

INTISARI

STUDI KOMPARASI KUALITAS HIDUP PASIEN KANKER SERVIKS DENGAN DUKUNGAN KELUARGA DARI KELUARGA INTI DAN KELUARGA BESAR DI RSUP Dr. SARDJITO YOGYAKARTA

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Latar Belakang: Perjalanan alamiah penyakit, efek samping dari pengobatan berupa tindakan operatif, kemoterapi maupun kemoradiasi menimbulkan penurunan kualitas hidup pasien sehingga dukungan keluarga menjadi kebutuhan dalam penanganan pasien kanker.

Tujuan: Membandingkan kualitas hidup pasien kanker serviks pada dukungan keluarga inti dan keluarga besar di RSUP Dr. Sardjito Yogyakarta

Metode: Populasi penelitian adalah seluruh pasien kanker serviks yang sedang menjalani program kemoterapi di RSUP DR. Sardjito Yogyakarta pada bulan Oktober – November 2016 dengan tehnik *purposive sampling* dengan 62 responden, 30 pada kelompok keluarga inti dan 32 pada kelompok keluarga besar. Penelitian ini menggunakan instrumen dukungan keluarga, EORTC QLQ-CX30 Versi bahasa Indonesia dan EORTC QLQ-CX24 yang telah diterjemahkan. Pasien diukur kualitas hidupnya pada saat melakukan kemoterapi.

Hasil: Kualitas hidup pasien kanker serviks supportif memiliki nilai rerata >50, nilai rerata kesehatan umum pada keluarga inti dan keluarga besar 76,28±21,434 vs 67,82±22,017. Pada skala gejala skala *multi-item* dan skala *single-item* nilai rerata <50 kecuali kesulitan keuangan. Sedangkan pada kualitas hidup pasien kanker serviks non supportif status kesehatan global dan skala fungsi >50 dengan status kesehatan global 70,83±20,972 vs 75,00±8,33 sedangkan pada skala gejala, skala *multi-item* dan skala *single-item* nilai rerata <50 kecuali pada kelelahan dan nyeri. Terdapat perbedaan bermakna antara kedua kelompok dengan nilai $p < 0,05$ yaitu konstipasi ($p = 0,049$), dan kesulitan keuangan ($p = 0,045$)

Kesimpulan: Tidak ada perbedaan bermakna antara kualitas hidup pasien kanker serviks dengan dukungan keluarga inti dan keluarga besar. Namun pada item kesulitan keuangan keluarga inti lebih baik dibanding keluarga besar dan pada item konstipasi keluarga besar lebih baik dibanding keluarga inti.

Kata Kunci : Dukungan Keluarga, Kanker serviks, Keluarga besar, Keluarga inti, kualitas hidup

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ABSTRACT

QUALITY OF LIFE OF CERVICAL CANCER PATIENT WITH NUCLEAR FAMILY SUPPORT AND EXTENDED FAMILY SUPPORT IN Dr.SARDJITO, YOGYAKARTA A COMPARATION STUDY

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Background: Nature of the disease, side effect from treatments such as surgery, chemotherapy, and chemo radiation reduce the patient's quality of life. Thus the family support is substantial in cancer patient treatment.

Aim: Comparing the quality of life of patients with cervical cancer in support of the nuclear family and extended family at Dr.Sardjito hospital Yogyakarta

Method: The study population were all cervical cancer patients treated with chemotherapy in Dr.Sardjito General Hospital, Yogyakarta from October to November 2016. Samples were collected using purposive sampling to obtain 62 respondents, 30 respondents for nuclear family group and 32 for extended family group. The study instruments were family support questionnaire, EORTC QLQ-C30 Indonesian version, and EORTC QLQ-C24 were translated to Indonesian. The quality of life was assessed during chemotherapy.

Result: Quality of life for cervical cancer patient from supportive family had mean >50. The respective mean of general health status for patients from supportive nuclear and extended family were 76.28±21.434 and 67.82±22.017. Nearly all items in symptom, multi-item and single-item scales had mean <50, except item financial problem. Meanwhile, quality of life for cervical cancer patient from unsupportive family had mean >50. The respective mean of general health status for patients from unsupportive nuclear and extended family were 70.83±20.972 and 75.00±8.33. Nearly all items in symptom, multi-item and single-item scales had mean <50, except items fatigue and sore. Several items of quality of life had p<0.05, which were constipation (p=0.049), and financial problem (p=0.045).

Conclusion: There is no significant difference between quality of life of cervical cancer patients with nuclear family support and extended family support, but on nuclear family's financial problem had better than extended family and on item constipation extended family had better than nuclear family.

Key Words : Cervical Cancer, Extended Family, Family Support, Nuclear Family, Quality of Life.