

RINGKASAN

Pengaruh faktor penderita baru terhadap konversi BTA TB Paru Yang mendapat pengobatan kategori-1 pada akhir fase intensif di Puskesmas se Kota Kendari, Maret s.d. Juni 2005

Oleh : Sitti Nurjuta

Cakupan program TB paru dengan indikator CDR (*Case Detection Rate*) di Kota Kendari masih sangat rendah yaitu 39 % pada tahun 2000, 20 % pada tahun 2001, dan 34 % pada tahun 2002 dari target 70 %. Indikator angka kesembuhan penderita (*Cure Rate*) baru mencapai 35 % dari target 85 %, artinya penemuan penderita TB paru BTA positif dan angka kesembuhan masih sangat rendah, padahal pemerintah telah menyediakan berbagai kemudahan dalam hal pengobatan yang diperoleh secara gratis.

Penelitian ini bertujuan untuk mempelajari pengaruh faktor penderita yang meliputi keteraturan berobat, status gizi, penyakit penyerta, pengetahuan, dan umur terhadap konversi sputum BTA TB paru setelah dua bulan pengobatan di Puskesmas.

Penelitian ini menggunakan metode observasional analitik dengan desain *prospective cohort study*. Penelitian dilakukan dengan mengidentifikasi penderita baru TB paru BTA positif yang mendapat pengobatan OAT kategori -1, dilakukan *follow up* selama dua bulan (Maret s.d. Juni 2005).

Besar sampel dalam penelitian ini sebanyak 72 orang. Pengambilan data dilakukan dengan cara observasi dan wawancara. Pengolahan data dengan menggunakan komputer. Analisis data dengan menggunakan uji *Chi-Square* untuk melihat adanya hubungan antar variabel, dan uji regresi logistik ganda, untuk mengetahui adanya pengaruh variabel independen yang diteliti secara bersamaan terhadap konversi BTA.

Hasil penelitian menunjukkan bahwa dari 72 orang penderita, yang mengalami konversi sebanyak 43 orang (59.72 %) dan yang mengalami gagal konversi sebanyak 29 orang (40.3 %). Penderita yang teratur berobat 100 % mengalami konversi, demikian pula penderita yang tidak teratur berobat 100 % mengalami gagal konversi.

Pada kelompok umur 31 – 70 tahun, risiko untuk mengalami konversi 6 kali lebih besar dibandingkan pada kelompok umur 18 – 30 tahun. Hal ini disebabkan karena penderita yang berumur lebih tua (31-71 tahun), lebih banyak yang berstatus gizi normal dibandingkan dengan umur yang lebih muda (18-30 tahun). Hasil penelitian ini menunjukkan penderita yang berumur 18 – 30 tahun 90 % mempunyai penyakit penyerta dan memiliki risiko untuk mempunyai penyakit penyerta 0.2 kali lebih kecil dibandingkan dengan kelompok umur 31 – 71 tahun.

Pada penderita yang berstatus gizi sangat kurus, risiko untuk mengalami konversi bersifat antagonis yaitu 9.5 kali lebih besar dibandingkan dengan yang berstatus gizi normal. Hal ini disebabkan karena penderita yang berstatus gizi sangat kurus lebih banyak pada kelompok umur muda (18 - 30 tahun).

Pada penderita yang tidak mempunyai penyakit penyerta risiko untuk mengalami konversi 0.11 kali lebih kecil dibandingkan dengan penderita yang mempunyai penyakit penyerta. Hal ini disebabkan karena penderita yang tidak mempunyai penyakit penyerta lebih banyak yang berstatus gizi normal, dibandingkan dengan penderita yang mempunyai penyakit penyerta.

Kesimpulan: keteraturan berobat, penyakit penyerta, status gizi dan umur penderita mempengaruhi kejadian konversi sputum BTA TB paru setelah akhir pengobatan fase intensif.

Saran : Diperlukan peningkatan penyuluhan secara terpadu tentang penyakit TB, keteraturan berobat, gizi, dan pendidikan kesehatan masyarakat.

SUMMARY

The Influence of Patients' Factor on Pulmonary Tuberculosis New cases who was Receiving Antituberculosis Drugs Category-1 in Acid-Fast Bacteria Conversion after Two-Month Treatment in Kendari, from March to June 2005

Sitti Nurjuta

The coverage of tuberculosis program, as indicated by the CDR (Case Detection Rate), in Kendari is remains low, 39 % in 2000, 20 % in 2001, 34 % in 2002 from the target of 70 %. The indicator of Cure Rate was only 35 % from the target 85 %. This indicated positive finding in pulmonary tuberculosis acid-fast bacteria and lower cure rate, although the government has provided treatment facilities which are available for free.

The objectives of this study was to identify the patients' factor, including treatment compliance, nutritional status, accompanying disease, knowledge and age on sputum conversion in acid-fast bacteria pulmonary tuberculosis after two-month treatment in public health center.

This study design was an observational analytic by using prospective cohort. The study was conducted by identifying positive acid-fast bacteria pulmonary tuberculosis new cases who was receiving antituberculosis drugs category-1 and followed-up for two month (from March to June 2005). Samples comprised 72 individuals. Data collecting by observation and interview. Data were processed with computer program by using bivariate (Chi-Square) test to analyze correlation between variables, and multiple logistic test to simultaneously find the influence of the independent variables on sputum conversion.

Result showed that from 72 patients, 43 (59.72 %) experienced conversion, and 29 others (40.3 %) had conversion failure. All patients (100 %) who were regularly treated had conversion, while, conversely, all of those (100 %) who irregularly treated had failed conversion.

Age group of 31 – 71 years had a risk of conversion 6 times higher than those in age group 18 – 30 years, as older patients (aged 31 – 71 years) where more regularly treated compared to those in younger age (18 – 30 years). This study also showed that 90 % of patients aged 18 – 30 years had accompanying disease, and had the risk of accompanying disease 0.2 times less than those belonged to age group 31 – 71 years.

The nutritional status had an antagonist risk to bacteria conversion. The patients with very thin had 9 times more risk to the bacteria conversion than normal nutritional status, this might be because the patients with very thin nutritional status were more likely regularly treatment than patients with normal nutritional status.

In patients with no accompanying disease, the conversion was 0.11 times less than those with accompanying disease. This was because the presence of the patients with no accompanying disease more likely normal nutritional status than the patients with accompanying disease.

In conclusion, treatment compliance have influence on pulmonary tuberculosis acid-fast bacteria sputum conversion, but accompanying disease, nutritional status, and patients' age was antagonistic influence.

Suggestion : To improved integrate of health education about TB disease, regularly treatment, nutrition, and public health education.

ABSTRACT

The Objective of this study was to identify the patients' factor, including treatment compliance, nutritional status, accompanying disease, knowledge, and age on sputum conversion in acid-fast bacteria pulmonary tuberculosis after two month treatment in public health center.

This was an analytic observational prospective cohort study. The study was conducted by identifying new cases positive acid-fast bacteria pulmonary tuberculosis who was receiving antituberculosis drugs category 1 and followed-up for two months (from March to June 2005).

Samples comprised 72 individuals. Data collecting by observation and interview. Data was processed by using chi-square test to analyze correlation between variables, and multiple logistic test to find the influence of the independent variables.

Result showed that from 72 patients, 43 (59.72 %) experienced conversion, and 29 others (40.3 %) had conversion failure. Age group of 31 – 71 years had a risk of conversion 6 times higher than those in age group 18 – 30 years. The patients with very thin had 9 times more risk to the bacteria conversion than normal nutritional status, this might be because the patients with very thin nutritional status were more likely regularly treatment than patients with normal nutritional status.

In patients with accompanying disease, the conversion was 0.11 times less than those with no accompanying disease

Keywords : *tuberculosis new cases first category treatment, acid-fast bacteria conversion, patients' factors.*