

# ASUHAN GIZI TERSTANDAR MELALUI *HEMOCARE* PADA LANSIA KANKER KOLON POST RESEKSI KOLON DENGAN ANASTOMOSIS DI WILAYAH KERJA PUSKESMAS PLERET KABUPATEN BANTUL

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## ABSTRAK

**Latar Belakang:** Lansia merupakan kelompok dengan risiko tinggi terhadap kanker, termasuk kanker kolorektal, akibat proses penuaan yang memicu perubahan fisiologis, inflamasi, dan metabolik. Kanker kolorektal menimbulkan gangguan metabolisme energi dan protein serta efek samping terapi dan pembedahan yang meningkatkan risiko malnutrisi. Malnutrisi pada pasien kanker berdampak pada penurunan kapasitas fungsional, kualitas hidup, serta efektivitas terapi. Dukungan gizi yang adekuat dan berkelanjutan, meliputi pemberian edukasi dan konseling gizi melalui *home care* berperan dalam mempertahankan status gizi, mendukung pemulihan pascaoperasi, serta mencegah komplikasi.

**Tujuan:** Untuk mengetahui, melakukan, dan menganalisis kegiatan asuhan gizi responden lansia kanker kolon post reseksi kolon dengan anastomosis di wilayah kerja Puskesmas Pleret, Kabupaten Bantul

**Metode:** Jenis penelitian ini merupakan studi kasus (*case study*) deskriptif yang melibatkan satu responden lansia berusia 65 tahun yang menderita kanker kolon dan telah dilakukan reseksi kolon dengan anastomosis. Pengumpulan data dilakukan melalui wawancara, observasi, telaah rekam medis, serta pengukuran langsung. Analisis data disajikan secara deskriptif dengan mengikuti tahapan *Nutrition Care Process*. Intervensi gizi yang diberikan adalah edukasi dan konseling gizi terkait penerapan diet Tinggi Kalori Tinggi Protein (TKTP).

**Hasil:** Responden memiliki status gizi *underweight* dan mengalami penurunan berat badan 15 kg dalam satu tahun. Intervensi gizi berupa edukasi dan konseling gizi terkait penerapan diet TKTP diberikan untuk meningkatkan kecukupan asupan terutama energi dan protein untuk mendukung proses pemulihan serta mencegah penurunan status gizi lebih lanjut. Pemberian edukasi dan konseling diet tinggi kalori tinggi protein berdampak pada peningkatan asupan energi dan makronutrien selama tiga hari pemantauan. Berat badan responden juga bertambah 0,8 kg disertai peningkatan pengetahuan keluarga yang ditunjukkan dengan pemilihan bahan makanan dan teknik pengolahan yang tepat.

**Kesimpulan:** Penerapan asuhan gizi terstandar melalui edukasi dan konseling diet TKTP mampu membantu meningkatkan asupan energi dan makronutrien, kenaikan berat badan, serta peningkatan pengetahuan responden dan keluarga dalam menentukan pilihan makanan yang sesuai untuk pasien kanker kolon.

**Kata Kunci:** Lansia, Kanker Kolon, Malnutrisi, Diet TKTP, Edukasi dan Konseling Gizi

**STANDARDIZED NUTRITIONAL CARE THROUGH HOMECARE FOR ELDERLY PATIENTS WITH COLON CANCER POST-RESECTION WITH ANASTOMOSIS IN THE WORKING AREA OF THE PLERET COMMUNITY HEALTH CENTER, BANTUL REGENCY**

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**ABSTRACT**

**Background:** Older adults are a high-risk group for cancer, including colorectal cancer, due to ageing processes that trigger physiological, inflammatory, and metabolic changes. Colorectal cancer causes disturbances in energy and protein metabolism as well as treatment- and surgery-related side effects that increase the risk of malnutrition. Malnutrition in cancer patients leads to decreased functional capacity, lower quality of life, and reduced treatment effectiveness. Adequate and continuous nutritional support, including nutrition education and counselling through home care, plays an important role in maintaining nutritional status, supporting postoperative recovery, and preventing complications.

**Objective:** To identify, implement, and analyse nutrition care activities for an elderly respondent with colon cancer post-colon resection with anastomosis in the working area of Pleret Primary Health Center, Bantul Regency.

**Methods:** This research is a descriptive case study involving one elderly respondent aged 65 years with colon cancer who had undergone colon resection with anastomosis. Data were collected through interviews, observation, medical record review, and direct measurements. Data analysis was presented descriptively following the stages of the Nutrition Care Process. The nutritional intervention provided was nutrition education and counselling related to the application of a high-calorie, high-protein (HCHP) diet.

**Results:** The respondent had an underweight nutritional status and experienced a 15 kg weight loss within one year. Nutrition intervention in the form of education and counselling related to the implementation of an HCHP diet was given to increase intake adequacy, particularly energy and protein, to support the recovery process and prevent further nutritional decline. Providing HCHP diet education and counselling resulted in increased energy and macronutrient intake during three days of monitoring. The respondent also gained 0,8 kg in body weight, accompanied by improved family knowledge, as reflected in better food selection and appropriate cooking techniques.

**Conclusion:** The implementation of standardised nutrition care through education and counselling on the HCHP diet can help improve energy and macronutrient intake, promote weight gain, and enhance the knowledge of respondents and their families in selecting appropriate foods for patients with colon cancer.

**Keywords:** Older Adults, Colon Cancer, Malnutrition, High-Calorie High-Protein (HCHP) Diet, Nutrition Education and Counselling