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FROM THE EDITOR-IN-CHIEF

Addressing Psychological Well-Being in Chronic Disease Management

We are thrilled to present another rich collection of articles that explore critical health concerns spanning diverse disciplines, reflecting the dynamic and multifaceted nature of healthcare challenges in Africa. The topics underscore the pressing need to bridge gaps in healthcare delivery, emphasizing the importance of context-specific approaches tailored to the unique socio-cultural and economic realities in our clime. A recurring theme is the necessity of targeted interventions to address urgent health challenges, ranging from infectious diseases and chronic conditions to mental health and preventive care. I will like to highlight a few, including the study by Fadeyi et al. at the University of Ilorin Teaching Hospital which reported a high prevalence of microbiologically confirmed neonatal sepsis. More than half of the identified pathogens were multidrug resistant, mainly caused by *Staphylococcus aureus*, emphasizing the urgent necessity for antimicrobial stewardship and caregiver education. Adebayo et al. in Tanzania found obstructive sleep apnoea to be prevalent in tertiary hospital patients, linked to obesity and male gender, and advocated the need for improved diagnostics and public awareness. In another study, Babalola et al. highlighted the significant association between pre-orchidectomy dihydrotestosterone levels and Gleason scores among patients with prostate cancer while the work by Adaje et al. serves as a poignant reminder of the significant efforts still required to reduce the high mortality rate among children under the age of five, primarily due to preventable causes.

Chronic diseases such as diabetes, cardiovascular diseases, cancer, and autoimmune disorders significantly impact not only physical health but also psychological well-being. An increasing body of research emphasizes the necessity of addressing psychological factors in chronic disease management, as these aspects influence disease progression, treatment adherence, and overall quality of life.^{1,2} Living with a chronic illness often leads to psychological distress, including anxiety, depression, and reduced self-esteem. This exacerbates the burden of disease by reducing functional status and complicating disease management.¹

It has been shown that depression is a significant predictor of poor outcomes in chronic conditions, such as increased hospitalizations, non-adherence to medication, and higher mortality rates.³ Conversely, positive psychological states, including resilience and optimism, are linked to better health outcomes. For example, the role of optimism in fostering adaptive coping mechanisms and enhancing recovery in cardiac patients has been demonstrated.^{4,5} Therefore, addressing psychological health can improve not only mental well-being but also physical health outcomes.

The importance of assessing the psychological health status of patients with Type 2 Diabetes Mellitus (T2DM) was the focus of the study by Mohammed et al. The findings showed a significant mental health burden among individuals with T2DM, with 46.5% experiencing major depressive disorder and 42.2% suffering from anxiety

disorders. These co-morbidities correlated with poor glycaemic control, increased complications, and reduced medication adherence. The research emphasizes the need for integrating mental health care into diabetes management, recommending routine mental health screenings and early intervention to enhance glycaemic control and treatment adherence. There is also the need for policymakers to prioritize mental health resources within diabetes care programs, invest in healthcare worker training, and support public awareness campaigns. This approach is also relevant to the care of other chronic health conditions.¹⁻³ Healthcare providers must be trained to recognize psychological distress in such patients, and to offer appropriate care, including mental health referrals where necessary. The biopsychosocial model advocates for a comprehensive approach to chronic disease management, incorporating biological, psychological, and social dimensions. Studies support the efficacy of this approach in improving patient outcomes, patients with chronic illnesses who participated in cognitive-behavioural therapy (CBT) experienced significant improvements in emotional well-being and self-management behaviours.^{6,7}

Despite the evidence, psychological care is often overlooked in chronic disease management. Barriers include stigma associated with mental health, limited access to mental health services, and a lack of interdisciplinary collaboration. Addressing these challenges requires policy changes, increased funding for integrated care models, and training for healthcare providers to recognize and

address psychological distress.⁸ It has also been suggested that digital mental health tools can be developed and deployed to address treatment gaps in resource-limited settings. In some other clinical context, digital tools have been shown to improve health literacy and coping mechanisms among patients.^{9,10}

In addition, more research is needed in our climes that focus on the development and implementation of integrated care models that prioritize psychological well-being alongside physical health.

We extend our sincere appreciation to our reviewers, authors, and readers whose dedication and collaboration continue to shape the success of this journal. The journal remains committed to serving as a dynamic forum for sharing knowledge and innovation among healthcare professionals, researchers, and policymakers worldwide. Publishing with us not only ensures your work reaches a broad and diverse audience but also amplifies its impact on healthcare advancement in the region and beyond. Let us jointly uphold and elevate the journal's standing as a vibrant platform for disseminating medical knowledge, research and education. We eagerly look forward to your contributions, which will undoubtedly enrich future editions and inspire progress in global healthcare.

Professor G. E. Erhabor

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