

STANDARD NUTRITION CARE PROCESS FOR LEFT-SIDED HEMIPARESIS SINISTRA STROKE NON-HEMORAGIK, OF TYPE 2 DIABETES MELLITUS AND HYPERTENSION AT ISLAMIC GENERAL HOSPITAL KLATEN

Dewi Agustinningsih¹, Isti Suryani², Susilo Wirawan³

Department of Nutrition, Health Polytechnic of the Ministry of Health Yogyakarta
Jalan Tata Bumi No.3 Banyuraden, Gamping, Sleman, Yogyakarta, 55293
(Email:dewid1908@gmail.com)

ABSTRACT

Background: **Diabetes Mellitus** is a serious global health issue with widespread impacts. According to the Central Java Health Profile in 2022, the prevalence of diabetes mellitus reached 163,751 individuals. Diabetes can lead to various health risks such as high blood pressure, elevated cholesterol levels, and circulatory problems. Standardized Nutrition Care Process (SNCP) is essential to support patient recovery and maintain nutritional status.

Objective: To determine the description of the implementation process of standardized nutrition care in a patient with left-sided hemiparesis due to non-hemorrhagic stroke with type 2 Diabetes Mellitus and Hypertension at Islamic General Hospital Klaten.

Method: The type and design of this research is descriptive with a case study design. Data analysis is presented in narrative, tabular, and graphic forms.

Results: The screening results indicated a risk of malnutrition, and nutritional status based on %MUAC (Mid-Upper Arm Circumference) was categorized as undernourished. Laboratory results showed high cholesterol, LDL, and triglycerides, while HbA1c and RBS (Random Blood Sugar) were normal. Physical examination revealed left-sided body weakness, dizziness, numbness, and high blood pressure. The patient's eating habits included consuming salty foods and fried processed foods. Nutritional counseling was provided using leaflets, food exchange lists, discussions, and question-and-answer sessions.

Conclusion: The research findings identified a patient with undernutrition. Physical complaints included weakness in the left limbs, dizziness, and numbness. Based on monitoring, during the intervention, the patient's food intake increased but did not yet reach 90% of requirements. Blood sugar levels were normal, blood pressure decreased, and physical complaints of left-sided body weakness, dizziness, and numbness were reduced.

Keywords: Standardized Nutrition Care Process, Stroke, Type 2 DM, Hypertension

1: Student Researcher

2: Main Supervisor

3: Co-Supervisor

**PROSES ASUHAN GIZI TERSTANDAR PADA (PAGT) PADA PASIEN
HEMIPARESIS SINISTRA STROKE NON-HEMORAGIK , DIABETES
MELLITUS TIPE II DAN HIPERTENSI DI RUMAH SAKIT UMUM
ISLAM KLATEN**

Dewi Agustinningsih¹, Isti Suryani², Susilo Wirawan³
Jurusan Gizi Poltekkes Kemenkes Yogyakarta
Jalan Tata Bumi N0.3 Banyuraden, Gamping, Sleman, Yogyakarta, 55293
(Email: dewid1908@gmail.com)

ABSTRAK

Latar Belakang: Diabetes Mellitus menjadi masalah kesehatan global yang serius dan berdampak luas. Prevalensi Diabetes Melitus menurut profil kesehatan Jawa Tengah pada tahun 2022 sebesar 163. 751 jiwa. Diabetes dapat menyebabkan berbagai risiko kesehatan seperti tekanan darah tinggi, kolesterol tinggi, dan masalah sirkulasi darah. Asuhan Gizi Terstandar (PAGT) diperlukan untuk mendukung pemulihan pasien dan menjaga status gizi..

Tujuan: Mengetahui Gambaran proses pelaksanaan asuhan gizi terstandar pada pasien Hemiparesis Sinistra Stroke Non-Hemoragik dengan Diabetes Mellitus Tipe 2 dan Hipertensi di RSUD Islam Klaten.

Metode: Jenis dan rancangan penelitian ini adalah deskriptif dengan rancangan desain studi kasus. Analisis data disajikan dengan narasi, tabular, dan grafik.

Hasil: Hasil skrining berisiko malnutrisi, status gizi berdasarkan %LILA termasuk gizi kurang. Hasil laboratorium kolesterol, LDL, trigliserida tinggi, untuk hbA1c dan GDS normal. Hasil pemeriksaan fisik pasien merasakan kelemahan tubuh sebelah kiri, pusing, sensasi kebas, dan tekanan darah tinggi. Kebiasaan makan makanan asin dan makanan olahan yang digoreng. Konseling gizi dengan media leaflet, form bahan penukar, diskusi dan tanya jawab.

Kesimpulan: Dari hasil penelitian ditemukan pasien dengan status gizi kurang. Keluhan fisik lemah pada anggota badan sebelah kiri, pusing, dan sensasi. Berdasarkan monitoring, selama intervensi asupan makan pasien meningkat tetapi belum mencapai 90%. Kadar GDS normal, tekanan darah menurun, keluhan lemah pada tubuh sebelah kiri berkurang, tidak pusing, sensasi kebas berkurang.

Kata Kunci: Proses Asuhan Gizi Terstandar, Stroke, DM tipe 2, Hipertensi

¹: Mahasiswa peneliti

²: Pembimbing utama

³: Pembimbing pendamping