INTISARI

Latar belakang. Di Indonesia permasalahan yang berhubungan dengan kelangsungan hidup anak saat ini antara lain angka kematian bayi yang masih cukup tinggi. Di sisi lain penyakit Infeksi saluran Pernafasan Akut (ISPA) dan diare masih merupakan penyebab utama kematian bayi dan anak balita. Kekurangan gizi terutama Kurang Energi dan Protein adalah factor pra kondisi yang memudahkan anak menderita sakit infeksi, khususnya ISPA dan diare.

Tujuan penelitian. Penelitian ini bertujuan untuk mengetahui pengaruh KEP terhadap durasi sakit ISPA, Diare dan pertumbuhan fisik anak balita.

Metode penelitian. Desain penelitian ini adalah kohort. Subyek penelitian ini anak balita, terdiri 2 kelompok, balita KEP dan tidak KEP. Besar sampel 36 anak/kelompok. Variabel yang diteliti adalah status KEP, durasi sakit ISPA dan diare, pertumbuhan fisik anak, dan biaya periksa kesehatan anak. Data BB dikumpulkan dengan menimbang anak/bulan dengan menggunakan dacin. Data TB/PB diukur dengan menggunakan microtoise dan papan pengukur panjang badan. Data penyakit ISPA dan diare dikumpulkan dengan metode wawancara *(recall)* terstruktur setiap minggu oleh para medis. Analisis data dilakukan dengan menggunakan uji t test, kai kudrat, uji Mann Withney, dan perhitungan risiko relatif (RR).

Hasil penelitian. Ada perbedaan yang bermakna durasi sakit ISPA dan diare antara balita KEP dan tidak KEP. Durasi sakit ISPA dan diare balita KEP lebih lama dibanding balita tidak KEP. Balita KEP mempunyai risiko terkena sakit ISPA dan diare lebih besar dibanding balita tidak KEP. Balita KEP lebih sering mengalami gangguan pertumbuhan fisik dibanding balita tidak KEP. Biaya periksa kesehatan balita KEP lebih besar dibanding balita tidak KEP.

Kesimpulan. Anak balita yang KEP akan mempengaruhi durasi sakit ISPA, diare, dan pertumbuhan fisik serta biaya periksa kesehatan.

Kata kunci: KEP, balita, durasi, ISPA, diare.

ABSTRACT

Background. The survival of children influenced by Mortality Rate and Protein Energy Malnutrition (PEM) which still high. On the other side, diarrhea and Acute Respiratory Infection (ARI) still being the mainly caution of babies and children under five years mortalities. Malnutrition is a pre condition factor for the all cases above.

Objectives. The study was conducted to investigate the influence of PEM for diarrhea and ARI duration, and physical growth among children under five years.

Study design. The study was a cohort . The subjects were children under five years with PEM and non PEM cases. Number of subjects were 36 children per case. The data collected in this study included characteristics of PEM status, Duration of ARI and Diarrhea, physical growth (e.g. weight and heiht) and health care cost. Weight and height were obtained using standarized baby scale and microtoise every month, while the Diarrhea, ARI, and health care cost data were obtained using structured recall questionnaire every week. The data were analyzed by "T-test, chi square" with SPSS software.

Results. There were the significant defferences of the duration and risk of ARI and diarrhea, physical growth, and health care cost for the PEM and Non PEM subjects ($p < 0,05$). Duration of ARI and diarrhea for the PEM subjects were longer than Non PEM subjects. The ARI' risk and diarrhea for the PEM subjects were bigger than Non PEM subjects. PEM subjects were occasionally suffering from ARI and diarrhea rather than Non PEM subjects. PEM subjects were mostly suffer from physical growth disorder comparing with Non PEM subjects. PEM subjects had the more expensive cost for health care than Non PEM subjects.

Conclusion: Children under five years with PEM will influence the duration and risk for ARI and diarrhea, physical growth, and health care cost.

Keywords: PEM, children under five years, duration, ARI, diarrhea