DIET COMPLIANCE AMONG PATIENTS WITH HYPERTENSION AT PUSKESMAS NGAGEL REJO SURABAYA

Nadifatul Kudsiyah^{1(CA)}, Hermin Tumini², Baiq Dewi Harnani R³, Heru Sulistijono⁴, Dyah Wijayanti⁵

^{1,}Prodi DIII Keperawatan Kampus Sutopo SurabayaPoltekkes Kemenkes Surabaya,

Corresponding Author nadifatulkudsiyah123@gmail.com

²Prodi DIII Keperawatan Kampus Sutopo, Poltekkes Kemenkes Surabaya, hermin.tumini@yahoo.com
³Prodi DIII Keperawatan Kampus Sutopo, Poltekkes Kemenkes Surabaya,

sby.ac.id

ABSTRACT

Hypertension occurs when blood pressure exceeds 140/90 mmHg. It is an incurable illness but being able to control it through diet. Diet is a natural control of hypertension as it has low side effects. The study aims to identify the diet obedience among patients with hypertension at Puskesmas Ngagel Rejo Surabaya. It uses the descriptive method. The population includes 20 patients with hypertension and all were taken as the samples of the study (total sampling). The single variable is diet compliance of hypertensive patients. A set of questioners was used as a data collection instrument. The study finds that 15 (75%) of the patients were obeyed the diet, and 5 (25%) disobey the hypertension diet. It is concluded that the majority of the hypertensive clients obey their diet. The study suggested that patients need to maintain their diet compliance. **Keywords:** Diet Compliance, Patient, Hypertension.

INTRODUCTION

Hypertension is a common public health problem in developing countries. Delays in treating hypertension may lead to the emergence of diseases, such as heart disease (Congestive Heart Failure), renal failure (end-stage renal disease), and vascular disease. Hypertension is still a serious public health issue as many patients do not understand about proper diet for clients with hypertension. People with hypertension are less aware of foods containing high salt (salted fish), irregular eating, and fatty foods. The World Health Organization (WHO) reported that 9.4 million people each year are suffered from hypertension. It is estimated that the numbers will increase by 2025. The Developing countries are the regions that suffered most from hypertension. According to WHO, the incidence of hypertension reached 32% comprises 42.7% to males and 39.2% to females. A survey of the Community Health Center in East Java, as many as 286,840 populations suffered from hypertension in 2012 (Ministry of Health, 2016).

Hypertension may lead to other illnesses such as heart disease, stroke, kidney, and vascular damage. The middle and upper-middle age groups are vulnerable to hypertension. Unfortunately, the main causality of hypertension remains unknown. Approximately 90% of people with hypertension are classified as essential hypertension while 10% are secondary hypertension. Primary hypertension often occurs at the age of 30-50 years. Consuming foods with high fat, cholesterol, smoking, and high stress are the triggers of hypertension. Dietary patterns that cause hypertension include high energy intake, excessive protein, excessive animal fat, and consuming too many salty foods. Foods are directly affected blood pressure stability. The content of nutrients such as fats and sodium is closely related to the emergence of hypertension. Reducing such food intake and eating foods that are high in fiber and doing sports activities are the efforts to reduce the vulnerability to hypertension (Purwanto, 2007). Adherence to a diet with low salt, fat and adequate exercise reduces the chance of hypertension. Indriyani (2009) found that 8.62% of outpatients with hypertension were unable to maintain a diet with low salt (3.44%), smoking (6.89%), and patients never have physical exercises. Patients with hypertension who are unaware of the importance of a balanced diet are apparent.

Hypertension is a preventable health problem. Control and monitor the risky behaviors, such as smoking, unhealthy diets such as lack of consumption of vegetables and fruits as well as consumption of sugar, salt, and excess fat, obesity, lack of physical activity, excessive alcohol consumption, and stress are the best ways to prevent hypertension. The Indonesian Health Basic Research found that the population aged

⁴ Prodi DIII Keperawatan Kampus Sutopo, Poltekkes Kemenkes Surabaya, heru_sulistijono@yahoo.com
⁵Prodi DIII Keperawatan Kampus Sutopo, Poltekkes Kemenkes Surabaya, dyahou.com

15 years and above is the riskier group. It reported that less consumption of vegetables and fruits (95.5%), lack of physical activity (35.5%), smoking (29.3%), obesity (31%), and general obesity (21.8%) are the contributing factors of hypertension (Riskesdas,2018). Therefore, efforts are needed to lower high blood pressure in people with hypertension by means of research on hypertension in patients how to adhere to a hypertensive diet. A healthy diet is important for health, maintaining a healthy diet regularly and structured can lower blood pressure. It can avoid the incidence of complications for people with hypertension. This study aims to explore the diet compliance among patients with hypertension at Puskesmas Ngagel Rejo Surabaya".

METHODS

The study uses a descriptive design aiming to describe and answer the problems of a phenomenon, both a single variable and various variables. The population includes 20 people with hypertension in Ngagel Rejo Health Center Area Surabaya. All populations were taken as the samples of the study, using a total sampling procedure (Sugiono, 2018). The data were collected using questionnaires containing 12 questions comprises 7 positive and 5 negative statements. The data were descriptively analyzed and presented in frequency distribution tables. All respondents will appear in anonym, provide informed consent, and confidentiality is guaranteed.

RESULTS

Table 1 Dietary Compliance of Hypertensive Patients in Ngagel Rejo Health Center Area surabaya in April 2021.

Compliance	Frequency	percentage (%)
Obedience	15	75%
Disobedience	5	25%
Total	20	100%

The results of the study in table 1 on Dietary compliance in hypertensive patients in the Ngagel Rejo Health Center Area surabaya, showed that 15 (75%) obey the diet for hyperstension while 5 (25%) of them incompliance with the diet.

DISCUSSION

The results showed that most of the respondents were obedient with a hypertensive diet. Purwanto (2006) listed some variables that affect a person's level of compliance, such as demography, disease, knowledge, therapeutic programs, psychosocial, and family support. The demographic factors including age, gender, ethnicity, socio-economic status, and education. Most of the respondents are aged 60 years and over and are susceptible to hypertension. Based on gender, there are more women than men. The socio-economic status of the respondents is lower middle class. And the average education is 6 people in high school, 6 people in elementary school, 5 people in junior high school, and 1 person in college.

Respondents' knowledge about treatment is high, therefore, the level of compliance is good. Someone who is highly knowledgeable is easier to accept and obey the advice of health workers than those with low knowledge. They understand the importance of complying with these recommendations so that the disease they suffer from does not get worse and reduces the chance of dangerous complications in the future. Therapeutic programs, namely the quality of instruction between patients and health workers determine a person's level of compliance. Psychosocial include respondents' attitudes towards hypertensive diet. The individual is aware of the importance of obeying the diet as they believe the recommendation will improve their health. Family support is also an influential factor in blood pressure treatment programs and diet. Continuous counseling and encouragement are needed so that people with hypertension are able to carry out an acceptable plan to survive with hypertension and comply with the rules of therapy. Family social support is an important factor in adherence to medical programs, (Saputro, 2009).

Based on the results of the data of the respondents who were obedient due to more routine control at the Puskesmas and often getting information from the health workers at the Puskesmas. Most of these respondents control their diet and follow the recommendations given by health workers. Respondents who do

not comply are due to their age. The older they are, they tend to be unwelcome or accept new information. Therefore, hypertension sufferers who adhere to the hypertension diet maintain their adherence to control blood pressure and prevent complications.

CONCLUSION

The study concludes that most of the hypertensive patients tend to obey and care their diet. They avoid to consume foods that trigger blood pressure such as salty food, faty food, and other physical exercises. However, the percentage of clients who incompliance with diet is still high. It means the chance of the population to get prolong hypertension is apparent. Therefore, the study advised patients with hypertension to maintain the compliance to balanced diet. For the patients who are not compliance with hypertension diet are encouraged to improve their knowledge about good diet for hypertensive people and the consequences of disobeying the diet.

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