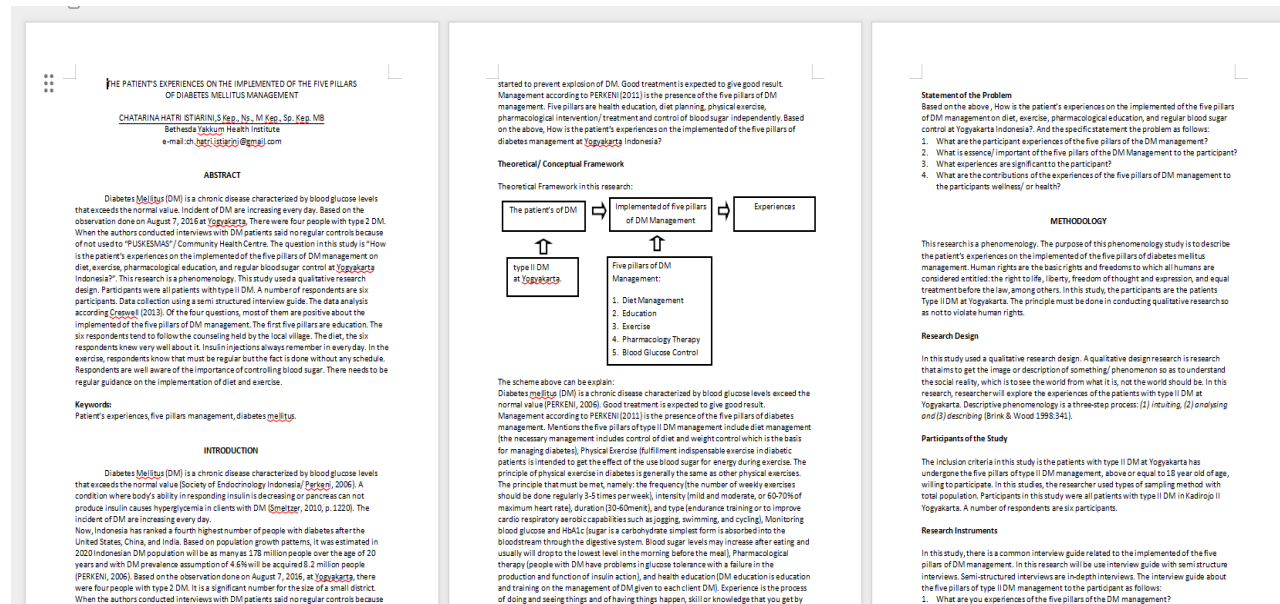
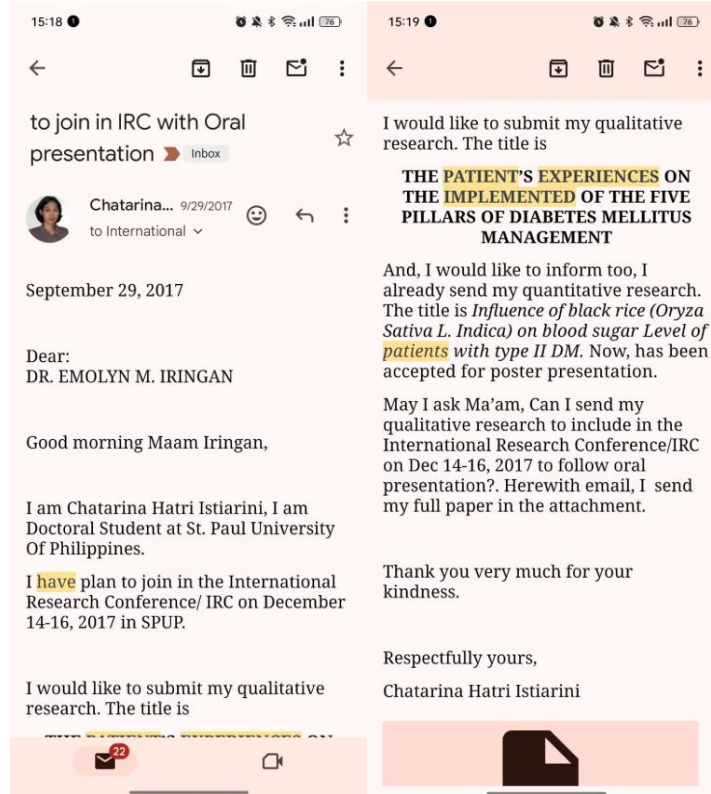
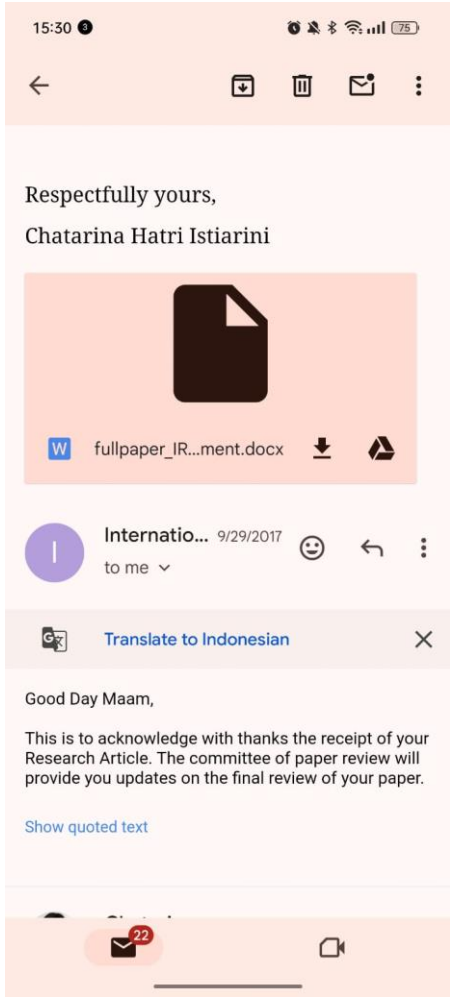


BUKTI KORESPONDENSI

Patients Experiences on the Implementation of the five pillars of Diabetes Mellitus Management





Bukti Artikel:

THE PATIENT'S EXPERIENCES ON THE IMPLEMENTED OF THE FIVE PILLARS OF DIABETES MELLITUS MANAGEMENT

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ABSTRACT

Diabetes Mellitus (DM) is a chronic disease characterized by blood glucose levels that exceeds the normal value. Incident of DM are increasing every day. Based on the observation done on August 7, 2016 at Yogyakarta. There were four people with type 2 DM. When the authors conducted interviews with DM patients said no regular controls because of not users to "PUSKESMAS" / Community Health Centre. The question in this study is "How is the patient's experiences on the implemented of the five pillars of DM management on diet, exercise, pharmacological education, and regular blood sugar control at Yogyakarta Indonesia?". This research is a phenomenology. This study used a qualitative research design. Participants were all patients with type II DM. A number of respondents are six participants. Data collection using a semi structured interview guide. The data analysis according Creswell (2013). Of the four questions, most of them are positive about the implemented of the five pillars of DM management. The first five pillars are education. The six respondents tend to follow the counseling held by the local village. The diet, the six respondents knew very well about it. Insulin injections always remember in everyday. In the exercise, respondents know that must be regular but the fact is done without any schedule. Respondents are well aware of the importance of controlling blood sugar. There needs to be regular guidance on the implementation of diet and exercise.

Keywords:
 Patient's experiences, five pillars management, diabetes mellitus.

INTRODUCTION

Diabetes Mellitus (DM) is a chronic disease characterized by blood glucose levels that exceeds the normal value (Society of Endocrinology Indonesia / Perkati, 2006). A condition where body's ability in responding insulin is decreasing or pancreas can not produce insulin causes hyperglycemia in clients with DM (Gopalar, 2016), p. 1200). The incident of DM are increasing every day. Now, Indonesia has ranked a fourth highest number of people with diabetes after the United States, China, and India. Based on population growth patterns, it was estimated in 2020 Indonesian DM population will be as many as 1.78 million people over the age of 20 years and with DM prevalence assumption of 4.8% will be acquire 8.2 million people (PERKENI, 2006). Based on the observation done on August 7, 2016, at Yogyakarta, there were four people with type 2 DM. It is a significant number for the size of a small district

started to prevent explosion of DM. Good treatment is expected to give good result. Management according to PERKENI (2011) is the presence of the five pillars of DM management. Five pillars are health education, diet planning, physical exercise, pharmacological intervention/ treatment and control of blood sugar independently. Based on the above, How is the patient's experiences on the implemented of the five pillars of diabetes management at Yogyakarta Indonesia?

Theoretical/ Conceptual Framework

Theoretical Framework in this research:

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  graph TD
    A[The patient's of DM] --> B[implemented of five pillars of DM Management]
    B --> C[Experiences]
    D[type II DM at Yogyakarta] --> A
    E[Five pillars of DM Management:  
1. Diet Management  
2. Education  
3. Exercise  
4. Pharmacology Therapy  
5. Blood Glucose Control] --> B
  
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The scheme above can be explain:

Diabetes mellitus (DM) is a chronic disease characterized by blood glucose levels exceed the normal value (PERKENI, 2006). Good treatment is expected to give good result. Management according to PERKENI (2011) is the presence of the five pillars of diabetes management. Mentions the five pillars of type II DM management include diet management (the necessary management includes control of diet and weight control which is the basis for managing diabetes), Physical Exercise (fulfillment indispensable exercise in diabetic patients is intended to get the effect of the use blood sugar for energy during exercise. The principle of physical exercise in diabetes is generally the same as other physical exercises. The principle that must be met, namely: the frequency the number of weekly exercises should be done regularly 3-5 times per week), intensity (mild and moderate, or 60-70% of maximum heart rate), duration (30-60min), and type (endurance training or to improve cardio respiratory aerobic capabilities such as jogging, swimming, and cycling). Monitoring blood glucose and HbA1c (blood sugar is a carbohydrate simplest form is absorbed into the bloodstream through the digestive system. Blood sugar levels may increase after eating and usually will drop to the lowest level in the morning before the meal). Pharmacological therapy (people with DM have problem in glucose tolerance with a failure in the production and function of insulin action), and health education (DM education is education and training on the management of DM when to each patient DM). Excellence in the exercise

Statement of the Problem

Based on the above, How is the patient's experiences on the implemented of the five pillars of DM management on diet, exercise, pharmacological education, and regular blood sugar control at Yogyakarta Indonesia?. And the specific statement the problem as follows:

1. What are the participant experiences of the five pillars of the DM management?
2. What is essential/important of the five pillars of the DM management to the participant?
3. What experiences are significant to the participant?
4. What are the contributions of the experiences of the five pillars of DM management to the participants' wellness' or health?

METHODOLOGY

This research is a phenomenology. The purpose of this phenomenology study is to describe the patient's experience on the implemented of the five pillars of diabetes mellitus management. Human rights are the basic rights and freedoms to which all humans are considered entitled: the "right to life, liberty, freedom of thought and expression, and equal treatment before the law, among others. In this study, the participants are the patients Type II DM at Yogyakarta. The principle must be done in conducting qualitative research so as not to violate human rights.

Research Design

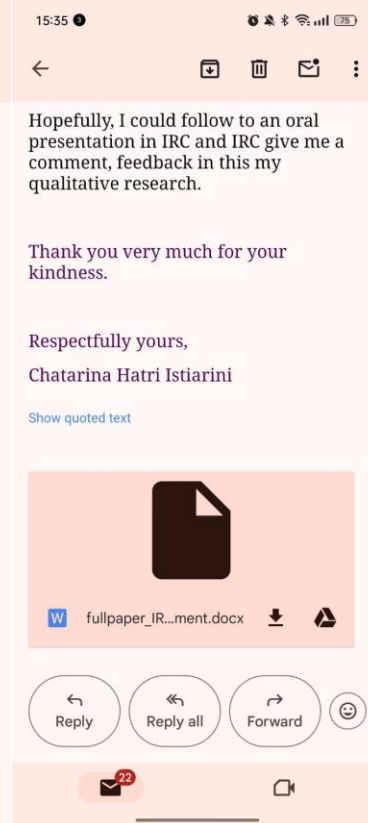
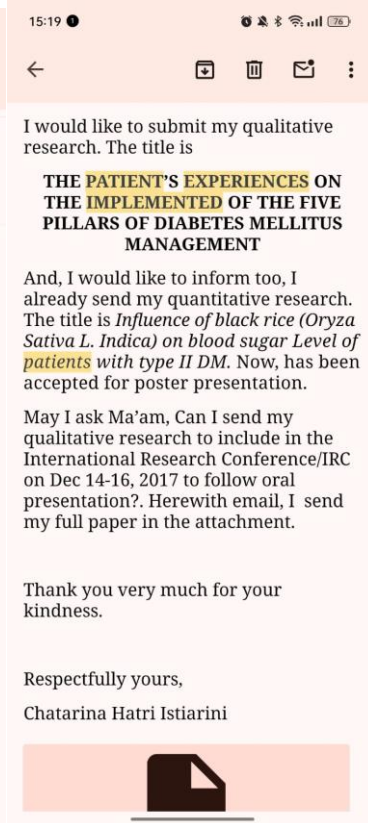
In this study used a qualitative research design. A qualitative design research is research that aims to get the image or description of something phenomenon so as to understand the social reality, which is to see the world from what it is, not the world should be. In this research, researcher will explore the experiences of the patients with type II DM at Yogyakarta. Descriptive phenomenology is a three-step process: (1) intuiting, (2) analyzing and (3) describing (Brink & Wood, 1992:341).

Participants of the Study

The inclusion criteria in this study is the patients with type II DM at Yogyakarta has undergone the five pillars of type II DM management. In this research will be use interview guide with semi-structure willing to participate. In this study, the researcher used types of sampling method with total population. Participants in this study were all patients with type II DM in Kadrojo II Yogyakarta. A number of respondents are six participants.

Research Instruments

In this study, there is a common interview guide related to the implemented of the five pillars of DM management. In this research will be use interview guide with semi-structure interviews. Semi-structured interviews are in-depth interviews. The interview guide about the five pillars of type II DM management to the participants as follows:



THE PATIENT'S EXPERIENCES ON THE IMPLEMENTED OF THE FIVE PILLARS OF DIABETES MELLITUS MANAGEMENT

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ABSTRACT

Diabetes Mellitus (DM) is a chronic disease characterized by blood glucose levels that exceeds the normal value. Incidence of DM is increasing every day. The Indonesian government has provided at the PUSKESMAS level an intervention that was called Five Pillars of Diabetes Management. This study explored the patient's experiences on the implementation of the five pillars of DM management on diet, exercise, pharmacological education, and regular blood sugar control at Yogyakarta Indonesia. This study utilized descriptive phenomenology. There were six participants who were with type II DM and has been participating in the five pillars of diabetic management for at least 6 months. A number of respondents are six participants. Data collection using a semi structured interview guide and observation along with field notes. The data analysis used Creswell (2013). Results show that there were three themes extracted from the interview: 1) Empowered to adhere with the therapy, 2) Hopeful for a better quality of life and 3) A meaningful experience that makes a difference.

Keywords: Patient's experiences, five pillars of Diabetes management, diabetes mellitus.

INTRODUCTION

Diabetes Mellitus (DM) is a chronic disease characterized by blood glucose levels that exceeds the normal value (Society of Endocrinology Indonesia) (Peglip, 2006). A condition where body's ability in responding insulin is decreasing or pancreas can not produce insulin causes hyperglycemia in clients with DM (Smeltzer, 2010, p. 1220). The incident of DM are increasing every day.

Now, Indonesia has ranked a fourth highest number of people with diabetes after the United States, China, and India. Based on population growth patterns, it was estimated in 2020 Indonesian DM population will be as many as 1.78 million people over the age of 20 years and with DM prevalence assumption of 4.6% will be acquired 8.2 million people (Perker, 2006). Based on the observation done on August 7, 2016, at Yogyakarta, there were four people with type 2 DM. It is a significant number for the size of a small district. When the authors conducted interviews with DM patients said no regular controls because of not used in "PUSKESMAS" (Community Health Centre). Of course, the program should be

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Statement of the Problem

Based on the above, How is the patient's experiences on the implemented of the five pillars of DM management on diet, exercise, pharmacological education, and regular blood sugar control at Yogyakarta Indonesia?. And the specific statement the problem as follows:

1. What are the participant experiences of the five pillars of the DM management?
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METHODOLOGY

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Research Design

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Participants of the Study

The inclusion criteria in this study is the patients with type II DM at Yogyakarta has undergone the five pillars of type II DM management, above or equal to 18 year old of age, willing to participate. In this studies, the researcher used types of sampling method with total population. Participants in this study were all patients with type II DM in Kadrojo II Yogyakarta. A number of respondents are six participants.

Research Instruments

In this study, there is a common interview guide related to the implemented of the five pillars of DM management. In this research will be use interview guide with semi structure interviews. Semi-structured interviews are in-depth interviews. The interview guide about the five pillars of type II DM management to the participant as follows:

1. What are you experiences of the five pillars of the DM management?
2. What is essence/ important of the five pillars of the DM Management to the participant?
3. What experiences are significant to the participant?
4. What are the contributions of the experiences of the five pillars of DM management to the participants wellness/ or health?

Descriptive phenomenology involves the following four strategies: *intuiting, bracketing, analysing and describing*.

Data Collection Procedure

Data collection using a semi structured interview guides. Three processes are blended throughout the study: collection, coding, and analysis of data. Steps for interview as follows:

1. Asked permission from PUSKESMAS/ Community Health Centre.
2. The researcher found the participants at Yogyakarta.
3. The researcher gave the informed consent to the participant.
4. Selects individuals to be interviewed for door to door/ face to face. The individuals are type II DM of the patients at Yogyakarta.
5. Conducting interviews in accordance with the guidelines that had been developed systematically interview. The time required for each interview approximately 45-60 minutes. By using a recording. Researcher already done observation (environment, personal), and check personal documentation (book controls from PUSKESMAS/ Community Health Centre).
6. Make a transcript of the interview as soon as possible after the interview.
7. Conduct data analysis of transcripts that have been made to make the categorization.
8. To verify and confirm the results of interview that it has been conducted with