ABSTRACT

THE ROLE of REASSURANCE PREOPERATIVE THERAPY in HYPERTENSION PATIENTS VIEWED FROM PRE-INDUCTION'S BLOOD PRESSURE UNDERGOING SURGERY at DR. SOETOMO SURABAYA PERIOD JULY - SEPTEMBER 2017

Background: Hypertension is a disease that has become a global burden. In Indonesia, hypertension is the main risk of cardiovascular diseases constituting a leading death cause, ranking third after stroke and tuberculosis, comprising of 6.7% of deaths in all age groups. The majority of hypertension cases in the community are not diagnosed. This is evident in the blood pressure measurement on people aged 18 and up, in which it is found that the prevalence of hypertension in Indonesia is 31.7%. Only 4.7% of the population are aware of having hypertension, and only 0.4% of people consume hypertension drugs (Kemenkes, 2012). Pre-surgical hypertension often occurs in patients who will undergo surgery. If it is not an emergency, it does not involve organ damage, meaning that there is ample time to reduce blood pressure of patients.

Method: This research is an intervention research to determine the rule of the reregulation of preoperative therapy using the reassurance method for patients who would undergo surgical action at the Integrated Surgery Center of RSUD Dr. Soetomo Surabaya by observing the changes that occur in patients' pre-surgical and pre-induction blood pressures. This study used purposive sampling and using total sampling technique. 50 sample patients were divided into 2 groups, namely the group with reassurance A method and the group with reassurance B method. The data collected in this study were age, sex, occupation, basal blood pressure, pre-surgical blood pressure, and pre-induction blood pressure in patients.

Results: From the results of this study, it is known that the reassurance A method and reassurance B method did not yield statistically significant change effect (ρ 0.246 > α (0.05)) against systolic blood pressure category 1 and (ρ 0.980> α (0.05)) against systolic blood pressure category 2. Meanwhile, the influences of both reassurance A method and reassurance B method on diastolic blood pressure also was not statistically significant (ρ 0.185> α (0.05)) against category 1 and (ρ 0.416> α (0.05)) against diastolic blood pressure category 2. However, when viewed clinically, the reassurance A method was able to reduce systolic blood pressure by 85% with an average decrease of 10.68 mmHg and diastolic decreased 88% with an average decrease of 9.34 mmHg. Meanwhile, the reassurance B method decreased systolic blood pressure by 54% with an average decrease of 5.84 mmHg and diastolic decreased by 75% with an average decrease of 4.66 mmHg.

Conclusion: It can be concluded that preoperative therapy in patients with a history of hypertension through reassurance method might reduce the patients' blood pressures before surgery, although the results remain statistically insignificant and when viewed from the clinical aspect the reassurance method significantly decreases the systolic blood pressure of the patient.

Keywords: ***hypertension, reassurance, complication of hypertension surgery, preoperative management, hypertension and anesthesia, prevalence of hypertension, age in hypertension, sex in hypertension, job in hypertension.***