

Profil lipid pada pilot penerbangan sipil PT. X serta faktor perilaku yang berhubungan

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Abstrak

Penelitian ini bertujuan menilai hubungan profil lipid dengan perilaku gizi, pola makan, asupan nutrisi, gaya hidup, Indeks Massa Tubuh (IMT), Rasio Lpe-Lpa, penggunaan obat, dan faktor diabetes mellitus. Studi kros-seksional, ini melibatkan populasi pilot perusahaan penerbangan PT X Jakarta, yang sedang menjalani Uji Kesehatan Periodik antara tgl. 21 Mei, 2001 sampai dengan 21 Juni, 2001. Data yang berhasil dikumpulkan meliputi, fraksi lipid serum, asupan nutrisi, perilaku gizi, pola makan, gaya hidup, IMT, Rasio Lpe-Lpa, penggunaan beta blocker, diuretika thiazide, dan faktor diabetes mellitus.

Hasil : Rata-rata kadar kolesterol total 232.83 ± 35.7 mg/dL, kolesterol HDL 39.7 ± 2.2 , kolesterol LDL 177.4 ± 33.8 , dan kadar trigliserida 162.8 ± 68.3 mg/dL. Prevalensi hiperkolesterolemia 39.6 %, hiperkolesterolemia LDL 67.7 %, prevalensi dislipidemia 71,9 %. Rata-rata asupan energi total 1752.5 k.kal (614.5-3575.5), asupan protein 66.1 (9.90-132.8) gr, asupan lemak 632 (7.40-115.3) gr, sedangkan rata-rata asupan karbohidrat, SAFA, MUFA, PUFA, kolesterol dan serat, masing-masing: 2463 (853-545.3) gr, 30.7 (2.6-61,9) gr, 13.5 (1.40-28.6)gr, 7.2 (1-30.3) gr, 245 (0-1594.0) mg, dan 13 (3-66) gr. Subjek memiliki rata-rata IMT 25.5 ± 2.7 , rasio Lpe-Lpa 0.95 ± 0.03 . Prevalensi kegemukan 56.3 %, obesitas sentral 38.5 %. Sebagian besar subjek penelitian yaitu sebesar 59.4%, tidak teratur melakukan kegiatan olah-raga, perilaku gizi baik 5.2 % sedangkan perilaku gizi kurang sebesar 41.7%, dan pola makan baik hanya 3.1 %. Dijumpai hubungan bermakna antara rasio Lpe-Lpa dengan kolesterol total dengan $p=0.0003$, Berdasarkan analisis regresi logistik rasio Lpe-Lpa mempunyai hubungan paling kuat dengan kolesterol total, kolesterol LDL, dan dislipidemia.

Kesimpulan : Asupan energi masih dibawah RDA, asupan SAFA tergolong kriteria lebih sebesar 55.2%, asupan serat tergolong rendah 83.3%, aktivitas kurang 63.6%. Terjadi keseimbangan energi positive, terlihat dari persentase kegemukan 56.3%, dan obesitas central 38.5%.

Lipid Profile Among P.T. X Civil Aviation Pilots and The Related Behavioral FactorsThe objective of study to assets the relationship between lipid profile and the nutrition behavior, nutrition intake, body mass index (BM), Waist-Hip circumference Ratio (WHR), life style, dietary pattern, flying stress, beta blacker and thiazide diuretic medication, and diabetes mellitus. This cross sectional study concerning population of PT X air line pilot's were being performed the periodically medical examination, between May 21, 2001 until June 21, 2001. The data had been collected from the level of lipid cerurn, nutrition intake, nutrition behavior, dietary pattern, BMI, WHR, beta blacker and thiazide diuretic medication, diabetes mellitus, flying stress, and life style including of physical activity, smocking and alcohol consumption habits.

Results : The mean total cholesterol, LDL cholesterol, HDL cholesterol and tryglycerides were 232.8 ± 35.7 mg/dL, 177.4 ± 33.8 mg/dL, 39.7 ± 2.2 mg/dL, and 162.8 ± 68.3 mg/dL. The prevalence of hypercholesterolemia 39.6%, LDL hypercholesterolemia 67.7 %, and dislipidemia 71.9 %. The median of total energy 1752 kcal, (614.3-575.5), protein intake 66.1 gr (9.90-132.8), the mean carbohydrate intake, fat,

SAFA, MUFA, PUFA, cholesterol were 246.7gr (85.7-545.3), 63.2 gr (7.4-115.3), 30.7gr (2.6-61.9), 13.5 gr (1.40-28.6), 7.2gr (1-30.3), and 245 mg (0-1594.0), the mean fiber intake 13 gr (3-66). The mean of BMI and AHR are: 25.5 + 2.7 and 0.95 + 0.03, the prevalence of overweight and obesity 56.3 %, central obesity 38.5 %. Most of the subject had low activity (59.4 %), good nutrition behavior 5.2 % while the less nutrition behavior as many 41.7 %, and good dietary pattern is just 3.1 %. There was significant relationship between WHR and the level of total cholesterol (p O.0003), and based on logistic regression analysis, WHR had strong relationship to total cholesterol, LDL cholesterol, and dislipidemia.

Conclusion : Energy intake were lower compared to RDA, the high SAFA intake 55.2 %, low fiber intake 83.3 %, low activity 63.6 %, and there were positive energy balance excess, and contribute 56.3% obesity and overweight, and 38.5 % central obesity.</i>