

INTISARI

Faktor-Faktor yang Mempengaruhi Asupan Gizi pada Pasien Degeneratif Paska Rawat Inap

Tri Catur Nugrahasari¹, Susetyowati¹, Isti Suryani²

Latar Belakang : Salah satu permasalahan yang sedang dihadapi oleh dunia kesehatan saat ini adalah kematian akibat penyakit degeneratif yang semakin lama semakin meningkat. Salah satu penyebab meningkatnya kematian akibat penyakit degeneratif adalah kurangnya perhatian pasien mengenai asupan gizi, apalagi ketika mereka sudah pulang dari rumah sakit. Banyak faktor yang dapat mempengaruhi asupan gizi pada pasien degeneratif paska rawat inap diantaranya yaitu faktor sosiodemografi dan faktor penyakit.

Tujuan : Untuk mengetahui hubungan antara faktor sosiodemografi (usia, jenis kelamin, tingkat pendidikan, pendapatan, pekerjaan dan status pernikahan), faktor penyakit (jenis penyakit dan riwayat prarawat inap) dengan asupan gizi (energi dan protein) pada pasien degeneratif paska rawat inap.

Metode Penelitian : Penelitian ini merupakan penelitian observasional dengan desain *cross sectional study*. Responden dalam penelitian ini sebanyak 89 orang dan merupakan pasien degeneratif paska rawat inap RSUD Sleman, yang menjalani rawat inap pada bulan April-Mei 2014. Untuk data sosiodemografi, riwayat prarawat inap, asupan energi dan protein diperoleh berdasarkan hasil wawancara, data jenis penyakit diperoleh dari data sekunder. Uji statistik yang digunakan adalah uji *chi-square* dan uji *spearman's rho*.

Hasil : Berdasarkan hasil analisis, responden yang memiliki asupan energi baik sebesar 27,0% dan asupan protein yang baik sebesar 25,8%. Dengan menggunakan uji statistik, diperoleh hasil tidak terdapat hubungan antara usia (*p value* 0,323), jenis kelamin (*p value* 0,555), tingkat pendidikan (*p value* 0,266), pendapatan (*p value* 0,892), pekerjaan (*p value* 0,609), status pernikahan (*p value* 0,106), jenis penyakit berdasarkan masalah gastrointestinal (*p value* 0,515), stres metabolik (*p value* 0,800), gangguan metabolisme protein (*p value* 0,624), riwayat prarawat inap (*p value* 0,861) dengan asupan energi. Selanjutnya, tidak terdapat hubungan antara usia (*p value* 0,348), jenis kelamin (*p value* 0,908), tingkat pendidikan (*p value* 0,188), pendapatan (*p value* 0,289), pekerjaan (*p value* 0,287), status pernikahan (*p value* 0,464), jenis penyakit berdasarkan masalah gastrointestinal (*p value* 0,156) dan gangguan metabolisme protein (*p value* 0,604), serta riwayat prarawat inap (*p value* 0,821) dengan asupan protein. Namun, terdapat hubungan antara jenis penyakit berdasarkan stres metabolik dengan asupan protein (*p value* 0,031).

Kesimpulan : Tidak ada hubungan antara faktor sosiodemografi (usia, jenis kelamin, tingkat pendidikan, pendapatan, pekerjaan dan status pernikahan). jenis penyakit berdasarkan masalah gastrointestinal, gangguan metabolisme protein dan riwayat prarawat inap dengan asupan energi dan protein. Tidak terdapat hubungan antara jenis penyakit berdasarkan stres metabolik dengan asupan energi, tetapi terdapat hubungan antara jenis penyakit berdasarkan stres metabolik dengan asupan protein.

Kata kunci : Asupan Energi, Asupan Protein, Faktor Sosiodemografi, Riwayat Prarawat Inap, Jenis Penyakit, Penyakit Degeneratif

¹ Program Studi Gizi Kesehatan Fakultas Kedokteran Universitas Gadjah Mada

² Poltekkes Kemenkes Yogyakarta, Jurusan Gizi

ABSTRACT

Factors Affecting The Intake of Nutrition in Patients Degenerative After Hospitalization

Tri Catur Nugrahasari¹, Susetyowati², Isti Suryani³

Background: Nowadays, one of the problems being faced by medical world is death due to a degenerative disease that progressively increasing. One cause of the increased mortality due to degenerative disease is the lack of attention patients about nutrition, especially when they come back from the hospital. Many factors can affect the nutritional intake in patients degenerative post-hospitalization among which sociodemographic factors and disease factors.

Objective: To determine the relationship between sociodemographic factors (age, gender, level of education, income, occupation and status of respondents) and disease factors (type of disease and history of rehospitalization) with the intake of nutrition (energy and protein) in patients degenerative after hospitalization.

Methods: This study was an observational study with cross sectional design. Subject of the study were 89 degenerative patients after hospitalization in RSUD Sleman, who was hospitalized in April-May 2014. For data on sociodemographic factors, history of rehospitalization, energy and protein intake obtained based on the interviews, for the data type of the disease was obtained from medical records. Chi-square test and Spearman's rho test was used in this study.

Results: Based on the analysis, respondents who have a good energy intake by 27.0% and respondents who have a good protein intake by 25.8%. Using statistical tests, obtained results there was no correlation between age (*p value* 0.323), gender (*p value* 0.555), level of education (*p value* 0.266), income (*p value* 0.892), occupation (*p value* 0.609), status of the respondents (*p value* 0.106), type of disease based gastrointestinal problems (*p value* 0.515), metabolic stress (*p value* 0.800), protein metabolism disorders (*p value* 0.624) and history of rehospitalization (*p value* 0.861). Furthermore, there was no correlation between age (*p value* 0.348), gender (*p value* 0.908), level of educational (*p value* 0.188), income (*p value* 0.289), occupation (*p value* 0.287), status of the respondents (*p value* 0.464), type of disease based gastrointestinal problems (*p value* 0.156), protein metabolism disorders (*p value* 0.604), history of rehospitalization (*p value* 0.821). However, there was a relationship between the type of disease based on metabolic stress with protein intake (*p value* 0.031).

Conclusion: There was no relationship between sociodemographic factors (age, sex, level of education, income, occupation and status of the respondents) and history of rehospitalization with energy and protein intake. There was no relationship between the type of disease based gastrointestinal problems and disorders of protein metabolism with energy and protein intake. There was no relationship between the type of disease based metabolic stress with energy intake, but there was a relationship between the type of disease based on metabolic stress with protein intake

Keywords: Energy Intake, Protein Intake, Sociodemographics Factors, History Of Rehospitalization, Type of Disease, Nutritional Status, Degenerative Diseases

¹ Program Studi Gizi Kesehatan Fakultas Kedokteran Universitas Gadjah Mada

² Poltekkes Kemenkes Yogyakarta, Jurusan Gizi