8. RECOMMENDATIONS

The onset of diabetes during last decade has reduced from 40 years to 30 years, hence the increased burden for Indian health care system to meet the growing demand for newer molecules for treatment of DM. Number of treatment options are limited in government sector hospitals, thereby newer strategies using available anti diabetic agents are essential. The proper utilization of available Siddha formulations can be one better way, provided an effective monitoring program is in place. There is also a significant number of depression seen in T2DM patients. In order to effectively monitor and control the progression of the DM, every hospital should have a healthcare professional called as Diabetic Advisor (DA). The qualification and eligibility for DA can be Pharmacy or Medical graduate along with minimum of 6 months of training in the Diabetes Mellitus Medication Therapy Management. For efficient functioning of DA, the DA to DM patient ratio should be around 1:10 to 1:15.

Also the role of Community Pharmacist (CP) in Diabetes management needs to be improved in India. As CPs are final and regular contact point for the ambulatory DM patients, without their contribution the early detection of diabetes, proper management and delaying the diabetes related complications can’t be achieved. Suitable continuing pharmacy education program national wide along with reasonable incentives, implementing diabetes monitoring program through collaboration with health care systems which also include pharmacy colleges and Diabetic Associations which are required to facilitate better diabetes management services.