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MANIPAL, INDIA

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DR. RAHIMAH MOHD ANSHARI PUSAT PENGAJIAN SAINS KESIHATAN





SOUVENIR



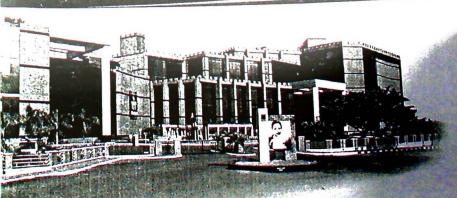
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has been argued to ignore diversity within cultures; to underplay similarities between cultures, and to ignore power relations (of gender, or of racism). Cultures also change over time and there is a two-way relationship between material circumstances and culture, between health services provision and culture, and between culture and the manner in which health professionals form their identities. In rural Ghana, with low socio-economic resources and with little formal health service provision, mortality from SCD was high and families with SCD were stigmatized. However, in the context of new-born screening and health insurance, children with SCD are surviving and flourishing and parents are more inclined to regard previous "cultural" views as hear ay, as outdated and as likely to undermine the practical ways they are finding to resist stigma, to care for their own child and to share positive caring strategies for a child with SCD with other families. The nature of the "culture" Indian realth professionals are likely to be faced with in meeting the challenge of SCD depends not so much a the "culture" of ribal groups, but on their experiences of poverty, and on whether Indian health services tend to emphasize premarital and prenatal screening, with the risk of reinforcing negative images of SCD or whether more emphasis is placed on newborn screening and basic affordable treatments that would enable children with SCD to survive and with support to flourish.

031 RPO 04

Dietary adherence and health beliefs among Malay clients with diabetes mellitus type 2 in the diabetic centre, Hospital University Sains Malaysia (HUSM).

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Adherence to diabetes self care management regimen is important for controlling Diabetes Mellitus Type 2. Low rate of dietary adherence had been found and health belief is considered as one of the factors that influence the performance of dietary adherence. The objective of this study was to determine the level of diabetic dietary adherence and diabetic health beliefs. A quantitative study was carried out among 136 Malay clients with DM Type 2 in Diabetic Centre, HUSM, Kelantan, Malaysia. The validated Summary Diabetes Self-Care Activities (SDSCA) scale with reliability alpha 0.68 and modified Health Belief Model Diabetes Scale with reliability alpha 0.69-0.82 were used. Ethical clearance was obtained from Ethical and Research Committee of USM. Duration of data collection was from February to March 2009. Data were analyzed via Chi-

Square and Fisher's Exact test. There were 64% respondents in this study who adhered to their diabetic dietary regimen. Majority of the respondents had high positive beliefs of diabetes on susceptibility to diabetic complication and benefit which were 90% and 95% respectively. The severity and barriers domain showed 23% of respondent had high positive belief. This study had identified that there were certain false beliefs of diabetes especially in severity and barriers domain. Perceived susceptibility, benefits, and barriers in following diabetic dietary regimens were significantly associated with diabetic dietary adherence with the p <0.0001, p = 0.009, and p = 0.028. Perceived severity showed no significant association with dietary adherence (p = 0.843). As a conclusion, the prediction of HBM is most likely true except for the perceived severity. Health care providers need to establish guideline to change false belief of diabetes and overcome the barriers among DM clients.

032 RPO 05

Effect of Pranayama on healthy living and life satisfaction KASTURI RAMESHADIGA.

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Modern age beset with stress, tensions and anxieties continues to deteriorate individuals' quality of life. Among the approaches to improve the quality of life, there has been search for healthy lifestyles and better strategies for handling stress and improving subjective wellbeing. These explorations have led to ancient disciplines such as yoga which combines the physical elements of healthy lifestyle with potent prescriptions for abiding mental peace. This study aims to find as to what extent 'Pranayama' which forms the eighth limb of Patanjali yoga enhances healthy living and improves life satisfaction in young adults, A quasi experimental two group pre and post test design was adopted. Cluster sampling was done to select two schools in Udupi district and purposive sampling to select subjects. Sample size was 155 based on power analysis. Non Parametric Wilcoxan signed rank tests for comparing pre and post test scores of healthy living and life satisfaction within experimental group were significant, with p 0.006 and 0.002 respectively (p,< 0.05). Non parametric Mann-Whitney U tests conducted to find difference in post test scores of healthy living and life satisfaction between the groups showed the former not significant (p 0.053) and the latter significant with p 0.001. Sharma et al (2008) have reported significant improvement in subjective well being of 77 subjects after ten day Pranayama practice. Rajutha et al (1991) also found improvement in positive approach towards life after intensive



DIETARY ADHERENCE AND HEALTH BELIEF AMONG MALAY WITH TYPE 2 DIABETES MELLITUS PATIENTS IN DIABETES CENTRE, HOSPITAL UNIVERSITI SAINS MALAYSIA (HUSM), KELANTAN MALAYSIA

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IIM Introduction

Diabetes mellitus (DM) is a non-communicable "silent killer" and multi-factorial disease caused by inherited and/or acquired deficiency in the production of insulin by the pancreas or by ineffective insulin production (WHO, 2008).

Prevalence for total cases of diabetic outpatient in Hospital Universiti Sains Malaysia (HUSM) showed a significance increase from year 2005 to year 2007 which was 14,034, 15,578 and 17,178 of DM patient respectively (Medical Record Department HUSM, 2008). 85.7% of Kelantan diabetes population had a poor glycemic control (Suhaiza et al., 2004).

A total of 96% of subjects from the hospital settings reported being advised on diet, however, 54% of the subjects said they had forgotten their dietary advice (Tan & Magarey, 2008).

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Introduction

Failing to adhere diabetes dietary regimen can have consequences that may be slow and insidious complication (Klein, Wustrack & Schwartz, 2006).

Malaysian National Diabetes Program reorganized and strengthened in year 2000 to provide primary prevention and health promotion targeting on diet and exercise (Shafie et al., 2004).

Alas, still high increase rates of diabetes in Malaysia (Tan, 2004).

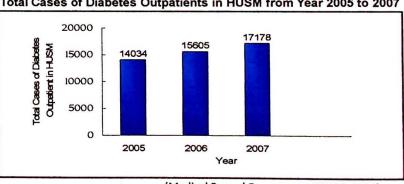
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Prevalence of Diabetes in Worldwide and Malaysia

Year	Prevalence of Diabetes	
	Worldwide	Malaysia
2000	171 million	942000
2030	366 million	2479000

(WHO, 2008)

Total Cases of Diabetes Outpatients in HUSM from Year 2005 to 2007



(Medical Record Department HUSM, 2008)