

South East Asia

Participant characteristics

A total of 929 people from IDF's South East Asia Region participated in Taking Diabetes to Heart, of whom 63% (581 respondents) were male. A fifth (19%) were under the age of 40 and 29% were over 60. Equal proportions of about a fifth of respondents had been living with type 2 diabetes for fewer than three years, three to six years and six to nine years, while 38% had been living with the condition for more than nine years. The majority (65%) of the respondents had tertiary level education, 23% had secondary level education and a tenth had primary school education.

Knowledge of CVD and risk factors

A majority of participants correctly identified heart attack (65%), angina (59%) and stroke (51%) as types of CVD. Less well recognised CVD events included: heart failure (45%), peripheral arterial disease (32%), atherosclerosis (23%), brain haemorrhage (14%) and aortic aneurysm (14%). Additionally, 12% of participants stated that they did not know what constituted a CVD event or selected 'none' (Figure 33).

Figure 33: Knowledge of CVD – SEA

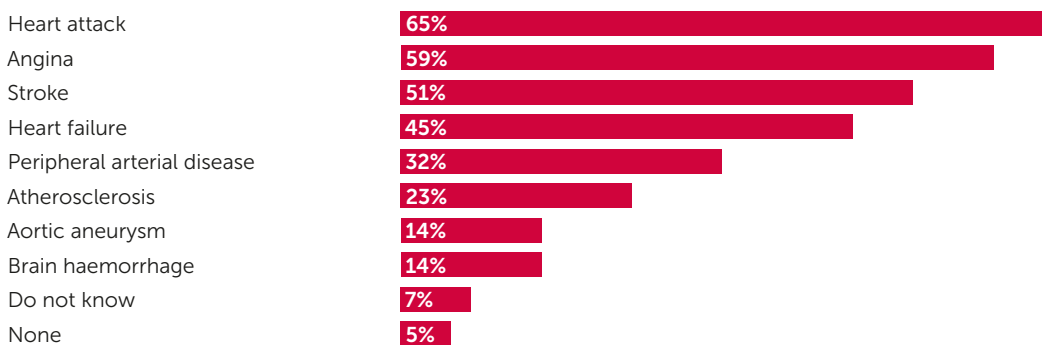
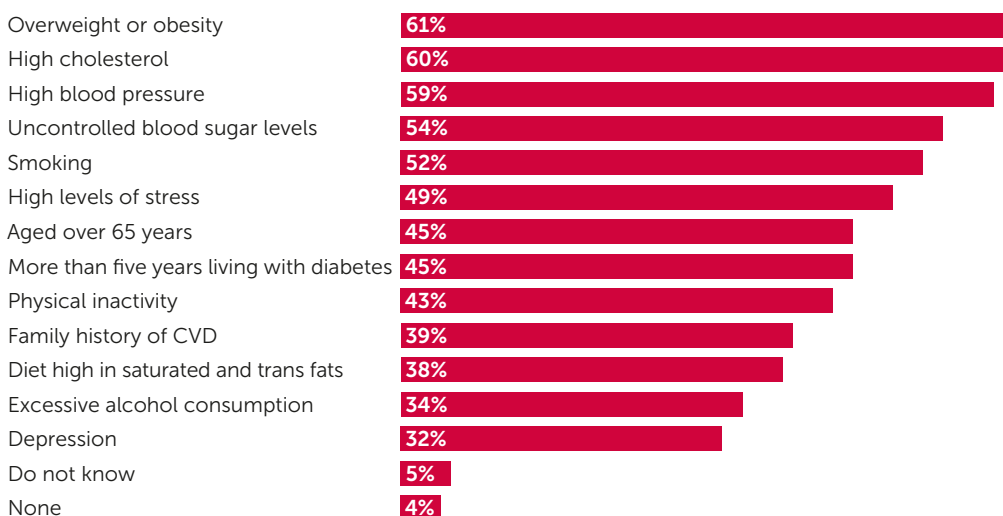


Figure 34: Knowledge of CVD risk factors – SEA

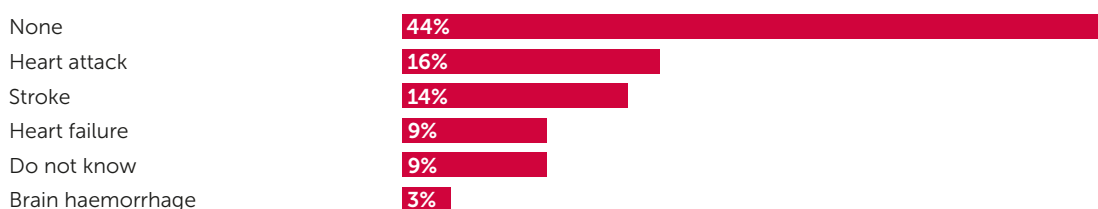


The majority correctly identified the following CVD risk factors: being overweight or obese (61%), high cholesterol (60%), high blood pressure (59%), and smoking (52%). Fewer than half were able to recognise high levels of stress (49%); being aged 65 or over (45%); living with diabetes for more than five years (45%); physical inactivity (43%); family history of CVD (39%); diet containing high amounts of saturated and trans fats (38%); excessive alcohol consumption (34%); or depression (32%) as risk factors for CVD. Additionally, 9% of participants stated that they did not know or selected 'none' (Figure 34).

Awareness of CVD and risk factors

When asked to self-evaluate CVD risk, 51% of the participants reported that they were at no or low risk. Thirty-nine percent thought their risk of developing CVD was somewhat or moderate, and only 10% thought they had a high risk. Risk factors cited by participants included living with diabetes for more than five years (58%), and uncontrolled blood sugar levels (56%). The least reported risk factors in this population were depression (31%) and excessive alcohol consumption (23%). A large number of participants (44%) had not experienced any CVD events. However, 16% had experienced heart attack, 14% stroke, 9% heart failure, and 3% brain haemorrhage, while 9% selected 'do not know' (Figure 35).

Figure 35: Experienced CVD events – SEA



Education about CVD

Around a fifth (19%) of participants reported that they had never had a conversation with a health professional about type 2 diabetes and CVD risk. An additional 7% were not sure or unable to recall any such conversation.

Only 18% had had a conversation with a health professional before being diagnosed with type 2 diabetes, while 31% had discussed CVD risk with them at the time of their diagnosis or soon after. A further 14% had talked about CVD risk with a health professional several years after their diagnosis with T2D. A minority (5%) had had this conversation at the time of or soon after their diagnosis with CVD, while 3% only discussed risk factors several years after being diagnosed with CVD. Five percent of participants reported having had this conversation on several occasions. Of these, 45% had discussed CVD risk factors with a health professional within the previous six months. Twelve percent had discussed CVD more than six months previously, and 22% more than a year ago. Seventeen percent had never discussed CVD with a health professional, and 3% were unsure if they had discussed CVD or not.

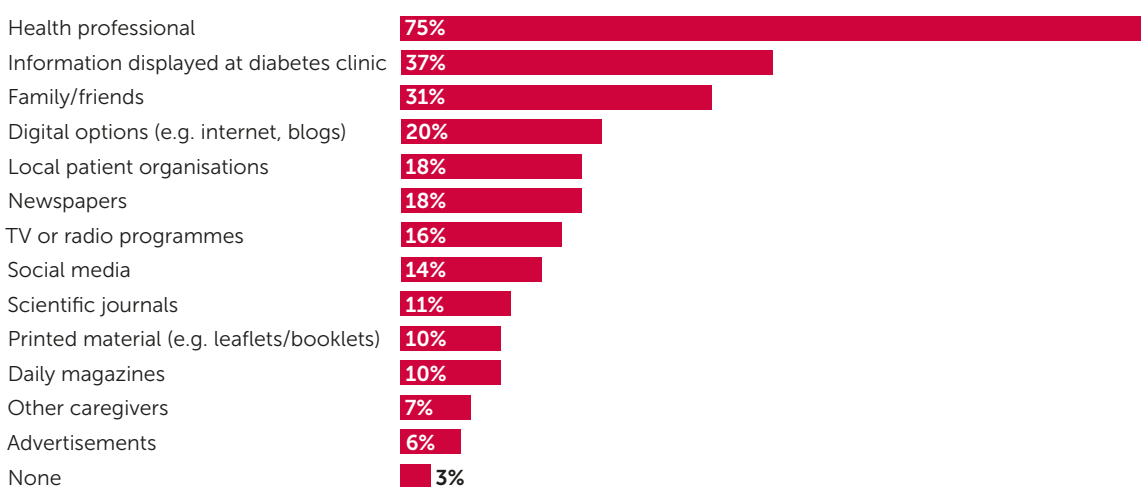
When responding to true/false statements, 86% of participants indicated that they could lower their risk of CVD through healthy diet and physical activity. Less positively, 28% felt that they were too young to worry about the risk of CVD, despite living with type 2 diabetes.

Close to or more than half of participants reported that they needed more information on CVD. Proportions ranged from 48% who indicated that they required advice on how to control and self-manage hypertension, to 64% who needed information on diabetes self-management.

Information about CVD

The majority of participants (75%) reported that they relied on a health professional for information about CVD. A further 37% depended on information displayed at a diabetes clinic and 31% relied on CVD information from family or friends (Figure 36).

Figure 36: CVD information sources on which the participants rely – SEA



Survey results for this group of respondents found that 41% were very satisfied with the quality of information received from a health professional, followed by diabetes clinics (25%). The highest level of reported dissatisfaction was among the 24% of participants who were very unsatisfied with the quality of information obtained from local patient organisations, followed by advertisements (23%), caregivers (22%), daily magazines (21%) and, surprisingly, scientific journals (21%).