HUBUNGAN STATUS ANEMIA DAN PARITAS DENGAN

KEJADIAN PERDARAHAN POST PARTUM

DI RSUD R.A.A TJOKRONEGORO

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ABSTRAK

Latar Belakang: Perdarahan Post Partum adalah perdarahan yang melebihi 500cc dalam 24 jam pertama setelah anak dan plasenta lahir. Salah satu penyebab nya adalah Atonia uteri. Faktor predisposisi terjadinya atonia uteri salah satunya adalah paritas, sering terjadi pada multipara dan grandemultipara. Selain itu juga dapat disebabkan anemia ibu hamil. **Tujuan**: menganalisis hubungan status anemia dan paritas dengan kejadian perdarahan post partum di RSUD R.A.A Tjokronegoro. **Metode**: Jenis penelitian observasional dengan pendekatan kasus control. Populasi kasus dalam penelitian ini adalah 96 orang dan diperoleh sampel 30 orang ibu post partum sebagai kelompok kasus. Sedangkan 30 ibu yang tidak mengalami perdarahan postpartum dijadikan kelompok control.Pengumpulan data diperoleh data rekam medis. Data di analisis secara univariat dan multi variat dengan *chi square* dan *Odd Ratio* (OR).**Hasil** : Kejadian ibu bersalin yang mengalami perdarahan post partum di RSUD R.A.A Tjokrongeoro adalah 96 orang. Jumlah kejadian perdarahan postpartum pada ibu bersalin dengan kejadian anemia yaitu 72,7% dan paritas >3 69,6%. Jjumlah kejadian perdarahan postpartum pada ibu bersalin tanpa anemia yaitu 36,8% dan paritas < 3 yaitu 37,8%. adanya hubungan status anemia dengan kejadian perdarahan postpartum di RSUD R.A.A Tjokronegoro Purworejo (p=0,045 dan OR =4,571) dan ada hubungan statu paritas dengan kejadian perdarahan postpartum di RSUD R.A.A Tjokronegoro Purworejo (p=0,034 dan OR=3,755). **Kesimpulan** : Ada hubngan status anemia dan paritad dengan kejadian dengan kejadian postpartum.

Kata kunci: Anemia, paritas, perdarahan pospartum

RELATIONSHIP BETWEEN ANEMIA AND PARITY STATUS

POST PARTUM HAEMORRHAGIC EVENTS

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ABSTRACT

Background: Postpartum hemorrhage is defined as bleeding exceeding 500cc within the first 24 hours after childbirth and placenta delivery. One of its causes is uterine atony. Predisposing factors for uterine atony include parity, which commonly occurs in multiparous and grand multiparous women. Additionally, it can be caused by maternal anemia. Objective: To analyze the relationship between anemia status and parity with the occurrence of postpartum hemorrhage at R.A.A Tjokronegoro Regional General Hospital. Methods: This study employed an observational case-control design. The case population consisted of 96 individuals, and a sample of 30 postpartum mothers was selected as the case group. Meanwhile, 30 mothers who did not experience postpartum hemorrhage were assigned as the control group. Data were collected from medical records and analyzed analyzed using univariate and multivariate with chi square and Odd Ratio (OR). Results: The incidence of postpartum hemorrhage among mothers at R.A.A Tjokronegoro Regional General Hospital was 96 individuals. The occurrence of postpartum hemorrhage in mothers with anemia was 72.7%, and in those with parity greater than 3, it was 69.6%. The occurrence of postpartum hemorrhage in mothers without anemia was 36.8%, and in those with parity less than 3, it was 37.8%. There was a significant relationship between anemia status and the occurrence of postpartum hemorrhage at RSUD R.A.A Tjokronegoro (p=0,045 dan OR =4,571), while there was significant relationship between parity and the occurrence of postpartum hemorrhage at RSUD R.A.A Tjokronegoro (p=0,034 dan OR=3,755). Conclusion: There is a relationship between anemia status and parity the occurrence of postpartum hemorrhage.

Keywords: Anemia, parity, postpartum haemoragic