

Visit Analysis Of Degenerative Hypertensive And Diabetic Millitus Patients Reviewed From The Level Of Anxiety During The Pandemic At The Sukorejo Health Center In Blitar City In 2022

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ABSTRACT

Degenerative diseases are chronic diseases that affect a lot of a person's quality of life and productivity, and regular examinations are needed to increase the success of degenerative disease management. The covid-19 pandemic has affected the anxiety level of degenerative patients (hypertension and diabetes mellitus) to visit regularly so that the level of patient visits has decreased. The purpose of this study was to analyze the visits of degenerative patients with hypertension and diabetes millitus in terms of anxiety levels during the covid-19 pandemic. The type of research used is quantitative with a cross-sectional research design, the population and sample of this study are 600 respondents with the simple random sampling technique so that 60 respondents are obtained. This data collection tool uses questionnaires. Data analysis using the chi square test with a α rate of 5% (0.05).the results of the study were obtained ($p = 0.000 > 0.05$) or ho received which means that there is no relationship between visits by degenerative hypertension and diabetes mellitus patients in terms of the level of patient anxiety during the covid-19 pandemic at the sukorejo health center, blitar city in 2022.it was concluded that there was no relationship between patient anxiety levels during the covid-19 pandemic and decreased visits by degenerative patients with hypertension and diabetes mellitus. It is recommended to further improve the kie or counseling for patients with degenerative diseases (hypertension and diabetes mellitus) to conduct regular examinations.

Keywords: Anxiety, Degenerative Diseases, Visit.

INTRODUCTION

Degenerative disease is a chronic disease that affects the quality of life and productivity of a person, where the progression of the disease will increase as the age of the patient. Older adults are genetically prone to developing degenerative diseases because their lifestyle can put them at risk of the disease. These degenerative diseases include cardiovascular disease (heart and blood vessels) including hypertension, diabetes mellitus (dm) and cancer (brunner & suddarth, 2002). According to a survey conducted by the world health organization (who), in 2014 the global prevalence of diabetes was estimated at 9% among adults over 18 years of age, about 387 million people worldwide live with diabetes or 8.3% on every continent, about 4.9 million people die and 77% of people with diabetes from low-and middle-income countries. Who projects that diabetes will be the 7th leading cause of death by 2030 and there will be an increase of more than 205 million people by 2035. (who) predicts an increase in the number of people with diabetes mellitus in indonesia from 8.4 million in 2000 to about 21.3 million in 2030.



According to data from basic health research (riskesdas, 2013) the national health system states there are 9 million cases of diabetes in indonesia in 2014. Diabetes mellitus in indonesia occupies the sixth place as a country with diabetes in the world, and this is estimated at 4.8% of the total population in indonesia. The main diabetes mellitus is classified into type i insulin dependent diabetes mellitus (iddm) and type 2 non insulin dependent diabetes mellitus (niddm) (gordon et al, 2008). With the prevalence of patients with diabetes mellitus there are 1.4% - 1.6%. Among the existing types of dm, 90-99% is dm type 2 (kariadi, 2009). Studies from the international diabetes federation (idf), a healthy diet, regular physical activity, maintaining a normal weight and avoiding tobacco use can prevent or delay the onset of type 2 diabetes. Diabetes mellitus (dm) type 2 is a heterogeneous disorder, which is characterized by genetic predisposition and interaction between insulin resistance and decreased pancreatic cell function (gordon et al, 2008).

According to (suyono 3 in ilyas, 2009) dm type 2 is a receptor response to insulin (insulin resistance). Because of this disorder insulin cannot help the transfer of glucosake in cells. Type 2 diabetes is a common disorder of glucose homeostasis which is a major public health problem where 8-10% of adults have the potential to experience type 2 diabetes (jain, 2001). Type 2 diabetes is caused by the body's inability to produce insulin properly. Often type 2 diabetes can be controlled with diet and exercise alone. It is characterized by insulin resistance and relative insulin deficiency, either or both of which can be present in diabetes when diagnosed (hidayah, 2010). The diagnosis of type 2 diabetes can occur at any age, the diagnosis is often made when complications arise or routine urine glucose tests are performed. People with type 2 diabetes often initially manage their condition through diet and exercise (wise, 2002). There are five natural components of diabetes management, namely pharmacological therapy (if needed), monitoring, education, diet and physical exercise/ sports (smeltzer. 2001). In managing diabetes mellitus to achieve these goals, various efforts are made to correct abnormalities in blood glucose levels, the first step that must be taken is non-pharmacological in the form of meal planning and physical activity (physical exercise) (suyono in waspadji, 2019).

Hypertension is an increase in blood pressure above normal values. According to nurarif a.h. & kusuma h. (2016), hypertension is an increase in systolic blood pressure of about 140 mmhg or diastolic pressure of about 90 mmhg. Hypertension is a problem that needs to be watched out for, because there are no special symptoms in hypertension and some people still feel healthy to move as usual. This is what makes hypertension a silent killer (ministry of health, 2018), people will realize they have hypertension when the symptoms are felt to be getting worse and check with health services. Symptoms that are often complained of hypertensive patients are headache, dizziness, weakness, fatigue, shortness of breath, anxiety, nausea, vomiting, epitaxis, and decreased consciousness (nurarif a.h. & kusuma h., 2016). Hypertension occurs because it is associated with risk factors. Risk factors that cause hypertension are age, sex, obesity, alcohol, genetic, stress, salt intake, smoking, physical activity patterns, kidney disease and diabetes mellitus (sinubu r.b., 2015).

METHODS

The research design used in this study is correlational quantitative research using *cross – sectional* design. Sampling in this study using a simple random sampling technique. The population in this study were all patients with degenerative hypertension and diabetes mellitus who had visited the sukorejo health center, while the number of samples was 10% of the total population of patients with degenerative hypertension and diabetes mellitus who had visited the sukorejo health center. The total sample was 60 patients with degenerative hypertension and diabetes mellitus. Data in this study is the primary data. Test analysis in this study is the *chi square test*.

RESULTS

1. Distribution Of Visits Of Hypertensive And Diabetes Mellitus Patients			
No	Patient Visits	Frequency	Presentation (%)
1	Attendance	19	31,7%
2	Absent	41	68,3%
Jumlah		60	100%

Based On Table 1, It Is Known That Most Respondents Did Not Visit The Sukorejo Sub-District Health Center As Many As 41 Respondents (68.3%) And Who Visited The Sukorejo Sub-District Health Center As Many As 19 Respondents (31.7%)

2. Distribution Of The Level Of Anxiety Of Hypertensive And Diabetes Mellitus Patients During The Covid-19 Pandemic

No	Tingkat Kecemasan	Frekuensi	Presentasi (%)
1	Tidak Cemas	29	48,3%
2	Cemas Ringan	17	28,3%
3	Cemas Sedang	2	3,3%
4	Cemas Berat	11	18,3%
5	Panik	1	1,7%
Jumlah		60	100%

Based On Table 2, It Is Known That 48.3% Of People With Hypertension And Diabetes Mellitus In The Sukorejo Health Center Do Not Feel Anxious In Conducting Health Checks At The Health Center. However, There Were 28.3% Who Experienced Mild Anxiety In Conducting Examinations At Pukesmas During The Covid – 19 Pandemic.

3. Hasil Uji Statistik			
	Value	Df	Asymp Sig (2-Sided)
<i>Pearsean Chi-Square</i>	4.327 ^a	4	.364
Likelihood Ratio	4.519	4	.340
Linear-By-Linear Association	.022	1	.883
N Of Valid Cases	60		

Based on table 3 above the results of correlation analysis using pearson chi-square using spss software, it was found that p value>level of significant (0.05) which is 0.364, the conclusion is ho accepted and h1 rejected, meaning that there is no relationship between patient visits degenerative hypertension and diabetes mellitus in terms of patient anxiety levels during the covid-19 pandemic at the sukorejo health center in blitar city in 2022.

DISCUSSION

A. Anxiety Level During The Covid-19 Pandemic At The Sukorejo Health Center In Blitar City In 2022.

Based on table 1, it is known that as many as 29 respondents (48.3%) were not anxious, as many as 17 respondents (28.3%) were mildly anxious, as many as 2 respondents (3.3%) were moderately anxious, as many as 11 respondents (18.3%) were severely anxious and as many as 1 respondent (1.7%) panicked. Based on these data, the level of public anxiety during the pandemic does not feel anxious.

Anxiety is a disorder of the conscious (effective) which is characterized by feelings of fear or anxiety deep and sustained, not impaired in assessing reality (reality testing ability / rta), is still good, the personality is still intact (not experiencing a personality fracture/ splitting of personality), behavior can be disrupted but still within normal limits.

Based on the results of the research questionnaire that was filled in, it was found that only 1 respondent panicked and 29 respondents who were not anxious during the covid-19 pandemic.

This is not in line with research by febriani & santi (2021) which stated that during a pandemic, the people of randutatah probolinggo who were sick chose to take care of themselves at home by buying medicine at pharmacies or using herbal drinks because people were worried when following hospital procedures that in the opinion of the public, health workers take too long in handling and the symptoms they complain about are always said to be covid.

The results of this non-supportive study show that the perception of the public or degenerative patients at the sukorejo health center in blitar city does not feel anxious or worried about the covid conditions that are currently hitting blitar city. This is based on the massive handling of covid - 19 in blitar city. This means that there is no gap for people with covid - 19 to continue their normal activities in the home environment. This is a manifestation of the regional government's commitment and is assisted by the covid-19 task force team for each region, especially the sukorejo area. So that this has the effect of not causing anxiety for residents to visit to carry out examinations at the puskesmas on the grounds that they are worried about getting a covid diagnosis.

Anxiety that arises among community members is suspected to still exist, but is still under control and has not become the main relationship in making visits to the sukorejo health center to carry out health checks.

B. Visit Of Hypertensive And Diabetic Millitus Degenerative

Based on table 2, it is known that 19 respondents (31.7%) visited puskesmas, and 41 respondents (68.3%) did not visit puskesmas. Based on these data, the level of community visits to puskesmas during the pandemic is still low.

Primary health services such as health centers are the spearhead in the control of degenerative patients. When implemented properly, it can reduce the number of pain, complications and death due to degenerative diseases. Screening is also performed to determine the stratification of risk factors and plans to overcome them.

The results of the data analysis of this study are similar to mardiana's research (2022) which showed a decrease in patient attendance at parung health centers in 2020 to 70.65%. According to mardiana (2022) the level of education, accessibility and doctor services have a significant relationship to the use of health services, implementation of health protocols, with which doctor services have a great relationship.

C. The Visit Of Hypertensive And Diabetic Millitus Degenerative Patients Was Reviewed From The Level Of Anxiety During The Covid-19 Pandemic At The Sukorejo Health Center In Blitar City In 2022.

Based on table 3, it is known that the results of correlation analysis using pearson chi-square using spss software, it was found that p value>level of significant (0.05) is 0.364, which means there is no relationship between the visit of patients with degenerative hypertension and diabetes mellitus to the level of anxiety of patients during the covid-19 pandemic at sukorejo health center.city.blitar.

The results of the study were supported by dolo, yusuf, and azis (2021) who stated that the factors that related to adherence to treatment for hypertensive patients during the covid-19 pandemic at the bulili palu health center were not caused by anxiety, but due to: 1) family support, 2) employment status, 3) affordability of access.

CONCLUSION

1. The results of identifying the level of anxiety during the covid-19 pandemic at the sukorejo health center in blitar city in 2022 only a few experienced anxiety.
2. The results of the identification of degenerative hypertension and diabetes mellitus patient visits at the sukorejo health center in blitar city in 2022 are still low.
3. The results of the study were obtained ($p = 0.000 > 0.05$) or ho accepted, which means that there is no relationship between visits by hypertensive degenerative patients and diabetes mellitus in terms of the patient's anxiety level during the covid-19 pandemic at the sukorejo health center in blitar city in 2022.

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