

**OVERVIEW OF LOW NUTRITION DIET LOW-PROTEIN DIET IN  
PATIENT WITH CHRONIC KIDNEY DISEASE IN PKU  
MUHAMMADIYAH HOSPITAL YOGYAKARTA**

PutriNila Ardianti<sup>1</sup>, Isti Suryani<sup>2</sup>, Idi Setiyobroto<sup>3</sup>  
JurusanGiziPoltekkesKemenkes Yogyakarta  
Jl. Tata Bumi No.3, Banyuraden, Gamping, Sleman, D.I Yogyakarta  
Email :nilaputri7@gmail.com

**ABSTRACT**

A low-protein diet was a diet that given to patients with a medical diagnosis of chronic kidney disease. This diet was given to achieve and maintain optimal nutritional status by considering the remaining kidney function, in order to maintain the kidney's condition. Chronic kidney disease was a condition characterized by a gradual loss of kidney function over time, then it made the kidney finally unable to perform its function properly. The purpose of this study was to comprehend the description of nutritional care low-protein diet in patients with chronic kidney disease in PKU Muhammadiyah Hospital Yogyakarta.

This research was a qualitative research with case study approach. The population that examined were all hospitalized patients at RS PKU Muhammadiyah Yogyakarta. There were three people that taken as the samples.

The results of three chronic kidney disease respondents found that screening scores showed  $\geq 2$ . Nutrition status of respondents with % LILA is  $< 90\%$ . Low haemoglobin, urea, and high creatinine levels. Blood pressure was unstable but rather high. There was a deficiency in the food intake. The defined nutritional diagnosis was NI-2.1 inadequate oral food and beverage intake, NI-5.4 Decrease in protein nutrient requirements, NC-3.2 unexpected weight loss, and NB-1.1 Lack of knowledge related to food / nutrients. Implementation of nutrition was meant by giving of protein  $\leq 45$  gram. Monitoring and evaluation of anthropometry, biochemistry, physical / clinical, and food intake.

From this research, it could be concluded that nutritional screening was done using *Malnutrition Universal Screening Tools* (MUST) with the results of the three respondents at risk of malnutrition. The nutrition status of respondents was in less nutrition. Patients have anaemia and elevated levels of urea and creatinine. The fluctuations of blood pressure and lack of food intake. Monitoring and evaluation on biochemistry and clinic experience fluctuation and nutritional intake of respondents increased every day.

Keywords: Nutritional Care, Low Protein Diet, Chronic Kidney Disease

**TINJAUAN ASUHAN GIZI DIET RENDAH PROTEIN PADA PASIEN  
GAGAL GINJAL KRONIK RAWAT INAP DI RS PKU  
MUHAMMADIYAH YOGYAKARTA**

Putri Nila Ardianti<sup>1</sup>, Isti Suryani<sup>2</sup>, Idi Setiyobroto<sup>3</sup>  
Jurusan Gizi Poltekkes Kemenkes Yogyakarta  
Jl. Tata Bumi No.3, Banyuraden, Gamping, Sleman, D.I Yogyakarta  
Email :nilaputri7@gmail.com

**ABSTRAK**

Diet rendah protein merupakan diet yang diberikan pada pasien dengan diagnosa medis gagal ginjal kronik. Diet ini diberikan untuk mencapai dan mempertahankan status gizi optimal dengan memperhitungkan sisa fungsi ginjal, agar tidak membebankan kerja ginjal. Gagal ginjal kronik adalah suatu penyakit yang menyebabkan fungsi organ ginjal mengalami penurunan hingga akhirnya tidak mampu melakukan fungsinya dengan baik. Tujuan penelitian ini adalah Diketuainya gambaran asuhan gizi diet rendah protein pada pasien gagal ginjal kronik rawat inap di RS PKU Muhammadiyah Yogyakarta.

Penelitian ini penelitian yang bersifat kualitatif dengan pendekatan studi kasus. Populasi yang diteliti adalah semua pasien yang dirawat inap di RS PKU Muhammadiyah Yogyakarta. Banyak sampel yang diambil adalah 3 orang.

Hasil penelitian dari tiga responden gagal ginjal kronik didapatkan bahwa skor skrining menunjukkan  $\geq 2$ . Status gizi responden dengan %LILA adalah  $< 90\%$ . Kadar hemoglobin rendah, ureum, dan kreatinin tinggi. Tekanan darah tidak stabil namun cenderung tinggi. Asupan makan mengalami defisiensi. Diagnosis gizi yang ditentukan yaitu NI-2.1 Inadekuat oral food and beverage intake, NI-5.4 Penurunan kebutuhan zat gizi protein, NC-3.2 penurunan berat badan yang tidak diharapkan, dan NB-1.1 Kurangnya pengetahuan berhubungan dengan makanan/zat gizi. Implementasi gizi yaitu pemberian protein  $\leq 45$  gram. Monitoring dan evaluasi antropometri, biokomia, fisik/klinik, dan asupan makan.

Dari penelitian ini dapat ditarik kesimpulan bahwa Skrining gizi dilakukan menggunakan *Malnutrition Universal Screaning Tools (MUST)* dengan hasil ketiga responden beresiko mengalami malnutrisi. Status gizi responden adalah gizi kurang. Pasien mengalami anemia dan peningkatan kadar ureum dan kreatinin. Tekanan darah fluktuasi dan mengalami kekurangan asupan makan. Monitoring dan evaluasi pada biokimia dan klinik mengalami fluktuasi serta asupan gizi responden mengalami peningkatan setiap harinya.

Kata kunci : Asuhan Gizi, Diet Rendah Protein, Gagal Ginjal Kronik