

**PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN DIABETES
MELITUS *HYPERGLIKEMIA NEPHROPATY* DAN HIPERTENSI DI
RUMAH SAKIT UMUM DAERAH WONOSARI**

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ABSTRAK

Latar Belakang : Diabetes Mellitus (DM) merupakan penyakit metabolik kronis yang ditandai oleh hiperglikemia akibat gangguan sekresi atau kerja insulin. Jika tidak dikendalikan, DM dapat menyebabkan komplikasi, seperti nefropati diabetik dan hipertensi, yang memperburuk status gizi pasien. Proses Asuhan Gizi Terstandar (PAGT) sangat penting untuk membantu manajemen kondisi ini secara holistik dan terstruktur di rumah sakit.

Tujuan : Menjelaskan penerapan PAGT pada pasien dengan DM Tipe 2 disertai hiperglikemia, nefropati, dan hipertensi di RSUD Wonosari guna mengidentifikasi masalah gizi, merencanakan intervensi yang tepat, serta mengevaluasi efektivitasnya dalam perbaikan status klinis dan metabolik pasien.

Metode : Penelitian ini menggunakan desain studi kasus deskriptif pada satu pasien rawat inap. Data dikumpulkan melalui skrining gizi (Malnutrition Screening Tool/MST), pengkajian gizi (antropometri, biokimia, fisik-klinis, riwayat makan), penetapan diagnosis gizi dengan format PES, perencanaan intervensi berupa diet DM 1300 kkal rendah protein dan garam, serta monitoring dan evaluasi klinis dan biokimia selama perawatan.

Hasil : Pasien dengan usia 77 tahun memiliki skor MST sebesar 6 (risiko malnutrisi tinggi), status gizi kurang (berdasarkan LILA), kadar glukosa darah sewaktu 188 mg/dL, HbA1c 10,7%, ureum 66 mg/dL, kreatinin 1,7 mg/dL, hemoglobin 11,2 g/dL, tekanan darah 150/90 mmHg, dan menunjukkan gejala nyeri perut dan kelelahan. Diagnosis gizi yang ditegakkan meliputi: asupan oral tidak adekuat, kebutuhan karbohidrat, protein, dan natrium menurun, serta defisit pengetahuan gizi. Intervensi diberikan berupa makanan lunak (nasi tim, bubur), diet DM 1300 kkal RG II rendah protein dan garam, dan edukasi gizi. Evaluasi menunjukkan penurunan glukosa darah sewaktu ke nilai normal (92–98 mg/dL), perbaikan tekanan darah, dan berkurangnya gejala klinis.

Kesimpulan : Proses asuhan gizi terstandar terbukti efektif dalam membantu pengelolaan pasien DM dengan komplikasi nefropati dan hipertensi. Pendekatan sistematis melalui skrining, asesmen, diagnosis, intervensi, dan monitoring memungkinkan intervensi gizi yang lebih tepat sasaran dan memberikan hasil klinis yang lebih baik.

Kata Kunci : Proses Asuhan Gizi Terstandar pada Pasien Diabetes Mellitus Hiperglikemia Nephropaty dan Hipertensi di Rumah Sakit Umum Daerah Wonosari

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STANDARDIZED NUTRITIONAL CARE PROCESS IN PATIENTS WITH DIABETES MELLITUS HYPERGLYCEMIA NEPHROPATHY AND HYPERTENSION AT WONOSARI REGIONAL GENERAL HOSPITAL

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ABSTRACT

Background : Diabetes Mellitus (DM) is a chronic metabolic disorder marked by hyperglycemia due to impaired insulin secretion or action. Without proper management, DM can lead to complications such as diabetic nephropathy and hypertension, which further deteriorate the patient's nutritional status. The Standardized Nutrition Care Process plays a critical role in managing such complex cases in a structured and comprehensive manner in clinical settings.

Objective : To describe the implementation of Standardized Nutrition Care Process for a patient with type 2 DM complicated by hyperglycemia, nephropathy, and hypertension at Wonosari General Hospital, with the aim of identifying nutritional problems, planning appropriate interventions, and evaluating their effectiveness in improving clinical and metabolic outcomes.

Methods : This study used a descriptive case study design on one inpatient. Data were collected through nutritional screening (Malnutrition Screening Tool/MST), nutrition assessment (anthropometry, biochemical tests, physical-clinical examination, and dietary intake), diagnosis using the PES format, intervention with a 1300 kcal diabetic diet low in protein and sodium, and ongoing monitoring and evaluation of clinical and biochemical parameters.

Hasil : The 77-year-old patient had an MST score of 6 (high malnutrition risk), undernutrition (based on MUAC), random blood glucose 188 mg/dL, HbA1c 10.7%, BUN 66 mg/dL, creatinine 1.7 mg/dL, hemoglobin 11.2 g/dL, and blood pressure 150/90 mmHg, along with symptoms of abdominal pain and fatigue. Diagnosed nutrition problems included: inadequate oral intake, decreased needs for carbohydrates, protein, and sodium, and lack of nutrition knowledge. Intervention consisted of soft-textured diabetic diet (1300 kcal, low protein and sodium), and nutrition education. Evaluation showed improved random blood glucose (92–98 mg/dL), better blood pressure control, and reduced clinical symptoms.

Conclusion : The standardized nutrition care process proved effective in managing a patient with DM complicated by nephropathy and hypertension. The systematic approach—screening, assessment, diagnosis, intervention, and monitoring—enabled targeted nutrition therapy and contributed to improved clinical outcomes.

Kata Kunci : Standardized Nutritional Care Process for Diabetes Mellitus Hyperglycemia Nephropathy and Hypertension Patients at Wonosari Regional General Hospital

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