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Infectious Diseases & Endocrinology 2019: Transcultural study of dietary habits and physical activities among patients with diabetes and control subjects in Myanmar and Thailand- Ahmad Ishtiaq- Juntendo University

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Diabetes occurrence has been rising more rapidly in low and middle income countries. In Myanmar Step survey, a high intake of FV was associated with lower odds of hypertriglyceridemia among men and women. It was also associated with a different cholesterol levels, by a negatively among women and positively among men. Myanmar's traditional food tends to have a lot of fats and carbohydrates. Dietary habits of Myanmar residents have been westernizing. More than 200,000 deaths are annually among the population are owing to chronic non-communicable diseases and about 30,000 deaths a leading cause of death in Thailand. With rapidly emerging T2DM, prevalence among adults has risen from 2.3% in 1991 to 8.0% in 20155. Over a 4 million adults live with diabetes, making it the top cause of disability adjusted life years lost for Thai women and the seventh cause for men. This study will investigate the occurrence of DM in citizens of the Yangon Region, Myanmar and Changing, Thailand. Comparison of protest results of the actual dietary habits and activity habits of adult of Myanmar and Thailand showed the factor that the prevalence of T2DM in urban Myanmar is extremely high. Asian countries suffering the bulk of the total diabetes epidemic, the Kingdom of Saudi Arabia is among the countries with the highest prevalence of diabetes mellitus (23.1%). People who are diagnosed with diabetes, on average they have medical healthcare by expenditures that are ten times higher than what expenditures would be in the absence of diabetes. The tight glycaemic control is achieved through medications and lifestyles modifications. Inadequate physical activity accompanied by poor dietary habits is associated with the development of obesity and type 2 diabetes mellitus. Adoption of a friendly diet and adoption of moderate physical activity are essential not only for the prevention and treatment of diabetes mellitus but also in maintaining physical and mental health. Exercise is associated with lower cardiovascular disease, chronic kidney disease, sepsis, pneumonia, influenza mortality, and all-cause mortality in patients with diabetes mellitus. Highest training programs may be warranted for patients with diabetes than currently provided by non-diabetics. Smoking, a major source of reactive oxygen species, is associated with higher glycated haemoglobin, while fruit and vegetable consumption is related to improved redox status. The majority of patients with type 2 diabetes mellitus are not meeting the recommended glycaemic targets even in developed countries, with deleterious consequences.

The undesirable glycaemic control is mainly through deficiency of nutritional knowledge and non-compliance with healthy lifestyles which are important for patients with diabetes in the short and long term. Adoption of a friendly diet and adoption of moderate physical activity are essential not only for the prevention and treatment of diabetes mellitus but also in maintaining physical and mental health. The American Diabetes Association recommends tight glycemic control as an essential strategy for the prevention of microvascular complication of diabetes mellitus. The tight glycemic control is achieved through medications and lifestyles modifications. Medication types, compliance to medications and reasons for not taking them, self-measurement of blood glucose and the level of blood sugar, diabetes complications, smoking, whether diagnosed with psychiatric disorders, and family history of diabetes mellitus. The participants were also asked to assess their knowledge regarding: if type 2 diabetes mellitus is dangerous, if it can be prevented or cured and if adherence to a healthy diet and exercise could control to prevent diabetes. The most recent HbA1c was collected from the patients' records to assess the degree of glycemic control, and those with HbA1c of ≤8 were regarded as accepted controlled. One hundred consecutive patients with the diagnosis of type 2 diabetes mellitus according to the American Diabetes Association guidelines4 and came for routine follow-up were enrolled the participants were invited to sign a written informed consent, then interviewed by the researchers using a structured questionnaire to collect data on age, sex, level of education, income, if the patient had received education about diabetes, adherence to a healthy diet, by frequency of sugar, fast food, and fruit and vegetable consumption in the last month. Also included in the questionnaire were the levels of exercise as defined by the American Diabetes Association.

Patients with type 2 diabetes had higher BMI, and were more likely to skip breakfast, consume less food and more fruits than control subjects. More physical activity and less sweet food consumption were observed among patients with accepted glycaemic control. Around One hundred patients with type 2 diabetes and 150 control subjects were interrogated to collect demographic data regarding, breakfast skipping, late dinner intake, and fruit, vegetables, sweet food, and fast food consumption. Diabetic patient's perception of their disease was also assessed.