









Fig. 8 Other Miscellaneous Problems

**DISCUSSION:**

The sample size wasn't very big, so solid inferences can't be drawn, but the findings have been presented nevertheless. Majority of the affected population was male. Most of the Indian population believe that alcoholism and smoking are looked down upon, and since the sample size didn't consist of many youngsters, who are generally more upfront, (inclusion criteria was to choose only diabetics), there is a chance that not everyone answered to that question honestly. 13 out of 40 people experienced a depression-like phase at the onset of their diabetes. Since a fairly significant part of the sample size falls in this category, it is important that depression be considered an important co-morbidity that requires apt management because of its undeniable effect on quality of life [3]. The attitude exhibited by the people towards handling this condition was very positive, with a majority taking medicines, visiting doctors regularly, exercising, and making dietary and lifestyle changes to maintain glycaemic control.

**CONCLUSION:**

The increased prevalence of diabetes comes with the increased probability of end stage complications, like blindness, lower extremity amputations, coronary diseases leading to death[4]. The chances of co-morbid angina, myocardial infarction, hypertension, arthritis are largely increased in older patients with depression[5]. It is a well-

known fact that neuropathy often starts only as the patient is well into the disease or after a long period of onset of the disease in majority of the cases, which was affirmed in this research[4]. The commonly associated conditions amongst the oral conditions are dry mouth and tooth decay, of the cardiac and respiratory symptoms are chest pain, and shortness of breath, of the neuro-muscular and joint related problems are arthritis, and vision related problems. Apart from this, from amongst the rest of the conditions, depression, slow wound healing, fatigue and hypoglycaemic attack are prominent. Diabetes is not a singular condition, and is a spectrum of various other co-morbidities, which have to be identified and treated rightly by the doctor.

**REFERENCES:**

- [1] Amos A, Mc Carty D, zimmer P. The rising global burden of diabetes and its complications: Estimates and projections to the year 2010. *Diabetic Med.* 1997;14:S1-S85.
- [2] King h, Aubert R, Herman W. Global burden of diabetes, 1995-2025. Prevalence, numerical estimates and projections. *Diabetes Care.* 1998;21:1414-1431.
- [3] Goldney RD, Philips PJ, Fisher LJ, Wilson DH. Diabetes, Depression and quality of life. *Diabetes Care,* Volume 27, Number 5, May 2004; 1066-1070.
- [4] Bytzer P, Talley NJ, Leemon M, Young LJ, Jones MP, Horowitz M. Prevalence of Gastrointestinal symptoms associated with Diabetes Mellitus.
- [5] Black SA. Increased Health Burden Associated With co-morbid Depression in older diabetic Mexican Americans. *Diabetes Care* Volume 22, number 1, January 1999; 56-64.