Hypotheses

H1: There is a significant level of blood sugar among patients experimental I and experimental group II before and after Amla juice and Curry leaf.

H2: There is a significant effectiveness of Amla Juice and Curry leaf on blood sugar among patients in experimental group I and II.

H3: There is a significant association between post test scores of blood sugar level among experimental group I and II of patient and their demographic variables.

NEED FOR THE STUDY:

Type II diabetes mellitus is a growing problem worldwide. India has the highest rate of diabetes in the world and Indians are particularly known to be at risk of developing the disease.

As per the diabetic statistics 2010, include the fact that there is one person in the world dying of diabetes every 10 seconds. Also there will be 2 new diabetic cases in the world being identified every 10 seconds.

Two major concerns are that much of this increase in diabetes will occur in developing countries, due to population growth, ageing, unhealthy sicks, obesity and
sedentary life styles and there is a growing incidence of Type II diabetes – which accounts for about 90% of all cases at a younger age.

(CD Rajiv Gupta 2008) Eye

and Kidney disease are more common in India because of poorer diabetic control and late diagnosis of disease by which time complications such as eye and kidney disease have already developed.

(Rahul Potluri, 2007) There are 6 million new diabetes sufferers in the world each year. Diabetes is now the fourth biggest cause of death worldwide. One million amputations each year are caused by Diabetes. Diabetes raises the sufferer’s risk of developing a cardiovascular disease by two to four times. It is estimated that diabetes accounts for 5% to 10% of nation’s health budgets.

Economic Burden to Nation:

Due to its chronic nature, the severity of its complications and the means required to control them, diabetes is a costly disease, not only for affected individuals and their families, but also for the health systems.

Studies in India estimates that, for a low income Indian family with an adult with diabetes as much as 25% family income may be devoted to diabetes care.

(ShabanTharkar – 2008)

Death and Disability

The International Diabetes federation (2010) estimates that the equivalent of an additional 23 million year of life are lost each year to the disability and reduced quality of life caused by diabetes complications.

In a recent study, Indians are susceptible to major complications related to diabetes like coronary artery disease, neuropathy, nephropathy and retinopathy. Prevalence of the complications are higher in low socio economic groups due to lack of good control of glycaemia and hypertension also due to behavioral factors.

There is an urgent need to implement preventive measures to reduce the high morbidity and mortality and to reduce the cost burden to patients and to the society.

(A Ram Chandra,