



## Short Paper

# Intervention for Compassionate Nursing Care in Diabetic Patients During COVID-19 Pandemic: An Integrative Review

Jovelyn Tumbaga

St. Paul University Philippines – Graduate School, Philippines

May Ann Bayawa Aya-Ay

St. Paul University Philippines – Graduate School, Philippines

Erika Cayago

St. Paul University Philippines – Graduate School, Philippines

Gina Cabeso Consulta

St. Paul University Philippines – Graduate School, Philippines

Roison Andro Narvaez

St. Paul University Philippines – Graduate School, Philippines

(corresponding author)

[rnarvaez@spup.edu.ph](mailto:rnarvaez@spup.edu.ph)

<https://orcid.org/0000-0001-7555-5420>

Jessica Barrientos Rodado

St. Paul University Philippines, Philippines

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## **Abstract**

*Purpose* – The coronavirus 19 (COVID-19) scourge is a critical public health concern on a worldwide scale adding another menace to the lives of people with co-morbidities and creating a challenge in providing nursing care to patients with Diabetes Mellitus. While the COVID-19 puts patients with Diabetes in a higher risk of susceptibility and complications, interventions for compassionate nursing care may substantially impact in a safe and quality healthcare delivery system

*Method* – The literature search for this integrative review of the study was conducted using scientific search engines with the following electronic database: Google Scholar, PubMed, and Science Direct, Research Gate and others online search journal with free access

*Results* – Adults with diabetes, overall, experienced considerable changes in their management. Consultations are missed for almost 4 out of 10 diabetes patients. It showed an increase in general and diabetes-related stress, as well as social alienation. Negative responses and transitions in clinical appointments from physical assessment visits to telemedicine were overwhelming.

*Conclusion* – Interventions for compassionate nursing care during the COVID-19 pandemic are an important process for providing care for diabetic patients. As such, it gives a great impact on the healthcare system, compassionate nursing care is given in an extra mile during this era.

*Implications* – Interventions for compassionate nursing care during the COVID-19 outbreak are very helpful. The specific functions of nurses during this pandemic gives a significant impact on providing special care for diabetic patients.

*Keywords* – COVID-19, compassionate, nursing care, diabetes mellitus, patients, interventions, integrative review

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## **INTRODUCTION**

The SARS-CoV-2 contamination caused COVID-19, a potent disease (Bollyky & Patrick, 2020) and the severe acute respiratory syndrome – Corona Virus 2 (SARS-CoV-2), the seventh coronavirus affecting humans was found in Wuhan, China during the new pandemic in January 2020 (Wu et al., 2020). According to World Health Organization (2020), the sickness has spread worldwide since that time providing a tally of 4, 806, 299 people with COVID-19 and killed 318, 599 individuals in 20<sup>th</sup> of May 2020. The need to invigorate the conveyance of kind flourishing, unequivocally for people with steady contamination in focus settings, reliably distinguished as crucial for medical care (Dewar

et al., 2014). On the other hand, worldwide, the incidence and prevalence rates of diabetes has been growing, thus, marking its huge impact in the Philippines and other third-world countries and perceiving the peak of cases in Asia by the year 2025. A new study on young patient sort two diabetes (Type 2 Diabetes) in the Philippines additionally tracked down below predominance at 0.91 percent (Costelo et al., 2015); also, the hyperglycemia prevalence rate among adults over 20 years old was 5.4 percent up to 0.7 percent from a similar survey in 2008. According to a survey conducted in 2014, a prevalence rate of 5.9 % covering over 3 million reported cases of Type 2 Diabetes Mellitus in individuals between 20 and 79 (International Diabetes Federation, 2014).

In any case, four vital parts of the account of compassion has been identified and recognized. This integrates knowledge, love, humankind, and (Von Dietze & Orb 2000), whereas a compassionate manner in setting up firmly sends support of the medical professional in a responsive activity that dispassionately alleviates enduring and guarantees poise, however, compassion is capable, and care peaceful relationship is assembled (Dewar et al., 2014). In New Zealand, a mission to incorporate empathetic consideration as a patient right highlighted the importance of sympathy (Paterson, 2011). For healthcare providers and healthcare institutions, it signifies acknowledgment and consideration of patients' viewpoints, convictions, and principles in life. Notwithstanding, writings has evidently shown that compassion in an under-appreciated skill of nursing (Burnell, 2013).

According to Papadopoulos (2017), compassion has been defined as the basic principle and solid foundation of the nursing profession thus, upholding as a core value in the delivery of quality nursing care. Furthermore, rendering compassionate nursing care in accordance with the needs of patients is one of the expert norms of nursing that is a principal component in the provision of excellent care to patients (Shea et al., 2016). Moreover, it could possibly be the most outstanding core value a healthcare worker possesses, and a healthcare institution upholds which will offer excellent care to patients. The strengthened need for compassionate healthcare delivery in specific persons with chronic diseases in a clinical setting is explicitly essential to medical services (Dewar et al., 2014). Moreover, compassion is demonstrated as dire as careful by nursing theorist Jean Watson (2008) definition of compassion abounds, and the literature is the same confusing and confused in the way that they often conflicted.

The purpose of this integrative study was conceived to evaluate the significance and degree of giving compassionate nursing care to assess intercessions for empathetic nursing care, including the depiction, plan, and conveyance of the mediation, particularly to patients with diabetes in the COVID-19 crisis.

## **PICOT QUESTION**

The question of this review was: with the experiences of diabetic patients (P) in the intervention of compassionate nursing care (I), what are the intervention descriptions (O) during the COVID-19 pandemic (T)?

## **METHODS**

### ***Research Design***

An integrative review of the literature was utilized in this paper. According to Souza et al. (2010), an integrative thinking is an approach that synthesizes facts and the relevance of outcomes of substantial research put into practice. It summarizes the previous theoretical studies that give important information on a particular phenomenon in a healthcare system.

### ***Quality Assessment***

With the collated studies, the researchers tend to consider the following: address the focused problem; methods used were valid to address the question; the importance of good results in the study; and if the correct result applied to population. Overall, the quality of the study was crucial. Forty-four studies screened, and eighteen (41%) were included for full-text review due to relevance. Hence, twelve (27%) were in outstanding quality with potent relevance and set to represent the criteria of eligibility. Additionally, the Hierarchy of Evidence for Intervention Studies were used to verify the Level of Evidence (LOE) of each study (Melnik & Fineout-Overholt, 2022)

### ***Search Strategy***

COVID-19, caring, nursing care, diabetes mellitus, patients, interventions, integrative review were all key words used in a direct manual search. The four web databases searched were PubMed, Research Gate, Google Scholar, and Science Direct due to their freely available web search databases indexing full texts and scholarly papers. However, Scopus and EBSCO Host were excluded due to the researchers' limited access. The search was conducted using titles and abstracts. The researcher conducted manual web resource google searches, Google Scholar, journal articles that published significant studies due to their range of biomedical and life sciences topics, and specific websites such as the Centers for Disease Control (CDC), World Health Organization (WHO), and other reputable government-sponsored public information websites. The researcher further searched the references sections of the selected publications to see whether any other studies or reports had been missed during the initial searches.

## Criteria of Eligibility

Relevant to this research, the researchers identified and screened numerous studies that conveyed pertinence in rendering compassionate nursing care during the COVID-19 crisis in DM patients. Thus, these studies were deliberately decided in relation to the delivery of compassionate nursing care for health promotion, complication prevention, treatment and management of Diabetes Mellitus. The COVID-19 has been announced as a pandemic in March 2020, therefore, this marked the specification date up to April 2022. More so, significance of compassion through verbal and non – verbal approaches in any health care setting were included. However, studies, publications and articles with inadequate data and duplication as well as with undetermined references were rejected.

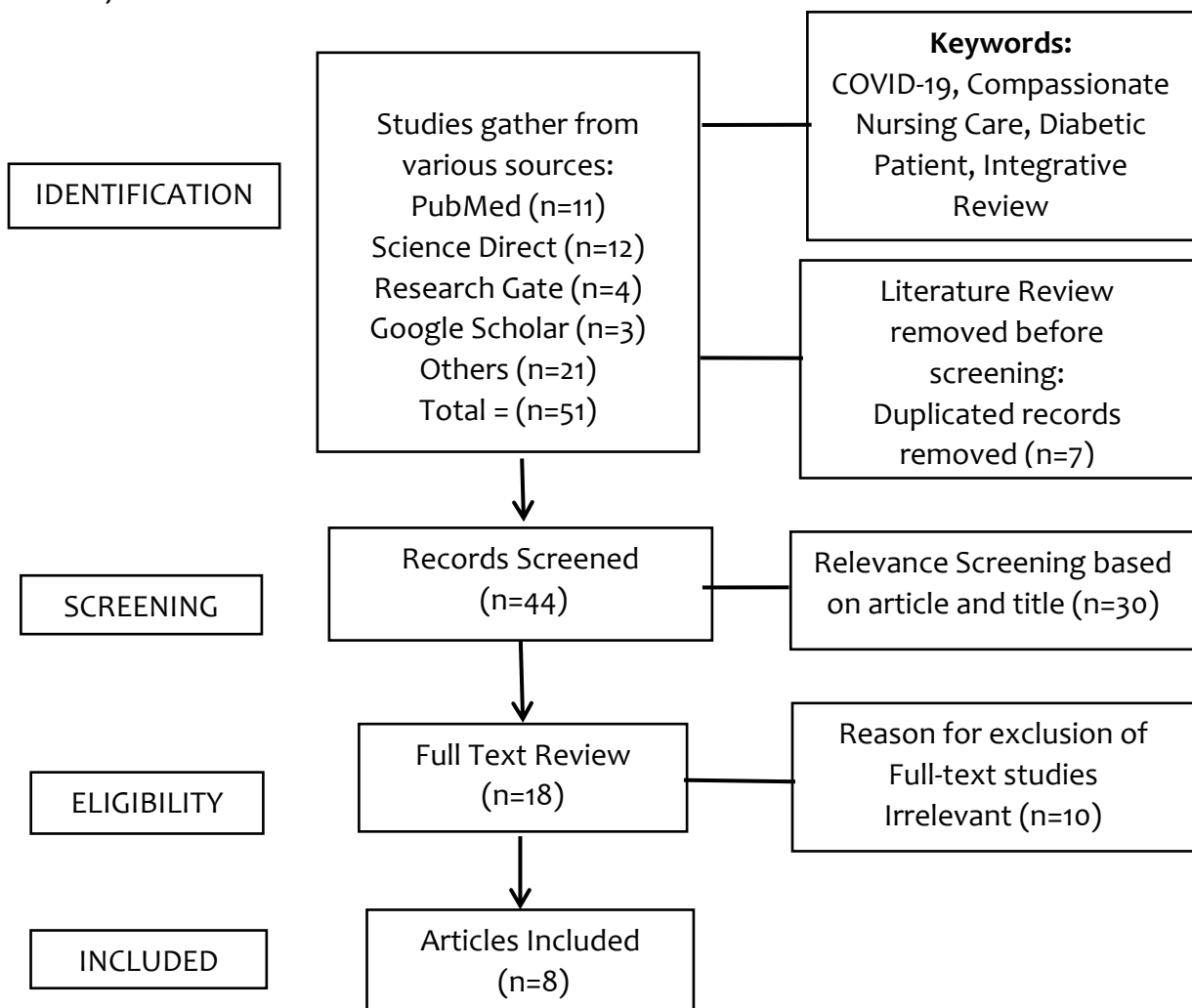


Figure 1. Search Strategy and Data Selection of Studies Related to Interventions for Compassionate Nursing Care to DM Patients During the COVID-19 Pandemic

## RESULTS

The studies (n=8) with extraordinary relevance and met the eligibility criteria were summarized in Table 1 (See Appendix A). These studies utilized cross-sectional studies, observational – retrospective studies, and literature review. Studies were conducted in the United States (n=3), United Kingdom (n=2), India (n=1), Bahrain (n=1), and Iran (n=1) were included, and they had been published in a range of international journals within that time period. The Level of Evidence are V (n=3) which are literature reviews, and VI (n=5) which are descriptive qualitative or quantitative studies.

## DISCUSSION

### ***Compassionate Care to Diabetic Patients during COVID-19 Pandemic***

The focus of the integrative review is the provision of a summary of significant results related to the efficacy of interventions for compassionate nursing care comprising of the assessment of description of the intervention and evaluation of the strength and nature of the efficacy of results. Table 2 summarizes the different nursing management in providing compassionate care to the diabetic patients during the COVID-19 pandemic, while Table 3 summarizes the compassionate care, intervention, and effects to diabetic patients

The COVID-19 pandemic has had an impact on how care is delivered in the United Kingdom. According to British Diabetic Association (2020) prior to the COVID-19 epidemic, Diabetes UK published 'Making Hospitals Safe for People with Diabetes, which detailed recommendations for enhancing diabetes inpatient treatment. Despite the limitations of delivering treatment during the pandemic, many of those interviewed noted a revelatory opportunity to give inpatient services in ways they had always desired to. They emphasized that the new standard for inpatient treatment should not revert to past practices that undervalued the relevance of inpatient diabetes care. Diabetic patients during the COVID-19 pandemic made physical restrictions on the management of the disease as a threat to acquiring COVID-19 infection as they suffer from no access to health care services. It is important that adjustments in the healthcare services for patients with diabetes in preventing complications is by trying to utilize technology in health teaching guides.

The 9<sup>th</sup> edition of the International Diabetes Federation Atlas (2019) noted about 463 million individual is affected by diabetes during epidemic. The limited focus on medical resources in affected areas gives fear to the patient on going to the hospital for treatment and the management of their DM is significantly affected. Approximately, 4 out of 10 adults with diabetes have clinic appointments canceled. Others about 40% reported retained appointments but in a different way of check-ups like audio or video telehealth person-to-person encounters, and almost 50% noted reports have lower

satisfaction in this way of check-ups compared to on-site visits. There is a visible increase in general and diabetes-related stress and isolation socially among diabetes patients. Through telehealth, a non-convenience and anxiety during travel to the facility may be reduced. As patients with Diabetes Mellitus acquire greater risk for complications due COVID-19 infection, continuous and optimal care should be delivered. The level of quality care received by the patients may not be compared to the care provided through telemedicine, nonetheless, compassionate nursing care by verbal approaches can assist in maintaining the nurse-patient relationship (Alromaihi et al., 2020).

When the COVID-19 outbreak started, it causes a huge impact to everyone that continuously spread globally and the healthcare system was adjusted to the pandemic's consequences, especially to the diabetes community, specifically self-management, diabetes education, and psychological support (Forde et al., 2021). Likewise, there was no specific treatment or anti-viral medication regimen and was usually managed by supportive care; hence, compassionate care is one of the key techniques in giving supportive treatment (Ghafourifard, 2020). Nurses play a significant role in managing patients with severe mental illness that are at a higher risk of diabetes, poor diabetes management, and thus complications. Nurses make a difference who assisted diabetic patients in identifying challenges to setting realistic goals and self-management as well as promoting well-being for all ages (Cox, 2020). In the healthcare setting, adjustments in diabetes-related guidelines and technological advances can significantly deliver quality nursing care; however, one must consider the risks and costs of treatment. In addition, nursing care was streamlined quickly and reduce exposure during COVID-19 pandemic as when nurses visit a patient, they "bundled" treatment by restricting the frequency and timing of glucose tests with other interventions, such as insulin infusion titration or insulin administration (Wallia et al., 2020).

Diabetic foot ulceration has been the most common cause of hospitalization among diabetic patients in Western countries and face – to – face clinical consultation has made difficult by the emergence of COVID-19. However, various approaches for the management and treatment of diabetic foot during the pandemic includes the use of telemedicine, home care visits by a podiatrist or home care nurse, construction of community ambulatory care center and the establishment of wound care directions, teachings and distribution of wound care kits to families and home care agencies. A review has been conducted 6 weeks pre-lockdown and 6 weeks post-lockdown for the different alternatives used during the COVID-19 pandemic in 2 cities, Los Angeles and Manchester. Before lockdown, there were zero reports for the use of telemedicine and home visits in these two cities, however, a shift in the mode of consultation had been significantly seen from clinic visits to telemedicine and home visits. Also, a higher number of hospital admission had been reported in these two cities before lockdown than in 6 weeks post-lockdown (Shin et al., 2020).

Non-verbal communication, like therapeutic touch by a healthcare provider and using appropriate facial expressions, can deliver or convey compassion toward patients.

Due to the COVID-19 pandemic whereas healthcare workers must wear personal protective equipment and social distancing must be observed, both are being affected, and another method should be considered to avoid compassion fatigue (Brown, 2020). In taking a significant step in upgrading care for diabetic patients, the healthcare system should establish innovative management techniques (Peric & Stulnig., 2020).

Strategies for outpatient and inpatient care management greatly impacted continuous glycemic control in patients with diabetes. For out-patient, infection prevention by reinforcing the importance of glycemic control, improving current therapy, and giving awareness for the premature discontinuation of contemporary medication. For in-patient and ICU admission timely glucose monitoring, blood ketones, electrolytes, and pH balance, cautiously put liberal indication for intravenous insulin therapy and management of very high insulin consumption. The therapeutic aims are plasma glucose concentration; 4-8mg/dl (72-144mg/dL), HbA<sub>1c</sub>; less than 53mmol/L (7%), TIR more than 70% and hypoglycemia less than 4% (Bornstein et al., 2020).

The COVID-19 dilemma put nurses on their edge, forcing them to think and use another method for granting patients' and family's requests. Nurses communicate with their patients using mobile phones or call bells with limited time spent at the bedside. There may be no way, or it may have- the percentage to hold hands, hug, and accompany the patient throughout the hospitalization fall short, but maybe with the compassionate care that healthcare providers offer, especially the nurses, we can yoke creative solution to help the patient feel a connection while still keeping everyone safe (Wakam et al., 2020).

## **LIMITATIONS**

This study focuses on determining the significance and degree of giving compassionate nursing care to assess intercessions for empathetic nursing care particularly to patients with diabetes during the COVID-19 pandemic. The researchers exhausted all the available resources including Google Scholar, PubMed, and Science Direct, ResearchGate and others online search journal with free access related to the impact of the COVID-19 pandemic in caring diabetes patient to provide compassionate nursing care. In addition, there were few research studies related to the effect of compassionate care of nurses in catering patient with diabetes during COVID-19 crisis. The researchers were given an ample time to use accessible online platforms to journals, literatures, and articles relevant to the study.

Furthermore, as with any studies, there are constraints to address, including questions about the reliability and validity of the research study; probability sampling; geographical subjectivity; and item finalization (missing data).

## **CONCLUSIONS**

Based on the integrative review of the related literature, the researchers concluded that COVID-19 pandemic has greatly changed the physical interaction with others in providing compassionate nursing care to patients. Some nurses managed to use ways of showing compassion like words instead of physical touch, humble gestures, and facial expressions. Nevertheless, for some, recognizing patient's discomfort and inability to cope with the disease process by applying therapeutic touch or compassionate movement may result in a low level of compassion satisfaction and greater compassion fatigue. The feeling of compassion by nurses increases the promotion of well- the being of the individual and provides a positive outcome for the patient as beneficial nursing care. With the continuous use of PPE and ensuring social distancing, implementing nursing care is acceptable to both patient and nurse.

## **RECOMMENDATIONS**

During this time of the COVID-19 pandemic, it challenges a health care professional to determine satisfaction with compassionate nursing care, especially with diabetes mellitus patients. Future studies should note effective strategies and techniques in giving compassionate care to improve quality nursing care and ensure patient satisfaction. Furthermore, an increase in the number of research studies globally would address interventions for compassionate nursing care that suites on today's pandemic era.

## **DECLARATIONS**

### ***Conflict of Interest***

The authors confirm that there are no known conflicts of interest associated with this publication and there has been no significant financial support for this work that could have influenced its outcome.

### ***Informed Consent and Ethics Approval***

This is a comprehensive review of available literatures. Reviewers do not collect deeply personal, sensitive, or confidential information, thus informed consent and ethical approval are not required.

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## APPENDIX A

Table 1. Article Sample and Characteristics

<b>Author/Year/ Country</b>	<b>Design</b>	<b>Samples and Sample Size</b>	<b>Data Collection Method and Instruments</b>	<b>Level of Evidence</b>
Susilo et al. (2021) India	Literature Review	Participants with Type 2 diabetes mellitus  222 countries with 3,459,966 respondents with ages 60 and above.	Article selection method and data gathering using databases for the years 2020-2021  Statistics were collected thru Covid- 19 prevention Task Force, India	LOE V
Wallia et al. (2020) United States of America	Observational, Retrospective study	1122 patients with laboratory confirmed SARS- CoV-2 infection in 88 US hospitals in 10 states across the country	Survey, interview, and review of related literature.	LOE VI
Forde et al. (2020) Europe	Cross- sectional study	Participants: Diabetes Nurses  1829 respondents.	The data was gathered through an online survey utilizing rapid Delphi approach. It was translated into 17 languages and distributed online to 27 nations through national diabetes nurse networks.	LOE VI
Ghafourifard (2020) Iran	Article	N/A	Review of related literature	LOE V
Cox (2020) United States of America	Article	N/A	Review of related literature	LOE V
Shin et al. (2020) United States	Cross-sectional study	Participants: DM with Diabetic foot ulceration	Collection of data gathered 6 weeks pre and post lockdown	LOE VI

of America		seeking consult in Los Angeles and Manchester		
Alromaihi et al. (2020) Bahrain	Cross-sectional prospective study	Participants: DM patients seeking consultation at King Hamad University Hospital. Sample: 1,972 patients.	Data collection through the electronic health record system.	LOE VI
Burr et al. (2020) United Kingdom	Rapid Review	28 healthcare professionals across United Kingdom	Interview, Review of related literature	LOE VI

Table 2. Different Nursing Management in Providing Compassionate Care to Diabetic Patients during COVID-19 Pandemic

Author/Year/Country	Nursing Management
Susilo et al. (2021) India	Adjustment in management by utilizing health technology and use of telehealth in diabetes mellitus services
Wallia et al. (2020) United States of America	Alteration in diabetes-related guidelines and deployment of new technology in inpatient setting
Forde et al. (2020) United Kingdom	Adaptation of new care systems with some urgency
Ghafourifard (2020) Iran	Active listening, compassionate communication, and building rapport
Cox (2020) United States of America	Reduce face-to-face healthcare appointment, using virtual appointment and mobile applications in delivering care
Shin et al. (2020) United States of America	Focusing in developing detection algorithms as part of the mobile app for monitoring
Alromaihi et al. (2020) Bahrain	Use of telehealth and technology like web-based applications and transfer of data for communication
Burr et al. (2020) United Kingdom	Improvement of delivering care: Maintaining positive working environment

Table 3. Compassionate Care, its intervention, and its effects to diabetic patients

<b>Author/Year/ Country</b>	<b>Compassionate Care (Intervention/ Management)</b>	<b>Effects</b>
Susilo et al. (2021) India	Diabetes self-management by massive open online course  Diet and Lifestyle Change	Gained education, knowledge and skills as important outcome in reducing the risk of complications and continue management. Physical activity improves the sensitivity of insulin production to maintain a fit body.
Wallia et al. (2020) United States of America	<ul style="list-style-type: none"> <li>✓ Adjustments in diabetes-related guidelines and technological advances</li> <li>✓ Considering the risks and costs of treatment</li> <li>✓ Bundled treatment</li> </ul>	Potentially increase improvement in patient and healthcare worker safety. Increase outcome in glycemic control to patient with diabetes.
Forde et al. (2020) Europe	<ul style="list-style-type: none"> <li>✓ Psychological support</li> <li>✓ Diabetes education</li> <li>✓ Self-management support</li> </ul>	An increase in both physical and psychological challenges among their patients during COVID -19 pandemic Clinical diabetic services have also been considerably affected.
Ghafourifard (2020) Iran	<ul style="list-style-type: none"> <li>✓ Compassionate communication</li> <li>✓ Active listening to the patients and families</li> <li>✓ Establishing rapport</li> <li>✓ Providing information</li> </ul>	Improved hypothalamic–pituitary–adrenal (HPA) axis reactivity Improved immunological functionality Boosted parasympathetic nervous system reactivity Lowered cortisol reactivity Decreased cardiovascular reactivity
Cox (2020) United States of America	<ul style="list-style-type: none"> <li>✓ Detecting and identifying at-risk individuals</li> <li>✓ Providing health education</li> <li>✓ Support in self-management and psychosocial interactions</li> <li>✓ Use of sing virtual communications and technologies (health-related</li> </ul>	Patient with diabetes can manage their health treatment and restore quality of life.

	mobile applications)	
Shin et al. (2020) United States of America	<ul style="list-style-type: none"> <li>✓ Home visit and care by a health care provider with DM patients who were not eligible for admission.</li> <li>✓ Construction and provision of temporary treatment facilities outside hospital for DM patients</li> <li>✓ Provision of health care education and care kits to the patients and family for self-care management</li> </ul>	Amidst the surge of COVID-19 cases and fully occupied beds in the hospital, DM patients were able to be treated and managed at home or in temporary facilities to avoid complications.
Alromaihi et al. (2020) Bahrain	<ul style="list-style-type: none"> <li>✓ Innovative approach through telehealth</li> <li>✓ Compassionate nursing care through good communication skills and quality interpersonal relationship</li> </ul>	Though severe cases of DM were admitted in the hospital, mild to moderate treatment and consultation were provided through telehealth to reduce their risk of contracting COVID-19 as people with co-morbidities.
Burr et al. (2020). United Kingdom	<ul style="list-style-type: none"> <li>✓ Understand how inpatient care for people with diabetes has been affected</li> <li>✓ Identify opportunities, areas of concerns</li> </ul>	Inpatient diabetes service disruptions generated favorable settings and chances for new methods of working in the majority of cases but had a negative influence on the quality-of-care professionals thought they could provide in the minority.

## Author's Biography

Jovelyn Tumbaga, RN is a Registered Nurse and a student at St. Paul University Philippines – Graduate School.

May Ann Bayawa Aya-Ay, RN is a Registered Nurse and a student at St. Paul University Philippines – Graduate School.

Erika Cayago, RN is a Registered Nurse and a student at St. Paul University Philippines – Graduate School.

Gina Cabeso Consulta, RN is a Registered Nurse and a student at St. Paul University Philippines – Graduate School.

Roison Andro Narvaez, MSN RN, PhD (c) is a Registered Nurse and a Professor of St. Paul University Philippines – Graduate School.

Jessica Barrientos Rodado, RN is a Registered Nurse and a student at St. Paul University Philippines – Graduate School.