Faktor determinan status serum vitamin A ibu nifas di Kabupaten Pandeglang (Analisis data sekunder 2008) = Determinant factor status of serum vitamin A supplementation in Pandeglang (Analysis of secondary data 2008)

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Abstrak

Secara fisiologis bayi lahir dengan cadangan vitamin A yang rendah. Kemampuan transfer vitamin A dari ibu hamil ke janin sangat kecil, meskipun ibu mempuyai status gizi yang baik, bayi hanya dapat mencukupi kebutuhan vitamin A kurang dari 2 minggu. Masalah kurang vitamin A pada balita secara klinis sudah bukan merupakan masalah kesehatan masyarakat. Namun hasil studi masalah gizi mikro di 10 kota tahun 2006, secara subklinis diketahui sebanyak 14,6% balita dengan serum retinol <20μg/dl mendekati batas ambang masalah kesehatan masyarakat sebesar 15%. Data Riskesdas 2010 presentase nasional anak umur 6-59 bulan yang mendapatkan kapsul vitamin A sebesar 69.8% dan untuk propinsi Banten sebesar 69.3%. Data Ibu nifas yang mendapat kapsul vitamin A saat melahirkan anak terakhir sebesar 52.2%, sementara untuk propinsi Banten sebesar 48.7%. Status serum vitamin A dalam darah dapat menggambarkan cadangan vitamin A ibu. Cadangan vitamin A pada ibu nifas menentukan kandungan vitamin A dalam ASI. Bila ibu nifas mempunyai status serum vitamin A rendah maka bayi akan berisiko menderita kekurangan vitamin A (KVA).

Penelitian ini bertujuan untuk mengetahui faktor determinan status serum vitamin A pada ibu nifas di Kabupaten Pandeglang (analisa data sekunder 2008) yang merupakan gambaran tidak langsung vitamin A ibu nifas yang pada akhirnya dapat memberi gambaran cadangan vitamin A dalam Air Susu Ibu (ASI). Penelitian ini dilakukan pada Mei 2012. Disain yang digunakan cross sectional dengan jumlah sampel 127 orang ibu nifas 0 hari yang diambil dengan menggunakan kekuatan uji (power of the test 1-β). Variabel yang dikumpulkan meliputi karakteristik sosial (umur, paritas, pendidikan, pekerjaan), Konsumsi Zat Gizi (asupan protein, asupan lemak, asupan vitamin A), Status Gizi (Indeks Massa Tubuh, Kadar Haemoglobin) serta Status Kesehatan (Morbiditas) terhadap Serum vitamin A ibu nifas. Karakteristik sosial diukur dengan wawancawa, konsumsi zat gizi di ukur dengan metode recall 1x24jam.

Status gizi (IMT) diukur dengan membandingkan berat badan dengan tinggi badan, kadar Hb diperiksa denga menggunakan HemoCue, Morbiditas dengan mengunakan wawancara dan pemeriksaan medis serta Serum vitamin A dengan menggunakan merode High Performance Liquid Chromatography (HPLC). Analisa data yang dilakukan univariat, bivariat dan multivariate. Hasil analisa didapatkan sebesar 40,9% ibu nifas mempunyai status serum vitamin A normal. Persentase terbesar dari karakteristik sosial ibu nifas adalah : umur 20 tahun-30 tahun (59,8%), paritas lebih besar dari 2 kali (56,7%), pendidikan <9 tahun sekolah (61,4%), tidak bekerja (98,4%).

Persentase terbesar dari konsumsi makanan ibu nifas: asupan protein <80% AKG (89,0%), asupan lemak <25% total energi (54,3%), asupan vitamin A >700 RE (66,1%). Sebanyak 70,1% ibu nifas mempunyai IMT

normal, 15% IMT tergolong gemuk dan 13,4% tergolong obesitas, serta 1,6% tergolong kurus. Lebih banyak ibu nifas yang tergolong tidak anemia (65,4%). Sebanyak 85.0% ibu nifas berstatus sehat. Analisis bivariat menunjukkan tidak ada hubungan yang signifikan antara karakteristik sosial, konsumsi zat gizi, status gizi, status kesehatan dengan serum vitamin A ibu nifas Analisis multivariat menunjukkan, tidak ada variabel yang menjadi faktor determinan serum vitamin A ibu nifas.
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Physiologically babies born with low vitamin A reserves. The ability of vitamin A transfer from mother to fetus is very small, although the mother has a good nutritional status, the baby can only meet the need of vitamin A is less than 2 weeks. Problem of lack of vitamin A in infants is clinically not a public health problem. But the study results micronutrient problems in 10 cities in 2006, is known as subclinical 14.6% of infants with serum retinol <20μg/dl approaching the threshold of public health problems by 15%. Data Riskesdas 2010 the national percentage of children aged 6-59 months who received vitamin A capsules for 69.8% and 69.3% Banten province. Data partum mother who received vitamin A capsules in childbirth last at 52.2%, while for 48.7% of Banten province. Status of vitamin A in blood serum may reflect vitamin A reserves. Reserves of vitamin A in women postpartum to determine the content of vitamin A in breast milk. Childbirth if the mother had serum vitamin A status of low-risk the baby will suffer from vitamin A deficiency (VAD).

This study aims to determine the determinant factors of serum vitamin A status in mothers at parturition Pandeglang (secondary data analysis of 2008) which is an indirect picture of vitamin A deficiency, which in turn can provide a backup image of vitamin A in breast milk (ASI). The research was conducted in May 2012. Cross sectional design used a sample of 127 people 0 days post partum mothers are taken by using a test power (power of the test 1-β). Variables collected include social characteristics (age, parity, education, occupation), Substance Consumption Nutrition (protein intake, fat intake, intake of vitamin A), Nutritional status (body mass index, hemoglobin levels) and health status (morbidity) of serum vitamin A deficiency. Social characteristics are measured with wawancawa, nutrient consumption measured by the method of recall 1x24jam.

Nutritional status (BMI) was measured by comparing weight to height, hemoglobin concentration using the HemoCue premises inspected, Morbidity by using interviews and medical examinations and serum vitamin A by using High Performance Liquid Chromatography Metode (HPLC). Data analysis conducted univariate, bivariate and multivariate. Analysis results obtained for 40.9% of postpartum mothers had vitamin A status of normal serum. The largest percentage of the social characteristics of postpartum mothers were: age 20 years-30 years (59.8%), parity greater than 2 times (56.7%), education <9 years of school (61.4%), it does not work (98.4%).

The largest percentage of postpartum maternal food consumption: a protein intake <80% RDA (89.0%), fat intake <25% total energy (54.3%), vitamin A intake of> 700 RE (66.1%). A total of 70.1% of postpartum mothers had normal BMI, 15% BMI classified as obese and 13.4% classified as obese, and 1.6% classified as underweight. More mothers are not classified as puerperal anemia (65.4%). A total of 85.0% of mothers postpartum health status. Bivariate analysis showed no significant relationship between social characteristics, nutrient intake, nutritional status, health status with serum vitamin A supplementation.

Multivariate analysis showed that no variable is the determinant factor of serum vitamin A supplementation.