

HUBUNGAN FAKTOR RISIKO DENGAN KEJADIAN PREEKLAMSI DI RSUD Dr. H. CHASAN BOESOIRIE TERNATE

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ABSTRAK

Latar Belakang: Preeklamsia merupakan keadaan tekanan darah sistolik ≥ 140 mmHg dan tekanan darah diastolik ≥ 90 mmHg pada wanita hamil dengan usia kehamilan ≥ 20 minggu. Terdapat beberapa gejala dan tanda preeklamsia seperti proteinuria, trombositopenia, gangguan fungsi hati, nyeri epigastrium atau nyeri pada kuadran kanan atas, insufisiensi ginjal, dan edema paru. Banyak faktor risiko yang mempengaruhi kejadian preeklamsia yaitu usia, obesitas, status gravida atau paritas, anemia, riwayat hipertensi, riwayat preeklamsia sebelumnya, dan kehamilan kembar. Insiden preeklamsia mengakibatkan 60.000 kematian ibu dan >500.000 kelahiran di seluruh dunia.

Tujuan: Mengetahui hubungan faktor risiko dengan kejadian preeklamsia di RSUD Dr. H. Chasan Boesoirie Ternate.

Metode: Jenis penelitian observasional-analitik dengan pendekatan *cross sectional*. Pengambilan sampel menggunakan teknik *consecutive sampling* sebanyak 169 sampel.

Hasil: Hasil uji *chi square* didapatkan terdapat hubungan antara usia, obesitas, dan riwayat hipertensi dengan kejadian preeklamsia ($p=<0,001$), terdapat hubungan antara anemia dengan kejadian preeklamsia ($p=0,039$) dan tidak terdapat hubungan antara status gravida dan kehamilan kembar/*multiple* dengan kejadian preeklamsia ($p=0,514$ dan $p=0,525$).

Kesimpulan: Terdapat hubungan antara usia, obesitas, anemia, dan riwayat hipertensi dengan kejadian preeklamsia dan tidak terdapat hubungan antara status gravida dan kehamilan kembar/*multiple* dengan kejadian preeklamsia.

Kata kunci: Faktor Risiko, Preeklamsia, Ternate

THE RELATIONSHIP BETWEEN RISK FACTORS WITH INCIDENCE OF PREECLAMPSIA AT RSUD Dr. H. CHASAN BOESOIRIE TERNATE

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ABSTRACT

Background: *Preeclampsia is a condition where systolic blood pressure ≥ 140 mmHg and diastolic blood pressure ≥ 90 mmHg in pregnant women with gestational age ≥ 20 weeks. There are several symptoms and signs of preeclampsia such as proteinuria, thrombocytopenia, impaired liver function, epigastric pain or pain in the right upper quadrant, renal insufficiency, and pulmonary edema. Many risk factors contributed to the incidence of preeclampsia, including age, obesity, gravida status or parity, anemia, history of hypertension, previous history of preeclampsia, and multiple pregnancy. The incidence of preeclampsia results in 60,000 maternal deaths and $>500,000$ premature births worldwide.*

Objective: *To determine the association of risk factors with the incidence of preeclampsia at RSUD Dr. H. Chasan Boesoirie Ternate.*

Methods: *Observational-analytic research with cross sectional. Sampling using consecutive sampling techniques, totaling 169 samples.*

Results: *The results of chi square test there is a relationship between preeclampsia and age, obesity, and a history of hypertension ($p<0.001$); anemia ($p=0.039$). There is no relationship between preeclampsia and gravida status ($p=0.514$) and twin/multiple pregnancy($p=0.525$).*

Conclusion: *There is an association between age, obesity, anemia, and history of hypertension with the incidence of preeclampsia and no association between gravida status and twin/multiple pregnancy with the incidence of preeclampsia.*

Keywords: Risk Factors, Preeclampsia,Ternate