

Nursery education for diabetes

Abstract

Nursery education in schools plays key roles for medical practice in nurse career. However, nursery service in hospitals needs a lot of experience and experts. To promote medical and technical knowledge, different nursery skills and participation for diabetes are particular discussed in this article.

Keywords: healthcare, nursing, medical service, modern technology, education, psychoanalysis, diabetes

Volume 7 Issue 2 - 2020

Da-Yong Lu,¹ Yu-Zheng Chen,² Da-Feng Lu²

¹School of Life Sciences, Shanghai University, China

²The Second Hospital of Neijiang District, China

Correspondence: Da-Yong Lu, School of Life Sciences, Shanghai University, China, Email ludayog@shu.edu.cn

Received: February 29, 2020 | **Published:** March 06, 2020

Introduction

Medical care and nursing advances greatly improve patient's recovery and disease controls in the clinic.¹⁻⁷ Different medical disciplines need many unique characters, techniques and knowledge.⁸⁻¹⁰ In the past, medical and technique education plays key roles for nursery activity and quality in the hospitals and healthcare centers.¹¹⁻¹⁵ These different types of nursery education contain two distinct categories (quality and knowledge).^{16,17}

Methods

The key for nursery study and practice is the nurse quality buildup; it contains different categories (Table 1).

Table 1 different class of nursery capability and knowledge

Training systems	Categories
Quality	Responsibility ¹¹⁻¹⁵
	Cooperative ability
	Language
	Carefulness
	Literal capability
Medical knowledge	Nutrition ¹⁶⁻³⁸
	Physiology
	Pathology
	Pharmacology
	Toxicology
Technical	Biochemistry ^{18-20,39-49}
	Morphology
	Machines
	Drug administration
	Surgery
	Anesthesia

Results

In this editorial, we emphasize the nursery activity and knowledge for human diabetes. Type 2 diabetes (T2DM) continues to grow in the past 3 decades.^{41,42} Now the number of people with T2DM is one of the most popularity human morbidity worldwide (exceeding to 100 million). As a result, human anti-diabetic treatment requires a great number of nurses and activity.

Discussion

Several main factors may impact the epidemic/therapeutic outcomes of anti-diabetic treatment (Table 2).

Table 2 Factors for human diabetic treatment and knowledge

Categories	Disciplines
Medical	Epidemics ⁴¹⁻⁴⁴
	Pathology
	Physiology
Physical	Life-style ⁴⁵⁻⁴⁸
	Obesity
	Pharmacology
Pharmacology	Drug choice/dosing
	Drug toxicity
	Drug combination
	Economics
	Nursery activity

T2DM is a chronic disease that needs life-long therapeutics. In financial-restrained countries, patients are generally burden with financial interests. In order to cope with this problem, patients may seek medication to low-tier hospitals or directly from nurses. Nurses may take responsibility according to therapeutic guidelines and their own medical knowledge. This is practical because diagnosis and therapeutics for diabetes can be worked by experienced nurses.

Conclusion

Nursery services in the hospitals are affected by nurse education and training. Many work and organization need to promote. Many new nursery training systems and knowledge will be evolved with times and technology advances.

Funding

None.

Acknowledgments

None.

Conflicts of interest

The authors declare that there are no conflicts of interest.

References

- Lu DY, Chen YZ, Lu DF, et al. Patient's care and nursery in different diseases. *Hospice & Palliative Medicine International Journal*. 2019;3(1):28–30.
- Lu DY, Chen YZ, Lu DF, et al. Patient's care and nursery in modern medicine. *Nursery Practice and Health Care*. 2019;1(1):101.
- Lu DY, Chen YZ, Lu DF. Nursery education, capability and service promotion. *Open Access J Nursery*. 2019;2(3):1–4
- Iqbal U, Humayyn A, Li YC. Healthcare quality improvement and measurement strategies and its challenges ahead. *Int J Quality in Health Care*. 2019;31(1):1.
- Iqbal U, Rabrenovic M, Li YC. Healthcare quality challenges in low- and middle-income countries. *Int J Qual Health Care*. 2019;31(3):165.
- Lu DY, Che JY, Putta S, et al. How to improve the quality of pharmacotherapy for bone diseases. *EC Orthopaedics*. 2019;10(6):366–369.
- Leebov W, Scott G. Service quality improvement. The customer satisfaction strategy for healthcare. *J Healthcare Quality*. 1995;18(4):35.
- Lu DY, Chen YZ, Lu DF. Nursery service, quality promotion. *Hospice & Palliative Medicine International J*. 2019;3(3):97–98.
- Lu DY, Chen YZ, Lu DF, et al. Nursery service in modern day. *Adv Biomedical Engineering Biotechnology*. 2019;1(3):1–2.
- Lu DY, Chen YZ, Lu DF. Nursery science and convention. *J Comprehensive Nursing Res Care*. 2019;5:157.
- Kwag YK. A study of clinical nurses' perception on nursing student character development levels and requirement of character education virtue for nursing students. *J Comprehensive Nursing Res Care*. 2019;4:148.
- Alzghool MM, Al-Bakiri AM. The future of mental health nursing practice in Saudi Arabia: A delphi study. *J Comprehensive Nursing Res Care*. 2019;4:132.
- Miyazaki T. The use of virtual reality learning materials in nursing seminar and its possibility. *J Comprehensive Nursing Res Care*. 2019;4:138.
- Naber J, Hale A. A nursing study abroad experience in the blue zone of Sardinia, Italy: A case study of the program and development. *J Comprehensive Nursing Res Care*. 2019;4:146.
- Ghaffari M. Building a community of learners: Lessons learned. *Nursery Practice and Health Care*. 2019;1(1):104.
- Lu DY, Chen YZ, Lu DF. Nursery education in schools, significance for career. *Biomed Res & Rev*. 2019;2(2):113.
- Lu DY, Chen YZ, Lu DF. Nursery training, from technique details in schools into medical knowledge education in nursery career. *Hospice Palliative Medicine International J*. 2019;3(5):163–165.
- Lu DY, Shen Y, Xu B. Heart and brain stroke, a paramount task for emergency medication. *EC Emergency Medicine and Critical Care*. 2019;3(10):785.
- Khan M, Silver B. Editorial: Stroke in elderly: current status and future direction. *Frontier in Neurology*. 2019;10:177.
- Lu DY, Wu HY, Yarla NS, et al. HAART in HIV/AIDS treatments, future trends. *Infectious Disorders-Drug Targets*. 2018;18(1):15–22.
- Lu DY. HIV/AIDS Treatments, Fight for a Cure. Germany: LAMBERT Academic Publishing; 2017.
- Serafini G, Salano P, Amore M. Suicidal ideation: a comprehensive overview. *Suicidal Ideation: Predictors, Prevalence and Prevention*. USA: Nova Science Publishing; 2015. pp. 1–42.
- Lu DY. Suicide Risks and Treatments, New Ideas and Future Perspectives. Nova Science Publishers; 2017.
- Lu DY, Zhu PP, Wu HY, et al. Human suicide risk and treatment study. *Cent Nerv Syst Agents Med Chem*. 2018;18(3):206–212.
- Melton J. Hip fracture; a worldwide problem today and tomorrow. *Bone*. 1993;14:S1–S8.
- Lu DY, Che JY, Shen Y. Osteoporosis in old women, therapeutic selection. *EC Orthopaedics*. 2018;9(7):386.
- Lu DY, Che JY, Yarla NS, et al. Bone disease recovery strategies, An overview. *EC Orthopaedics*. 2019;10(1):1–3.
- Lu DY, Che JY, Shen ZM, et al. Osteoporosis treatments for old people. *EC Orthopaedics*. 2019;10(5):278–280.
- Lu DY, Lu TR, Wu HY, et al. Cancer Metastasis treatments. *Current Drug Therapy*. 2013;8(1):24–29.
- Nieto MA, Huang RY, Jackson RA, et al. EMT: 2016. *Cell*. 2016;166(1):21–45.
- Lu DY, Xu B, Ding J. Antitumor effects of two bisdioxopiperazines against two experimental lung cancer models in vivo. *BMC Pharmacology*. 2004;4:32.
- Lu DY, Chen XL, Ding J. Treatment of solid tumors and metastases by fibrinogen-targeted anticancer drug therapy. *Medical Hypotheses*. 2007;68(1):188–193.
- Lambert AW, Pattabiraman DR, Weinberg RA. Emerging biological principles of metastasis. *Cell*. 2017;168(4):670–691.
- Lu DY, Che JY, Chen YZ, et al. Nursery service for cancer treatment. *J Nursing & Palliative Care*. 2020;1(1):1–3.
- Lu DY, Lu TR. Herbal medicine in new era. *Hospice Palliative Medicine International J*. 2019;3(4):125–130.
- Kapil M, Verma A, Sareen R, et al. Palliative care—a small step, big result, an effort to achieve. *Hospice Palliative Medicine International J*. 2019;3(5):149–150.
- Prityko DA, Burkov IV, Safonov VV, et al. Palliative care for children, problems and ways to solve them. *EC Clinical & Experimental anatomy*. 2019;2(9):23–29.
- Lu DY, Wu HY, Shen Y, et al. Medical treatments for incurable diseases, palliative therapy. *Hospice Palliative Medicine International J*. 2019;3(5):175–176.
- Lu DY, Chen XL, Cao JY, et al. Effects of cancer chemotherapy on the blood fibrinogen concentrations of cancer patients. *J Int Med Res*. 2000;28(6):313–317.

40. Lu DY, Chen XL, Huang M, et al. Relationship between blood fibrinogen concentration and pathological features of cancer patients: a 139-case clinical study. *Online J Biological Science*. 2007;7(1):8–11.
41. Lu DY, Che JY, Yarla NS, et al. Type 2 diabetes study, introduction and perspective. *The Open Diabetes Journal*. 2018;8:13–21.
42. Lu DY, Che JY, Yarla NS, et al. Type 2 diabetes treatment and drug development study. *The Open Diabetes J*. 2018;8:22–33.
43. Zimmet PZ, Magliano DJ, Herman WH, et al. Diabetes; a 21st century challenge. *Lancet Diabetes Endocrinol*. 2014;2:56–64.
44. Putta S, Peluso I, Yarla NS, et al. Diabetes mellitus and male aging, pharmacotherapeutics and clinical implications. *Current Pharmaceutical Design*. 2017;23(41):6321–6346.
45. Lu DY, Che JY, Lu Y, et al. An overview of obesity. *Metabolomics*. 2018;8(2):200.
46. Lu DY, Che JY, Wu HY, et al. Obesity, risks and managements. *Metabolomics*. 2018;8(1):e156.
47. Lu DY, Che JY, Lu TR, et al. Pathology and treatments of obesity. *Trends in Medicine*. 2018;8(5):157.
48. Lu DY, Che JY, Yarla NS, et al. Human obesity, pathological and therapeutic advances. *EC Pharmacology & Toxicology*. 2019;7(4):231–238.
49. Grimaccia F, Kanavos P. Cost, outcome, treatment pathways and challenges for diabetes care in Italy. *Global Health*. 2014;10(1):58.