevention, 2023). Diabetes is when the body breaks down food in the body for energy. The body then starts to break down for fuel. During this disease, the body is not producing insulin, or the body is not using insulin correctly. There are many types of diabetes, but type 1 and type 2 are the most widely known of them all. In this paper, I will be mainly focusing on type II diabetes.

Statement of the Problem

"Type II diabetes is a combination of inadequate insulin production and insulin resistance. With type II the body still has the presence of insulin which is the main difference between type I" (Dickinson 2023, pg. 1288). This disease can occur at any age but is mainly diagnosed in adults. This disease can not only go undiagnosed for years at a time, but the onset of this disease is also more gradual rather than immediate. This disease is characterized by an inactive or sedentary lifestyle, poor diet/ obesity, infections that reoccur, and a history of high blood pressure. If type II diabetes were to go untreated it could have major damage to the cardiovascular system, urinary system, nervous system, integumentary system, and more. Some of those complications could be neuropathy, strokes, cardiovascular disease chronic kidney disease, and others (American Diabetes Association, 2023). If left untreated the body can also go into DKA which is Diabetic ketoacidosis.

Risk Reductions/ Treatment of the Problem

Type II is highly prevalent in Native American, African American, Hispanic, and Asian heritage. Those with these racial backgrounds and a family history of type II are more predisposed than others especially if it was a first-degree relative (Dickerson, 2023 pg. 1288). This is one of the main risk factors that is unmodifiable. Another unmodifiable risk factor would

be a family history of type II diabetes or insulin resistance Modifiable risk factors would be a sedentary lifestyle, obesity, and prediabetes. Obesity is a predisposing factor for diabetes especially and it was found that BMI correlates with the prevalence of minorities having type II diabetes (Strings et al., 2023).

Risk reductions for type II diabetes would be to control weight to a healthy range for age, quit smoking, eat healthily, live an active lifestyle, and have regular checkups, especially for those with prediabetes who need to be checked more often than others. Current evidence-based practice for the prevention of type II diabetes is lifestyle changes and modifications. (Lambrinou et al., 2019.) have found that physical activity plays a key role in helping to prevent type II diabetes. The recommended treatment of type II diabetes includes oral antidiabetics and lifestyle changes (CDC 2023). Knowing how to treat and prevent type II diabetes allows for the patient's education to specifically focus on what they need to treat it and what they need to know to prevent it.

A way to also help with risk reduction would be health screenings. Specifically for type II diabetes, I would want to focus on A1C which is the average blood sugar for a period (CDC, 2023). Blood tests are another way to screen for diabetes certain blood tests that can be done would be random blood glucose or fasting blood glucose. A random blood glucose is taken at any time during the day. A fasting blood glucose is when you do not have anything to eat, and the blood sugar is taken (CDC, 2023). Getting a hemoglobin A1C is very important, especially for those predisposed to diabetes. this not only determines if you have it, but it can also tell you what level you like normal, prediabetic, or diabetic (Lippincott, n.d.).

Planning of Teaching Content

Something I would like a patient to teach back modifiable risk factors of type II diabetes by the end of the presentation. I picked this topic specifically because modifying the risk factors such as smoking cessation, healthy diet, and active lifestyle, and having frequent check-ups with the healthcare provider especially those who are prediabetic could prevent type II diabetes. I would like the guests to also take away from this information on how type II can be treated. I would like the guests of the health fair to know what the treatment is and how it works during the presentation. Knowing how to treat this is very important, especially for those who already have it. I would want them to know why it needs to be treated and what the risks are if this is left untreated. Although type II is a lifelong disease, there are ways to keep it under control, such as lifestyle changes and oral antidiabetics.

The teaching methods I would use to get this information across to my target audience would be mostly visual. I would show how diabetes affects the body through pictures, and I would use graphs with statistics that show what race has a higher incidence of getting type II diabetes. I would include treatment options such as different types of oral antidiabetics, and different exercises. Some tools that I may use to aid in my teaching that may benefit the learner would be pamphlets and a trifold.

For my main teaching tools, I would use these two because not only is it something that a person could take home with them, but it is also something that will be useful and help them to understand and further explain the teaching that I provided. I would use a trifold to put extra information that may not be on the pamphlet. Using pamphlets and trifolds opens the opportunity for those who are learning to browse. I would also provide games because I think information sticks when a person is having fun learning it. I would also provide games that allow them to learn at the same time, such as one where they must control someone's sugar by feeding them the

right things or guessing how much sugar is in certain foods or drinks. Another game would include where guests would have to guess what a type II diabetic can or cannot eat. These games are to increase community awareness of what to look for when self-examining. This is also to show why education is important since those who are predisposed don't know why they should watch the things they eat and those who have it or are newly diagnosed sometimes don't know where to start to help control and manage their disease.

Conclusion

Ultimately type II diabetes is a disease that affects the whole body and each body system differently. Knowing this information, it is important for people of certain predispositions that were mentioned above to have regular screening and check-ups with their provider. Having regular checkups allows the healthcare provider to not only see how well you are managing the diabetes but also if they may need to recommend other forms of control or management. I would also teach that not only is it important to reduce and modify the factors that may expose someone who is a high risk for type II, but it is also important to treat it in those who already have it. I think that with plenty of teaching, it will be easy to engage the community to learn about this disease and help prevent it. Helping the community to understand this disease would hopefully increase awareness and encourage those who have predisposing factors to get regular check-ups by a healthcare provider to prevent this disease from going undiagnosed or worsening in those who already have it.

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