

International Journal Of Health Aedicine and Current Researd

International Journal of Health Medicine and Current Research Vol. 6, Issue 02, pp.2023-2027, June, 2021

DOI:

10.22301/IJHMCR.2528-3189.2023

Article can be accessed online on: http://www.ijhmcr.com

ORIGINAL ARTICLE

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

DESCRIPTION OF PREGNANT WOMEN'S KNOWLEDGE ABOUT HYPERTENSION DURING TRIMESTER II PREGNANCY IN THE WORK AREA PITU HEALTH CENTER.

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ARTICLE INFO

Article History:

Received 18th Jan. 2021. Received in revised form 18th March, 2021. Accepted 02th June, 2021. Published online 30th June, 2021.

Key words:

Pregnant Women, Hypertension in **Pregnancy**

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ABSTRACT

Hypertension or blood pressure disease is an increase in blood in the arteries. Hypertension is one of the risk factors for cardiovascular disease. A person is said to have hypertension if he has a systolic blood pressure and diastolic blood pressure. If this condition occurs during pregnancy, it is called hypertension in pregnant women. To find out how far pregnant women understand about hypertension and hypertension how to treat hypertension during the second trimester of pregnancy at the Pitu Health Center.

This study uses a qualitative method with an approach to see a description of the knowledge of pregnant women with hypertension in the second trimester at Pitu . Public Health Center, district. Tobelo Middle Year 2020. With a total of 30 respondents.

Based on the results of research on pregnant women in the second trimester at Pitu Health Center, since October 2020, 30 respondents were found to be pregnant women: The level of Good Knowledge is 15 respondents with a percentage (50%), Knowledge Enough, 10 respondents with a percentage (33.33%) and Knowledge Less as many as 5 respondents with a percentage (16.66%).

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Citation: Yael Aurmatin¹, dr. Selvie Ticoalu^{1,2}, Faleryn F. Sahuleka^{1,2} 2021 "DESCRIPTION OF PREGNANT WOMEN'S KNOWLEDGE ABOUT HYPERTENSION DURING TRIMESTER II PREGNANCY IN THE WORK AREA PITU HEALTH CENTER.", International Journal Of Health Medicine And Current Research, 6, (02), 2023-2027.

Advice for clients to increase knowledge about hypertension during pregnancy, so that if the client has hypertension during pregnancy, he can immediately request treatment from health workers so that it can be handled appropriately.

Preliminary

Hypertension or high blood pressure is one of the risk factors for cardiovascular disease and is a major problem in both developed and developing countries. Cardiovascular disease is also the number one cause of death in the world every year. WHO 2018 data shows that around 1.13 billion people in the world suffer from hypertension. This means that 1 in 3 people in the world is diagnosed with hypertension, only 36.8% of them are taking medication. The number of people hypertension in the world continues to increase, it is estimated that by 2025 there will be 1.5 billion people affected by hypertension and every year 9.4 million people die from hypertension complications.

Hypertension is called the silent killer because the symptoms are often without complaint. Usually the patient does not know that he has hypertension and is only known after complications occur. Likewise, according to Kowalski, who stated that hypertension is also called the silent killer because most cases do not show any symptoms but are very dangerous.

Meanwhile (in the Journal of UIN Alauddin, 2018) states that hypertension or known as high blood disease is a condition where there is an increase in blood pressure above the normal threshold of 120/80 mmHg. According to the World Health Organization (WHO), the limit for blood pressure that is considered normal is less than 130/85 mmHg.

MMR in Indonesia is still a serious problem, caused by complications of Hypertension, Sepsis, Bleeding and other causes. According to the 2017 data, there has been a significant decrease from before, due to improvements in nutritional status and an increase in adequate health services.

In Indonesia, hypertension is one of the main causes of mortality and morbidity, so the management of this disease is a very common intervention carried out at various levels of health facilities (Zaenurrohmah, 2017). According to the Ministry of Health (2017), hypertension is still a big challenge in Indonesia because it is a condition that is often found in primary health services such as Clinic . Hypertension is the number 3 death after stroke and tuberculosis, where the proportion of deaths reaches 6.7% of the death population at all ages in Indonesia.

Until now, hypertension is a health problem with a high prevalence of 25.8% (Riskesda 2013, in the Ministry of Health 2017). Meanwhile, data from the 2016 National Health Indicators Survey (Sirkesnas) showed an increase in the prevalence of hypertension in the population aged 18 years and over by 32.4% (KEMENKES 2018). In addition, according to BPJS Health data, the cost of hypertension services has increased every year, namely Rp. 2.8 trillion in 2014, Rp. 3.8 trillion in 2015, and Rp. 4.2 trillion in 2016.4

Maternal Mortality Rate (MMR) in North Moluccass Province from 2011 to 2015 was very volatile. In 2015 MMR experienced an increase of 260/100,000 live births, which means that from 100,000 live births there were 260 mothers who died, this figure is still far from the National AKI target of 120/100,000 live births in 2015.5

Based on data from the Health Office of North Halmahera Regency, the Maternal Mortality Rate (MMR) in 2017 was 392/100,000 live births, which tends to experience a significant increase compared to 2016 which was 367/100,000 live births. In 2018 the MMR decreased to 162/100,000 live births. In 2018 pregnant women who experienced hypertension were 357 pregnant women from 2878 pregnant women in North Halmahera Regency.⁶

Data obtained from the Pitu Health Center, the maternal mortality rate in 2018 was 3/100,000 live births caused by eclampsia, anemia and lack of antenatal care (ANC).7

Until now, the high maternal mortality rate in Indonesia is still a priority problem in the health sector. In addition to showing public health, it also describes the level of community welfare and the quality of health services. The direct causes of maternal death are high blood pressure and protein in the urine (preeclampsia).

Method

This research is a research This study uses a qualitative method with an approach to see the description of knowledge of pregnant women with hypertension in the second trimester at Pitu Health Center. This research will be conducted at the Pitu Public Health Center, District, North Halmahera Regency, in October-November 2020. The population in this study were all pregnant women in the working area of the Pitu Health Center as many as 157 pregnant women and 52 pregnant women in the second trimester. The samples used were pregnant women from each village in the working area of the Pitu Health Center and met the inclusion criteria. The sampling method in this study was purposive sampling technique. The research instrument used in this research is to use a questionnaire sheet in the form of written questions. Univariate analysis was carried out to get a general picture by describing each variable used in the study by looking at the picture of the frequency distribution.

> Results Table 1.1 Characteristic Frequency Distribution of maternal knowledge about hypertension at the PITU health center in 2020

Variable	Frequency (f)	Percentage (%)
Education	•	
No school	3	10
SD	4	13.3
middle school	2	6.66
high school	20	66.66
Bachelor	1	3.33
Profession		
Farmer	25	83.33
IRT	5	16.66
civil servant	5	16.66

Source: Results of computerized data processing

shows that out of 30 respondents with no school background, 3 respondents (10%), elementary education 4 respondents (13.33%), and junior high school as many as 2 respondents (6.66%), high school 20 respondents (66.66%), Diplomas and bachelors, namely 1 respondent (3.33%) of respondents who are in IRT jobs, namely 5 respondents (16.66%), farmers 25 respondents (83.33%) and civil servants 5 respondents (16.66%).

Table 2 Frequency Distribution of Respondents Knowledge **Description Hypertension During** Second **Trimester Pregnancy** Pitu in

Community Health Center Work Area		were Pitu
Variable	Frequency (f)	
Knowledge		uses a qu
GOOD	15	
ENOUGH	10	description
LESS	5	
		with hyper

This research was conducted in October 2020 with a total of 30 pregnant respondents who Public Health Center patients. This study Percentage (%) ualitative research approach to see the n of the 3km 3 wledge of pregnant women 16.66 with hypertension in the second trimester in the Pitu

Health Center Work Area.

Source: Results of computerized data processing Good knowledge level as many as 15 respondents with a percentage (33.33%), Knowledge Enough 10 respondents with a percentage (33.33%) and less knowledge 5 with a percentage of 16.66%.

DISCUSSION

Based on the results of the research, the occupations of respondents who are in IRT jobs are 5 respondents (16.66%), the most occupations are farmers, namely 25 respondents (83.33%) and civil servants 5 respondents (16.66%) according to the theory stating that in daily life days of work are the most important thing this research found in Pitu Health Center, North Halmahera Regency mostly farmers work, but work as farmers does not affect their quality of life at all where that the higher the job, the better one's knowledge, and the lower the job, the better. low knowledge.

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