

Pengaruh obat non-program TB terhadap ketidakpatuhan berobat : analisis data Riskesdas 2010 = The influence of non-TB program's drugs on non-compliance TB treatment secondary data : analysis National Health Survey 2010

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Abstrak

Pendahuluan. Beban TB di Indonesia masih masuk lima tertinggi di dunia. Temuan kasus dan pengobatan adalah pilar utama program penanggulangan TB. Survei nasional menunjukkan peningkatan penggunaan obat non-program TB dari 16,8% (2010) menjadi 55,6% (2013). Peningkatan penggunaan obat non-program TB diduga berpengaruh terhadap ketidakpatuhan berobat.

Tujuan. Penelitian ini bertujuan untuk mempelajari ketidakpatuhan berobat pada orang dengan TB yang menerima obat non-program TB dan obat program TB.

Metode. Penelitian menggunakan data sekunder Riskesdas 2010. Analisis logistik multivariabel dilakukan pada sampel 971 orang dengan TB yang selesai mendapatkan pengobatan.

Hasil. Ada kecenderungan orang dengan TB yang menerima obat non-program TB ketidakpatuhan berobat lebih tinggi. Hasil penelitian juga menunjukkan odds untuk tidak menyelesaikan pengobatan lebih tinggi pada orang yang menerima obat non-program TB dibandingkan orang yang menerima obat program TB, yaitu rasio odds terkontrol 2,4 (95% CI RO: 1,7-3,5).

Simpulan. Dalam upaya menjamin kepatuhan berobat TB perlu didukung dengan mutu program pengobatan, diantaranya adalah ketersediaan obat program TB, penyetaraan standar pengobatan antara fasyankes swasta dan publik, dan sistem pemantauan minum obat.

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Background. TB in Indonesia is one of five highest burden countries. Case finding and treatment are the main pillars of TB control program. National survey reports the increase in the use of non-TB program's drugs from 16,8% (2010) to 55,6% (2013). Increased use of non-TB program's drugs associate with non-compliance TB treatment.

Objective. The study purposed to compare the non-compliance of TB treatment among people who received TB program's drugs and people who received non-TB program's drugs.

Methods. The study used secondary data of National Health Survey 2010. Analysis used multivariable logistic through 971 people who completed TB treatment.

Result. The findings were people who received non-TB program's drugs had higher non-compliance TB treatment than people who received TB program's drugs. The result also showed that the odds of people not to complete the treatment was higher in people who received non-TB program's drugs than who received TB program's drugs, adjusted OR was 2,4 (95% CI OR: 1,7-3,5).

Conclusion. To assure the compliance to TB treatment is strengthening TB treatment program; such as the availability of TB program's drugs, the equality of standard TB treatment among public and private health services, and the system of observed treatment.