

BAB 6

SIMPULAN DAN SARAN

6.1 Simpulan

Berdasarkan hasil penelitian yang telah dilakukan, dapat disimpulkan beberapa hal sebagai berikut:

1. Umur

Persentase tertinggi pasien rawat inap berada pada kelompok umur 45-49 tahun. Pasien rawat jalan mempunyai persentase tertinggi sebesar 17,46% pada kelompok umur 55-59 tahun. Pada penelitian ini kejadian hipertensi lebih banyak didapatkan pada kelompok umur > 40 tahun baik pada pasien rawat jalan maupun rawat inap. Pada pasien rawat inap sebesar 92% dan pada pasien rawat jalan sebesar 92,05%.

2. Jenis Kelamin

66,7% dari total pasien rawat inap mempunyai jenis kelamin perempuan; dan dari pasien rawat jalan 63% juga dengan jenis kelamin perempuan. Berdasarkan perbandingan jenis kelamin dengan kelompok umur, didapati perempuan > 55 tahun lebih banyak menderita hipertensi baik pada pasien rawat inap maupun pasien rawat jalan.

3. Pekerjaan

50% subjek pasien rawat inap tidak mempunyai data tentang pekerjaan. Pekerjaan yang paling banyak adalah pegawai swasta sebesar 47,2%.

4. Tingkat Pendidikan

72,2% tidak mempunyai data tingkat pendidikan. Tidak ada data mungkin disebabkan karena data tidak diambil dari kuesioner atau wawancara terhadap subjek penelitian. Tamat SD merupakan persentase terbanyak kedua, dan tingkat universitas merupakan persentase terkecil.

5. Faktor Risiko

a. Rokok

86,1% dari total subjek di rawat inap tidak mempunyai data merokok atau tidak pada rekam medis; dan sebesar 13,9% subjek tidak merokok, sedangkan pada pasien rawat jalan tidak didapatkan data apakah subjek merokok atau tidak.

b. Alkohol

Hasil penelitian didapati 86,1% subjek tidak punya data, dan 13,9% subjek tidak meminum alkohol pada pasien rawat inap. Tidak didapati ada subjek yang positif minum atau mempunyai kebiasaan minum alkohol. Pada pasien rawat jalan, tidak didapati data ada subjek yang menyatakan mempunyai kebiasaan minum alkohol. Banyak tidak ada data

disebabkan karena pengumpulan data hanya didasarkan pada rekam medis. Pada penelitian ini tidak disebutkan jenis minuman alkohol, karena penelitian ini tidak menggunakan kuesioner atau wawancara. Namun sebanyak 5,6% pasien rawat inap dan 3,1% pasien rawat jalan mempunyai *fatty liver*.

c. Obesitas

Hasil penelitian didapati sebanyak 2,8% pasien rawat inap mempunyai obesitas, sedangkan pada pasien rawat jalan didapati 2,38% merupakan obesitas dan 1,63% pasien merupakan *overweight*.

6. Penyakit Penyerta

a. Diabetes Melitus

Penyakit diabetes melitus menempati frekuensi penyakit penyerta terbanyak pada pasien rawat inap dan rawat jalan. Hipertensi lebih sering didapatkan pada populasi diabetes. Terdapat etiologi dan mekanisme penyakit yang saling tumpang tindih antara hipertensi dengan diabetes melitus.

b. Penyakit Kardiovaskular

Hasil penelitian di Rumah Sakit Gotong Royong menunjukkan penyakit kardiovaskular menempati peringkat kedua dalam penyakit penyerta baik pada pasien rawat inap maupun pasien rawat jalan. Hasil penelitian di Rumah Sakit Gotong Royong, mempunyai frekuensi kejadian

terbanyak ditempati oleh penyakit jantung koroner. Beberapa data pasien mempunyai kardiomegali, tetapi tidak dapat disimpulkan apakah kardiomegali tersebut merupakan LVH.

c. Penyakit Serebrovaskular

Faktor risiko pada stroke iskemik berupa hipertensi; diabetes; hiperlipidemia; umur diatas 55 tahun; jenis kelamin laki-laki; riwayat stroke, banyak didapatkan pada hasil penelitian baik pada pasien rawat inap maupun rawat jalan, sehingga meningkatkan kejadian penyakit serebrovaskular.

d. Penyakit Ginjal Kronis

Penelitian ini tidak menentukan apakah hipertensi pada subjek disebabkan karena PGK atau tidak. Hal ini karena keterbatasan sarana dan prasarana dalam menentukan hal tersebut. Pada pasien rawat inap, sebanyak 22,2% laki-laki dan 44,4% perempuan mempunyai kreatinin serum tidak normal. Hasil yang sama juga didapatkan pada pasien rawat jalan laki-laki. Sebanyak 11,1% mempunyai kreatinin serum tidak normal, sedangkan pada perempuan didapatkan persentase yang sama. Hasil penelitian BUN baik pada pasien rawat inap dan rawat jalan menunjukkan sebagian besar masih berada dalam batas normal.

Hasil penelitian menunjukkan sebagian besar subjek baik rawat inap dan rawat jalan tidak mempunyai data serum asam urat sehingga tidak

dapat ditarik kesimpulan lebih jauh apakah memang serum asam urat memiliki pengaruh terhadap hipertensi dan PGK. Hampir sama dengan asam urat, tidak banyak didapatkan data kadar albumin baik pada pasien rawat inap dan rawat jalan.

7. Hipertensi

Hasil penelitian antara pasien rawat inap dan rawat jalan menunjukkan perbedaan. Pasien rawat inap banyak mempunyai yang tingkat risiko tinggi; sedangkan pada pasien rawat jalan banyak mempunyai tingkat risiko sedang.

Faktor risiko yang digunakan dalam penelitian ini adalah: jenis kelamin laki-laki; umur (perempuan ≥ 65 tahun dan laki-laki ≥ 55 tahun); merokok; dislipidemia; gula darah puasa 102-125 mg/dL; tes toleransi gula darah yang abnormal; obesitas; obesitas sentral; ada riwayat keluarga pernah mengalami kejadian penyakit kardiovaskular (laki-laki < 55 tahun dan perempuan < 65 tahun). Kerusakan target organ asimtomatis yang dimasukkan adalah: tekanan nadi pada lansia ≥ 60 mmHg dan apakah ada mikroalbuminuria. Kerusakan organ simptomatis yang digunakan adalah diabetes melitus; kejadian serebrovaskular; infark miokardium; gagal jantung; penyakit ginjal kronis; dan retinopati.

8. Profil Lemak

Sebagian besar pasien rawat inap dalam penelitian ini mengalami dislipidemia. Dislipidemia secara luas meliputi abnormalitas pada LDL, HDL, dan kadar trigliserida. Serum total kolesterol; trigliserida; dan LDL didapati lebih tinggi pada individu dengan hipertensi dibandingkan dengan normotensi. Individu dengan hipertensi memiliki kadar HDL yang lebih rendah dibandingkan normotensi terutama pada perempuan.

6.2 Saran

Berdasarkan penelitian yang telah dilakukan, maka saran yang dapat disampaikan adalah sebagai berikut:

1. Hasil penelitian diharapkan dapat meningkatkan kesadaran subjek penelitian dan masyarakat terhadap hipertensi dan faktor-faktor risiko.
2. Hasil penelitian diharapkan dapat dijadikan masukan bagi Rumah Sakit Gotong Royong dan pelayanan kesehatan lain untuk melengkapi rekam medis, menyusun program kesehatan untuk mengendalikan hipertensi, dan faktor-faktor risiko dalam rangka menurunkan angka kejadian hipertensi.
3. Hasil penelitian diharapkan dapat dijadikan masukan bagi institusi pendidikan untuk meningkatkan pengetahuan hipertensi dan hal-hal yang mempengaruhi hipertensi.

4. Program promosi kesehatan yang dapat dilakukan kepada subjek penelitian dan masyarakat sekitar adalah menyebarkan poster dan mengadakan *talk show* yang mempromosikan hipertensi, bahaya hipertensi dan komplikasi, serta promosi gaya hidup sehat lewat olahraga dan pola makan yang ideal.
5. Hasil penelitian ini diharapkan dapat dijadikan sebagai dasar penelitian lebih lanjut.

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