

# Research identifies blocks to South Asian diabetes treatment

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The social stigma associated with diabetes and a fear of being poisoned by medical drugs may contribute to patients of South Asian origin failing to take their medication, a new study shows.

South Asians in the UK are six times more likely than the general population to be affected with diabetes at a younger age and at greater risk of developing cardiovascular complications. Type 2 Diabetes is a major risk factor associated with heart disease.

Scientists at the University of Birmingham recommend that South Asian [patients](#) would benefit from health professionals giving them tailored advice that highlights the long-term consequences of diabetes and [cardiovascular disease](#) (CVD).

Researchers studied the factors that influenced behaviour around taking medicines and identified a number of key areas that helped to shape when South Asian patients took their medication:

- Beliefs about the need for medicines and their effectiveness
- Fears around the toxicity of medicines
- Traditional remedies versus 'western' medicines
- Stigma and social support
- Communication by health professionals

Dr Paramjit Gill, from the University of Birmingham's Institute of Applied Health Research, said: "Not taking medicines – for whatever

reason – can have a profound effect on patients' health and poor clinical outcomes for those with diabetes and cardiovascular disease.

"We identified a range of beliefs that influence how patients from South Asian communities approach taking medication for these conditions. These patients would benefit from tailored medical advice that highlights the long-term consequences of diabetes and CVD."

Dr Kanta Kumar further added: "Health beliefs found in South Asian diabetic patients are present in other chronic diseases such as rheumatoid arthritis. These health beliefs should be explored when consulting South Asian patients about using long-term medication."

The study was published in the journal BMC Endocrine Disorders and noted that stigma and social support had a major impact on medicine taking.

For people from a South Asian background – India, Pakistan or Bangladesh - diabetes and insulin were viewed as culturally unacceptable, making some patients reluctant to start insulin therapy or even admit to family and friends that they had the condition.

Some patients were concerned about increasing numbers of [prescribed medicines](#) being added to their treatment plans – compounding their fears about toxicity. A number of patients feared that taking too many medicines would lead to death.

Many patients missed doses intentionally because they 'felt fine' or their symptoms had become less severe. Others decided to stop their treatment during social gatherings – often stopping their medicines to take part fully in activities such as weddings.

The study found many patients of South Asian origin regarded

medicines for treatment of diabetes and CVD as necessary. However, patients who had migrated to the UK described the medicines they received in Britain as more effective than those they would have received in places like India and Pakistan.

Some patients used traditional and herbal remedies rather than 'Western' medicines, believing them to be better at tackling illnesses without side effects. Family and friends were often important in deciding whether to take these medicines and, in some cases, would also supply them.

Health professionals' communication styles were found to influence the way patients viewed the treatment of their disease. Some patients felt that they were not always fully informed about disease management and how medication would help to control their symptoms.

The findings suggest that if [health professionals](#) took patients' beliefs about medicines into account when prescribing, this would help them to better advise [diabetes](#) and CVD sufferers about the benefits of taking their medication on a regular basis.

**More information:** Kanta Kumar et al. Understanding adherence-related beliefs about medicine amongst patients of South Asian origin with diabetes and cardiovascular disease patients: a qualitative synthesis, *BMC Endocrine Disorders* (2016). [DOI: 10.1186/s12902-016-0103-0](https://doi.org/10.1186/s12902-016-0103-0)

Provided by University of Birmingham

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