

Hubungan antara obesitas dan hipertensi pada Aparatur Sipil Negara Pemerintah (ASN) Kota Depok tahun 2018 = Association between obesity and hypertension in civil servant of Depok government at 2018

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Abstrak

Latar belakang: Riskesdas Indonesia tahun 2018, prevalensi hipertensi pada pegawai pemerintah sebesar 36.91% dan prevalensi obesitas pegawai pemerintah sebesar 33.7%%. Prevalensi ini di atas prevalensi nasional, hipertensi 34.1% dan obesitas 21.8%. Tujuan penelitian ini untuk melihat prevalensi obesitas dan hipertensi pada Aparatur Sipil Negara Pemerintah (ASN) Kota Depok tahun 2018, hubungan antara obesitas dan hipertensi serta rekomendasi pencegahan serta pengendalian di kemudian hari. Metode: Penelitian ini menggunakan desain cross sectional. Analisis bivariat antara hipertensi dan faktor yang berkaitan dilakukan menggunakan Chi square test and dilanjutkan analisis multivariat menggunakan model regresi Cox. Hasil: Dari 659 ASN, 53.11% menderita obesitas, 27.47%-56.30% menderita hipertensi. Dalam model regresi Cox akhir, ASN dengan obesitas memiliki resiko 1.65-2.11 kali lebih tinggi menderita hipertensi daripada ASN dengan status gizi normal setelah dikontrol variabel obesitas sentral, jenis kelamin dan hiperglikemia. Diskusi: Obesitas merupakan faktor risiko kejadian hipertensi pada ASN Pemerintah Kota Depok dan faktor lain yang berpengaruh adalah obesitas sentral, jenis kelamin pria dan hiperglikemia. pola hidup sehat, gizi seimbang, aktivitas fisik, pemeriksaan berat badan, lingkar pinggang dan gula darah secara berkala diperlukan untuk mengendalikan hipertensi. Rekomendasi ini perlu ditindaklanjuti oleh Pemerintah Kota Depok dan ASN.

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Indonesian Riskesdas in 2018, prevalence of hypertension in civil servant was 36.91% and prevalence of obesity in civil servant was 33.7 %%. This prevalence was above the national prevalence of hypertension, 34.1% and obesity, 21.8%. The purpose of this study was to determine the prevalence of obesity and hypertension in Civil Servant of Depok Government in 2018, association between obesity and hypertension and to provide a recommendation for prevention and control in the future. Methods: This study used cross sectional design. Bivariate analysis between hypertension and its potential factor were done using Chi square test and further multivariate analysis was performed using Cox regression model. Results: Among 659 civil servant, 53.11% had obesity, 27.47%-56.30% had hypertension. In final Cox regression model, civil servant with obesity had a risk of 1.44-2.11 times higher in hypertension than civil servant with normal nutritional status after being controlled by central obesity variable, sex and hyperglycemia. Discussion: Obesity is a risk factor for the incidence of hypertension in civil servant of Depok Government and the other factors that influence were central obesity, man and hyperglycemia. A healthy lifestyle, balanced nutrition, physical activity, periodic blood pressure checks, waist circumference and blood sugar are needed to maintain ideal weight and blood pressure. This recommendation needs to be followed up by Depok Government and civil servant.