

“跳出糖線”：A NURSE-LED MULTIMEDIA PROGRAM EMPOWERING LIFESTYLE CHANGE IN PREDIABETES ACROSS PRIMARY CARE SETTINGS

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INTRODUCTION

Prediabetes is a reversible yet underrecognized condition elevating diabetes and cardiovascular disease risks. A six-week nurse-led lifestyle empowerment program utilizing multimedia tools was piloted across four NTWC GOPCs, enhancing accessibility and patient engagement to promote preventive health behaviors.



METHODS

Between June and August 2024, 45 prediabetes patients were recruited; 43 completed the program (2 lost to follow-up). Participants received structured education via QR-coded cue cards, videos, and a website, alongside individualized nurse-led counseling and goal setting. Follow-up calls at weeks 3 and 6 reinforced behavior changes. Pre/post-questionnaires assessed knowledge, lifestyle habits, and selfmonitoring practices. Due to unavailable paired data, Chi-square analyses compared pre/post group level changes.

RESULTS

Participants were predominantly female (67.4%) and aged 61–70 (51%).

Knowledge: Mean score rose significantly (3.7→8.0); participants scoring ≥ 9 increased markedly (2→23).

Exercise: Inactivity decreased substantially (58.1%→18.6%); ≥ 3 times/week exercise increased significantly (23.3%→46.5%; $\chi^2(3)=14.46$, $p=.0023$).

BP Monitoring: Significant rise in monitoring ≥ 2 times/week (34.9%→65.1%; $\chi^2(3)=22.04$, $p<.001$), indicating enhanced self-care.

Lifestyle: 83.7% reported improved diet; 65.1% experienced weight loss. No significant change in glucose monitoring.

Satisfaction: Over 90% rated program components highly (scores 4–5/5), suggesting strong acceptability.

CONCLUSION

This nurse-led, multimedia empowerment initiative demonstrated significant improvements in knowledge and lifestyle behaviors in patients with prediabetes, despite methodological limitations in data-pairing. Future iterations should include extended follow-up and paired data collection, enabling evaluation of sustained outcomes and facilitating scalability to other chronic conditions in primary care settings.