

Tata laksana Nutrisi pada Pasien Gagal Jantung Dekompensasi Akut karena Infark Miokard Lama = Nutrition management in patients with acute decompensated heart failure due to old myocardial infarction

Linda Arintawati, author

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Abstrak

ABSTRAK

Latar Belakang: Prevalensi gagal jantung semakin meningkat per tahun, 60-70% disebabkan penyakit jantung koroner (PJK). Beberapa faktor risiko penyebab gagal jantung yaitu DM, hipertensi, obesitas, sindrom metabolik, dan aterosklerosis. Patofisiologi gagal jantung sangat kompleks dan melibatkan banyak sistem, terjadi hipermetabolisme yang dapat menyebabkan penurunan berat badan dan memicu terjadinya malnutrisi. Keadaan gagal jantung dekompensasi akut karena infark miokard lama membutuhkan penanganan segera di RS untuk menghindari komplikasi lebih lanjut.

Metode: Laporan serial kasus ini memaparkan empat kasus pasien gagal jantung dekompensasi akut karena infark miokard lama, berusia antara 41 hingga 70 tahun, dan tiga diantaranya dengan riwayat DM tipe II. Semua pasien memerlukan dukungan nutrisi, tiga pasien memiliki status gizi obesitas dan satu pasien berat badan normal. Masalah berkaitan erat pada nutrisi keempat pasien adalah hipoalbuminemia, gangguan elektrolit, gangguan fungsi ginjal, gangguan fungsi hati, keseimbangan cairan, serta defisiensi mikronutrien. Perhitungan kebutuhan energi basal (KEB) dihitung berdasarkan rumus Harris Benedict dengan faktor stres sesuai kondisi klinis dan penyakit penyerta. Komposisi makronutrien diberikan menurut rekomendasi Therapeutic Lifestyle Changes (TLC) dan American Heart Association (AHA), pemberian protein disesuaikan dengan fungsi ginjal masing-masing pasien. Pemberian suplementasi mikronutrien juga diberikan

kepada keempat pasien. Pemantauan pasien meliputi keluhan subyektif, hemodinamik, analisis toleransi asupan, pemeriksaan laboratorium, antropometri, keseimbangan cairan dan kapasitas fungsional.

Hasil: pemantauan selama di RS, keempat pasien menunjukkan perbaikan klinis, peningkatan toleransi asupan, perbaikan kadar elektrolit dan peningkatan kapasitas fungsional.

Kesimpulan: Terapi nutrisi medik yang adekuat dapat memperbaiki kondisi klinis pasien gagal jantung dekompensasi akut karena infark miokard lama.

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<i>ABSTRACT</i>

Background: The prevalence of heart failure increase annually, 60-70% due to coronary heart disease (CHD). Some of the risk factors associated with heart failure are diabetes, hypertension, obesity, metabolic syndrome, and atherosclerosis. The pathophysiology of heart failure is very complex and involves many systems. The occurrence of hypermetabolism can lead to weight loss and trigger malnutrition. The state of acute decompensated heart failure due to old myocardial infarction require immediate treatment in hospital to avoid further complications.

Methods: This series of case report describes four cases of patients with acute myocardial heart failure, due to old infarction, aged between 41 to 70 years old, and three of them with a history of type 2 diabetes melitus. All patients required nutritional support, three patients had nutritional status of obese and one patient was normal in weight. The problems which closely linked to all nutrition of the four patients were hypoalbuminemia, electrolyte disturbances, impaired renal function, impaired liver function, fluid inbalance, and micronutrient deficiencies. Basal Energy Requirement was calculated using Harris Benedict formula with stress factors corresponding clinical condition and comorbidities. Macronutrients composition was given according to the recommendation of the Therapeutic Lifestyle Changes (TLC) and the American Heart Association (AHA), while the provision of proteins was tailored with the kidney function of each patient. Micronutrients supplementation was also given to four patients. Patient monitoring parameters included subjective complaints, hemodynamic, analysis tolerance of intake, laboratory tests, anthropometric, fluid balance and functional capacity.

Results: During the monitoring period in the hospital four patients showed clinical improvement, increased tolerance of intake, improved electrolyte levels and increased functional capacity.

Conclusion: Adequate medical nutrition therapy can improve the clinical condition of patients with acute decompensated heart failure due to old myocardial infarction.</i>