According to WHO data a person’s health depends on the quality of medicine (10-15%), heredity (15-20%), ecological factors influence (25%) and the person’s lifestyle (50-55%).

In 1989 the St. Vincent Declaration was published, an international regulatory document which promotes a set of goals and principles for the social and medical care of people with diabetes mellitus (DM). Among other things it declares that an exceptionally important part of any action plan on its implementation includes a creation of training programs for specialists who would teach patients and their families about self-control methods.

According to long-term clinical observation of endocrinologists from all over the world, a proper training and aftercare program for patients with DM ensures a long-term compensation of the disease, decreases the number of acute complications, shortens the periods of hospitalization time and temporary disablement and reduces occurrences of amputations due to diabetic gangrene. An analysis conducted by the researchers from different countries using the data over the past decade has shown a significant metabolic control optimization in children and teenagers with type 1 DM and at the same time a reduction of hypoglycemia occurrences. The researchers relate this positive progress of the patients’ condition to the implementation of training programs into clinical practice and development of an active motivation towards self-management of young people during the research period.

There is a wide variety of lifestyle guidelines for patients with DM. But not all of them could be used by patients as they may contain plenty of inaccuracies and mistakes. Patient education in groups or individually at the specialized medical institutions provided by the trained and experienced professionals helps to avoid such mistakes.

Nowadays diabetes self-management workshops have been created and actively functioning all over the world. The objectives of such education consist not only in providing a patient with all necessary information but also in a step-by-step correction of his understanding of the disease and treatment methods and in development of a proactive approach to life. The best DM management, forehanded and adequate overcoming of life obstacles is only possible when the patient is absolutely conscious about his disease.

The educational process can be collective or individual. Each of these types has its advantages as well as disadvantages. There are two different approaches to education – “acceptance-based” and “authorized”. The following categories of patients are the most "problematic". The first includes young people with newly discovered DM or with a short disease history who do not want to accept all the restrictions involved by DM and therefore negatively meet any recommendations given by the medical personnel. The second group includes “experienced” diabetics who believe that their rich personal experience is enough and the lessons will give them nothing new.

The training program at the diabetes self-management workshops should be clearly organized which means that the volumes of information, the order of its presentation and subject list are strictly specified. The goal and structure of each lesson should be strictly determined. Retention of the
theoretical material is intensified by using visual material and pedagogical techniques which improve mastering, repetition and reinforcement of acquired knowledge and skills. Training programs are targeting a specific group of people with diabetes, that’s why separate classes for patients with DM 1 and DM 2, children with DM, their parents, and pregnant women give the best results. At the same time this ideal (separate) training program is only possible at a specially designated self-management schools (at the polyclinics as a rule) with professional personnel.

At the “diabetes school” practical skills are also developed as an obligatory addition to the theoretical knowledge. It’s been reported that education is effective if it is carried by an educator. Audiovisual items (brochures, guidelines, books, movies etc) are used as a supplement to the basic course for the repetition of the acquired material.

The optimal staff of a diabetes self-management workshop includes a diabetes specialist who carries out classes, a nutrition specialist (a doctor or a nurse) and a specially trained assistant nurse who can give any needed consultative assistance to the patients.

At the SE «IEPP» clinic a self-management school for DM patients has been functioning since 2001. Mainly a group method is used during classes. DM 1 and DM 2 patients are trained together which happens due to limited hospital stay and unavailability of special personnel who could provide separate classes. Along with lecture course we use interactive maps (Healthy Interactions Inc). Development and implementation of structured educational system is a result of 13 years of experience. It includes a course of 12 lectures dedicated to different aspects of the disease self-management. The educational system allows to the patients to attend classes together with their relatives.

Conclusions:
1. Regardless the conventional opinion on the differential training of the patients with diabetes type 1 and 2, present conditions (a short patient day, lack of trained personnel of self-management school in most of endocrinological institutions) allow to carry out classes only in mixed groups.
2. A training program should be structured and include the key issues of self-management. Targeting the patients only to specific subjects, for example about a diet, is unacceptable.
3. The training should be a dialogue which supposes the possibility of asking questions at any point of a lecture.
4. The patients should take an active part in the educational process. The discussion of personal cases encourages retention of the theoretical material.
5. The patients who attended self-management classes are more committed to the treatment which contributes to more optimal diabetes compensation.
6. For patients with newly diagnosed diabetes it’s recommended to attend self-management classes together with their relatives.