

Faktor-faktor yang berpengaruh terhadap survival kelanjutan berobat penderita tuberkulos di wilayah Suku Dinas Kesehatan Masyarakat Kota Jakarta Timur tahun 2005-2006 = Factors having an effect on to survival and continuation treatment for tuberculosis patient at municipality of east Jakarta Health Region of Health Communfties Sub Services Office 2005-2006

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Abstrak

Pengobatan yang tidak tuntas menyebabkan penyakit tidak akan sembuh, Masalah putus berobat tuberkulosis adalah suatu yang universal, pengobatan tuberkulosis relatif panjang, jika dibandingkan dengan penyakit infeksi lain. Penderita tuberkulosis bila tidak diobati dengan baik akan menyebabkan terjadinya kekebalan pada kesehatan dan dapat menularkan penyakit pada orang lain.

Desain penelitian: Desain penelitian Kohort Retrospektif. Sampel sebanyak 652 orang pasien tuberkulosis yang telah menyelesaikan pengobatan tahun 2005 sd. 2006 di wilayah Suku Dinas Kesehatan Masyarakat Kota Jakarta timur. Sampel yang didapatkan 652 orang dengan menggunakan random sampling yang didapat dari kelompok tipe penderita baik penderita baru maupun penderita lama.

Hasil dan Diskusi: Ditemukan penderita tuberkulosis yang pernah berobat selama tahun 2005-2006 sebesar 24 orang (3,16%). Probabilitas kesehatan berobat pasien tuberkulosis adalah sebesar 99,69% (hari ke 11), 99,38% (hari ke 60), 97,01% (hari ke 90), 96,19% (hari ke 190) dan 96,19% (hari ke 249). Pada analisis Cox regression PMO dan Yankes merupakan variabel independen pada penderita tuberkulosis yang PMO berasal dari non keluarga memiliki resiko putus berobat 11,75 kali lebih besar dibandingkan pasien tuberkulosis yang PMO berasal dari keluarga (HR : 11,754 95% CI: 3,177-34,737). Demikian juga pasien tuberkulosis pada Runtah Sakit memiliki resiko putus berobat 2,4 kali lebih tinggi dihantui oleh pasien tuberkulosis yang di Puskesmas (2,369 95% CI : 1,011-5,547).

Kesimpulan dan saran: Faktor-faktor yang berpengaruh terhadap survival kelanjutan berobat penderita tuberkulosis adalah Pengawas Minum Obat (PMO) dan Yankes dengan keseluruhan probabilitas survival kelanjutan berobat penderita tuberkulosis adalah 99,38% (hari ke 60 hari), 97,01% (hari ke 90) dengan median probabilitas kesintasan obat hari ke 191 hari.

.....Treatment for TB patients who are not complete will affect the disease will not recover. TB treatment not come to compliance is a universal and this condition based on TB drugs intake is needed few months (6 - 9 months), when to be comprised by other infectious diseases. The happening of impenetrability at germ (germ resistance) and can be contagious of disease at others, and it was affected by TB patients were not received a good case management including drugs management.

Research Design: Designing of research was Retrospective cohort Sampling was amounting 652 TB patients who have been done on treatment compliance by the year 2005 to 2006 at East Jakarta Health Region of Health Community of Sub Services. Number of sampling 652 people by using sampling random that getting from new case detection (new TB patients), and also old case detection (old TB patients).

Result and Discussion: Found by patient of tuberculosis broken medicines during year 2005-2006 equal to 24 people (3,86%). Probability survival of continuation medicines patient of tuberculosis is equal to 99,69%

(day to 11), 97,38% (day 10 60), 97,01 (day 10 90), 96,19% (day 10 190) and 96,19% (day 10 249). At analysis of Cox PMO regression and of health services represent independent variable at patient of tuberculosis which is PMO come from non family have broken risk medicines 11,75 bigger times compared to patient of tuberculosis which its this come from family (HR: 11,754 95% CI: 3,977-34,737). And so do 10 patient of tuberculosis at Hospital have broken risk medicines 2,4 higher times compared to patient of tuberculosis which in Health Center (2,369 95% CI: 1,011-5,547).

Conclusion and Suggestions: Factors having an effect on survival of continuation treatment of tuberculosis patients was supervisor of drugs intake (PMO) and Health Services with overall probability survival of continuation treatment of tuberculosis patients was 99,38% (day to 60 day), 97,01% (day to 90) with probability median survival on 191 days after drugs intake. It will be suggested that should be taken step for increasing quality of Health Services in strategy of DOTS which are: diagnoses, counseling (health education) to the TB patients and Supervisor of Drugs Intake (PMO).