



CHAPTER I

INTRODUCTION

Diabetes Mellitus (DM) is a significant public health problem and a major cause of death in Thailand since 1980 (Medical department, 1999). World Health Organization estimated that in 2015 there would be 1,923,000 cases of Diabetes in Thailand (Supawan Manosounthorn, 1999) or 4 out of every 100 people (Thep Himathongkam et al, 1997). Early case finding is important because it convinces the prevention of subsequent complications i.e. cardiovascular diseases. Besides, it also causes other complications e.g. ocular, renal and nervous complications, which bring disability or death. In Thailand and Asian region countries, 99% of patient found NIDDM and more in female than male, which is similar to the US of 90% (ADA, 1996)

Control and Prevention of Diabetes Mellitus - Hypertension Program (CPDP) in Phayao municipality started in 1999 and continued in every year by collaboration of Department of Social Medicine of Phayao general hospital and village health volunteers (VHVs). These program aimed at early case finding through screening in order to provide treatment, complication control and rehabilitation as indicated in Diabetes – Hypertension control guideline of Department of Social Medicine of Phayao general hospital. Total 5,791 people from 13 communities in Phayao municipality, aged 40 and above, were screened for diabetes and hypertension.

The program aims to reduce the morbidity and mortality of diabetes and its complications and targeted to serve at least 10 % of people at risk. The following objectives to support the program goal are to: (a) increase public awareness of seriousness of diabetes, its risk factor, and potential strategies for preventing diabetes and its complication and (b) improve understanding of diabetes and its control and to promote self management behavior among people with diabetes.

Chapter 2, reviews literature and reviews the situation of diabetes in Thailand, in the region 10, and in Phayao from 1995 to 2000, the diabetes screening in Phayao municipality from 1999 to 2000, guideline for prevention and control and diabetes treatment, and related studies.

Chapter 3, the program evaluation is shown including objective, target population and sample group characteristics, tool, data collection, analysis, and results.

Chapter 4, Discussions and Conclusions, the conclusion of program evaluation is clarified including objectives, sampling, tool, results of evaluation i.e. preparation, intervention, knowledge and self-care practice of participating people at risk and diabetic patients.

Chapter 5, recommendations are presented in accordance with the evaluation results for the future benefits of the program.