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Kadar homosistein pada perempuan usia lanjut dan hubungannya dengan asupan folat = Association of folate intake and homocysteine level in elderly women

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Abstrak

Homosistein merupakan asam amino kelompok sulfhidril dari hasil metabolisme metionin. Faktor-faktor seperti, penuaan, defisiensi asam folat, vitamin B6 dan B12, dapat meningkatkan kadar homosistein. Telah dilakukan penelitian dengan desain studi potong lintang yang bertujuan mengetahui hubungan antara asupan folat dengan kadar homosistein pada usila perempuan. Pengumpulan data dilakukan selama bulan Desember 2012 sampai Januari 2013 di Pusaka 12 (Tomang) dan Pusaka 39 (Senen). Pengambilan subyek dilakukan dengan cara cluster random sampling, dan didapatkan 55 orang subyek yang memenuhi kriteria penelitian. Data dikumpulkan melalui wawancara meliputi usia, tingkat pendidikan, penghasilan, food frequency questionnaire (FFQ) semikuantitatif untuk menilai asupan folat, vitamin B6 dan B12.
Pengukuran antropometri yaitu berat badan (BB) dan tinggi lutut (TL) untuk menilai status gizi berdasarkan indeks massa tubuh (IMT) serta pemeriksaan laboratorium meliputi kadar homosistein. Didapatkan rerata usia 69,2±6,3 tahun. Malnutrisi terdapat pada 78,2 % subyek. Sebagian besar subyek penelitian, memiliki asupan folat, vitamin B6 dan B12 yang kurang dari angka kecukupan gizi (AKG), yaitu masing-masing 92,7%, 87,3% dan 80%. Median asupan folat berbahan kedelai 17,9(0,75–151,2)%. Median kadar homosistein 13,95(7.92–29,21)mol/L. Hiperhomosisteinemia ringan dan sedang didapatkan sebanyak 23,6% dan 3,6%. Pada penelitian ini tidak didapatkan hubungan bermakna antara asupan folat, vitamin B6 dan vitamin B12 dengan kadar homosistein (p=0,702, p=0,624, dan p=0,658).
.....Homocysteine is an amino acid sulfhydryl group from the metabolism of methionine. Homocysteine levels influenced by various factors, ie aging, deficiency of folic acid, vitamin B6 and B12, can raise homocysteine level. The aim of the cross sectional study was to determine the relationship between intake of folate with homocysteine levels in elderly women. Data collection was conducted during December 2012 to January 2013 at the Pusaka 12 (Tomang) and Pusaka 39 (Senen). Subjects were obtained using cluster random sampling, and 55 subjects who met the study criteria were recruited. Data were collected through interviews include age, education level, income, and semiquantitative food frequency questionnaire (FFQ) to assess intake of folate, vitamin B6 and B12.
Anthropometric measurements of the body weight (BW) and high-knee (TL) to assess the nutritional status based on body mass index (BMI) as well as laboratory examinations include homocysteine levels. This study obtained a mean age of 69.2 ± 6.3 years. Malnutrition was occurred in 78.2% of subjects. Majority of the subjects had intakes of folate, vitamin B6 and B12 were less than the nutritional adequacy rate (RDA), which is respectively 92.7%, 87.3% and 80%. Median folate intake from soybeans 17.9 (0.75 to 151.2)%. Median levels of homocysteine 13.95 (7.92-29,21) mol/L. Mild hyperhomocysteinemia and intermediate hyperhomocysteine were obtained as 23.6% and 3.6%. No significant association was found between intake of folate, vitamin B6 and vitamin B12 with homocysteine levels (p = 0.702, p = 0.624, and p = 0.658).