

Faktor-faktor yang berhubungan dengan persalinan prematur di Indonesia tahun 2010 (analisis data Riskesdas 2010) = Associated factors with preterm labor in Indonesia year 2010 (analysis Riskesdas data 2010)

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Abstrak

Angka persalinan prematur di Indonesia sebesar 10%. Penyebab langsung utama kematian neonatal adalah lahir prematur (28%), infeksi berat (26%), dan asfiksia (23%). Tujuan penelitian adalah diperolehnya informasi mengenai faktorfaktor yang berhubungan dengan persalinan prematur yaitu faktor maternal, faktor demografi, faktor fetoplasenta, faktor iatrogenik. Desain penelitian ialah cross sectional. Populasi adalah seluruh ibu yang bersalin pada kurun waktu 1 Januari 2005 sampai Juni 2010 di Indonesia. Pada hasil penelitian ini persalinan prematur terdapat 738 (4.1%), ketuban pecah dini memiliki peluang 3.7 kali (95%CI:3.003-4.493), riwayat abortus secara statistik tidak bermakna. Jarak kehamilan<18 bulan memiliki peluang 1.6 kali dibanding ibu dengan jarak kehamilan >24bulan, pada primipara memiliki peluang 1.6 kali dibanding multipara, antenatal care secara statistik tidak bermakna. Ibu yang berumur 35 tahun memiliki peluang 1.9 kali persalinan prematur dibandingkan umur 20-34 bulan. Pendidikan rendah menurunkan peluang 0.7 kali dibandingkan pendidikan tinggi (95%CI: 0.593-0.988), preeklampsia/eklampsia memiliki peluang 3 kali persalinan prematur (95%CI: 2.208-4.098). Perdarahan antepartum memiliki peluang 3.6 kali persalinan prematur (95%CI:2.809-4.713). Diharapkan agar para ibu waspada terhadap terjadinya ketuban pecah dini, plasenta previa, preeklampsia/eklampsia, serta perdarahan antepartum yang berpeluang untuk persalinan prematur, mengatur jarak kehamilan (minimal 24 bulan), hamil tidak melebihi usia 35 tahun.

.....Prevalence of preterm labor in Indonesia is 10%. The direct causes of neonatal deaths were born preterm (28%), severe infections (26%), and asphyxia (23%). The research objective is to obtain information about the associated factors with preterm birth is maternal factors, demographic factors, fetoplasenta factors, iatrogenic factors. The study design was cross sectional. The population is all women who labor in the period January 1 2005 to June 2010 in Indonesia. In the results of this study there were 738 preterm deliveries (4.1%), premature rupture of membranes has a chance of 3.7 times (95% CI :3.003-4 .493), history of abortion were not statistically significant. Distance pregnancy <18 months had a chance 1.6 times compared to mothers with pregnancy spacing> 24months, in primiparas has a chance 1.6 times compared to multiparous, antenatal care were not statistically significant. Mothers aged 35 years had 1.9 times the odds of preterm labor compared to the age of 20-34 months. Low educational opportunities 0.7 times lower than higher education (95% CI: 0593-0988), preeclampsia/eclampsia has three times the odds of preterm labor (95% CI: 2208-4098). Antepartum haemorrhage have a 3.6 times chance of preterm labor (95% CI :2.809-4 .713). It is expected that the mothers aware of the occurrence of premature rupture of membranes, placenta previa, preeclampsia / eclampsia, antepartum haemorrhage and a chance for preterm labor, adjust the spacing of pregnancy (at least 24 months), not pregnant more than 35 years old.