Riding the Diabetes Rollercoaster
A new approach for health professionals, patients and carers

The book provides a new approach in looking at diabetes as a health problem with complex dimensions affecting patients, their families and health professionals. The authors have adopted a particular approach to diabetes, starting with a brief introduction to diabetes, outlining some of its main aspects and charting historical developments to show why it is such a perfect example of a complex system. They highlight the growing number of patient with diabetes worldwide, now reaching epidemic proportions, and the consequent social and economic impacts.

In the second chapter, they introduce the reader to the basics of complexity science. Using a historical approach, the authors chart the pathways of complexity’s emergence out of the natural sciences in the early twentieth century and its spilling over into the medical and social sciences at the end of that century. Following this historical and theoretical exposé, they apply different concepts of complexity to the management of diabetes.

Diabetics run the additional risk of developing psychological problems; indeed, the prevalence of mental health problems in people with diabetes exceeds that found in general populations. Therefore, in chapter 4, the authors approach the psychological aspects of the problem of balancing patients’ mood swings due to the anxieties caused by diabetes. They also discuss negative attitudes, coping difficulties, eating disorders, depressions, anxiety and other disorders which frequently complicate the health care of diabetics and are often missed. Poor psychological functioning causes suffering, can seriously interfere with daily diabetes self-management, and is associated with poor medical outcomes and high costs. They highlight the need to integrate personal experiences into the educational process, so acknowledging the expertise the patient develops from living with diabetes. In chapter 5, the authors discuss the complexity of the management of diabetes viewing, on the one hand, the medical expert’s emphasis on the importance of glucose control. On the other hand, they discuss the patient’s viewpoint on living with diabetes on a day-to-day basis and so acquiring valuable knowledge and experience of their condition and its management. Ultimately, they therefore become experts in living with their disease.

The authors also contrast the hierarchical with the interactive approach to the management of diabetes. The emphasis is on how to help diabetics of all ages to understand and communicate what is happening to
them. The design of interactive counselling and learning aids is also discussed; for example, three ‘Diabetes Boxes’, each one a three-dimensional hand-made cube, can be used to stimulate discussions and to help people to develop knowledge and understanding of the biological and psychological concepts relating to diabetes, and help them to understand and express their feelings about having the disease. Each box relates to a specific theme. The idea of the three-dimensional diabetes boxes is to encourage people to make their own box modelled on their own particular needs or situation.

The sixth chapter discusses diabetes as a cascade of complexity. It is presented as a gateway event for anyone developing the disease since it combines new regularities (monitoring diet, exercise, blood glucose levels, etc.) with the new, unpredictable events (integrating one’s lifestyle with new regularities, personal reactions, patient-career relationships, family responses, etc.). Once someone passes through the gateway, they can not go back. The main point of this chapter is that helping patients to make most of their walk is the truly caring approach expected from health professionals and others.

In chapter 7, there is an emphasis on the management of diabetes through complementary therapies. It covers lifestyle therapies such as medications and relaxations; Eastern therapies such as Chinese medicine and acupuncture; natural therapies such as herbalism and homeopathy; manipulative therapies such as chiropractic and osteopathy; mind therapies such as hypnotherapy and spiritual healing, and the arts such as dance, music, and art. Combining modern and complementary medicine provides the best of both approaches and would seem to be common sense. However, the scientific barrier that lies between them is both a lack of research to prove the effectiveness of complementary therapies and the difficulty of applying the methods of conventional medical research to such treatments. Notwithstanding, relaxation therapy is presented as a widely used and scientifically proven diabetic therapy.

The final chapter of this book summarises for the reader the effectiveness of the complexity approach for dealing with diabetes: the recognition of the importance of the interwoven physical and mental aspects of diabetes. It argues that if one is going to support people with diabetes effectively the health system must pay more attention to and spend more money on mental health aspects. Similarly, complementary therapies that have been shown to have an impact on mental health must be researched to support their common use in medical practice. The complexity approach, which was outlined in this book, is a radical new approach to understanding and managing diabetes that embraces its challenges and uncertainties using the latest advances in complexity theory. From this perspective, the diabetes rollercoaster is a normal curve and is a mirror of life itself. Learning this tool may alter the approach to diabetes.

This book is a good and interesting read for anybody dealing with diabetes, including health professionals, careers, families and patients themselves.

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