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### **Factors effecting the initiation of insulin therapy in type 2 DM patients in primary care: perspective of family physicians**

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**Background and Aim:** Delay on beginning insulin therapy to the patients with type 2 diabetes causes the progression of complications, leads increases in health expenditures. GP/FPs should be effective at every step of the management of Type 2 diabetic patients. However, GP/FP s hesitate to start insülin therapy when it s neccessary. In this study, it is aimed to determine the the behavior of GP/FPs on initiating insulin therapy and reasons to avoid taking responsibility in type 2 DM.

**Method:** The study was designed as cross-sectional pattern. It was projected to reach 25% of 1141 GP/FPs who work at family health centers in Izmir. The questionnaire was prepared by the researcher based on the qualitative study conducted prior to this research. SPSS ver.15 was used for data analysis.

**Results:** 400 GP/FPs participated in the study. The mean age was  $47.35 \pm 5.68$ . 61,2% of them were male. 45,3% of them did not get any postgraduate training regarding with insulin therapy. 89,8% of them were usually able to start OAD therapy, 48,1% could easily switch between OADs.100% of them could advise life-style changes. On the other hand 82% of them could decide to begin insulin, but only 6,6% of them could begin insulin therapy. 2,1% of them could stop insulin therapy when it is neccessary. Although, 70,5% of them reported that GP/FPs should begin insulin therapy. The main obstacles for not to begin insulin therapy were lack of experience (61,8%), fear of hypoglycaemia (52,8%), lack of time (48,6%), fear of malpractice (48,3%). 75,6% of them remarked that beginning insulin therapy confidently could only be done by having a consultancy that could be reached easily.

**Conclusion:** GP/FPs admitted that they have an important role to begin insulin therapy. Lack of knowledge and experience were the main reasons for not beginning insulin.