

INTISARI

Latar Belakang: *Interdialytic Weight Gain* (IDWG) merupakan salah satu tantangan utama pasien hemodialisis karena berisiko menimbulkan komplikasi serius hingga mortalitas. Salah satu faktor penting dalam mengontrol IDWG adalah *self efficacy* dalam mengendalikan cairan. Umumnya, IDWG pasien akan stabil, tetapi dapat bersifat fluktuatif. Namun, studi mengenai perubahan IDWG di Indonesia masih terbatas.

Tujuan Penelitian: Mengetahui gambaran IDWG dan *self efficacy* pengendalian cairan pada pasien hemodialisis di RSUP Dr. Sardjito secara umum dan berdasarkan karakteristik demografi serta mengetahui perubahan IDWG pasien selama satu bulan.

Metode: Penelitian deskriptif observasional dengan desain *prospective study*. Sampel sebanyak 61 responden dipilih menggunakan teknik *consecutive sampling*. Pengukuran IDWG dilakukan selama delapan sesi hemodialisis. *Self efficacy* pengendalian cairan diukur dengan kuesioner I-FIAI. Data dianalisis secara univariat dan dilakukan uji *crosstab* untuk mengetahui gambaran IDWG dan *self efficacy* berdasarkan karakteristik demografi.

Hasil: Mayoritas pasien memiliki IDWG sedang (52,5%). Rata-rata IDWG tertinggi terjadi pada sesi ke-5 (5,54%) dan terendah pada sesi ke-8 (4,13%). Rata-rata skor *self efficacy* dalam mengendalikan cairan adalah $209,16 \pm 59,51$.

Kesimpulan: IDWG sebagian besar pasien berada pada kategori sedang. IDWG sedang dan berat ditemukan pada pasien dengan pendidikan tinggi, lama HD >5 tahun, memiliki penyakit penyerta. IDWG lebih tinggi terjadi ketika jarak waktu antar dialisis lebih panjang. *Self efficacy* pengendalian cairan lebih tinggi pada pasien berusia >65 tahun, laki-laki, memiliki tingkat pendidikan tinggi, dan memiliki lama HD <1 tahun.

Kata Kunci: *interdialytic weight gain*, *self efficacy*, hemodialisis, pengendalian cairan

ABSTRACT

Background: *Interdialytic Weight Gain (IDWG)* or fluid overload during the interdialytic period is one of the major challenges for hemodialysis patients that potentially leading to serious complications and mortality. One of the key factors in managing IDWG is *self efficacy* in fluid control. Generally, IDWG tends to be stable, but in some case it may fluctuate. However, studies on IDWG changes in Indonesia remain limited.

Objective: to describe IDWG and *self efficacy* of fluid control among hemodialysis patients at RSUP Dr. Sardjito in general and based on demographic characteristics, and to observe IDWG changes over a one month period.

Method: This research was a descriptive observational study with a prospective design. Total 61 respondents were selected using consecutive sampling. IDWG was measured over eight hemodialysis sessions. *Self efficacy* of fluid control was measured using the I-FIAI questionnaire. Data were analyzed using univariate analysis and crosstab test to explore IDWG and *self efficacy* based on demographic characteristic.

Result: The majority of patients had moderate IDWG (52,5%). The highest mean IDWG occurred in session 5 (5,54%) and the lowest in session 8 (4,13%). The mean of *self efficacy* score for fluid control was $209,16 \pm 59,51$.

Conclusion: Most patients had moderate IDWG. Moderate to high IDWG was found among patients with higher education, >5 years of hemodialysis, and had comorbidities. Higher IDWG was also occurred when the interval between dialysis sessions was longer. *Self efficacy* of fluid control was higher among patients aged >65, males, those with higher education, and had been on hemodialysis for <1 years.

Keywords: *interdialytic weight gain, self efficacy, hemodialysis, fluid control*