

ABSTRACT

**COUNSELING THROUGH HOME PHARMACY CARE TO HEMODIALYSIS
PATIENTS WITH HYPERTENSION IN REDUCING
BLOOD PRESSURE**

*(The study was carried out on outpatients in the Hemodialysis Unit
at Aloe Saboe Hospital and Toto Kabila Hospital)*

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Hypertension is an underlying disease that is in the first position as a comorbid in CKD patients with ESRD undergoing hemodialysis. It is a comorbid that is difficult to manage and is a major factor that increases the risk of cardiovascular events. While cardiovascular disease was reported as the leading cause of death in hemodialysis patients at 51%, it is therefore important for this patient group to receive special medical attention at the individual level. Therefore, pharmacists who are involved in the management of blood pressure in hemodialysis patients should be involved in providing counseling related to pharmacological and non-pharmacological therapies. Providing counseling to patients through HPC services is expected to improve patient supervision of the therapy so that patients get optimal therapeutic effects.

The aim of the study was to assess the effect of pharmacist counseling through HPC on the reduction in pressure associated with education and monitoring of patients taking medication for hemodialysis patients with hypertension in the hemodialysis unit.

This research is a quasi-experimental research with pretest-posttest treatment. This research was conducted through HPC by collecting initial data and giving informed consent in the hemodialysis unit at Aloe Saboe Hospital and Toto Kabila Hospital, Gorontalo. The parameters in this study a person will take medication through the MAQ and PCA questionnaires and the patient's blood pressure.

The number of samples that met the inclusion criteria was 61 patients, but during the study 3 of them dropped out of school. 2 patients were transferred to be inpatients and 1 patient died. So that the total number of patients until the end of the study was 58 patients and the number of this group was divided into 2 groups, namely the group without counseling. Of the 58 patients, 72.4% were male patients with a vulnerable age of > 35-59 years at 52.7%. 56.9% patient education level with advanced education level. Duration of hemodialysis > 6 months 60.3%. The results showed that the level of care of patients taking medication significantly in the counseling group, especially in the "high" level category compared to the group without counseling decreased with a significance value of $p < 0.05$. Likewise, the drinking based measurement based on PCA, where patients increased in the counseling group compared to the non-counseling group with a significance value of $p < 0.05$. The increase in taking this medicine is expected to affect the results on the patient's blood pressure so that the optimal range. As much as 86.2% of patients in the counseling group who were able to experience a decrease in systolic blood pressure and the group without counseling 17.2%. Meanwhile, for diastolic blood pressure, 69% of patients experienced a reduction in the counseling group and 10.3% in the group without counseling. After controlling for confounding variables, pharmacist counseling through HPC gave a chance of decreasing

systolic blood pressure 32,256 times (95% CI: 7,198-144,550) and diastole 42,173 times (95% CI: 6,204-286,677).

From the results of these studies it can be said that the provision of pharmacist counseling through HPC affects the increase in drinking compliance and affects the decrease in blood pressure in hemodialysis patients with hypertension.

Keyword : Home Pharmacy Care, Hemodialysis Patients With Hypertension, Blood Pressure