

## **Diabetes and complication**

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## **ABSTRACT**

The patients who attend the Cambodia Korea Diabetes Center have often not received an early diagnosis of diabetes and therefor do not go to the Hospital until they have the complication such as micro complication and macro complication. The majority of the patients with the diabetes present late for consultation many poor patients live in remote areas far from the hospital and cannot attend in timely minor. The patients are unaware that diabetes is a side lend killer and may live with symptom for many years. For the prevalence of diabetes in Cambodia, there are 5% in Siem Reap province and 11% in kampong Cham (King et al, 2005). According to WHO study in 2016, they found 5.9% prevalence in Cambodia. In 2012, IDF showed the average 8% in western Pacific region. Also, the diabetic foot disease in Asia is 5.5% (Zhang et al, 2017). In Cambodia, there will be 0.5% of amputation. By CIA report in 2018, population of Cambodia is 16204486 million. For people who live with diabetes is 956065, foot ulcers are 52583 and 4,780 diabetes related amputations.

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## **BIOGRAPHY**

For any patients who live with diabetes, they should do exercise at least 30 minutes per day in their lifestyle. For diet, patients should always choose only healthy foods. At least they receive a health checkup in every 6 months. Also, a foot checkup with a health care professional and eyes checkup with an ophthalmologist are needed. In order to avoid from diabetes, there are some important prevention such as pre-diabetes a voice complication, hyper-dyslipidemia, hyper tension, hyper glycaemia, diabetic chronic kidney disease, diabetic retinopathy, and diabetic cardiopathy. Moreover, for insulin therapy, doctor or nurse has to teach patients about self-management of insulin dosing and self-management of blood glucose. In conclusion, the diabetes and complication in Cambodia is the big challenge due to poor understanding for necessity to take medication, poor patients do not come to hospital for follow-up with medication staff, and lacking of the important knowledge of diabetes.

