

**PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN GANGREN
EKSTREMITAS INFERIOR SINISTRA DENGAN TINDAKAN
AMPUTASI PADA PASIEN DIABETES MELITUS TIPE 2 DI RS PKU
MUHAMMADIYAH GOMBONG**

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ABSTRAK

Latar Belakang : Diabetes melitus (DM) adalah penyakit metabolik kronis yang ditandai hiperglikemi. Penyakit ini dapat menimbulkan komplikasi serius, salah satunya gangren. Komplikasi ini berisiko terjadi pada sekitar 15% pasien DM di Indonesia, dan secara global mencapai 6,4%. Asuhan gizi perlu dilakukan untuk mendukung perawatan terutama dalam mengontrol kadar gula darah, penyembuhan luka, mencegah infeksi, dan peningkatan status imun, sehingga perlu dikaji untuk mendukung perawatan pasien gangren.

Tujuan : Mengetahui pelaksanaan asuhan gizi terstandar pada pasien Gangren Ekstremitas Inferior Sinistra dengan Tindakan Amputasi pada Diabetes Melitus Tipe 2

Metode : Penelitian ini menggunakan jenis penelitian deskriptif yang dirancang sebagai studi kasus.

Hasil : Hasil asesmen pada pasien Gangren Ekstremitas Inferior Sinistra menunjukkan bahwa pasien memiliki status gizi kurang. Kadar glukosa darah sewaktu dan leukosit tinggi, albumin, kalium dan hemoglobin rendah. Pasien mengalami mual, kulit kering, luka di ibu jari kaki, atrofi otot, dan penurunan nafsu makan. Riwayat asupan makan pasien dapat dikategorikan dalam defisit tingkat berat berdasarkan *24-Hour Recall* dan SQFFQ selama satu bulan. Berdasarkan hasil monitoring dan evaluasi selama dua hari, terjadi peningkatan asupan makan, penurunan kadar glukosa darah sewaktu, peningkatan kadar albumin, serta perbaikan kondisi fisik ditandai dengan hilangnya keluhan mual.

Kesimpulan : Pasien gangren ekstremitas inferior sinistra menunjukkan status gizi kurang dengan gangguan biokimia dan fisik yang mengindikasikan kondisi metabolik yang buruk. Intervensi gizi yang diberikan selama dua hari menunjukkan hasil positif berupa peningkatan asupan makan, perbaikan kadar glukosa darah dan albumin, serta perbaikan gejala fisik.

Kata Kunci : Proses Asuhan Gizi Terstandar, Gangren Ekstremitas, Diabetes Melitus Tipe 2

***STANDARDIZED NUTRITIONAL CARE PROCESS IN A PATIENT WITH
GANGRENE OF THE LEFT LOWER EXTREMITY UNDERGOING
AMPUTATION CAUSED BY TYPE 2 DIABETES MELLITUS AT PKU
MUHAMMADIYAH GOMBONG HOSPITAL***

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ABSTRACT

Background: Diabetes mellitus (DM) is a chronic metabolic disease characterized by hyperglycemia. This disease can lead to serious complications, one of which is gangrene. This complication is estimated to occur in around 15% of DM patients in Indonesia, and globally reaches 6.4%. Nutritional care is essential to support treatment, particularly in controlling blood glucose levels, wound healing, preventing infections, and boosting immune status. Therefore, a nutritional assessment is needed to support the care of patients with gangrene.

Objective: To understand the implementation of standardized nutritional care process in a patient with Gangrene of the Left Lower Extremity undergoing amputation due to Type 2 Diabetes Mellitus.

Methods: This research is a descriptive study designed as a case study.

Results: The assessment of a patient with Gangrene of the Left Lower Extremity showed that the patient had poor nutritional status. Random blood glucose and leukocyte levels were high, while albumin, potassium, and hemoglobin levels were low. The patient experienced nausea, dry skin, wounds on the big toe, muscle atrophy, and decreased appetite. The patient's dietary intake was categorized as severely deficient based on a 24-Hour Recall and SQFFQ over one month. Based on monitoring and evaluation over two days, there was an increase in dietary intake, a decrease in random blood glucose levels, an increase in albumin levels, and improvement in physical condition marked by the disappearance of nausea.

Conclusion: The patient with gangrene in the left lower extremity showed signs of poor nutritional status with biochemical and physical disturbances indicating a poor metabolic condition. The nutritional intervention provided over two days showed positive outcomes, including increased dietary intake, improved blood glucose and albumin levels, and relief of physical symptoms.

Keywords: Standardized Nutritional Care Process, Extremity Gangrene, Type 2 Diabetes Mellitus