Faktor risiko kematian neonatal dini di rumah sakit bersalin

Andi Zulkifli Abdullah, author

Abstrak

Angka kematian bayi di Indonesia masih tergolong tinggi, kematian neonatal 50% terjadi pada bayi berat lahir rendah (BBLR) dan lebih dari 50% kematian bayi adalah kematian neonatal dini. Penelitian ini bertujuan untuk mengetahui faktor-faktor antenatal care (ANC), status imunisasi Tetanus Toxoid (TT) ibu hamil, anemia pada saat hamil, berat lahir, status paritas, dan status hipotermia terhadap kematian neonatal dini. Penelitian menggunakan desain penelitian case control di Rumah Sakit Bersalin Kota Makassar dengan sampel 40 kasus dan 120 kontrol. Data diperoleh melalui wawancara langsung dengan responden. Hasil penelitian menunjukkan bahwa faktor risiko kejadian kematian neonatal dini meliputi ANC (nilai p = 0,000; odds ratio, OR = 7,333; CI 95% = 2,966 _ 18,129), status imunisasi TT (nilai p = 0,000; OR = 19,205; CI 95% = 7,902 _ 46,678), anemia ibu hamil (nilai p = 0,000; OR = 32,818; CI 95% = 7,549 _ 142,674), berat lahir (nilai p = 0,000; OR = 122,212; CI 95% = 32,324 _ 462,068), status paritas (nilai p = 0,000; OR = 5,537; CI 95% = 2,029 _ 15,111), status asfiksia (nilai p = 0,000; OR = 8,197; CI 95% = 0,452 _ 2,745). Status hipotermia bukan merupakan faktor risiko kematian neonatal dini (nilai p = 0,815; OR = 1,114; CI 95% = 3,646 _ 18,428). Hasil uji regresi logistik ganda menemukan bahwa berat lahir bayi merupakan faktor yang paling berisiko terhadap kematian neonatal dini (nilai p = 0,000).
<hr>
Infant mortality rate in Indonesia is still high. Fifty percent of the neonatal mortality occurred among low birth weight infants (LBWI) and neonatal mortality within 7 days of life accounted for 50% of total infant mortalities. This study was aimed to examine the extent of early neonatal mortality risk by antenatal care (ANC), Tetanus Toxoid (TT) immunization status of pregnant women, anemia during pregnancy, birth weight of neonatal, parity status, and hypothermia status.This study was a case control study with direct interview to respondents, conducted in the Maternity Hospital of Makassar with 40 cases and 120 controls. Samples were selected by purposive sampling. Study results indicated that risk factor of early neonatal mortality were ANC (p value = 0,000; odds ratio, OR = 7,33; CI 95% = 2,966 _ 18,129), TT immunization status (p value = 0,000; OR = 19,205; CI 95% = 7,902 _ 46,678), pregnancy anemia (p value = 0,000; OR = 32,818; CI 95% = 7,549 _ 142,674), birth weight (p value = 0,000; OR = 122,212; CI 95% = 32,324 _ 462,068), parity status (p value = 0,000; OR = 5,537; CI 95% = 2,029 _ 15,111), asphyxia status (p value = 0,000; OR = 8,197; CI 95% = 0,452 _ 2,745), whereas hypothermia status (p value = 0,815; OR = 1,114; 0,452 _ 2,745) was not a risk factor. Results of logistic regression multivariate analysis indicated that infant?s birth weight was the most risk factor of early neonatal mortality (p value = 0,000). Specific surveillance program for high risk neonatal needed to be arranged in all health centers.