STANDARDIZED NUTRITION CARE PROCESS (SACC) FOR PATIENTS WITH UNSTABLE ANGINA PECTORIS (UAP) AND HYPERGLYCEMIA IN THE SUMBADRA WARD, BAGAS WARAS REGIONAL HOSPITAL, KLATEN REGENCY

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ABSTRACT

Background: Diabetes mellitus (DM) is a non-communicable disease whose prevalence continues to increase and is a global health problem. DM can cause macrovascular complications, one of which is Unstable Angina Pectoris (UAP), due to the atherosclerosis process triggered by chronic hyperglycemia. UAP in DM patients can reduce food intake and increase metabolic needs, thus risking nutritional problems. Therefore, appropriate nutritional management through the Standardized Nutrition Care Process (SPC) is necessary to help control blood glucose levels, meet patient nutritional needs, improve clinical conditions, and prevent further complications.

Objective: To identify the SPC management procedures for patients with Unstable Angina Pectoris (UAP) and Diabetes Mellitus in the Sumbadra Ward, Bagas Waras Regional Hospital, Klaten Regency.

Method: This study used a descriptive observational method with a case study design. The subjects were patients diagnosed with Unstable Angina Pectoris (UAP) and Diabetes Mellitus in the Sumbadra Ward and hospitalized for at least three days at Bagas Waras Regional Hospital, Klaten Regency.

Results: Based on the assessment results, biochemical examinations showed high blood glucose (GDS), blood glucose (FBG), and GD2JPP levels. Physical and clinical examinations revealed nausea, vomiting, shortness of breath, and decreased appetite. A 24-hour recall indicated that the patient's intake was still inadequate due to decreased appetite and vomiting. The interventions provided included a 1,500 kcal diabetes diet cardiac diet and low-protein diet, along with nutrition education and consultations for the patient and family using leaflets and a food exchange list (DBMP). Monitoring of energy, protein, fat, and carbohydrate intake showed increases and decreases. Fasting and 2-hour blood sugar monitoring remained high. Physical monitoring, including nausea, vomiting, and shortness of breath, had disappeared, and clinical monitoring was normal.

Conclusion: The study revealed that the patient was at risk of malnutrition. The patient's overall condition during monitoring and evaluation improved compared to the time of hospital admission.

Keywords: Standardized Nutrition Care Process, *Unstable Angina Pectoris*, Diabetes

PROSES ASUHAN GIZI TERSTANDAR (PAGT) PADA PASIEN *UNSTABLE ANGINA PECTORIS (UAP) HIPERGLIKEMIA* DI BANGSAL SUMBADRA RSUD BAGAS WARAS KABUPATEN KLATEN

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ABSTRAK

Latar Belakang : Diabetes melitus (DM) merupakan salah satu penyakit tidak menular yang prevalensinya terus meningkat dan menjadi masalah kesehatan global. DM dapat menyebabkan komplikasi makrovaskular, salah satunya *Unstable Angina Pectoris* (UAP), akibat proses aterosklerosis yang dipicu oleh hiperglikemia kronis. Kondisi UAP pada pasien DM dapat menurunkan asupan makan dan meningkatkan kebutuhan metabolik sehingga berisiko menyebabkan masalah gizi. Oleh karena itu, diperlukan penatalaksanaan gizi yang tepat melalui Proses Asuhan Gizi Terstandar (PAGT) untuk membantu mengontrol kadar glukosa darah, memenuhi kebutuhan gizi pasien, memperbaiki kondisi klinis, serta mencegah terjadinya komplikasi lebih lanjut.

Tujuan: Mengidentifikasi tata penatalaksanaan Proses Asuhan Gizi Terstandar (PAGT) pada pasien *Unstable Angina Pectoris* (UAP) Diabetes Melitus di Bangsal Sumbadra RSUD Bagas Waras Kabupaten Klaten.

Metode: Penelitian ini menggunakan metode deskriptif observasional dengan rancangan studi kasus. Subyek penelitian ini yaitu pasien dengan diagnosis *Unstable Angina Pectoris* (UAP) Diabetes Melitus yang berada di bangsa sumbadra dan menjalani rawat inap minimal 3 hari di RSUD Bagas Waras Kabupaten Klaten.

Hasil: Berdasarkan hasil assessment, pemeriksaan biokimia menunjukkan kadar GDS, GDP, GD2JPP termasuk dalam kategori tinggi. Pemeriksaan fisik dan klinis menunjukkan pasien mengalami mual, muntah, sesak, dan penurunan nafsu makan. Hasil recall 24 jam menunjukkan asupan pasien masih kurang akibat penurunan nafsu makan dan muntah yang dialami. Intervensi yang diberikan berupa diet DM 1.500 kkal Diet Jantung dan Diet Rendah Protein diserta edukasi dan konsultasi gizi kepada pasien dan keluarga pasien menggunakan leafleat DM dan daftar bahan makanan penukar (DBMP). Hasil moniroting asupan energi, protein, lemak, dan karbohidrat mengalami peningkatan dan penurunan, monitoring gula darah puasa dan gula darah 2 jam pp masih dalam kategori tinggi, monitoring fisik yaitu keluhan mual, muntah, dan sesak sudah tidak ada, dan monitoring klinis dalam kategori normal.

Kesimpulan: Hasil penelitian dapat diketahui bahwa pasien berisiko malnutrisi. Keadaan pasien saat dilakukan monitoring dan evaluasi secara keseluruhan mengalami peningkatan dibandingkan saat masuk rumah sakit.
Kata Kunci: Proses Asuhan Gizi Terstandar, *Unstable Angina Pectoris*, DM