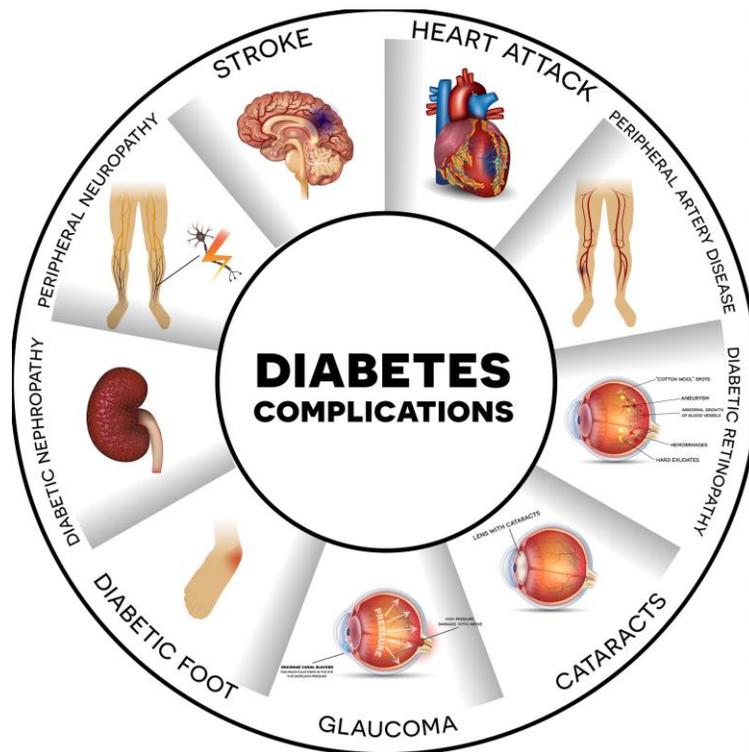




Diabetic Pioneers of Tanzania

Type 2 Diabetes in Tanzanian women is a devastating chronic illness. As reported in the **CITIZEN NEWSPAPER** on July 12, 2017 - multiple studies have shown that Tanzania's increased wealth, urbanization, changing lifestyle, changes in eating habits, more sedentary work practices and an increasing aging population.... have all lead to an increased risk of Tanzania women developing diabetes. At any time, roughly 9% of all Tanzanian women have diabetes. Out of these, only half are aware that they have the disease.

Only 10% of those who are aware, are actually on treatment. Unfortunately, untreated diabetes is devastating to the human body. High levels of blood sugar damages the long nerves of the legs and feet. As a result, diabetics lose feeling in their feet and often injure themselves unknowingly. These wounds can become infected and the high levels of blood sugar impair wound healing. Diabetics often suffer from chronic slow healing wounds of the legs. Far too often these festering wounds lead to lower extremity amputations. Chronic high levels of blood sugar often cause direct damage to organs. This is why diabetics are more likely to have heart disease and kidney failure. Direct damage to the small blood vessels of the eye will lead to blindness if left untreated. High blood sugar levels also impair the immune system. This explains why malaria is more severe in diabetics. Diabetics are three times more likely to develop tuberculosis than non-diabetics.



Diabetes not only damages the body physically; the emotional impact of diabetes is equally if not more devastating. A group of researchers have done an excellent job of assessing the impact of diabetes in Tanzania (<https://doi.org/10.1371/journal.pone.0178396>). These researchers conducted forty-one in-depth interviews with diabetic patients and family members of diabetic patients. Their findings offer us a glimpse into the life experience of Tanzanian women living in rural areas suffering with diabetes. Some of the women they interviewed shared how having high blood sugar levels made them feel. One woman stated, “Sometimes even washing and cooking at home happens to be difficult. I feel ill and weak all the time and my body is weaker. So I just lie down a lot waiting for my daughter to help me with all that. . .” Family members of those with diabetes are also impacted. One woman shared about how a family member’s diabetes has impacted her work-load, “. . .she is not able to do anything tough . . .I mean she’s turned into someone we have to look after like a child. . . you have to find food and cook for her . . . only on rare occasions can she cook for herself but you need also to make sure everything is closer to her . . . Honestly, this is a very strange/bad illness . . . it can make a person completely disabled”

Another woman commented on the difficulty of managing her high blood sugar through making the necessary dietary changes. She stated, “. . .the main challenge I see is getting used to the food . . .myself, I have diabetes and BP (blood pressure). I was advised to stop salted and sugary foods . . .so you can imagine this is something that I had never thought about. . . but I had no choice. . . .at first it was really difficult; I could not manage it and as a consequence I was always sick . . . the sugar was very unstable and the BP was rising all the time. . .” Another woman stated how her diabetic diet was a challenge to food preparation as well as to their food budget. She states “The fact that we have to differentiate my food from that of the rest of the family is already a challenge on our budget on food. It means not only cooking two pots; also, the type of food that I am recommended to use is not easily accessible and again it is very expensive compared to that of the rest. . .”

Type 2 Diabetes is a devastating chronic illness that not only has physical consequences; the emotional and psychological impact can also be devastating to women and their families. This is a disease that is not just about blood sugar levels, pills and insulin. This disease is about 9% of Tanzanian women who are going through a challenging life experience that is new to them and their communities. These women and their families are not passive; they are trying to manage a disease in the setting of limited resources. The aim of this article was to put a human face to a disease in order to inspire us non-diabetics to be an addition to the ground-breaking work started by the diabetic pioneers of Tanzania - who happen to be women.



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