



*Ministry of higher education and
scientific research*



Diabetic Adult Patients Nutritional Knowledge at Al- Hila Teaching Hospitals

A graduation project submitted to the Faculty of Nursing
University of Babylon as part of the requirements for obtaining
a Bachelor's degree in Nursing

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April 2023

Shawwal 1444

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

(أَمَّنْ هُوَ قَانِثٌ آتَاءَ اللَّيْلِ سَاجِدًا وَقَائِمًا يَحْذَرُ الْآخِرَةَ وَيَرْجُو رَحْمَةَ رَبِّهِ ۗ
قُلْ هَلْ يَسْتَوِي الَّذِينَ يَعْلَمُونَ وَالَّذِينَ لَا يَعْلَمُونَ ۗ إِنَّمَا يَتَذَكَّرُ أُولُو
الْأَلْبَابِ ﴿٩﴾

صدق الله العلي العظيم

سورة الزمر الآية (٩)

Dedication

To Allah Almighty our creator, our strong pillar, our source of inspiration, wisdom, knowledge and understanding. He has been the source of our strength throughout this program and on His wings only have we soared.

To our supportive parents who encouraged and inspired us in conducting this study. They have never left our side throughout the process and gave us strength and hope when we thought of giving this up. They provided us a great sense of enthusiasm and perseverance in continuing this. Without their love and assistance, this research would not have been made possible

Acknowledgements

Our thanks extended to the Dean prof. Dr.Ameen A.yassir of his support.

We would like to express our deep gratitude to Dr. Amenah Abd-AL-Hassan, my research supervisor, for her patient guidance, enthusiastic encouragement and useful critiques of this research work and for her advice and assistance in keeping our progress on schedule, her willingness to give his time so generously has been very much appreciated.

Finally, we wish to thank our families for their support and encouragement throughout our study.

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Abstract

Background: Patients with diabetes are at higher risk of morbidity, mortality, and other chronic non-communicable or infectious diseases. Diabetes can lead to life-threatening complications, The diabetes self-care behaviors include adherence to a dietary regime, medication adherence, regular physical activity, proper medication follow-up, blood glucose self-monitoring, monitoring disease progression, and foot care practices.

Objectives: To assess patients' knowledge regarding nutritional status.

Methodology: A quantitative study descriptive cross sectional design selected to carry out the study directed to assess of Diabetic Adult patients Nutritional Knowledge (T2DM) .

Results: A total of 100 participant, 47 Female, and 53male. And the overall assessment recorded faire level With regard to the knowledge of diabetics about healthy nutrition and its impact on physical health and what foods should be eaten

Conclusions: The result of demographical date regarding age most of the samples were belonging to the middle adulthood, males education level had more change of gaining knowledge that less educated respondents.

Recommendations:

- 1- Secondary school curriculum should include all topics related to health nutrition for diabetics
- 2- Advertisements and some health Educational programs regarding diabetes should be encouraged through the media to eat healthy foods and exercise.

Chapter One

Introduction

Chapter One Introduction

1.1. Introduction:

Patients with diabetes are at higher risk of morbidity, mortality, and other chronic non-communicable or infectious diseases. Diabetes can lead to life-threatening complications, including cardiovascular disease, retinopathy, nephropathy, neuropathy, and diabetic foot ulcer (Balaji R, et al: 2019).

The diabetes self-care behaviors include adherence to a dietary regime, medication adherence, regular physical activity, proper medication follow-up, blood glucose self-monitoring, monitoring disease progression, and foot care practices. Commitment to these behaviors can reduce the risk of complications and improve quality of life (Lael-Monfared E, et al :2020).

Dietary Knowledge (DK) is the knowledge that deals with the process and concepts related to health and diet, disease and diet, the nutritional value of the foods, the foods that explain the nutrients within them and the recommendations that should be followed. The Centers for Disease Control and Prevention have identified self-dietary management as a major step in assessing a patient's knowledge related to the nutritional aspects, treatment, and complications of diabetes, (Sami, W., et al : 2020).

Diabetes patients frequently face difficulty in identifying the recommended diet, including its quality and quantity. Food selection and dietary pattern are influenced by a patient's knowledge related to a recommended diet, the role standing of diet in controlling of diabetes is

considered imperative; still, diabetes patients are unaware of how they should approach this issue to ensure good glycemic control (Shikur, A., et al :2016).

1.2. Important of study:

In 2021, 537 million adults (20–79 years) were living with diabetes. This number is projected to rise to 643 million by 2030 and 783 million by 2045. Over 3 in 4 adults with diabetes live in low- and middle-income countries. According to World Health Organization (WHO), 1.5 million deaths are directly attributed to diabetes yearly. According to the latest figures from the International Diabetes Federation (IDF) in 2022, the prevalence of diabetes and total cases of diabetes in adults in Iran is estimated to be 9.5% and 5,450,300, respectively. It is projected that in Iran, 9.2 million will have diabetes by 2030 (Organization WH. Diabetes. 2022)

Dietary management is considered as a major step in assessing a patient's knowledge related to nutritional aspects, treatment, and complications of diabetes. Diabetes patients frequently face difficulty in identifying the recommended diet, including its quality and quantity, in the Kingdom of Saudi Arabia (KSA), sedentary lifestyle, along with food choices and portion sizes, have increased considerably and this has resulted in the soaring risk of diabetes. In addition, there is paucity of literature focusing on the Dietary Knowledge (DK) of type 2 diabetics in KSA (Sami, W., et al : 2020).

1.3. Statement of the study:

- Diabetic Adult Patients Nutritional Knowledge at Al-Hila Teaching Hospitals

1.4. Objective of the study:

1. To findout demographical characteristics of patients with type 2 diabetes mellitus.
2. To assess patients' knowledge regarding nutritional status.

1.5. Theoretical definition:

- **Diabetes mellitus** is a heterogeneous group of disorders characterized by hyperglycemia due to an absolute or relative deficit in insulin production or action (Alam, U., et al : 2014).

1.6. Operational definition:

- **Diabetes:** is a chronic (long-lasting) health condition that affects how the body turns food into energy.

Chapter Two

Methodology

Chapter Two Methodology

Methodology

This chapter includes, design of the study, administrative and ethical arrangement, Sample & setting of the study, study instrument and statistical analysis.

2.1. Study design: quantitative study descriptive cross sectional design selected to carry out the study directed to dietary knowledge of diabetic adult patients which conducted from (16th October to 30th April)

2.2 Administrative permission: for starting the study project formal from declared from community health nursing department assigned the group of research and the supervisor. The second step meeting assigned by the supervisor to crystalized the title and the objective of the study. (Appendix (A))

2.3 Setting: Al-Hila Teaching Hospitals selected as a+ rich field to collect the data to obtain the objectives of the study.

2.4 Sample of the study: Adult diabetic patients were selected as specific sample to find out how much they know about healthy nutrition The knowledge of diabetics about healthy nutrition for diabetics is a priority that a diabetic patient must take into account to maintain blood sugar levels and avoid complications. For this purpose (100) patient .

2.5 The questionnaire: In order to reach the objective of his study special questionnaire prepared after reviewing related literature, divided to two parts as the:
Part 1: this part content the demographical characteristics of the study sample.
Part 2: this part include Knowledge of diabetic patients about healthy nutrition

2.6 Validity: The content validity obtained by presenting the prepared questionnaire among faculty by (5) band of expert who specialized in the nursing Field. (Appendix (B)).

2.7 Data Collection: The questionnaire was used to gather data through (interview and self-report). Researchers were collected data individually from each participant. Each interview lasts 15-20 minutes maximum, with agreement to participate in the study

2.8 Statistical analysis

- **Descriptive statistical method:** were used to analyze the result of the study as frequency and percentage. Data were analyzed using the Statistical Package for Social Sciences (SPSS) version

Chapter Three

Results

Chapter Three Results

Results

Table 3: 1: Distribution of study sample related to demographical characteristics

Variables		Frequency	Percent
<i>Age</i>	18-39 years	40	40.0
	40-65 years	51	51.0
	>65 years	9	9.0
	Total	100	100.0
<i>Gender</i>	Female	47	47.0
	Male	51	53.0
	Total	100	100.0
<i>Marital status</i>	Single	23	23.0
	Married	50	50.0
	Divorced	12	12.0
	Widower	15	15.0
	Total	100	100.0
<i>living arrangements</i>	living alone	18	18.0
	living with someone	82	82.0
	Total	100	100.0
<i>Education level</i>	Illiterate	14	14.0
	Primary	28	28.0
	Secondary	29	29.0
	Tertiary	29	29.0

	Total	100	100.0
<i>Occupation status</i>	Formal employment	24	24.0
	Casual laborer	33	33.0
	Unemployment	43	43.0
	Total	100	100.0
<i>Is there any other family member with diabetes?</i>	No	64	64.0
	Yes	36	36.0
	Total	100	100.0

This table demonstrated the demographical characteristics of the study sample, the results recorded that the most of sample (53%) were males ,also recorded (51%) were between age group (40-65)years old, related to Marital status most of study sample (50%) were Married, considering living arrangements (82%) were living with someone, related to educational level Secondary and primary levels have the same percentage both have (29%) of study sample, also this table show the high percentage (43%) were unoccupied , also show the percentage (64%) with no other family member with diabetes.

Table 3:2 :: Nutritional Knowledge of patient with diabetes mellitus

Items		Frequency	Percentage	Level
<i>1-what does effect unsweetened fruit juice have on your blood sugar?</i>	incorrect	68	68.0	Poor
	correct	32	32.0	

	Total	100	100.0	
2-Which of these should not be used if you sense that your blood sugar is low?	incorrect	73	73.0	Poor
	correct	27	27.0	
	Total	100	100.0	
3-Which of the following is free food?	incorrect	55	55.0	Poor
	correct	45	45.0	
	Total	100	100.0	
4-Which of the following is highest in fat?	incorrect	68	68.0	Poor
	correct	32	32.0	
	Total	100	100.0	
5- Which of the following is highest in carbohydrates?	incorrect	55	55.0	Poor
	correct	45	45.0	
	Total	100	100.0	
6- The diet followed for diabetics is:	incorrect	44	44.0	Good
	correct	56	56.0	
	Total	100	100.0	
7- Eating food low in fat reduces the diabetic Patients for	incorrect	40	40.0	Good
	correct	60	60.0	
	Total	100	100.0	

General mean	Good
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This table results Indicated that most of the Diabetic Adult patients recorded poor knowledge of nutritional status only items number (6,7) recorded good Knowledge .

Table 3:3: Distribution of study sample related to nutritional knowledge.

		Frequency	Percent	Level
<i>1-Eating too much sugar and other sweet foods is a cause of Diabetes mellitus</i>	I don't know	3	3.0	Good
	no	8	8.0	
	yes	89	89.0	
	Total	100	100.0	
<i>2-The way I prepare my food is as important as the foods I eat</i>	I don't know	8	8.0	Poor
	no	12	12.0	
	yes	80	80.0	
	Total	100	100.0	
<i>3-Maintaining a healthy weight isn't important in the management of diabetes</i>	I don't know	24	24.0	Poor
	no	31	31.0	
	yes	45	45.0	
	Total	100	100.0	
<i>4-Medication is more important than diet and exercise to control my</i>	I don't know	13	13.0	Poor

<i>diabetes</i>	no	34	34.0	
	yes	53	53.0	
	Total	100	100.0	
<i>5-Diabetic diet consists of mainly specially prepared foods</i>	I don't know	33	33.0	Poor
	no	9	9.0	
	yes	58	58.0	
	Total	100	100.0	
General mean				Poor

Poor knowledge =1-1.6, Fair knowledge =1.7-2.3, Good knowledge =2.4-3.

This table results of Indicated that most of the Diabetic Adult patients Nutritional Knowledge recorded poor level .

Chapter Four

Discussion

Part I:

Through the data analysis distribution of demographic variable Table (2:1) report that the most age group that appeared in this study are middle adulthood stage , ages range from (40-65) years old and this high percent of the study group .

This result was agreement with those of (Rajaa Ibrahim Abed , Dr.Haleema Y.kadhim,2012)(8)(9)(10)(12)(37)(38)(39). Diabetes occurs most often after the age of (40) (Although the American Diabetes Association says there is an alarming potentially lifestyle related increase in the number of people under age 40 now developing this kind of diabetes) .

Regarding to gender , result reported high rate of type II diabetes among males than among females, as the percentage in male . which agreed with a study conducted by (Ibrahim Suliman AL-boudi et al,2012) . while the marital status , percentage reached the majority of patients were married , as the fifty percent , and this corresponds to study conducted by (Younis Khider Baez and Yassen M.Mussa ,2013) .

As for living arrangements, the highest percentage of patients who live with their families appeared more percent ,as it corresponded to a study conducted by (wafaa Abdul Aziz Mustafa , Mohammed Yousif ,2012)(13)(15)(17). Where the study confirmed that family support has a major role in influencing the patient's psyche and his adaptation to the disease .

According to level of education of the sample were primary and secondary school graduate are more percent of . This finding is a similar

to the result obtained from study conducted by (Rajaa Ibrahim Abed and Haleema Y. Kadhim,2012) the finding indicates that the diabetes mellitus type II patients low level of education , needs lessons to increase their knowledge and manage the disease to avoid complications .

The results result related to the occupational status that the highest percentage of the studied sample is unoccupied , and the percentage reached (43%) this study is consistent with a study conducted by (Rajaa Ibrahim Abed and Haleema Y.Kadhim , 2012)(8)(15) .

Part II : Nutritional knowledge for patient with diabetes mellitus

Table 2:2: the study shows that the Nutritional knowledge (T2DM) record poor level with general mean (1.51) .

As well as table 2:3 the study shows that Distribution of study sample related to nutritional knowledge (T2DM) record poor level.

Chapter Five

Conclusions and Recommendations

Conclusions

1- The result of demographical data regarding age most of the samples were belonging to the middle adulthood, males education level had more change of gaining knowledge than less educated respondents.

2-Regarding patient knowledge result show is poor therefore Type 2 diabetics need guidance and health education to improve their nutritional knowledge to maintain their health and prevent complications due to unhealthy food.

Recommendations

Based on the conclusion of the present study, the researchers recommended the following:

- All diabetic centers in Iraq should include instructional about management of long-term complications for diabetes mellitus type II patients and instruction intervention program should be implemented in all diabetic centers in Iraq.
- An education program should be designed to increase people's education about self - care regimen.
- Secondary school curriculum should include all topics related to healthy nutrition for diabetics .

- Advertisements and some health Educational programs regarding diabetes should be encouraged through media to eat healthy foods and exercise.

References

References

- Alam, U., Asghar, O., Azmi, S., & Malik, R. A. (2014). General aspects of diabetes mellitus. *Handbook of clinical neurology*, 126, 211-222
- ALshehri A, Taha A, Abahnassy A, Salah M. Health related quality of life in type 2 diabetic patients, *Ann Saudi Med* 2008; 28(5):352-360
- Balaji R, Duraisamy R, Kumar M. (2019), Complications of diabetes mellitus:a review.*Drug Invent Today*;12(1):98-103
- Bosseri ,S. and Beshyah,S.; Characteristics of diabetic patients with end-stage renal failure on chronic haemodialysis in Tripoli, Libya; *International Diabetes Federation Journal* ,Vol.11, No .1,2001, p.20.
- Eljedi A, Mikolajczyk RT, Kraemer A, Laaser U. Health-related quality of life in diabetic patients and controls without diabetes in refugee camps in the Gaza strip: a cross-sectional study *BMC Public Health* 2006; 6:268.
- Issa BA, Baiyewu O. Quality of Life of Patients with Diabetes Mellitus in a Nigerian Teaching Hospital, *Hong Kong J Psychiatry* 2006;16:27-33.
- Javanbakht M, Abolhasani F, Mashayekhi A, Baradaran HR, Jahangiri Noudeh Y. Health related quality of life in patients with type 2 diabetes mellitus in Iran: A national survey. *PLoS One*. 2012;7:e44526.
- Koopmanschap M. CODE. Advisory Board. Coping with type II diabetes: The patient's perspective. *Diabetologia*. 2002;45:S18–22.
- Lael-Monfared E, Tehrani H, Teiho Z, Jafari A. (2020), The study of eye carebehaviors in patients with type 2 diabetes.*J Diabetes Metab Disord*;19(1):257-263

- Nicholos,G; et al.: Incremental costs of diabetes treatment; International Diabetes Monitor Journal ,Vol.12, No. 2,2000, p.9
- O'Reilly DJ, Xie F, Pullenayegum E, Gerstein HC, Greb J, Blackhouse GK, et al. Estimation of the impact of diabetes-related complications on health utilities for patients with type 2 diabetes in Ontario, Canada. Qual Life Res. 2011;20:939–43.
- Organization WH. Diabetes. 2022. Accessed November 1,2022.<https://www.who.int/health-topics/diabetes#tab=tab>.
- Redekop WK, Koopmanschap MA, Stolk RP, Rutten GE, Wolffenbuttel BH, Niessen LW. Health-related quality of life and treatment satisfaction in Dutch patients with type 2 diabetes. Diabetes Care. 2002;25:458–63.
- Sami, W., Alabdulwahhab, K. M., Ab Hamid, M. R., Alasbali, T. A., Alwadani, F. A., & Ahmad, M. S. (2020). Dietary knowledge among adults with type 2 diabetes—kingdom of Saudi Arabia. International journal of environmental research and public health, 17(3), 858
- Sasso, F.; et al.: Cochlear dysfunction in type II diabetes :a complication independent of neuropathy and acute hyperglycemia; International Diabetes Monitor Journal ,Vol.12, No. 2,2000, p.42.
- Sasso, F.; et al.: Cochlear dysfunction in type II diabetes :a complication independent of neuropathy and acute hyperglycemia; International Diabetes Monitor Journal ,Vol.12, No. 2,2000, p.42.
- Shikur, A. D. B., Hagos, M. S., & Yifter, D. H. (2016). Dietary Pattern Of Type 2 Diabetes Mellitus Patients On Follow Up In Public Hospitals Addis Ababa, Ethiopia
- WU,J, et al.: Orthostatic hypotension in patients with type II diabetes; International Diabetes Monitor Journal ,Vol.12, No. 2,2000, p.7.

Appendix: A

Permission

جمهورية العراق

Mistry Of Health Babylon Health Director Email : babylwaring@gmail.com تولّد جري ناصر صادق - سائل مع الترخيص من الطب الكورديا والمسألة على اليد من التوت		وزارة الصحة دائرة صحة محافظة بابل المركز العام مركز التدريب والتنمية البشرية وحدة إدارة البحوث الهدف : التاريخ : ١٩ / ١٢ / ٢٠٢٣
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الس / مستشفى الأمام الصفاق (E)
مستشفى العلة لتطبي
مستشفى مرجان لتطبي

م / تسهيل مهمة

تدبة طبية ...
أشارة إلى كتاب جلعه بابل إلية التمريض / شعبة شؤون العمدة ذي العدد ١٠٥٢ في
٢٠٢٣/٣/١٣ ...
تسهيل مهمة الطبية المدرجة أسمائهم أدناه من الجفعة أنفا لإجراء البحث الخاص بفتح
(المعرفة التغذوية لمرضى السكري البالغين في المستشفيات التطبية في محافظة بابل)
للتفضل بالإطلاع وتسهيل مهمة العوما إليهم وحسب الضوابط والإمكانات على أن لا تتعمل
مؤسساتكم أية تبعث مدية وقانونية ...

... مع الاحترام .

وزارة الصحة
دائرة صحة بابل
مركز التدريب والتنمية البشرية

الاسماء :-
١- زهراء صباح رسول
٢- زهراء فاضل حمدي
٣- زهراء صلح صلح
٤- زيب ضياء جلد ✓

محمد عبد الله عورش
كدير مركز لتدريب والتنمية البشرية
٢٠٢٣ / ١

نسخة منه اليوم
مركز التدريب والتنمية البشرية / وحدة إدارة البحوث ... مع الاحترام
دائرة صحة محافظة بابل / مركز التدريب والتنمية البشرية : تيمم المراد : babylwaring@gmail.com

منفذ الحفظ
اختصاص مدير الموارد البشرية

جمهورية العراق

 <p>Ministry Of Health Babylon Health Directorate Email: babylon@mo.gov.iq الأهل عريق الطير سناني... شغلن معاترشو سنوكانه كلوة الاحيوية والتغذية على البعد من التوت</p>		وزارة الصحة دارة صحة محافظة بابل المدير العام مركز التدريب والتنمية البشرية وحدة إدارة البحوث
		العدد: ٤٨١ التاريخ: ٢٠٢٣ / ٣ / ١٩

٥٢٦٨
٢٠٢٣ / ٣ / ١٩

الى / مستشفى الامام الصادق (ع)
 مستشفى الحلة لتطعيم
 مستشفى مرجان لتطعيم

د/ تسهيل مهمة

تحية طيبة ...
 أشارة إلى كتاب جمعه بابل /كلية التمريض / شعبة الشؤون العلمية ذي العدد ١٠٥٢ إلى
 ... ٢٠٢٣/٣/١٣
 تسهيل مهمة الطيبة المدرجة اسمانهم ادناه من الجامعة أنفا لإجراء البحث الخاص بكتفاج
 (المعرفة التخوية ليرضى السكري البالغين في المستشفيات التذيمية في محافظة بابل)
 للتفضل بالاطلاع وتسهيل مهمة السوما إليهم وحسب لضوابط والإمكانات على أن لا تتحمل
 مؤسساتكم أية تبعات مادية وقانونية....

... مع الاحترام .
 وزارة الصحة
 دارة صحة بابل
 مركز التدريب والتنمية البشرية

- الأسماء :-
- ١- زهراء صباح رسول
 - ٢- زهراء قاضل حمدي
 - ٣- زهراء صلح صلح
 - ٤- زهراء ضياء جلد

المستشار العام
 عباس عدنان البيروصاني
 مدير مركز التدريب والتنمية البشرية
 ٢٠٢٣ / ١

نسخة منه الورقة
 مركز التدريب والتنمية البشرية / وحدة إدارة البحوث مع الأوليت .
 دارة صحة محافظة بابل / مركز التدريب والتنمية البشرية // ايميل المركز : babylon@training@gmail.com

جمهورية العراق

Ministry Of Health Babylon Health Directorate Email : babitraining@gmail.com أيلول هو في شهر صافو يستعمل هذا التاريخ في جميع بطاقة الترخيص والبطاقة على اليد من الترخيص		وزارة الصحة دائرة صحة محافظة بابل المدير العام مركز التدريب والتنمية البشرية وحدة إدارة البحوث الترخيص: ٢٠٢٣ / ٣ / ١٣
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مستشفى مرجان
 مستشفى الخيرية والتنمية البشرية
 مركز التدريب
 ٢٠٢٣ / ١٣

الس / مستشفى الأمام الصافي (ع)
 مستشفى الحلة التطبيقي
 مستشفى مرجان للتعليم

تسهيل مهمة

تحية طيبة ...
 أشارة إلى كتاب جامعه بابل / كلية التمريض / شعبة تشاؤون العلمية ذي العدد ٥٤ ...
 تسهيل مهمة الطلبة المدرجة اسمائهم أدناه من الجلسة أنفا لإجراء البحث الخاص بالنتائج
 (المعرفة لتجاوزة لمرضى السكري البالغين في المستشفيات التطبيقي في محافظة بابل)
 لتفضل بالاطلاع وتسهيل مهمة الموما إليهم وحسب ضوابط والإمكانات حتى أن لا تحصل
 مؤسساتكم أية تبعات مالية وقانونية ...

... مع الاحترام .

الأسماء :-

- ١- زهراء صباح رسول
- ٢- زهراء فاضل حمدي
- ٣- زهراء صلح صاهب
- ٤- زينب ضياء جلد

وزارة الصحة
 دائرة صحة بابل
 مركز التدريب والتنمية البشرية

محمد عبد الله هجرس
 مدير مركز التدريب والتنمية البشرية
 ٢٠٢٣ / ١

Handwritten notes and stamps in blue ink, including signatures and dates, covering the bottom half of the letter.

Appendix: B
Panel of Expert

مكان العمل	سنوات الخدمة	اللقب	اسم الخبير	ت
كلية التمريض/جامعة بابل	٣٤	استاذ	أ.د. سحر ادهم علي	١
كلية التمريض/جامعة بابل	٢٥	استاذ	أ.د. شذى سعدي محمد	٢
كلية التمريض/جامعة بابل	١٠	مدرس مساعد	م.م. وفاق مهدي هادي	٣
كلية التمريض/جامعة بابل	٨	مدرس مساعد	م.م. حسنين يحيى شميران	٤

Appendix C

Questionnaire

Dear Patient

This questionnaire is directed to you individually. Your name is not required. Your participation in this study is voluntary. This data is used for scientific research purposes only.

This questionnaire consists of two parts:

- Part One: participant's demographical data. (7 items)**
- Part Two: Knowledge of adult diabetics about nutrition. (12 items)**

(Thank you and appreciate your participation in this study)

Research Title:

Diabetic Adult Patients Nutritional Knowledge at Al-Hila Teaching Hospitals

Names of researchers:

Zahraa Sabah Rasool

Zahraa Saleh Sahib

Zahraa Fadel Hamdi

Zainab Daa Jald

Section A: - Demographics Data

Age	<input type="text"/>	Year
Gender	Male	<input type="radio"/>
	Female	<input type="radio"/>
Maternal status	Single	<input type="radio"/>
	Married	<input type="radio"/>
	Divorced	<input type="radio"/>
	Widower	<input type="radio"/>
living arrangements	living alone	<input type="radio"/>
	living with someone	<input type="radio"/>
Education level	doesn't write and doesn't read	<input type="radio"/>
	primary	<input type="radio"/>
	Secondary	<input type="radio"/>
	institute or college	<input type="radio"/>
Employment status	Formal employment	<input type="radio"/>
	Casual laborer	<input type="radio"/>
	unemployment	<input type="radio"/>
Is there any other family member with diabetes?	Yes	<input type="radio"/>
	No	<input type="radio"/>

Section B: - Knowledge

B- A first domain

1. What does effect unsweetened fruit juice have on your blood sugar?
 - lowers it
 - Raises it
 - Has no effect
 - normal
2. Which of these should not be used if you sense that your blood sugar is low?
 - 3 pieces of chocolate
 - Half a cup of Orange juice
 - 1cup of soft drink (soda)
 - 1cup of full cream cow's milk
3. Which of the following is free food?
 - Any unsweetened food
 - Any diabetic food
 - Any food labeled sugar free
 - Any food with less than 20 calories / serving
4. Which of the following is highest in fat?
 - Low-fat milk
 - Orange juice
 - corn
 - Honey
5. Which of the following is highest in carbohydrates?
 - Roasted chicken
 - chocolate
 - Baked potato
 - Peanut butter (ground nut paste)

6. The diet followed for diabetics is:

- The way most adult eat.
- A healthy diet for most people.
- Too high in carbohydrates for most people.
- Too high in proteins for most people

7. Eating food low in fat reduces the diabetic Patients for

- Nerve disease
- kidney disease
- Heart disease
- Eye disease
- all of the above

B-b second domain

	Yes	No	I don't know
1 . Eating too much sugar and other sweet foods is a cause of Diabetes mellitus			
2. The way I prepare my food is as important as the foods I eat			
3. Maintaining a healthy weight isnt important in the management of diabetes			
4. - Medication is more important than diet and exercise to control my diabetes			
5 - Diabetic diet consists of mainly specially prepared foods			

الاستبيان النسخة العربية

عزيزي المريض

هذا الاستبيان موجه لك بشكل فردي. اسمك غير مطلوب. مشاركتك في هذا البحث مخير. تستخدم هذه البيانات لأغراض البحث العلمي فقط.

يتكون هذا الاستبيان من جزأين:

- الجزء الأول: البيانات الديموغرافية للمشاركين (٧ عناصر)
 - الجزء الثاني: معرفة مرضى السكر البالغين بالتغذية. (١٢ عناصر)
- (شكرا لك وأقدر مشاركتك في هذه الدراسة)

عنوان البحث

المعرفة الغذائية لمرضى السكري البالغين في مستشفيات الحلة التعليمية

أسماء الباحثين:

زهراء صالح صاحب

زهراء صباح رسول

زهراء فاضل حمدي

زينب ضياء جلد

نرجو التفضل بالإجابة على الاسئلة التالية مع جزيل الشكر والامتنان:

الجزء أ : البيانات الديموغرافية

العمر سنة

الجنس:

ذكر

انثى

الحالة الاجتماعية:

أعزب/عزباء

متزوج/ة

منفصل/ة

أرمل/ة

نوع المعيشة في البيت:

يعيش بمفرده

يعيش مع أحد أو مجموعة

مستوى التعليم:

لا يقرأ ولا يكتب

ابتدائي

ثانوي

معهد او كلية

دراسات عليا

العمل او الوظيفة:

موظف

كاسب

لا يعمل

هل يوجد فرد اخر في العائلة مصاب بالسكري نعم لا

الجزء ب: المعرفة

ب-أ

١- ما هو تأثير عصير الفاكهة غير المحلى على نسبة السكر في الدم؟

- يرفعها
- يخفضها
- ليس له تأثير
- طبيعي

٢- أي مما يلي لا يجب استخدامه إذا شعرت أن نسبة السكر في الدم لديك منخفضة؟

- ثلاثة قطع من الشكولاتة
- نصف كأس من عصير البرتقال
- كوب واحد من المشروبات الغازية
- كوب واحد من الحليب كامل الدسم

٣- أي مما يلي هو طعام مسموح به بحرية تامة؟

- اي طعام غير محلى
- أي طعام مخصص لمرضى السكري
- أي طعام مكتوب عليه (خال من السكر)
- أي طعام يحتوي على سعرات حرارية اقل من ٢٠ كالوري

٤- أي من المنتجات التالية يحتوي على اعلى نسبة من الدهون؟

- حليب قليل الدسم
- عصير البرتقال
- الذرة
- العسل

٥- أي من المنتجات التالية يحتوي على اعلى نسبة من الكربوهيدرات؟

- الدجاج المشوي
- الشكولاتة

- البطاطا المشوية
- زبدة الفول السوداني

- ٦- الحمية المتبعة لمرضى السكري هي:
- الطريقة التي يأكل بها معظم البالغين
- حمية صحية لأغلب الناس
- حمية غنية بالكربوهيدرات
- حمية غنية بالبروتين

- ٧- تناول الطعام قليل الدسم يحمي مرضى السكري من:
- أمراض الاعصاب
- أمراض الكلى
- أمراض القلب
- أمراض العيون
- جميع ما ذكر

ب-ب

لا اعرف	لا	نعم	
			١- اكل السكريات والاطعمة المحلاة هو سبب من اسباب مرض السكر
			٢- طريقة تحضير الطعام مهمة كأهمية اختيار نوعه
			٣- الحفاظ على وزن مثالي ليس له تأثير مهم للحد من مضاعفات المرض
			٤- الدواء أهم من النظام الغذائي وممارسة الرياضة للسيطرة على مرض السكري لدي

			٥- يتكون النظام الغذائي لمرضى السكري من الأطعمة المعدة بشكل خاص
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المخلص:

المقدمة:

المرضى الذين يعانون من مرض السكري أكثر عرضة للإصابة بالأمراض والوفيات والأمراض المزمنة غير المعدية أو غير المعدية. ، المراقبة الذاتية لنسبة الجلوكوز في الدم ، ورصد تطور المرض ، وممارسات العناية بالقدم.

الأهداف:

الهدف من الدراسة:

١. لمعرفة الخصائص الديموغرافية لمرضى السكري من النوع ٢.

٢. لتقييم معرفة المرضى فيما يتعلق بالحالة التغذوية.

المنهجية: دراسة كمية وصفية تصميم مقطعي تم اختياره لإجراء الدراسة الموجهة لتقييم المعرفة الغذائية لمرضى السكري البالغين

النتائج: إجمالي ١٠٠ مشارك و ٤٧ أنثى و ٥٣ ذكر. وسجل التقييم العام مستوى التدخل فيما يتعلق بمعرفة مرضى السكر حول التغذية الصحية وأثرها على الصحة البدنية وما هي الأطعمة التي يجب تناولها.

الاستنتاجات: يحتاج مرضى السكري من النوع ٢ إلى الإرشاد والتثقيف الصحي لتحسين معرفتهم الغذائية للحفاظ على صحتهم ومنع المضاعفات الناجمة عن الطعام غير الصحي.

التوصيات:



وزارة التعليم العالي والبحر العلمى



المعرفة الغذائية لمرضى السكرى البالغين فى مستشفيات الحرلة التعلللمة

مشروع رخرج مقدم لكلية التمريض جامعة بابل ضمن متطلبات الحصول على درجة البكالوريوس فى
التمريض

إعداد الطلبة:

زهراء صالح صاحب
زهراء فاضل حمدي

زهراء صباح رسول
زينب ضياء جلد

إشراف:

م.د. امه عبد الحسن

نيسان ٢٠٢٣

شوال ١٤٤٤