

Pengaruh terapi medik gizi terhadap status nutrisi, kapasitas fungsional, dan kualitas hidup pasien gagal jantung kongestif = The Role of medical nutrition therapy on nutritional status, functional capacity, and quality of life in patients with congestive heart failure

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Abstrak

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Gagal jantung kongestif merupakan penyakit kronis dengan tingkat morbiditas dan mortalitas yang tinggi. Perubahan metabolisme dan aktivasi sistem neurohormonal turut berperan terhadap terjadinya malnutrisi, yang dapat memperburuk prognosis pasien dengan gagal jantung kongestif. Dalam serial kasus ini, dipaparkan empat kasus pasien gagal jantung kongestif dengan berbagai faktor risiko, diantaranya adalah penyakit jantung koroner, diabetes melitus, hipertensi, dan obesitas. Pada awal pemeriksaan didapatkan adanya defisiensi asupan makro- dan mikronutrien, hiperglikemia, tekanan darah di atas normal, retensi cairan, penurunan kapasitas fungsional dan kualitas hidup. Terapi medik gizi diberikan secara individual, sesuai dengan kondisi klinis, hasil pemeriksaan laboratorium, dan analisis asupan terakhir. Seluruh pasien mengalami peningkatan asupan, perbaikan kondisi klinis, dan kapasitas fungsional. Status nutrisi pasien tidak mengalami perburukan selama perawatan, sedangkan perbaikan kualitas hidup didapatkan pada satu dari empat pasien. Terapi medik gizi yang adekuat pada pasien gagal jantung kongestif dapat mempertahankan status nutrisi pasien dan mendukung perbaikan kondisi klinis, kapasitas fungsional, serta kualitas hidup pasien.

ABSTRACT

Congestive heart failure is a chronic disease with high morbidity and mortality. Metabolic changes and activation of neurohormonal system cause malnutrition that worsened prognosis in patient with congestive heart failure. Decreased functional capacity and quality of life commonly experienced by patient with congestive heart failure. Early medical nutrition therapy supports the recovery phase of patient with congestive heart failure. Four patients in this case series presented with various risk factors for congestive heart failure, including coronary heart disease, diabetes mellitus type-2, hypertension, and obesity. At the first examination, patient presented with inadequate macro- and micronutrient intake, hyperglycemia, high blood pressure, fluid retention, decreased functional capacity and quality of life. Nutritional therapy tailored based on clinical presentation, laboratory results, and previous nutritional intake. All patients showed increase of intake with improvement of clinical condition and functional capacity. Nutritional status during hospitalization remained the same, on the other hand only one patient experienced improvement of quality of life. Adequate medical nutrition therapy in patients with congestive heart failure aids the recovery process of patient with congestive heart failure.