

NUTRITIONAL CARE FOR PATIENTS INFARCTION STROKE, WITH DEXTRA HEMIPARESE, DIABETES MELLITUS, AND HYPERTENSION AT RS PKU MUHAMMADIYAH GAMPING

Muftin Annisa¹, Weni Kurdanti², Almira Sitasari³

^{1,2,3} Department of Nutrition, Health Polytechnic of the Ministry of Health
Yogyakarta

Jl. Tatabumi No.3 Banyuraden, Gamping, Sleman

Email: muftinannisa112@gmail.com

ABSTRACT

Stroke is a disease that attacks the brain area resulting in motor organ dysfunction. Diabetes mellitus (DM) is a group of metabolic diseases characterized by hyperglycemia that occurs due to abnormalities in insulin secretion, insulin action or both. Diabetes and stroke have a fairly close relationship, especially if you don't control your diabetes. The aim of this research is to determine the implementation of the Standardized Nutritional Care Process for Stroke Infarction patients, with Dextra Hemiparesis, Diabetes Mellitus, and Hypertension at PKU Muhammadiyah Gamping Hospital. This research method is descriptive observational with a case study design. The results of the nutritional assessment are anthropometric data on malnutrition status, biochemical data obtained from hyperglycemia, low MCV, high MCH, hypochloride, hyponatremia, low creatinine, low eosinophils, physical/clinical data, weakness in the right limbs, drooping lips, fast pulse, high blood pressure , and data on the patient's poor eating history as well intake recall of severe deficits. Monitoring carried out includes biochemistry, vital signs, complaints, and food intake. Monitoring results showed that GDS levels were still in the high category, blood pressure was high, complaints improved and food intake increased but still in the mild deficit category. Conclusion: From the results of the study, patients with poor nutritional status, high GDS, low MCV, high MCH, hypochloride, hyponatremia, low creatinine, low eosinophils, severe nutritional deficiencies, high blood pressure were found. Based on monitoring and evaluation during service, GDS levels decreased, blood pressure decreased but was still in the high category, complaints improved, food intake increased.

Keywords: Standardized Nutrition Care Process, Infarction Stroke, Dextra Hemiparesis, Diabetes Mellitus, Hypertension

¹: Student of the Department of Nutrition Poltekkes Kemenkes Yogyakarta

²: Lecturer of the Department of Nutrition Poltekkes Kemenkes Yogyakarta

³: Lecturer of the Department of Nutrition Poltekkes Kemenkes Yogyakarta

ASUHAN GIZI SARAF PADA PASIEN STROKE INFARK, DENGAN HEMIPARESE DEXTRA, DIABETES MELITUS, DAN HIPERTENSI DI RS PKU MUHAMMADIYAH GAMPING

Muftin Annisa¹, Weni Kurdanti², Almira Sitasari³
^{1,2,3}Jurusan Gizi Poltekkes Kemenkes Yogyakarta
Jl. Tatabumi No.3 Banyuraden, Gamping, Sleman
Email: muftinannisa112@gmail.com

ABSTRAK

Stroke merupakan penyakit yang menyerang daerah otak yang mengakibatkan disfungsi organ motorik. Diabetes melitus (DM) merupakan suatu kelompok penyakit metabolic dengan karakteristik hiperglikemia yang terjadi karena kelainan sekresi insulin, kerja insulin atau keduanya. Diabetes dengan stroke memiliki hubungan yang cukup erat, terutama apabila tidak mengendalikan diabetes yang dimiliki. Tujuan penelitian ini untuk mengetahui pelaksanaan Proses Asuhan Gizi Terstandar pada pasien Stroke Infark, dengan Hemiparese Dextra, Diabetes Melitus, dan Hipertensi di RS PKU Muhammadiyah Gamping. Metode penelitian ini adalah observasional deskriptif dengan rancangan studi kasus. Hasil pengkajian gizi yaitu data antropometri status gizi kurang, data biokimia diperoleh hiperglikemia, MCV rendah, MCH tinggi, hipoklorida, hiponatremia, kreatinin rendah, eosinophil rendah, data fisik/klinis kelemahan pada anggota gerak kanan, bibir merot, nadi cepat, tekanan darah tinggi, dan data riwayat makan pasien kurang baik serta asupan recall deficit berat. Monitoring yang dilakukan meliputi biokimia, vital sign, keluhan, serta asupan makan. Hasil monitoring diperoleh kadar GDS masih dalam kategori tinggi, tekanan darah tinggi, keluhan membaik serta asupan makan meningkat namun masih dalam kategori deficit ringan. Kesimpulan: Dari hasil penelitian dapat ditemuan pasien dengan status gizi kurang, GDS tinggi, MCV rendah, MCH tinggi, hipoklorida, hiponatremia, kreatinin rendah, eosinophil rendah, asupan zat gizi defisi berat, tekanan darah tinggi. Berdasarkan monitoring dan evaluasi selama pelayanan kadar GDS menurun, tekanan darah menurun namun masih kategori tinggi, keluhan membaik, asupan makan meningkat.

Kata kunci: Proses Asuhan Gizi Terstandar, *Stroke Infark*, *Hemiparese Dextra*, Diabetes Melitus, Hipertensi

¹: Mahasiswa Jurusan Gizi Poltekkes Kemenkes Yogyakarta

²: Dosen Jurusan Gizi Poltekkes Kemenkes Yogyakarta

³: Dosen Jurusan Gizi Poltekkes Kemenkes Yogyakarta