



Nutrition Knowledge among Nurses in Primary Health Care

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ABOUT THE STUDY

Over the past few decades, several studies have focused on the effects of diet on the incidence and prevalence of diabetes. The literature emphasizes the widespread impact of diet on diabetes progression and complications, as well as the role nurses play in diabetes self-determination. Helping patients with chronic health problems develop self-management skills is one of the primary tasks of professional nurses. This is often achieved through education and counseling. Nurses are primarily responsible for providing important information to improve the quality of life for diabetics. Previous studies have shown that patient education has a positive impact on treatment outcomes. Therefore, the nurse must have sufficient knowledge to provide the patient with the necessary information. Diabetic patients have a higher hospitalization rate and are usually hospitalized longer than non-diabetic patients.

PHC nurses are globally recognized as an important factor in providing primary care services to patients with chronic diseases. However, most of the previous studies investigating the nutritional knowledge of nurses associated with diabetes focused on acute care nurses, and few studies examined PHC nurses. In addition, previous studies have shown that most people who benefit from primary health care are patients with chronic diseases such as diabetes. To fill these gaps in the literature, this study examines PHC nurses' perceptions of (a) nutritional knowledge of PHC nurses related to diabetes and (b) knowledge and role in assessing diabetic nutrition education. c) Investigate the relationship between diabetes-related nutritional knowledge

and organizational support of PHC nurses with background characteristics.

Diabetes is the leading cause of premature death worldwide. About half of all patients with T2DM die prematurely as a result of diabetic complications such as cardiovascular disease and renal failure. Complications associated with T2DM increase the social and financial burden. The patient dies every 10 seconds and the patient is amputated every 30 seconds. Much of the evidence so far emphasizes the importance of diet quality and quantity in diabetes management. Limiting carbohydrate consumption reduces the risk of type 2 diabetes.

However, it was found that 75.5% of PHC nurses had below average knowledge levels. This result is consistent with previous studies showing that nurses' nutritional knowledge of diabetes ranges from an average of 12.13 out of 20 to 49.44 out of 100. Contrary to ADA and WHO guidelines for diabetes management, only 50.9% of nurses agree that diabetic patients should limit their dietary trans fats. At the same time, elevated cholesterol and low-density lipoprotein (LDL) levels in diabetic patients increase the risk of heart disease, but more than half of nurses limit their intake of animal fat and daily cholesterol intake. I wasn't aware that I needed to limit. Lack of knowledge about the need to limit fat intake makes patient dietary compliance more difficult and increases complication rates, length of stay, readmission rates, mortality, and cost of care. In addition, few nurses were able to accurately state the average daily calorie content that would ideally be derived from carbohydrates and protein.

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