

Selection of Allopathic System of Medicine by Diabetic Patients

Thanga Sheeba C

Research Scholar, Post Graduate and Research Centre
Scott Christian College (Autonomous), Nagercoil -629 003
Affiliated to M. S University, Abishekkapatti, Tirunelveli -627012, Tamil Nadu, India
Corresponding Author E-mail id: jbsrctss@gmail.com

Abstract — Diabetes is a chronic disorder of metabolism of carbohydrates proteins and fat due to complete or virtual shortage of insulin secretion and with unreliable measure of insulin resistance which can be characterized by hyperglycemia, glycosuria and hyperlipidemia balance. To analyses the selection of allopathic system of medicine by diabetic patients in kanniyakumari districts. The present study is based on primary data. Primary data have been composed with the help of pretested interview schedule administered to the respondents in the selected study area. Since the Pseudo R^2 is 0.7862 in the probit regression model of diabetic patients, they have the nearest positions about the ranking the reasons for choosing government hospitals for treatment in the study area. A large number of diabetic patients have preferred allopathic medicine. Most of the patients depend upon allopathic medicine. The model was significant at 1 per cent level of significant. The coefficient of total cost of treatment was found to be negative and significant, meaning that getting treatment in allopathic system of medicine involved more treatment cost than the other medicine systems, so the probability of selecting allopathic medicine was negatively related with the total cost treatment.

Keywords — Teacher Innovation; Distance Learning; Disabled Students.

1. Introduction

Diabetes is a chronic disorder of metabolism of carbohydrates proteins and fat due to complete or virtual shortage of insulin secretion and with unreliable measure of insulin resistance which can be characterized by hyperglycemia, glycosuria and hyperlipidemia balance . It has now become a pandemic with worldwide occurrence of 5% in the common population. Up to 171 million people about the world have diabetes with this form possible to more than double by 2030. Nearly 3.2 million deaths taking place each year are held to be attributed to troubles of diabetes, 6 deaths every minute. The top 10 countries in facts of nation suffer from diabetes are India, USA, China, Japan, Indonesia, Pakistan, Brazil, Russia, Italy and Bangladesh.

Allopathic medicine used for the treatment of diabetes have their own side effect & adverse effect like hypoglycemia, nausea, vomiting, hyponatremia, flatulence, diarrhea or constipation, alcohol flush, headache, weight gain, lactic acidosis, pernicious anemia, dyspepsia, dizziness, joint pain. So instead of allopathic Formulation, herbal medicines are a great choice which is having more or less consequence & unpleasant effects. Ayurvedic Medicines derived from medicinal plants are used by about 70% of the world's population. Ayurvedic medicine used for avoidance of diabetes mellitus and has good marketed formulations specially in India

The model was same for all probit regression analysis for allopathic system of medicine. The independent

variables have not been changed and only the dependent variable was changed in each model. In the present model the dependent variable was allopathic system of treatment for diabetic patients.

2. Result and Discussion

The present results of the estimated coefficients from probit model. The model was approximate by the maximum likelihood method. The model was significant at 1 per cent level of significant. The estimated coefficients and their respective 'z' values revealed the important factors that have affected the selection of allopathic system of medicine by diabetic patients. A statistically significant coefficient suggested that the likelihood of selection of allopathic system of medicine was influenced as the response of the explanatory variable. The likelihood ratio test statistic results of the model indicated that 11 variables are statistically significant at 1 per cent, and 5 per cent levels. The calculated McFadden's Pseudo- R^2 value was 0.7862. This value illustrated that the explanatory variables placed in the model explained high level of the probabilities of selection of allopathic system of medicine by diabetic respondents.

The researcher tried to include all personal, health and economic variables in the model but the variables Existence of co-morbidity, and Duration of co-morbidity were not statistically significant. In other words, in contrast to the expectation, these variables did not have any significant impact on the selection of allopathic medicine system by diabetic respondents. The constant of probit regression was significant at one percent level. Therefore,

the ratio for selecting allopathic system of medicine was 1: 1.30 times; explained that if one diabetic respondent has not selected allopathic system of medicine, then 1.30 diabetic respondents have selected allopathic system of medicine for treatment. It showed that in the study area majority of the diabetic respondents have selected allopathic system of medicine for their treatment.

The coefficient of age was negative and significant as expected, revealed that the diabetic respondents in the age group of below 40 years have more likely to select allopathic medicine system than the diabetic respondents in the age group of above 40 years. It exhibited that the young patients have wanted immediate recovery from their disease so they have preferred allopathic system of medicine.

Gender is an important factor to select allopathic as their system of medicine for the disease. The coefficient of gender was positive and significant, it indicated that the probability of selecting allopathic system of medicine was found more in male diabetic respondents compared to female diabetic respondents.

Interestingly, the coefficient of education was found to negative and significant impact on selecting allopathic medicine system, revealed that the probability of selecting allopathic system of treatment was found high among the illiterates and those who have completed school level education. It articulated that the literacy level of diabetic respondents has helped them to compare the cost, curability and other factors regarding different systems of medicine. It is surprise to see that the coefficient of occupation of the diabetic respondents was found to be statistically significant and negative, demonstrated that the probability of selecting allopathic medicine was high among the daily

wage earners and private employees. Because the daily wage earners and private employees cannot take sufficient days of leave for treatment in non-allopathic system of medicine, so they have preferred allopathic system of treatment. The coefficient of the variable age of disease was found out an important health factor for the probability of selecting allopathic system of medicine by the diabetic respondents. In estimated model, the age of disease variable was statistically significant and positive, which demonstrated that when the age of disease was high, the possibility occurrence of co-morbidity was also high. So the respondents with chronic diabetic condition were more likely to select allopathic system of treatment.

The positive sign of the coefficient of the variable present stage of the disease indicated that when the diabetic was chronic and critical, then the tendency of preferring allopathic medicine system increased among the diabetic respondents.

It is important to note that the household wealth and household income of diabetic patients played a statistically significant and positive role in section of allopathic system of medicine which showed that section of allopathic system of medicine was driven by household wealth and income increases.

It could be known from the significant and negative sign of the coefficient of the variable household debt that the probability of selecting allopathic system of medicine was decreased when the household debt of the diabetic respondents has increased. The reason could be the allopathic medicine system was comparatively costlier than the other system of medicines. Hence the debt burden of the diabetic respondents has negatively affected the selection of allopathic system.

Table 1. Results of Profit Regression for the Selection of Allopathic System of Medicine by Diabetic Patients

| Dependent variable = Allopathic | | | Number of observations = 136 | | | |
|---------------------------------|--------------|------------|-----------------------------------|-------|---|--------------------|
| | | | LR chi ² (11) = 174.72 | | | |
| Log likelihood = -98.126295 | | | Prob > chi ² = 0.0000 | | | |
| | | | Pseudo R2 = 0.7862 | | | |
| Variables | Coefficients | Std. Error | Z | P> | z | 95% Conf. Interval |
| Constant | 1.3076 | 0.5184 | 5.48 | 0.000 | | 1.8226 3.8549 |
| Age | -0.1460 | 0.2052 | -2.79 | 0.005 | | -1.3200 -0.2310 |
| Gender | 0.6459 | 0.2778 | 3.19 | 0.001 | | 0.4541 0.1085 |
| Education | -0.2813 | 0.0881 | -3.22 | 0.001 | | -0.1535 -0.6307 |
| Occupation | -0.1480 | 0.3586 | -2.53 | 0.011 | | -0.6053 -0.0772 |
| Age of disease | 0.6283 | 0.3890 | 4.77 | 0.000 | | 1.1170 2.6759 |
| Present stage | 0.3946 | 0.4861 | 2.08 | 0.038 | | 0.0020 0.0682 |
| Wealth | 0.5480 | 0.4267 | 2.10 | 0.036 | | 0.0081 0.8459 |
| Income | 0.4921 | 0.2778 | 5.21 | 0.000 | | 1.0808 1.1870 |
| Debt | -0.7755 | 0.2778 | -2.40 | 0.016 | | 0.0464 0.4592 |
| Income loss | 0.2813 | 0.2379 | 5.56 | 0.000 | | 0.5510 1.1510 |
| Total Cost | -0.1687 | 0.1057 | -4.33 | 0.000 | | 0.6442 1.7086 |

Source: Field survey data computed by researcher

3. Conclusion

The coefficient of the annual average income loss found positive and significant. It revealed that when the annual average income loss of the diabetic respondents has increased, the probability of selection of allopathic medicine system has also increased. Because taking treatment in non-allopathic system has resulted in more man-days loss and thus income loss. Hence, the diabetic respondents have more likely to select allopathic treatment.

The coefficient of total cost of treatment found to be negative and significant, meaning that getting treatment in allopathic system of medicine involved more treatment cost than the other medicine systems, so the probability of selecting allopathic medicine was negatively related with the total cost treatment.

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