STANDARDIZED NUTRITIONAL CARE PROCESS IN PATIENTS DIABETES MELLITUS TYPE II WITH HYPERTENSION AND HYPERTRIGLYCERIDEMIA AT TIDAR MAGELANG HOSPITAL

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ABSTRACT

Background: Diabetes mellitus is a condition characterized by high blood sugar levels caused by the pancreas' inability to produce insulin. According to Basic Health Research (Riskesdas), the prevalence of diabetes in Indonesia increased from 6.9% in 2013 to 8.5% in 2018. Nutritional support is crucial for type II diabetes patients with hypertension and hypertriglyceridemia to prevent disease severity and control blood sugar levels.
Objective: Know the Standardized NCP in patients DM Type II with Hypertension and Hypertriglyceridemia at Tidar Magelang Hospital.
Method: This research is descriptive, using a case study design. Data analysis is presented in tabular and narrative form.
Results: Based on the MNA-SF screening results, the patient is at risk of malnutrition. Nutritional status based on the LILA percentile is good nutrition. Physical examination showed composmentis, wrist pain, swelling. Vital sign examination showed rapid pulse, high blood pressure. Biochemical examination of HBA1C and triglyceride levels were high; hemoglobin was low. 24-hour recall intake was insufficient. Intervention was given a 1600 kcal DM Diet, Low Salt III in the form of soft foods, with a frequency of 3 main meals, 3 snacks. Evaluation monitoring results: physical complaints decreased, pulse decreased, blood pressure was high; blood sugar levels were normal, triglycerides, and HBA1C were high; and the patient's food intake was not consistent. Food intake on the third day was small, could not be compared with previous food intake because on the third day of intervention food intake only lasted until lunch (because the patient was allowed to go home by the doctor).
Conclusion: The patient had good nutritional status, weakness, pain in the right wrist, a rapid pulse, high HBA1C and triglyceride levels, and inadequate nutrient intake. Monitoring during the intervention revealed weakness, wrist pain, decreased swelling, and decreased pulse rate; normal blood sugar levels, high triglycerides and HBA1C, and inconsistent food intake.
Keywords: Standardized Nutritional Care Process (PAGT), Diabetes Melitus Type II, Hypertension, Hypertriglyceridemia.

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN DIABETES MELITUS TIPE II DENGAN HIPERTENSI DAN HIPERTRIGLISERIDEMIA DI RSUD TIDAR MAGELANG

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ABSTRAK

Latar Belakang: **:** Diabetes mellitus adalah kondisi ketika kadar gula darah tinggi dikarenakan pankreas tidak dapat memproduksi insulin. Berdasarkan data Riskesdas, prevalensi DM di Indonesia meningkat dari 6,9% (tahun 2013) menjadi 8,5% (tahun 2018). Asuhan gizi penting bagi pasien DM tipe II dengan hipertensi dan hipertrigliseridemia untuk mencegah keparahan penyait dan mengendalikan gula darah.
Tujuan: Diketahuinya PAGT pada pasien DM tipe II dengan Hipertensi dan Hipertrigliseridemia di RSUD Tidar Magelang.
Metode: Jenis penelitian ini adalah deskriptif, dengan desain studi kasus. Analisis data disajikan dalam bentuk tabulasi dan narasi.
Hasil: Berdasarkan hasil skrining MNA-SF, pasien berisiko malnutrisi. Status gizi berdasarkan percentile LILA yaitu gizi baik. Pemeriksaan fisik dalam keadaan composmentis, nyeri pergelangan tangan, bengkak. Pemeriksaan *vital sign* nadi cepat, tekanan darah tinggi. Pemeriksaan biokimia kadar HBA1C dan trigliserida tinggi; hemoglobin rendah. Asupan *recall* 24 jam yaitu kurang. Intervensi diberikan Diet DM 1600 kkal Rendah Garam III bentuk makanan lunak, frekuensi 3x makan utama, 3x selingan. Hasil monitoring evaluasi: keluhan fisik berkurang, nadi menurun, tekanan darah tinggi; kadar gula darah normal, trigliserida, dan HBA1C tinggi; serta asupan makan pasien belum konsisten. Asupan makan hari ketiga sedikit dan tidak dapat dibandingkan dengan asupan makan sebelumnya dikarenakan pada hari ketiga intervensi asupan makan hanya sampai makan siang (karena pasien diperbolehkan pulang oleh dokter).
Kesimpulan: Pasien memiliki status gizi baik, tubuh lemas, nyeri pergelangan tangan kanan, nadi cepat; kadar HBA1C dan trigliserida tinggi; asupan zat gizi kurang. Berdasarkan monitoring selama intervensi tubuh lemas, nyeri pergelangan tangan, bengkak berkurang, nadi menurun; kadar gula darah normal, trigliserida dan HBA1C tinggi, dan asupan makan pasien belum konsisten.
Kata Kunci: Proses Asuhan Gizi Terstandar (PAGT), Diabetes Mellitus Tipe II, Hipertensi, Hipertrigliseridemia