

ABSTRAK

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN ACUTE MYELOMONOCYTIC LEUKEMIA (AML)- M4 POST KEMOTERAPI, CEPHALGIA TANPA LATERALISASI ONSET AKUT, COMMUNITY- ACQUIRED PNEUMONIA (CAP), dan MALNUTRISI DI BANGSAL DAHLIA RSUP Dr. SARDJITO

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ABSTRAK

Latar Belakang : Leukemia mielomonositik akut (AML-M4) merupakan keganasan darah yang ditandai oleh proliferasi sel mieloid abnormal yang mengganggu pembentukan sel darah normal. Kondisi ini sering menyebabkan penurunan kadar hemoglobin, trombosit, serta gangguan status gizi akibat perubahan metabolisme tubuh. Pemenuhan kebutuhan gizi melalui diet tinggi energi tinggi protein diperlukan untuk mendukung regenerasi jaringan, pembentukan sel darah, dan proses penyembuhan pasien.

Tujuan: : Memberikan asuhan gizi terstandar dengan implementasi diet tinggi energi tinggi protein untuk pasien Proses Asuhan Gizi Terstandar Pada Pasien Acute Myelomonocytic Leukemia (AML)- M4 Post Kemoterapi, Cephalgia Tanpa Lateralisasi Onset Akut, Community-Acquired Pneumonia (CAP), dan Malnutrisi di Bangsal Dahlia RSUP Dr. Sardjito

Hasil : Hasil pengkajian menunjukkan pasien memiliki status gizi kurang dengan IMT 14,11 kg/m² termasuk kategori underweight. dan LiLA 52,8% tergolong gizi buruk. Pemeriksaan biokimia memperlihatkan kadar hemoglobin, albumin, dan trombosit yang rendah, mengindikasikan adanya gangguan hematologis dan ketidakseimbangan metabolik. Secara klinis, pasien tampak lemas dengan keluhan mual, muntah, dan penurunan nafsu makan. Intervensi gizi yang diberikan kepada pasien selama 3 hari berupa diet TKTP dengan bentuk Biasa (Nasi @100gr) ekstra susu Peptisol dengan energi 2000 kkal, protein 65 g, lemak 54,16 g, dan karbohidrat 313,14 g. Hasil monitoring dan evaluasi yang dilakukan selama tiga hari terhadap pemenuhan asupan dan fisik/klinis menunjukkan hasil yang fluktuatif

Kesimpulan : Asuhan gizi dengan diet tinggi energi tinggi protein melalui oral mampu membantu peningkatan pemenuhan zat gizi makro, terutama protein dan energi, serta mendukung perbaikan status gizi pasien. Perubahan klinis menunjukkan kondisi yang lebih stabil dengan penurunan keluhan subjektif dan perbaikan kadar hemoglobin

Kata kunci : leukemia mielomonositik akut, status gizi, diet tinggi energi tinggi protein, asuhan gizi terstanda

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PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN ACUTE MYELOMONOCYTIC LEUKEMIA (AML)- M4 POST KEMOTERAPI, CEPHALGIA TANPA LATERALISASI ONSET AKUT, COMMUNITY- ACQUIRED PNEUMONIA (CAP), dan MALNUTRISI DI BANGSAL DAHLIA RSUP Dr. SARDJITO

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Background : Acute myelomonocytic leukemia (AML-M4) is a blood cancer characterized by the proliferation of abnormal myeloid cells that interfere with the formation of normal blood cells. This condition often causes a decrease in hemoglobin and platelet levels, as well as nutritional disorders due to changes in the body's metabolism. Meeting nutritional needs through a high-energy, high-protein diet is necessary to support tissue regeneration, blood cell formation, and the patient's healing process.

Objective : To provide standardized nutritional care through the implementation of a high-energy, high-protein diet for patients Standardized Nutritional Care Process for Patients with Acute Myelomonocytic Leukemia (AML)- M4 Post-Chemotherapy, Acute Onset Cephalgia Without Lateralisasi, Community-Acquired Pneumonia (CAP), and Malnutrition in the Dahlia Ward of Dr. Sardjito General Hospital

Result: The assessment results showed that the patient had poor nutritional status with a BMI of 14.11 kg/m², classified as underweight, and a LiLA of 52.8%, classified as malnourished. Biochemical tests showed low hemoglobin, albumin, and platelet levels, indicating hematological disorders and metabolic imbalances. Clinically, the patient appeared weak and complained of nausea, vomiting, and loss of appetite. Nutritional intervention was provided to the patient for 3 days in the form of a TKTP diet with regular food (100 g of rice) and extra Peptisol milk, providing 2000 kcal of energy, 65 g of protein, 54.16 g of fat, and 313.14 g of carbohydrates. The results of monitoring and evaluation conducted over three days regarding intake fulfillment and physical/clinical status showed fluctuating results.

Conclusion : Nutritional care with a high-energy, high-protein diet administered orally can help improve the fulfillment of macronutrients, especially protein and energy, and support the improvement of the patient's nutritional status. Clinical changes show a more stable condition with a decrease in subjective complaints and an improvement in hemoglobin levels

Kata kunci : acute myelomonocytic leukemia, nutritional status, high-energy, high protein diet, standardized nutritional care
