



DOI:

10.22301/IJHMCR.2528-3189.208

Article can be accessed online on:

<http://www.ijhmcr.com>

**INTERNATIONAL JOURNAL
OF HEALTH MEDICINE AND
CURRENT RESEARCH**

CASE REPORT

MITES AND THE PROBLEM ON THE COMMUNITY

Sarah Gabriella Mapanawang¹, Greta J P Wahongan², Janno B Bernadus²

¹ Sam Ratulangi University Manado Faculty of Medicine

² Parasitologi Sam Ratulangi University Faculty of Medicine

ARTICLE INFO

Article History:

Received 27th October, 2016
Received in revised form
12th November, 2016
Accepted xxxth xxx, 2016
Published online 30th December,
2016

Key words:

Behavior, Society, House Dust Mites

***Correspondence to Author:**

Sarah Gabriella Mapanawang
Sam Ratulangi University Manado
Faculty of Medicine, Parasitologi
Sam Ratulangi University Faculty of
Medicine.

E-mail:

sarahgabriella@rocketmail.com

ABSTRACT

House Dust Mites (HMD) is an washington source of allergens screened acres exposed to act as a trigger for atopic disease. HMD is found in damp houses, mattresses, bolsters, pillows, and other home furnishings. There are some of the most common species of HMD found throughout the world, namely Dermatophagoides pteronyssinus, Dermatophagoides farinae, Glycyphagus destructor. HMD can be a serious health problem for people who may be vulnerable due to the emergence of staffs triggers allergies such as asthma, rhinitis, conjunctivitis and atopic dermatitis, the body parts HMD allergens acres the cuticle, sex organs and gastrointestinal disturbances. The aim of this study to determine the behavior of the community is includes knowledge, attitude highly and action to house dust mites surrounding houses. This study was a descriptive survey method, the research conducted in the Village District Taas Tikala subdistrict Manado with sample 95 family members who met the inclusion criteria. The results showed that 89.5 percent of people have poor knowledge, 96.8 percent of people have a good attitude highly and 100 percent of the public has a good action.

Copyright © 2016, Sarah Gabriella Mapanawang¹. This is an open access article distributed under the creative commons attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Sarah Gabriella Mapanawang¹, Greta J P Wahongan², Janno B Bernadus², 2016 "Mites And The Problem On The Community", International Journal of Health Medicine and Current Research, 1, (02), 208-211.

INTRODUCTION

House dust mites (HMD) is an important source of allergens affected to act as a catalyst for the disease - moderate atopic.¹ HMD live everywhere in the countless groups.² and many found on the house that damp cloth, mattresses, wallow, cushions and other home furnishings. HMD there are around the world. There are several species of HMD which is most commonly found throughout the world namely *Dermatophagoides pteronyssinus*, *Dermatophagoides farinae*, *Glycyphagus destructor*.³

HMD can be a serious problem for the health of the people who are vulnerable HMD can become the founder of the emergence of allergy reksi factors such as asthma, rhinitis, konjungtivitis and atopic dermatitis,⁵ body part HMD that become allergens is hard cuticle, sex organs and digestive tract. The role of HMD on asthma no doubt because of the very important role on the rising prevalence of asthma in South Fore Papua New Guinen. When in the previous ten years in the area obtained the prevalence of asthma of 0.28% then when examined Dowse et al rose to 7.8%.⁴ Although in Indonesia itself the prevalence of asthma has not yet been definitely, but are expected to 2-5 percent of the population in Indonesia suffered.⁵

Some research in Central Jakarta, Aulung et al have examined 5.237 gram of house dust that contains 343 mites consists of 6 genus. On research in order, reported from 5.411 grams 876 house dust mites which are composed of 7 genus. In the house of the HMD most found in many bedroom furniture (582) mites which at least on the decoration of the house (186 mites). On the Home Furnishings namely table, chair, bookshelves and cupboards obtained 363 mites. The existence of HMD on bedroom furniture especially mattresses kapuk closely linked to the availability of food. Human skin

RESULTS

Based on the general description Kelurahan geographically Kelurahan Taas Taas is one of the sub-district which is located in Tikala subdistrict Manado City with the area as a whole is 340 ha. This research is obtained as much as 95 family members minimum age 19 years are willing to become respondents. The group of respondents majority votes aged 40-49 years i.e. net

flakes is the staple food of HMD. An improvement in HMD influenced by several factors among others areas with the summer longer than the winter, the house dirty and many dust, temperature between 240C-260c and air humidity 80-90%.⁶ behavior is the response or the reaction to the stimuli or stimulus measures from the outside. ⁸ The behavior includes knowledge, attitudes and community action Kelurahan Taas Tikala subdistrict Manado City.

METHODS

The type of research that is used research that is descriptive survey that aims to only describe the condition of the variables in the measuring cup. This research done in Kelurahan Taas Tikala subdistrict in the month of October - December 2012. How sampling with how simple random sampling is the determination of the samples in random order based on the number of family members to construct the environment. Samples used the family who remain in Kelurahan taas less than 1 years and have a family member berusi 19-65 years, healthy physical berdeia become respondents and were at home when pngambilan samples. To explain the behavior of society toward dust mites in the analysis according to the characteristics of the respondents i.e. age, gender, education, knowledge, attitudes and actions. Data pegumpulan techniques taken from the primary data is the questionnaire and secondary data that is the population. In the analysis based on the scale of the Guttman scale that want concrete answers that have only 2 assessment interval that is good and bad for correct answers were given a score 1 while the incorrect answers were given a score 0.

cash consumption%, most gender respondents are women namely 62 people (65.3%), while the least is the man that is 33 people (34.7%). The last education respondents most is SMA namely 54 people (56,8%). The knowledge of the community about the dust mites Kelurahan Taas 89.5% bad but on the attitude of the community shows that the community Kelurahan Taas has a good attitude 96,8% and a good action 100%.

Table 1. The disease caused HMD

No	The disease caused HMD (%)
----	----------------------------

1.	Allergy	23,1
----	---------	------

2.	Malaria	0
3.	Demam berdarah	1.1
4.	Do Not Know	75,8

The number of	100
---------------	-----

Based on the distribution of table 1 obtained the Community Kelurahan Taas does not know (75,8%) disease caused dust mites because never get information about dust mites from the officers of the local health besides society less read/ heard information about House dust mites.

Table 2. The HMD

No	The place that found dust mites	many (%)
1.	Mattresses kapuk, Bedspreads, carpets and sofas	20
2.	The cabinet clothes, table, home decorations	3.1
3.	Bathroom	0
4.	Do Not Know	76.9
The number of		100

Based on the distribution of table 2. Society Kelurahan Taas does not know (76.9%) places that many found dust mites. The lack of knowledge of the

Table 3. How to eradicate

No	How to eradicate dust mites	(%)
1.	Yes, with hygiene	22,1
2.	Yes, by doing spraying insecticides	1.1

Based on the distribution of table 3 the community does not know how to eradicate dust mites (74,7%). This lack of knowledge according to the assumptions caused by the society that less get away from printed media (newspapers, magazines etc). From

Table 4. The Attitude Of Respondents

No	The Question	S %	T %	The RR %	TT %	Jlh %
1.	HMD counseling and Allergies	100				100
2.	Patients with allergic under to Persahabatan Hospital	92,6	4.2	1.1	2.1	100
3.	Clean the furniture with a moist cloth	92,6	1.1	5.2	1.1	100

DISCUSSION

Obtained from respondents agree (92,6%) to bring patients with allergic to the nearest hospital or health clinic. Even though there are some who answer doubt but in this case the respondents know the attitude in facing the patients affected by allergies. To maintain

respondents cause serious problems for the health because HMD spread by kosmopolit.⁷ And his body can be allergens that cause diseases on the allergy.⁴

3.	Yes, with another way (control of regulating, control vectors)	2.1
4.	Do Not Know	74,7
The number of		100

the distribution of the level of knowledge of using the distributed guttman scale namely respondents Kelurahan Taas community about HMD as much as 10 respondents (10.5%) have the knowledge of good and as many as 85 respondents (89.5%) have less knowledge.

4.	Put the items in the cabinet closed	95,8	2.1	1.1	1.1	100
5.	Change the bedspreads once a week	91,6	2.1	5.2	1.1	100
6.	Jemur mattresses once a week	90,5	1.1	8.4	0	100
7.	Open the window every day	96,8	2.1	0	1.1	100

cleanliness as clean home furnishings with a moist cloth (92,6%). The activities of the cleanliness of the house in Indonesia there are 3 namely sweep, wipe and vacuumed. On research in Semarang the attitude of the community in the wipe home furnishings with a moist cloth of 3-7 times. This attitude in accordance with reference to wipe and vacuumed every day.³ is the same as with change the bedspreads and hung mattresses

which is done once a week and the community Kelurahan Taas diligent open windows every day 92 percent can reduce the density of HMD. Data from the scale Guttman withdrawal is based on the table of the

Table 5. How To clean the Furniture

No	How to clean wooden furniture	(%)
1.	The wet cloth	45,3
2.	Kemoceng	49.5

Based on the distribution of table 5. The actions of the respondents to clean home furnishings every day (37,9%) using kemoceng (45.7%). This visible society have good actions in the efforts of the cleanliness of the house and the eradication of HMD. Change the bedspreads once a week (53.7%) also can reduce the

Table 6. The action opens the window

No	Open the Window	(%)
1	Every day	91,6
2	2 times a week	2.1

Based on the distribution of the Table 6. Obtained that society Kelurahan Taas open windows every day (91,6%). This is done so that the sunlight can enter into the house. The distribution of the actions of the respondents society Kelurahan Taas Tikala subdistrict about HMD as many as (100%) respondents had a good action.

CONCLUSION

From this research shows that the knowledge of the society about the dust mites less good while the attitude and community action against dust mites better.

ACKNOWLEDGMENTS

Thank you to dr Greta J P Wahongan, MKes and Dr Janno B Bernadus, MBIomed which has been providing advice/inputs which are very useful in the settlement of this research. And also not forget all parties that directly or indirectly have grow the idea in this article.

attitude of respondents can be concluded as much as (96,8%) has a good attitude and as much as (3.2%) have bad attitude.

3.	Another way (the brush, vaccum cleaner)	2.1
4.	Do not know/never	3.1
The Total		100

amount of HMD. On the other research there is a relationship between the succession of bedspreads with HMD density. Compared with the research Hadi in Semarang replace bedspreads done once a week.⁷

3	1 times a week	0
4	Rarely/not regularly	6.3
The Total		100

REFERENCES

1. Sinclair W, Coetze L, Joubert G. House Dust Mite species in Bloemfontein. *Afr Med J*. 2010;3:100.
2. Suryanto S, Priyandi S. Kutu serangga paling menyeramkan diseluruh dunia. Jakarta:2010.p.94.
3. Sungkar S. Aspek biomedis Tungau Debu Rumah. *Tinjauan Pustaka. Maj Kedokt Indon*. 2004;54:225-33
4. Sujudi Y, Tina WS. Tungau Debu Rumah dan peranannya pada dermatitis atopik anak. *MDVI*.2000;27s-42s.
5. Demiati R, Maria S, Qomariah. Faktor-faktor yang berhubungan dengan penyakit asma di Indonesia. *Media Litbang Kesehatan*. 2010;XX(1):41-2
6. Safar S. *Parasitologi Kedokteran*. Bandung: Yrama widya;2010.
7. Hadi S. Hubungan Kepadatan Tungau Debu Rumah dengan derajat penyakit dermatitis atopik. Tesis. Semarang: Universitas Diponegoro:2002.
8. Effendi F, Makhfudli. *Keperawatan Kesehatan Komunitas*. Jakarta: Salemba Medika; 2009.
