

Tatalaksana nutrisi pada pasien diabetes melitus tipe 2 dengan komplikasi sistem kardiovaskular = Nutrition therapy in type 2 diabetes mellitus with cardiovascular system complications

Khrisnugra Ramadhani Rasyi, supervisor

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Abstrak

[ABSTRAK

Latar belakang: Prevalensi Diabetes Melitus Tipe (DM) tipe 2 semakin meningkat setiap tahun. Kontrol glikemik yang buruk, hipertensi, dislipidemia, dan kebiasaan merokok serta menopause dapat meningkatkan risiko komplikasi penyakit kardiovaskular. Komplikasi kardiovaskular merupakan komplikasi paling sering ditemukan dengan angka mortalitas yang tinggi. Oleh karena itu, untuk menekan progresivitas komplikasi kardiovaskular diperlukan suatu terapi nutrisi medik yang adekuat sesuai dengan kondisi klinis dan edukasi dalam memodifikasi gaya hidup.

Metode: Pasien pada serial kasus berusia 55-65 tahun. Tiga pasien didiagnosis DM tipe 2 dengan gagal jantung, satu pasien dengan penyakit jantung hipertensi. Semua pasien memiliki skor skrining malnutrition screening tools (MST) ≥ 2. Dua pasien mempunyai status gizi obesitas, satu pasien berat badan dan pasien lainnya dengan berat badan normal. Kebutuhan energi basal (KEB) berdasarkan rumus Harris-Benedict dengan faktor stress 1,3-1,4 tergantung kondisi klinis dan penyakit penyerta. Komposisi makronutrien sesuai dengan rekomendasi American Diabetes Association dan Dietary Approach to Stop Hypertension. Pemberian mikronutrien dan nutrient spesifik diberikan pada satu dua kasus. Pasien dipantau selama 5-17 hari, meliputi keluhan subyektif, hemodinamik, toleransi dan analisis asupan, antropometri, pemeriksaan laboratorium, imbang cairan, dan kapasitas fungsional.

Hasil: Selama pemantauan di RS, keempat pasien menunjukkan perbaikan klinis yaitu tekanan darah turun dan kapasitas fungsional membaik. Satu pasien kadar glukosa darah dipertahankan < 200 mg/dL.

Kesimpulan: Terapi nutrisi medik yang adekuat dapat memperbaiki kondisi klinis pasien DM tipe 2 dengan komplikasi sistem kardiovaskular.

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ABSTRACT

Background: The prevalence of type 2 diabetes mellitus (DM) is increasing every year. Poor glycemic control, hypertension, dyslipidemia, smooking and menopause increase the risk for cardiovascular complications. Cardiovascular complications is the most common complications in type 2 DM with a significant high mortality rate. Therefore, a medical nutrition therapy is required to decreased the progresitivity of the cardiovascular complication in DM, based on improvement of clinical conditions and lifestyle modifications.

Method: Patients in this case series were between 55-65 years old. There of those patients were diagnosed heart failure and one with hypertension heart disease. All patients had a screening score ≥ 2 with malnutrition screening tools (MST). Two of patients had nutritional status of obesity, one patients was overweight, and another patients was normoweight. Basal calorie requirement were calculating using Harris-Benedict formula with stress factor 1,3-1,4 adjusment according to clinical conditions and comorbidities. Macronutriens were given recommendations by The American Diabetes Association and Dietary Approach

to Stop Hypertension. Two patients received micronutrient and specific nutrients. Monitoring was done for 5-17 days included subjective complaints, hemodynamic, tolerance and intake analysis, anthropometric measurement, laboratory test, fluid balance and functional capacity.

Results : All the patients showed the improvement of clinical conditions, blood control and functional capacity. Blood glucose levels of one patient was maintained to below 200 mg/dL

Conclusion: Medical nutrition therapy can improve clinical conditions of patients type 2 DM with cardiovascular complications., Background:

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