

The differences in health-related quality of life between younger and older adults and its associated factors in patients with type 2 diabetes mellitus in Indonesia

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Abstract	<p>Background It is well known that diabetes mellitus (DM) affects health-related quality of life (HRQOL) in both younger (aged 18-64 years) and older adults (aged \geq 65 years). However, to date, no study has compared HRQOL and its predictors between younger and older adults with DM in Indonesia. Such a comparison is important because the results can guide nurses and clinicians to establish evidence-based educational programs that are specific and suitable for patients. Therefore, the aim of this study was to investigate the difference in HRQOL and its predictors in younger and older adults with DM in Indonesia. Methods A cross-sectional study was conducted on 641 patients with type 2 diabetes mellitus (T2DM) who were recruited via simple random sampling from 16 primary health centers in Banyumas Regency, Indonesia. A self-administered questionnaire containing the Summary of Diabetes Self-Care Activities, the DDS17 Bahasa Indonesia, the Beck Depression Inventory II, the Self-Efficacy for Diabetes Scale, the Family APGAR, and the 36-item Short-Form Health Survey was used to measure diabetes self-management (DSM), diabetes distress (DD), depression, self-efficacy, family support, and HRQOL, respectively. Independent t-tests were used to compare the physical component summary (PCS) and mental component summary (MCS) scores between younger and older adults with T2DM. Hierarchical multiple regression analyses were used to examine the factors associated with HRQOL in both groups. Results PCS scores were significantly different between the two groups. Older adults reported lower PCS scores than younger adults. No differences between the two groups were observed in the MCS scores. The hierarchical multiple regression analysis showed that level of education, employment status, number of diabetes-related complications, DSM, DD, depression, and self-efficacy were significant predictors of HRQOL in younger adults, while income, depression, DD, and self-efficacy were significant predictors of HRQOL in older adults. DD was the strongest predictor of HRQOL in younger adults, and depression was the strongest predictor in older adults. Conclusion Older adult patients had lower PCS scores than younger adult patients. This study is the first to show that the predictors of HRQOL differ between younger and older adults with T2DM. It provides insights for nurses and clinicians in Indonesia to establish evidence-based, age-specific educational programs.</p>
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