**Editorial** 

## Emotional, Psychological Distress Causing Diabetes: Factors and Management

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## **DESCRIPTION**

Have we ever questioned dose the person with psychiatric diseases can be the victim to diabetes? Or person with diabetes disorders can be affected with disturbed mental behaviors?

There are many researches that show the evidences of person with psychiatric disorders have been affected with diabetes. About of 20-25% of individuals who are dysfunctional in behavior have diabetes; more than 80% on people with dysfunctional behavior with diabetes are undiscovered [1].

The most commonly seen diabetes patients are 2-3 times more who are having depression than the people without diabetes. Only about of 50% of depressed people with diabetes got diagnosed and are treated. Feeling sad, losing interest, unable to sleep, feeling hopeless, suicidal thoughts, isolated self from others major symptoms of depression and are the people more likely affected with diabetes. People with diabetes and depression are named as depressogenic. There are some studies that projects the evidence of person with stress and anxiety feelings like worry, fear are more likely to have diabetes which is about of 30%. This mental dysfunction of feeling anxiety can make the drop in the blood sugar levels also the vice versa. They were researches suggested to check the blood sugar levels during anxiety.

Some extreme level feelings of frustration, discouragement, tiredness that could cause diabetes which is needed for daily care. These shows the psychiatric disorders can be a broadcasting factor for diabetes [2].

Psychiatric diseases can be diagnosed by using two most common nosologic systems namely, International classification of diseases and related health conditions-10 ie., ICD-10

accordingly to World Health Organization (WHO) and the other by Statistical Manual of Mental Disorders-IV as per American Psychiatric Association (APA). With the of help of these systems which made easy for the identification of diabetes in the mentally dysfunctional individuals. Delirium with diabetes which is manifested for occurrence of diabetic ketoacidosis. This disorder could be represented as hypoactive or hyperactive delirium, who are symptomized with confusion, disorientation, sensorium and hallucinations. Mood disorders like dysthymia and bipolar disorders can also be affected with diabetes. Schizophrenia is one of the psychotic disorder which is associated with diabetes which show she high mortality rates than in the individuals of diabetes alone. Insulin resistance and glucose tolerance are associated with Schizophrenia [3].

Emotional issues, psychiatric disorders associated with diabetes makes the issue complicated. Diabetes care has be taken with the inculcation behavior of self-management. The extra difficulties of overseeing co-dismal diabetes and psychological instability require close cooperation between mental and actual wellbeing administrations.

## REFERENCE

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