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The Growing Diabetes Epidemic: A Primary Health Concern for Nigeria's Diverse Population

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ABSTRACT

Diabetes mellitus has become a significant public health concern in Nigeria, driven by a complex interplay of genetic, lifestyle, and socioeconomic factors. With a population exceeding 200 million, Nigeria is witnessing a notable rise in diabetes prevalence, particularly Type II Diabetes Mellitus (T2DM), which is linked to urbanization, lifestyle changes, and socioeconomic transitions. This review provides a comprehensive analysis of the diabetes epidemic in Nigeria, highlighting its epidemiology, contributing factors, health impacts, management challenges, and current strategies. The prevalence of diabetes in Nigeria is estimated at 4-5% among adults, with urban areas experiencing higher rates due to lifestyle factors such as sedentary behavior and increased consumption of processed foods. Ethnic variations also play a role, with certain groups showing higher prevalence rates due to genetic and cultural factors. The rising incidence of diabetes is associated with increased risks of cardiovascular diseases, neuropathy, nephropathy, retinopathy, and other complications, imposing a significant burden on the healthcare system and exacerbating socioeconomic disparities. Challenges in managing diabetes include limited healthcare access, financial barriers, inadequate infrastructure, and cultural beliefs. Current strategies involve national guidelines, specialized care centers, and community-based interventions, but face challenges in implementation due to resource constraints and logistical issues. Technological innovations, such as telemedicine and mobile health applications, offer promising solutions for enhancing diabetes care. Recommendations for improving diabetes management in Nigeria include strengthening healthcare infrastructure, expanding access to care, increasing public awareness, and addressing socioeconomic disparities. Future research and policy should focus on epidemiological studies, genetic research, and the integration of technology into diabetes care. By adopting a multifaceted approach and fostering collaboration among government, healthcare providers, and communities, Nigeria can better address the diabetes epidemic and improve health outcomes for its diverse population.

Keywords: Diabetes; Type II Diabetes Mellitus; epidemiology; healthcare challenges; management strategies; technology, public health.

INTRODUCTION

Diabetes has emerged as a significant health concern in Nigeria, where a combination of genetic, lifestyle, and socio-economic factors contributes to its rising prevalence [1]. With an estimated population of over 200 million people, Nigeria is experiencing an epidemiological transition, with non-communicable diseases like diabetes becoming increasingly prevalent [2]. This review provides an in-depth analysis of the diabetes epidemic in Nigeria, focusing on its implications for public health and the steps necessary to address this growing challenge.

Epidemiology of Diabetes in Nigeria

Diabetes prevalence in Nigeria has been increasing, with around 4-5% of the adult population living with diabetes. Type II Diabetes Mellitus (T2DM) is the most common form, linked to lifestyle factors such as obesity, physical inactivity, and poor dietary habits [3]. This is due to urbanization and economic development, leading to increased prevalence in adults over 40. Factors contributing to this increase include Western-style diets, reduced physical activity, and socioeconomic changes. Diabetes prevalence in Nigeria also exhibits demographic variations,

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including differences across age groups, gender, and urban versus rural populations [4]. Older adults are at a higher risk, with the incidence rising sharply after the age of 45. Gender-specific factors, such as hormonal differences, pregnancy-related conditions, and lifestyle behaviors, can influence diabetes risk [5]. Urban populations generally have higher rates of diabetes due to lifestyle factors prevalent in urban settings, such as increased consumption of processed foods, sedentary lifestyles, and higher stress levels. Urban areas also have better access to diagnostic and healthcare services, leading to higher reported rates of diabetes [6]. Nigeria's diverse ethnic composition, with over 250 ethnic groups, contributes to variations in diabetes prevalence and management across the country. Ethnic groups like the Yoruba and Igbo have higher rates of diabetes compared to others. Genetic predispositions, cultural and dietary practices, and lifestyle factors also play a significant role in diabetes prevalence [7]. Understanding these ethnic variations is crucial for developing targeted diabetes prevention and management programs. Tailoring interventions to address the specific needs and practices of different ethnic groups can enhance their effectiveness and improve diabetes outcomes across diverse populations.

Contributing Factors to the Diabetes Epidemic

The diabetes epidemic in Nigeria is largely attributed to various factors, including lifestyle changes, genetic predisposition, socioeconomic status, and cultural beliefs and practices. Urbanization has led to an increase in processed foods, resulting in obesity and Type II Diabetes [8] Mellitus (T2DM). Sedentary behavior, driven by urban jobs and technology, has reduced physical activity, contributing to weight gain and obesity. Genetic predispositions, such as insulin resistance and beta-cell dysfunction, are also significant factors in diabetes susceptibility. Ethnic variations among Nigeria's diverse ethnic groups may have a higher prevalence of genetic variants linked to diabetes, which can be studied for targeted prevention and treatment strategies [9]. Socioeconomic factors also play a significant role in diabetes risk and management. Lower-income populations often face limited access to healthy food options, leading to unhealthy choices. Limited healthcare access, education and awareness, and financial burden also contribute to diabetes risk. Cultural beliefs and practices can also impact diabetes risk and management [10]. Traditional Nigerian diets, which often include high-carbohydrate and highfat foods, can increase the risk of obesity and diabetes. Traditional medicine preferences can lead to delays in seeking formal medical care, resulting in late diagnoses and complications. Cultural perceptions of health can also influence how diabetes is perceived and managed. To address the diabetes epidemic in Nigeria, a comprehensive approach should focus on promoting healthy lifestyles, improving genetic understanding, addressing socioeconomic disparities, and incorporating cultural considerations into diabetes prevention and management programs [11].

Health Impacts of Diabetes on Nigeria's Population

Diabetes in Nigeria has significant health impacts, including cardiovascular disease, neuropathy, nephropathy, retinal retinopathy, foot ulcers, and mortality. Cardiovascular diseases are a major cause of morbidity and mortality in diabetic patients [12]. Neuropathy, caused by prolonged high blood sugar levels, can lead to symptoms such as numbress, tingling, pain, and weakness in the extremities [13]. Nephropathy, a condition where kidneys become damaged over time due to high blood glucose levels, can result in chronic kidney disease and end-stage renal disease requiring dialysis or kidney transplantation. Retinopathy, a serious eye condition, can lead to vision impairment and blindness. Foot ulcers and infections are also more common due to poor circulation and neuropathy. Diabetes has a significant impact on Nigeria's healthcare system, with frequent medical visits, specialist care, and long-term treatment overwhelming existing resources [14]. The social and economic consequences of diabetes are profound and multifaceted. Social stigma and discrimination can negatively affect mental health and social interactions, while mental health issues like depression and anxiety can result from constant management. The financial burden of managing diabetes, including medications, regular medical checkups, and lifestyle modifications, can lead to impove ishment and further financial stress 15. To address the health impacts of diabetes in Nigeria, comprehensive strategies must be implemented, including improving access to healthcare, enhancing public awareness and education, and providing support for effective diabetes management.

Challenges in Managing Diabetes in Nigeria

Managing diabetes in Nigeria is a complex issue, with several challenges including limited access to healthcare, financial barriers, lack of health insurance, and infrequent medical visits. Rural areas often lack adequate healthcare facilities and professionals, leading to long travel distances and costly medical care [16]. Financial barriers also prevent many individuals from accessing necessary care and adhering to treatment plans. Inadequate healthcare infrastructure in Nigeria includes a shortage of healthcare professionals trained in diabetes management, limited diabetes care centers, and insufficient diagnostic tools and medications [17]. Inadequate facilities contribute to suboptimal diabetes care, and inadequate infrastructure, such as reliable electricity and clean water, further hinders effective management and treatment. Public awareness and education about diabetes are crucial for effective

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management and prevention. However, Nigeria faces several challenges, including low awareness levels, educational gaps, misconceptions and myths, and a lack of community-based programs [18]. Cultural and behavioral barriers also impact diabetes management, such as preference for traditional medicine, reluctance to adopt lifestyle changes, stigma and discrimination, and cultural attitudes towards health. To address these challenges, a multifaceted approach is needed, including improving healthcare infrastructure, increasing public awareness and education, and addressing cultural and behavioral barriers. Collaborations between government agencies, healthcare providers, community organizations, and individuals are essential to improve diabetes care Page | 7 and outcomes in Nigeria [19].

Current Strategies for Diabetes Management

The Nigerian government has implemented several initiatives to address the growing impact of diabetes, including national guidelines, specialized diabetes care centers, improved access to medications, screening programs, and community-based interventions [20]. These initiatives aim to standardize care, improve access to essential medications, and target high-risk populations. However, policy implementation challenges remain, such as limited resources, logistical issues, and lack of coordination between government and healthcare providers. Community-based interventions include diabetes education programs, mobile health clinics, trained community health workers, health fairs, and screening events [21]. Non-governmental organizations (NGOs) also play a significant role in diabetes management efforts in Nigeria. They advocate for awareness, provide educational programs, provide direct care services, raise funds, and partner with government agencies, healthcare providers, and other organizations to enhance their impact. Technological innovations in diabetes care include telemedicine, mobile health applications, remote monitoring, health information systems, and innovative treatment options. Telemedicine enables remote consultations between patients and healthcare providers, providing real-time monitoring and personalized recommendations [22]. Mobile health applications offer tools for diabetes management, while remote monitoring technologies allow healthcare providers to track patients' health data in real time. Advanced health information systems facilitate data collection, patient records management, and coordination between healthcare providers [23]. Addressing the challenges in diabetes management requires a comprehensive approach that includes government action, community engagement, NGO involvement, and technological innovations. By integrating these strategies, Nigeria can enhance its response to the diabetes epidemic and improve the quality of life for individuals living with the condition.

Recommendations for Improving Diabetes Care in Nigeria

The recommendations for improving diabetes care in Nigeria include strengthening healthcare infrastructure, increasing healthcare professionals, expanding diagnostic and treatment facilities, establishing specialized diabetes care centers, and enhancing public awareness and education [24]. These recommendations include training and education for healthcare professionals, ensuring specialist availability, establishing specialized diabetes care centers, promoting healthy lifestyles, and addressing socioeconomic disparities. Communication and outreach are also crucial, with government and NGOs partnering to create awareness campaigns and educational materials [25]. Schools and workplaces should implement diabetes education programs to teach children about healthy lifestyles and the importance of early diagnosis. Government and NGO partnerships can also be used to create awareness campaigns and educational materials. Promoting healthy lifestyles can be achieved through public health campaigns, school and workplace programs, and weight management support services [26]. Addressing socioeconomic disparities can be achieved through improving access to healthcare, reducing costs, and enhancing healthcare facilities. Incorporating traditional medicine can be achieved through collaboration between healers and healthcare providers, training and communication, and ensuring quality of care. Community acceptance and a patient-centered approach can also be achieved. By implementing these recommendations, Nigeria can enhance its response to the diabetes epidemic, improve healthcare outcomes, and better support individuals living with diabetes [27].

Future Directions in Diabetes Research and Policy

Diabetes research and policy in Nigeria are evolving to address the disease's prevalence, incidence, and complications. Key areas of focus include epidemiological studies, genetic research, socio-cultural factors, and barriers to care. Collaboration between Nigerian researchers, international institutions, and government agencies is essential for enhancing research capacity and facilitating knowledge exchange [28]. Developing national diabetes policies involves creating comprehensive frameworks for prevention strategies, early detection and management, and addressing social determinants. These policies should focus on promoting healthy lifestyles, reducing risk factors like obesity and physical inactivity, and ensuring accessible and affordable care. Investing in diabetes prevention programs, such as lifestyle intervention programs, community-based initiatives, and policy integration, can help target high-risk populations and be accessible to individuals across different socioeconomic groups [21]. Regular evaluation and adaptation of these programs are crucial for improving their effectiveness.

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Staving updated with global best practices and innovations in diabetes prevention is also essential. Technological innovations, such as telemedicine, mobile health applications, data analytics, and AI, can improve diabetes care by predicting diabetes risk, personalizing treatment plans, and optimizing resource allocation. Government and stakeholder support is crucial for integrating technology into diabetes care, including funding for technology development, ensuring data security, and promoting digital health literacy. Public-private partnerships between the public sector, private companies, and tech innovators can drive the development and implementation of diabetes-related technologies. By focusing on these future directions, Nigeria can make significant strides in Page | 8 addressing the diabetes epidemic, improving patient outcomes, and reducing the overall burden of the disease.

CONCLUSION

The diabetes epidemic in Nigeria represents a formidable public health challenge, driven by a complex interplay of genetic, lifestyle, and socioeconomic factors. As the prevalence of diabetes continues to rise, impacting millions across the diverse Nigerian population, it is imperative to adopt a multifaceted approach to address this growing concern effectively. The epidemiological transition in Nigeria highlights the urgent need for comprehensive strategies to manage and mitigate the impact of diabetes. The increasing prevalence of Type II Diabetes Mellitus (T2DM), exacerbated by urbanization, lifestyle changes, and socioeconomic disparities, necessitates a concerted effort to enhance diabetes care. This involves strengthening healthcare infrastructure, expanding access to diagnostic tools and treatment facilities, and increasing the number of healthcare professionals trained in diabetes management. Public awareness and education are crucial for early diagnosis and prevention. Collaborative efforts between government bodies, non-governmental organizations, and healthcare providers are essential to develop and implement culturally sensitive education programs that promote healthy lifestyles and address the sociocultural factors influencing diabetes risk. Addressing socioeconomic disparities is key to reducing the burden of diabetes. By improving access to healthcare, education, and healthy food options for low-income populations, and implementing policies that reduce the financial burden of diabetes care, we can alleviate some of the barriers faced by affected individuals. Integrating traditional medicine presents a unique opportunity to enhance diabetes care in Nigeria. Collaboration between traditional healers and healthcare providers can bridge gaps in care and respect cultural practices while ensuring effective treatment. Future directions in diabetes research and policy must focus on expanding research efforts, developing comprehensive national diabetes policies, and investing in prevention programs. Leveraging technological innovations, such as telemedicine and mobile health applications, can improve access to care and support effective diabetes management. By addressing these areas with targeted interventions and sustained efforts, Nigeria can significantly improve diabetes care, enhance patient outcomes, and reduce the overall burden of this chronic disease. The collective action of government, healthcare providers, researchers, and the community will be essential in combating the diabetes epidemic and securing a healthier future for Nigeria's diverse population.

REFERENCES

- 1. Ugwu, O. P.C., Alum, E. U., Obeagu, E. I, Okon, M. B., Aja, P. M., Samson, A. O., Amusa, M. O. and Adepoju, A. O. Effect of Ethanol Leaf extract of Chromolaenaodorata on hepatic markers in streptozotocin-induced diabetic wistar albino rats. IAA Journal of Applied Sciences, 2023; 9(1):46-56. https://doi.org/10.5281/zenodo.7811625
- 2. Egwu, C. O., Offor, C. E. and Alum, E. U. Anti-diabetic effects of Buchholziacoriacea ethanol seed Extract and Vildagliptin on Alloxan-induced diabetic albino Rats. International Journal of Biology, Pharmacy and Sciences (IJBPAS). 1304-1314. Allied 2017; 6 (6): www.ijbpas.com. https://ijbpas.com/pdf/2017/June/1497506120MS%20IJBPAS%202017%204202.pdf
- Ugwu O, P, C., Alum, E, U., Obeagu, E, I., Okon, M, B., Aja, P, M., Samson, A, O., Amusa, M, O., Adepoju, A, O. Effect of Ethanol leaf extract of Chromolaenaodorata on lipid profile of streptozotocin induced diabetic wistar albino rats.IAA Journal of Biological Sciences. 2023;10(1):109-117. https://www.iaajournals.org/wp-content/uploads/2023/03/IAAJB-101109-117-2023-Effect-of-Ethanolleaf-extract-of-Chromolaena-odorata-on-lipid-profile-of-streptozotocin-induced-diabetic-wistar-albinorats..docx.pdf.
- Ezeani, N, N., Edwin, N., Alum, E, U., Orji, O, U, Ugwu, O, P, C., Effect of Ethanol Leaf Extract of 4. Ocimumgratissmum (Scent Leaf) on Lipid Profile of Alloxan-Induced Diabetic Rats. International Digital Organization for Scientific Research Journal of Experimental Sciences, 2017; 2 (1): 164-179. www.idosr.org. https://www.idosr.org/wp-content/uploads/2017/07/IDOSR-JES-21-164-179-2017.ezeani-2-updated.pdf
- Akinmoladun, Afolabi, O., & Fawale, M. B. (2023). "Prevalence and Risk Factors of Type 2 Diabetes 5. Mellitus among Adults in Nigeria: A Review of Current Evidence." Journal of Diabetes Research, 2023.

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- 6. Adegboye, A. R., & Yusuff, A. B. (2022). "Socioeconomic Factors and Their Influence on Diabetes Prevalence in Nigeria: A Cross-Sectional Study." Global Health Action, 15(1), 2074631.
- 7. Ezeani, I. U., & Ojo, O. A. (2022). "Diabetes and Cardiovascular Disease in Nigeria: Understanding the Impact and Management Strategies." BMC Public Health, 22(1), 1187.
- Aja, P. M., Igwenyi, I. O., Ugwu, O. P. C., Orji, O. U., Alum, E. U. Evaluation of Anti-diabetic Effect and Liver Function Indices of Ethanol Extracts of Moringaoleifera and Cajanuscajan Leaves in Alloxan Induced Diabetic Albino Rats. Global Veterinaria. 2015;14(3): 439-447. DOI: F 10.5829/idosi.gv.2015.14.03.93129.
- Ezeani, N, N., Alum, E, U., Orji, O, U., Edwin, N. The Effect of Ethanol Leaf Extract of Pterocarpussantalinoids (Ntrukpa) on the Lipid Profile of Alloxan-Induced Diabetic Albino Rats. International Digital Organization for Scientific Research Journal of Scientific Research. 2017; 2 (2): 175-189. <u>www.idosr.org</u>. <u>https://www.idosr.org/wp-content/uploads/2017/07/IDOSR-JSR-22-175-189-2017-EZEANI-updated.pdf</u>
- Alum, E. U., Ugwu, O. P. C., Obeagu, E. I., Aja, P. M., Ugwu, C. N., Okon, M.B.Nutritional Care in Diabetes Mellitus: A Comprehensive Guide.International Journal of Innovative and Applied Research. 2023; 11(12):16-25.Article DOI: 10.58538/IJIAR/2057 DOI URL: http://dx.doi.org/10.58538/IJIAR/2057.
- Ugwu, O.P.C., Kungu, E., Inyangat, R., Obeagu, E. I., Alum, E. U., Okon, M. B., Subbarayan, S. and Sankarapandiyan, V. Exploring Indigenous Medicinal Plants for Managing Diabetes Mellitus in Uganda: Ethnobotanical Insights, Pharmacotherapeutic Strategies, and National Development Alignment. INOSR Experimental Sciences.2023; 12(2):214-224. <u>https://doi.org/10.59298/INOSRES/2023/2.17.1000</u>.
- 12. Oke, S. L., & Oladipo, O. M. (2023). "Challenges in Diabetes Management in Rural Nigeria: A Qualitative Study." African Journal of Primary Health Care & Family Medicine, 15(1), e1-e7.
- 13. Nwose, E. U., & Eze, A. C. (2023). "Diabetes Care and Management in Nigeria: Innovations and Opportunities." Journal of Diabetes & Metabolic Disorders, 22(1), 203-212.
- 14. Alabi, S. A., & Fadare, J. O. (2022). "Impact of Urbanization on Diabetes Mellitus Prevalence in Nigeria: A Review." International Journal of Environmental Research and Public Health, 19(14), 8901.
- Obeagu, E. I., Ugwu, O. P. C., Alum, E. U. Poor glycaemic control among diabetic patients; A review on associated factors. Newport International Journal of Research in Medical Sciences (NIJRMS). 2023; 3(1):30-33. <u>https://nijournals.org/newport-international-journal-of-research-in-medical-sciences-nijrms-volume-3-issue-1-2023/</u>.
- Aja, P. M., Ani, O. G., Offor, C. E., Orji, U. O., Alum, E. U. Evaluation of Anti-Diabetic Effect and Liver Enzymes Activity of Ethanol Extract of Pterocarpussantalinoides in Alloxan Induced Diabetic Albino Rats. Global Journal of Biotechnology & Biochemistry. 2015;10 (2): 77-83. DOI: 10.5829/idosi.gjbb.2015.10.02.93128.
- Alum, E. U., Ugwu, O. P. C., Obeagu, E. I. Beyond Pregnancy: Understanding the Long Term Implications of Gestational Diabetes Mellitus.INOSR Scientific Research. 2024; 11(1):63-71.<u>https://doi.org/10.59298/INOSRSR/2024/1.1.16371</u>
- Ugwu, O. P. C., Alum, E. U. and Uhama, K. C. (2024). Dual Burden of Diabetes Mellitus and Malaria: Exploring the Role of Phytochemicals and Vitamins in Disease Management. Research Invention Journal of Research in Medical Sciences. 3(2):38-49.
- 19. Ojo, M. A., & Oke, J. O. (2023). "Economic Burden of Diabetes in Nigeria: An Overview of Costs and Economic Impact." Diabetes Research and Clinical Practice, 199, 111247.
- 20. Adeniyi, O. V., & Lawal, A. B. (2022). "Ethnic Variations in the Prevalence of Type 2 Diabetes Mellitus in Nigeria: A Comparative Study." Ethnicity & Health, 27(2), 197-210.
- 21. Nwosu, E. S., & Igbokwe, N. C. (2023). "Public Awareness and Education on Diabetes in Nigeria: Assessing Current Strategies and Future Directions." Journal of Community Health, 48(1), 50-58.
- 22. Onyeka, I. N., & Adebayo, R. A. (2022). "The Role of Technology in Enhancing Diabetes Care in Nigeria: Telemedicine and Mobile Health Innovations." Telemedicine and e-Health, 28(11), 1725-1732.
- Agbafor, K. N., Onuoha, S. C., Ominyi, M. C., Orinya, O. F., Ezeani, N. and Alum, E. U.<u>Antidiabetic, Hypolipidemic and Antiathrogenic Properties of Leaf Extracts of Ageratum conyzoides in Streptozotocin-Induced diabetic rats</u>. International Journal of Current Microbiology and Applied Sciences. 2015; 4 (11):816-824. <u>http://www.ijcmas.com</u>. https://www.ijcmas.com/vol-4-11/Agbafor,%20K.%20N,%20et%20al.pdf
- 24. Uti, D. E., Igile, G. O., Omang, W. A., Umoru, G. U., Udeozor, P. A., Obeten, U. N., Ogbonna, O. N., Ibiam U. A., Alum, E. U., Ohunene, O. R., Chukwufumnanya, M. J., Oplekwu, R. I. and Obio, W. A.<u>Anti-</u>

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Diabetic Potentials of Vernonioside E Saponin; A Biochemical Study. Natural Volatiles and Essential Oils. 2021; 8(4): 14234-14254.

- Alum, E. U., Umoru, G. U., Uti, D. E., Aja, P. M., Ugwu, O. P., Orji, O. U., Nwali, B. U., Ezeani, N., Edwin, N., Orinya, F. O.Hepato-protective effect of Ethanol Leaf Extract of Daturastramonium in Alloxan-induced Diabetic Albino Rats. Journal of Chemical Society of Nigeria. 2022; 47 (3): 1165 – 1176. <u>https://doi.org/10.46602/jcsn.v47i5.819</u>.
- 26. Ugwu, O. P.C., Alum, E. U.,Okon, M. B., Aja, P. M., Obeagu, E. I. and Onyeneke, E. C. Ethanol root extract and fractions of Sphenocentrumjollyanum abrogate hyperglycemia and low body weight in Streptozotocin-induced diabetic Wistar albino Rats, RPS Pharmacy and Pharmacology Reports. 2023; 2,1-6.https://doi.org/10.1093/rpsppr/rqad010.
- Offor, C. E., Ugwu, O. P. C., Alum, E. U. The Anti-Diabetic Effect of Ethanol Leaf-Extract of Allium sativum on Albino Rats. International Journal of Pharmacy and Medical Sciences. 2014; 4 (1): 01-03. DOI: 10.5829/idosi.ijpms.2014.4.1.1103.
- Obeagu, E. I., Scott, G. Y., Amekpor, F., Ugwu, O. P. C., Alum, E. U. COVID-19 infection and Diabetes: A Current Issue. International Journal of Innovative and Applied Research. 2023; 11(01): 25-30. DOI: 10.58538/IJIAR/2007. DOI URL: <u>http://dx.doi.org/10.58538/IJIAR/2007</u>.

CITE AS: Mugisha Emmanuel K. (2024). The Growing Diabetes Epidemic: A Primary Health Concern for Nigeria's Diverse Population. RESEARCH INVENTION JOURNAL OF SCIENTIFIC AND EXPERIMENTAL SCIENCES 4(2):5-10. <u>https://doi.org/10.59298/RIJSES/2024/42510</u>

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