

Demam berdarah dengue di perdesaan./ Erna Kusumawardani, Umar Fahmi Achmadi

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Abstrak

Berbeda dengan beberapa negara, laporan kejadian kasus demam berdarah dengue (DBD) di perdesaan Indonesia belum banyak dilaporkan. Penelitian ini bertujuan untuk memberikan gambaran kejadian DBD di perdesaan di wilayah perbatasan Kabupaten Bogor dan Kabupaten Lebak, Jawa Barat. Penelitian ini menggunakan desain studi kasus seri dengan sampel seluruh penderita DBD yang tercatat di puskesmas pada periode bulan Januari 2011 sampai April 2012. Hasil penelitian menemukan 18 kasus DBD dan 4 kasus kematian (case fatality rate, CFR = 22%). Sebagian besar kasus berjenis kelamin laki-laki (58,3%), berusia ≥ 15 tahun (58,3%), tidak bekerja/ibu rumah tangga (50%), melakukan mobilitas (66,7%), mempunyai pengetahuan yang baik (66,7%), berperilaku kurang baik (83,3%), dan mempunyai tempat penampungan air (100%). Lima dari 12 kasus DBD (41,7%) diduga merupakan kasus lokal. Dari empat puskesmas (57,1%) yang melakukan kegiatan penyelidikan epidemiologi DBD terindikasi bahwa kemungkinan besar telah terjadi transmisi DBD di wilayah perdesaan daerah perbatasan Kabupaten Bogor dan Kabupaten Lebak.

Dengue hemorrhagic fever (DHF) has long been reported as disease affecting predominantly among urban populations. However, several recent studies suggest that DHF has spread into rural area. This study aims to describe disease occurrence of DHF in border rural areas of Bogor ? Lebak.

The study design is case series. The sample of this study was all patients with confirmed DHF admitted to public health centers between January 2011 and April 2012. The study was conducted in April to May 2012. The results showed that there were 19 DHF cases and four out of 18 cases died (case fatality rate, CFR was 22%). Out of 12 eligible respondents, most of them were male (58,3%), aged ≥ 15 years (58,3%), unemployed/housewife (50%), conducting mobility (66,7%), having good knowledge (66,7%), behave poorly (83,3%), and having water containers (100%). Five of 12 DHF cases (41,7%) were suspected as local cases. Four primary health centers (57,1%) were able to perform PE DBD (DHF Epidemiological Investigation). These results indicate that the transmission of DHF in border rural areas of Bogor ? Lebak, most likely has occurred.