Background: Globally diabetes is an epidemic. Over 19 million adults in Africa have diabetes. If current trends persist, it is estimated that this number will exceed 41 million by the year 2025. The economic implications for a continent with weak systems are dire. Type II diabetes is the commonest type of diabetes and constitutes over 90% of all diabetes. Type II diabetes is a potentially reservable disease however there is a critical period beyond which reversibility is no longer possible. Driving type II diabetes into remission is most feasible early in the disease, some studies have suggested, within the first 6 years of diagnosis.

Achieving tight glycaemic control early in the disease is not only associated with remission but also with more favourable long-term outcomes and fewer complications. The complications of diabetes (e.g. blindness, amputations, renal failure) are life-changing and devastating. Daily routines determine glycaemic control and thus outcomes of diabetes. Behavioural choices e.g. meal timing and portions, levels and intensity of physical activity, adherence to insulin therapy impact heavily on glycaemic control. Diabetes self-management education may influence these behavioural choices positively. Diabetes specific education may equip patients with the skills they need to handle the burden of care imposed by diabetes. Diabetes self-management however requires a high level of literacy especially, where insulin therapy is involved. In low resource settings in Africa, literacy and health literacy levels are low. Expertise in diabetes is also extremely limited. Having a structure/ formal curriculum for DSME makes it reproducible and scalable. Compared to adhoc sessions, structured DSMES is less dependent on the availability expertise.

Aim research project: To review literature and present evidence on the outcomes of structured DSME compared with unstructured DSME in persons newly diagnosed with diabetes and on insulin in low resource settings with a focus on Sub-Saharan Africa.

Project activities and required skills: We are looking for students who want to participate in a systematic review.

Research project: This study will be a systematic review of literature conducted according to the recommendations outlined in the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) statement. A review will be conducted on articles reporting on the outcomes of structured diabetes self-management as compared to unstructured diabetes self-management.

Output: Experience in systematic review. A scientific report, with the possibility to publish it in a peer-reviewed journal.

Skills: Being able to work independently

Profile: Flexibility, enthusiasm, hard worker

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