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Self-care of People with Type 2 Diabetes During the COVID Pandemic: A Qualitative Interpretive Description

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To explore and describe the **experience of self-care** of people with T2DM during the **COVID-19 pandemic**

Methods

Qualitative Interpretive Description (Thorne, 2016).

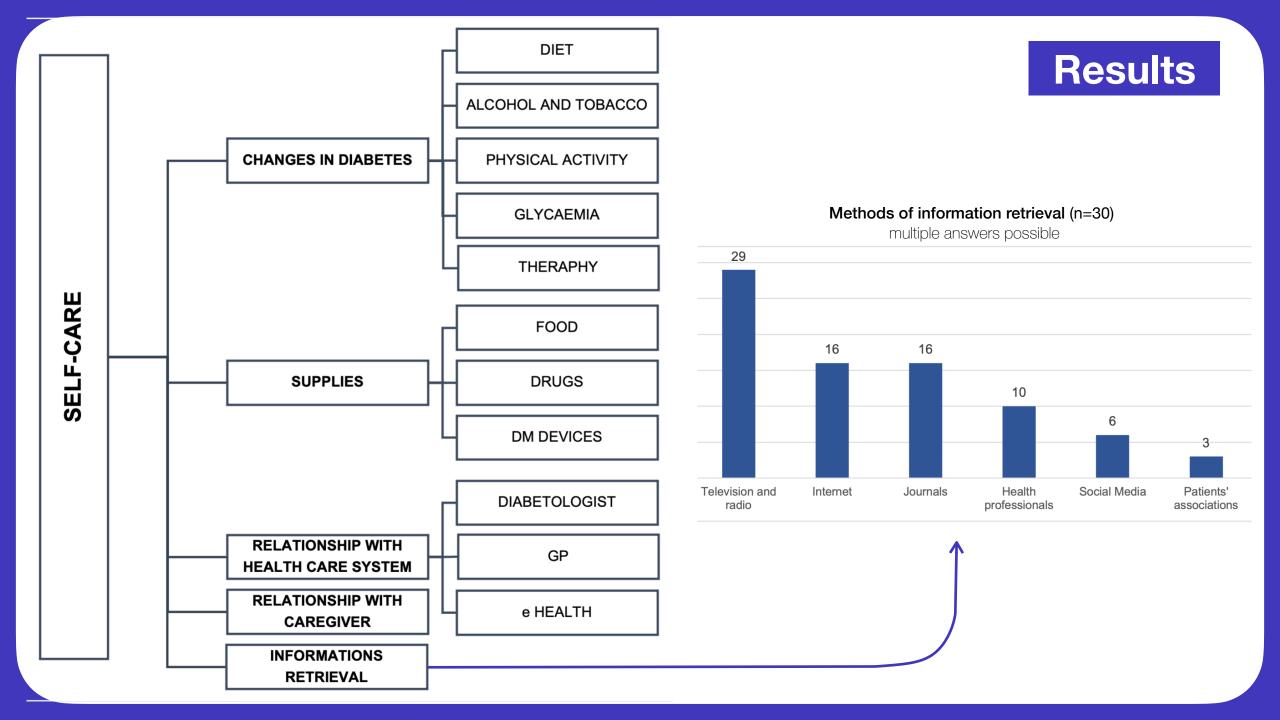
Data collected with **semi-structured interviews** and analysed inductively in accordance with Interpretive Description criteria.

The **sample (n=30)** was purposefully selected and composed of seven women and 23 men, mean age 69.9 years old (60–77) and 19.4 mean years (3–40) of living with T2DM.

DIET ALCOHOL AND TOBACCO **CHANGES IN DIABETES** PHYSICAL ACTIVITY **GLYCAEMIA THERAPHY** SELF-CARE FOOD **SUPPLIES DRUGS DM DEVICES** DIABETOLOGIST **RELATIONSHIP WITH** GP **HEALTH CARE SYSTEM RELATIONSHIP WITH** e HEALTH **CAREGIVER INFORMATIONS RETRIEVAL**

Results

Many participants reduced physical activity levels and increased smoking and alcohol consumption. Some took time for meal prepping and better eating, and some increased food consumption and stress eating. These factors, with greater stress and anxiety, caused worsening of glycaemic values. Supplies were hard for participants to procure. Many chose online **shopping** for food and electronic prescriptions were used for drugs. In some cases, insulin was **not available** and participants borrowed it from other patients using informal network. The closure of diabetes centres and the lack of reference points forced people who could afford it to turn to private healthcare. Others, even when diabetes complications arose, were **not able to receive care** or advice for a long time. Those who contacted a healthcare professional often did so via **e-health** or telephone.



Conclusion

Participants struggled both in diabetes self-care and access to services. They advised for a diabetes case manager, continuity of care, and patients' empowerment. Supplies of food, drugs, and diabetes-related devices were a concern. Technology and eHealth were useful but only for the minority capable of using them. Developing advanced nurse-led community services could solve many issues reported in this study, during and after the pandemic.