

# Faktor-faktor yang berhubungan dengan kepatuhan berobat penderita tuberkulosis paru di Puskesmas dalam Wilayah Kabupaten Aceh besar tahun 1998

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## Abstrak

Penyakit tuberkulosis paru merupakan masalah kesehatan masyarakat terutama di negara-negara sedang berkembang termasuk Indonesia sebagai salah satu negara yang prevalensinya cukup tinggi. Di Propinsi DI Aceh jumlah tersangka TB paru (1995-1998) sebanyak 41.612 orang, dimana 2.444 orang (5,9%) dinyatakan BTA positif, 2.300 orang telah diobati dan 1.547 orang (67,3%) dinyatakan sembuh. Di Kabupaten Aceh Besar jumlah tersangka TB paru 5.576 orang, 385 orang (6,9%) dinyatakan BTA positif, dan 379 orang penderita telah diobati, dimana 264 orang (69,6%) dinyatakan sembuh. Salah satu upaya dalam pengobatan TB Paru dilakukan dengan pendekatan Strategi Directly Observed Treatment Shortcourse (DOTS). Namun prevalensi TB pain juga tetap masih tinggi. Keberhasilan pengobatan dan penyembuhan penyakit berhubungan dengan kepatuhan penderita minum obat selama 2 bulan fase awal dan 4 bulan fase lanjutan sehingga memberikan dukungan dalam keberhasilan. Tujuan penelitian untuk melihat faktor-faktor yang berhubungan dengan kepatuhan berobat penderita TB paru di Puskesmas dalam wilayah Kabupaten Aceh Besar tahun 1998. Waktu penelitian bulan November sampai Desember 1999 dengan desain penelitian cross sectional. Populasi penelitian ini adalah penderita TB pain yang berobat di 7 Puskesmas dengan menggunakan obat anti tuberkulosis (OAT) untuk waktu 6 bulan selama tahun 1998. Jumlah sampel sebanyak 112 orang dan pengumpulan data dilakukan dengan menggunakan kuesioner dan wawancara langsung.

Hasil penelitian menunjukkan sebanyak 52 orang (46,4%) tidak patuh berobat dan 60 orang (53,6%) patuh berobat. Hasil analisis menghasilkan 4 variabel yang hubungan bermakna ( $p < 0,05$ ). Pertama pengetahuan baik dibandingkan pengetahuan kurang berhubungan dengan kepatuhan dengan nilai odds ratio 12,25 (95% CI; 1,09-7,99;  $p=0,02$ ). Kedua, ketersediaan obat berhubungan dengan kepatuhan dengan nilai odds ratio 0,44 (95% CI; 0,18-1,02;  $p=0,04$ ). Ketiga, hubungan antara sikap petugas kesehatan dengan kepatuhan dengan nilai odds ratio 3,57 (95% CI; 1,09-12,38;  $p=0,02$ ). Keempat, pengawasan minum obat dengan kepatuhan dengan nilai odds ratio 2,81 (95% CI; 1,05-7,68;  $p=0,02$ ).

Dari hasil multivariat dengan metode regresi logistik, dari 12 variabel bebas hanya 7 variabel yang masuk sebagai kandidat untuk dianalisis. Hasilnya menunjukkan 2 variabel yang berhubungan ( $p < 0,05$ ), yaitu variabel pengetahuan dengan nilai odds ratio 4,24 ( $p=0,0099$ ) dan variabel pengawasan minum obat dengan nilai odds ratio 3,30 ( $p=0,0497$ ) terhadap kepatuhan setelah dikontrol oleh variabel pendidikan, pekerjaan, transportasi, ketersediaan obat dan pelayanan petugas kesehatan.

Untuk mengantisipasi hal tersebut diperlukan berbagai upaya intervensi, terutama peningkatan pengetahuan terhadap penderita melalui penyuluhan, peningkatan pelayanan petugas dalam memberikan pengobatan, serta perlunya pengawasan terhadap penderita saat minum obat sebagai upaya yang tepat dalam

meningkatkan kepatuhan penderita.

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The Factors Related to Treatment Compliance of Tuberculosis Patients in Public Health Center of District Area of Aceh Besar, Year 1998Indonesia, as one of developing country, still facing Tuberculosis (TB) as main Public Health problem, Indonesia is one of the country with high prevalence of tuberculosis disease. In Aceh's Province, the suspect's of tuberculosis are 41.612 patients for 1995 - 1998. The result of laboratory confirmed that 2.444 people (5,9%) are positive of tuberculosis. From 2.300 patient who have got treatment, it was confirmed that 1.547 (67,1%) were recovered. In district of Aceh Besar the total of tuberculosis suspect is 5.576 people, 385 people (6,9%) are stated positive Acid Flaccid Bacilli (AFB positive) of tuberculosis, 379 patient who have been treated, using 264 people (69,6%) were recovered. The government's carried out tuberculosis treatment using Directly Observed Treatment Short course (DOTS). Prior to 1993, the prevalence rate of tuberculosis disease is still high. The successfulness of disease control and treatment program is related closely to patient's compliance. Based on this consideration, the purpose of this study is to explore of the factors related to treatment compliance of tuberculosis patients in Public Health Center Aceh Besar district during the period of the 1998. The study was conducted on November to December 1998 by using cross-sectional design. The population in this study was patient of tuberculosis treated with short course regimen at 7 Public Health Center that have got tuberculosis drugs for 6 months. Sample of 112 patients were taken from the perspective population. Data were collected by interviewing tuberculosis patients using structured questionnaire.

The result of the study showed that only 60 (53,6%) patients compliant to the treatment and 52 persons (46,4 %) incompliant, The result of analysis found 4 variables significantly related to compliance ( $p<0,05$ ). First, good knowledge compare to less knowledge is related to treatment compliance with odds ratio 12,25 (95% CI : 1,09-317,99:  $p=0,02$ ), Second, preparing the drugs is also related to treatment compliance with odds ratio value 0,44 (95% CI : 0,18-1,02 :  $p=0,04$ ). Third, health providers services is also related to patient compliance with odds ratio value 3,57 (95% CI : 1,09-12,38 :  $p=0,02$ ). Fourth, the control of drinking drugs, with odds ratio value 2,81 (95% CI : 1,05-7,68 :  $p=0,02$ ).

The result of multivariate analysis with logistic regression method found 7 candidate variables from 12 independent variables, and 2 variables statistically significant ( $p<0,05$ ). They are knowledge with odds ratio 4,24 ( $p=0,0099$ ), and treatment's control of drugs, with odds ratio 3,30 ( $p=0,0497$ ) related to compliance. The analysis was done by controlling the others variables, such as occupation, drugs availability and health providers services. The study concluded that knowledge and treatment control have more contribution to treatment compliance of tuberculosis disease in Public Health Centre than of tuberculosis disease than the others variables. Based on the results of the study, it is recommended to increase patients' knowledge in tuberculosis by health education, to increase patients' compliance, treatment observer must be accessible and acceptable to the patient and accountable to the health system. Beside that, health providers' services in health centre need to be increase and direct observation.