

## ABSTRAK

Anemia kehamilan terjadi karena penurunan kadar hemoglobin <11 gr/dl selama masa kehamilan trimester I dan III. Prevelensi kejadian anemia di Puskesmas Tongguh Arosbaya masih tergolong tinggi. Anemia kehamilan pada bulan Januari 2024 didapatkan 16 ibu hamil (40%). Studi kasus ini bertujuan untuk menjelaskan faktor resiko, tanda gejala, dampak serta penatalaksanaan anemia pada multigravida trimester III di wilayah kerja Puskesmas Tongguh Arosbaya.

Desain studi kasus ini *Multiple case design* yaitu dua responden dengan kriteria sama yaitu multigravida Trimester III dengan anemia. Studi kasus dilakukan pada bulan Januari sampai Mei 2024. Pengumpulan data dilakukan dengan wawancara menggunakan kuisioner, buku KIA dan rekam medis. Analisa data yang digunakan berupa deskriptif kemudian dianalisa dalam tabel matrik dan dinarasikan.

Faktor resiko anemia responden 1 antara lain umur, pendidikan, dan paritas. Sedangkan responden 2 tidak memiliki faktor resiko terjadinya anemia. Tanda gejala anemia pada kedua responden adalah sama yaitu pusing dan mudah lelah. Saat hamil maupun bersalinan tidak terjadi dampak anemia pada responden 1. Sedangkan responden 2 terdapat dampak persalinan yaitu persalinan SC, namun indikasi persalinan SC tidak diakibatkan karena dampak anemia melainkan letak lintang. Penatalaksanaan anemia pada kedua responden secara farmakologi berupa tablet Fe dan non farmakologi berupa pemberian KIE, pemenuhan makanan kaya zat besi dan keikutsertaan dalam kegiatan kelas ibu hamil.

Tatalaksana pencegahan dan pengobatan anemia pada kehamilan diperlukan asuhan komprehensif dengan menekankan pada upaya pendidikan kesehatan untuk meningkatkan pengetahuan dalam menjaga kesehatan selama kehamilan dan mengurangi faktor resiko. Tindakan penting lainnya yaitu deteksi dini berupa pemeriksaan Hb dan pemantauan dalam konsumsi tablet Fe.

**Kata Kunci:** multigravida, anemia

## **ABSTRASCT**

*Pregnancy anemia occurs due to a decrease in hemoglobin levels <11 gr/dl during the first and third trimesters of pregnancy. The prevalence of anemia at the Tongguh Arosbaya Community Health Center is still relatively high. Pregnancy anemia in January 2024 was found in 16 pregnant women (40%). This case study aims to explain the risk factors, signs, symptoms, impact and management of anemia in third trimester multigravidae in the Tongguh Arosbaya Health Center working area.*

*This case study design is a multiple case design, namely two respondents with the same criteria, namely multigravida Trimester III with anemia. The case study was conducted from January to May 2024. Data was collected by interviews using questionnaires, KIA books and medical records. The data analysis used is descriptive, then analyzed in a matrix table and narrated.*

*Respondent 1's risk factors for anemia include age, education and parity. Meanwhile, respondent 2 did not have any risk factors for anemia. The signs of anemia in both respondents were the same, namely dizziness and fatigue. During pregnancy or childbirth, there was no impact of anemia in respondent 1. Meanwhile, respondent 2 had an impact of birth, namely SC delivery, but the indication of SC delivery was not caused by the impact of anemia but rather latitude. Management of anemia in both respondents was pharmacological in the form of Fe tablets and non-pharmacological in the form of giving IEC, fulfilling iron-rich foods and participating in class activities for pregnant women.*

*The management of prevention and treatment of anemia in pregnancy requires comprehensive care with an emphasis on health education efforts to increase knowledge in maintaining health during pregnancy and reducing risk factors. Another important action is early detection in the form of Hb examination and monitoring the consumption of Fe tablets.*

**Keywords :** *multigravida, anemia*