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## Introduction

Diabetic persons have been at a higher risk of morbidity and mortality than the general population since the beginning of the COVID-19 pandemic. Hence, it is important for diabetic persons to have regular health care appointments to maintain good glycemic control to help prevent grave consequences. However, as a result of COVID-19 pandemic, along with imposed restrictions by the Government to curb the spread of infection, diabetes care and glycemic control have been critically limited. This study investigated and explored the challenges experienced by diabetic patients aged 30-65+ years old in Trinidad and how it impacted the treatment and management of their disease.

## Objective

Investigate barriers to proper management and treatment of diabetic patients as a result of the COVID-19 pandemic.

## Methodology

- The primary data collection method that was used was a 30- item questionnaire consisting of mainly open- ended questions.
- This study was originally intended to be conducted mainly online by sending participants a link to our online questionnaire via WhatsApp or Email
- This methodology yielded low responses so physical copies of the questionnaire were then distributed to staff at clinics & private institutions who facilitated distribution to patients.
- This study is a descriptive one following a retrospective qualitative design. Therefore, patients' treatment and management of their diabetes during the pandemic were noted then compared with a treatment and management of their disease prior to the pandemic to evaluate any changes.

## Results

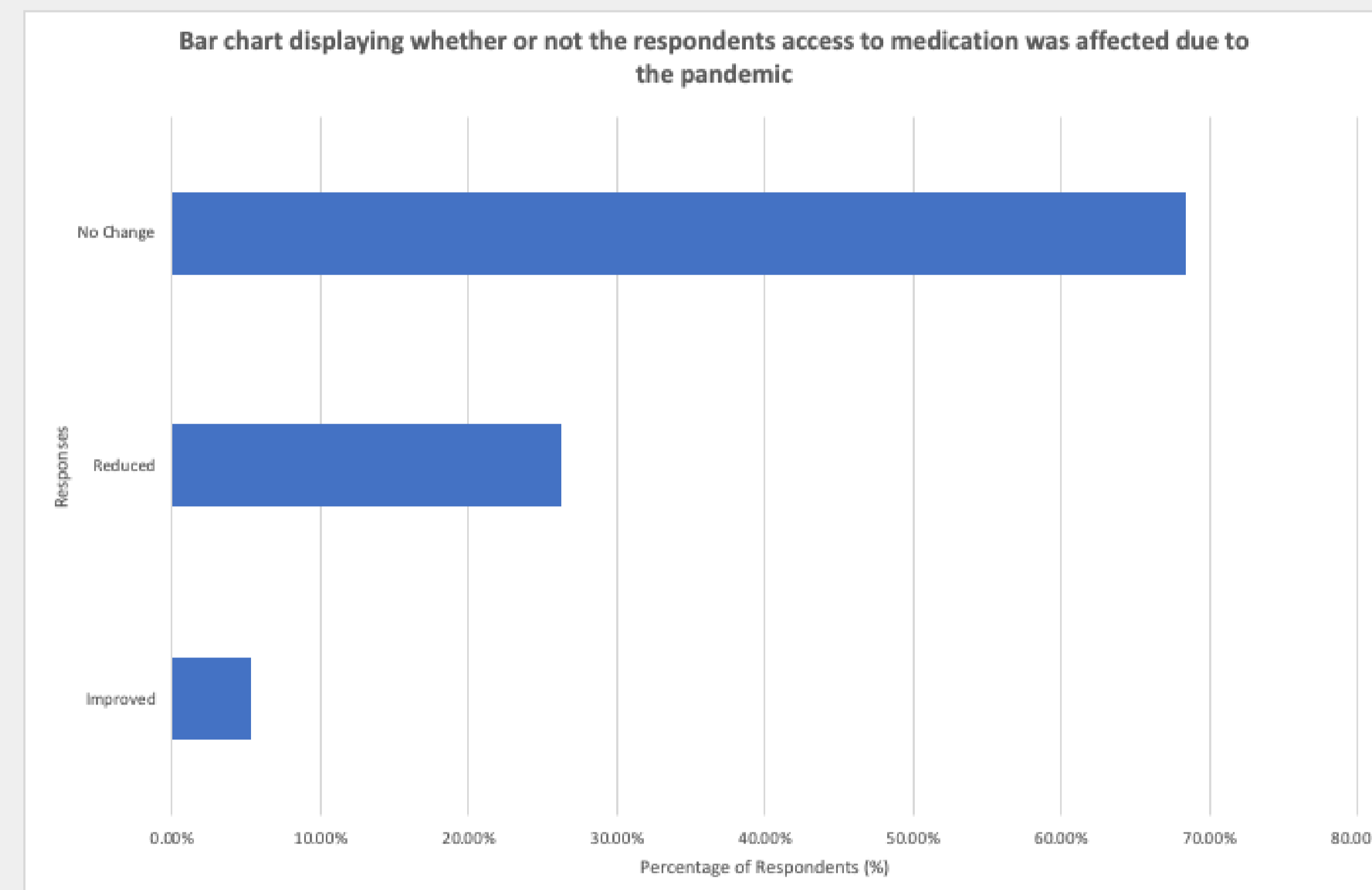


Figure 1. Bar chart displaying whether or not the respondents access to medication was affected due to the pandemic.

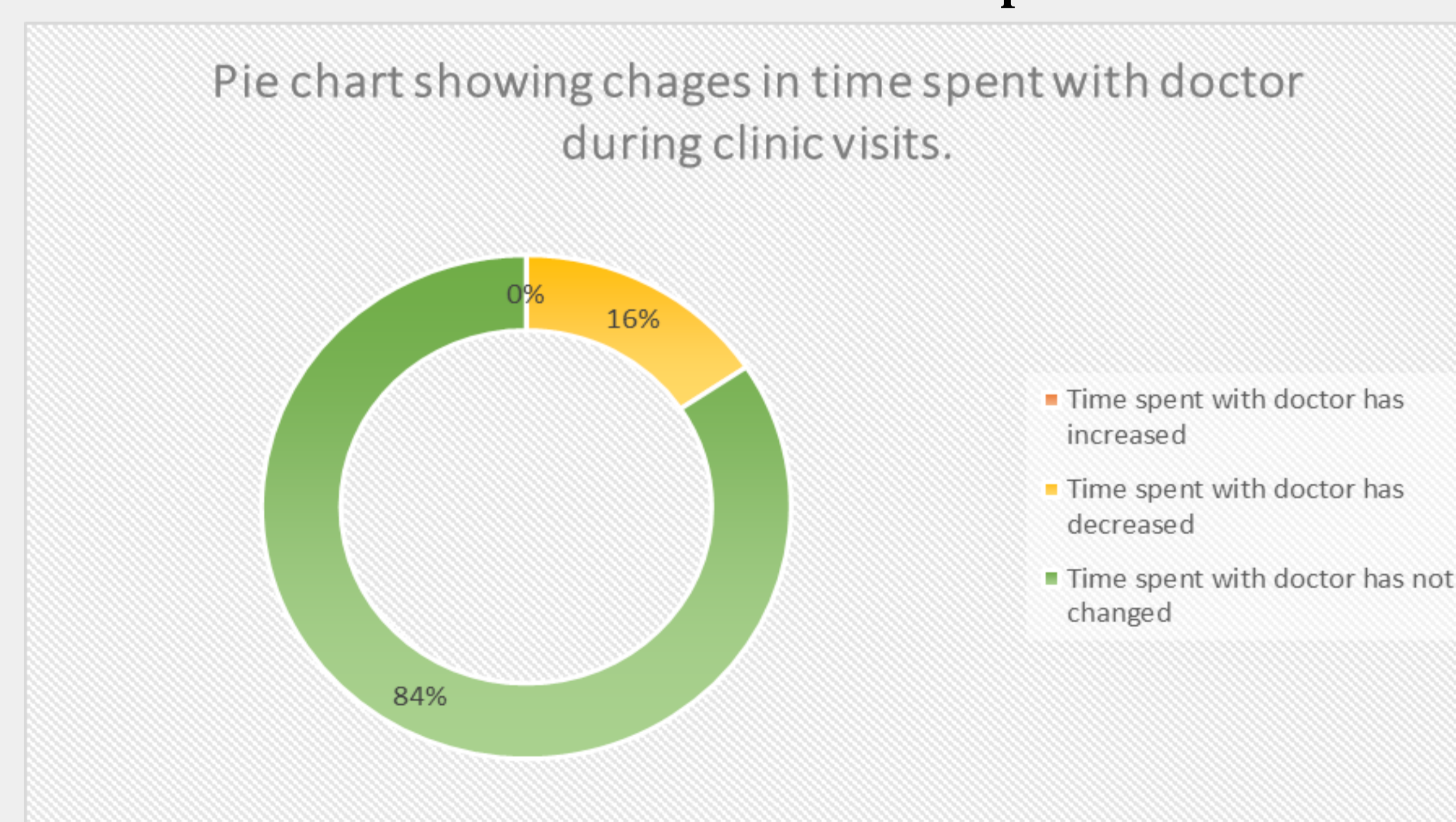


Figure 2. Changes in time spent with doctor during clinic visits.

Table 1. Percentage of patients who attended or did not attend routine check ups during the pandemic.

Variable	Percentage (%)
Patients attended Routine Check Ups	68.42
Patients did not Attend Routine Check Ups	31.58

## Discussion

- Participants 26.3 % said they had less access to medication because of COVID-19 restrictions, fear of contracting the disease, and medication availability.
- A reduction in the time spent with the doctor was reduced among 16% of the participants. The participants were unable to discuss all their medical issues with the doctors, leaving important questions unanswered. Participants' lack of proper guidance led to noncompliance with their treatment regime and the adaptation of an improper diet, which contributed to uncontrolled blood glucose levels.
- Approximately 32% of participants admitted to not attending routine check ups during the pandemic because their appointments were indefinitely postponed due to limited daily appointments and others simply wanted to avoid being in a COVID-19 high risk environment considering their immunocompromised state.

## Conclusion

Majority of the diabetic patients 30-65+ in Trinidad gave credence to the idea that there was no change in their ability to effectively manage their condition during the pandemic's inception and that management was good. According to patients who had agreed that there was a change, they would have indicated that due to time availability, there was a positive effect of ensuring that their management was top priority. On the other hand, patients who saw a reduction of management linked it to clinic/doctor appointment cancellation. Findings of our study suggest that improvements can be made to assist with the issues some patients faced regarding diabetes management. These include implementation of a tele-health system, increase availability of free glucose testing strips, and increase the number of doctors in the healthcare system .

## References

1. Rennert-May E, Leal J, Thanh NX, Lang E, Dowling S, Manns B, et al. The impact of COVID-19 on hospital admissions and emergency department visits: A population-based study. PLOS ONE [Internet]. 2021 Jun 1 [cited 2022 Jun 23];16(6):e0252441. Available from: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0252441>

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