

Peran Terapi Medik Gizi terhadap Status Nutrisi Kapasitas Fungsional, dan Kualitas Hidup Pasien Tuberkulosis Paru dengan Penyulit = Role of Medical Nutrition Therapy on Nutrition Status, Functional Capacity, and Quality of Life of Patient with Lung Tuberculosis with Complication.

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Abstrak

Latar Belakang:

Tuberkulosis Paru (TB Paru) merupakan penyakit infeksi yang bersifat kronis dengan tingkat morbiditas dan mortalitas yang tinggi. Perubahan metabolisme akibat infeksi Mycobacterium Tuberkulosa (M.TB) dan aktivasi sistem neurohormonal turut berperan terhadap terjadinya malnutrisi, yang dapat memberikan efek negatif terhadap prognosis pasien dengan TB Paru. Penderita TB Paru mengalami penurunan kapasitas fungsional dan kualitas hidup. Terapi Medik Gizi sejak awal diagnosis ditegakkan, akan mendukung proses pemulihan pasien TB.

Kasus :

Dalam serial kasus ini, dipaparkan empat kasus pasien TB Paru dengan berbagai faktor risiko, diantaranya adalah penyakit TB Paru, TB Miliar, PPOK et causa TB Paru, Meningitis TB. Pada awal pemeriksaan didapatkan adanya defisiensi asupan makronutrien dan mikronutrien, hipoalbuminemia, CRP yang meningkat, hemoglobin (Hb) yang turun, penurunan kapasitas fungsional dan kualitas hidup. Terapi medik gizi diberikan secara individual, sesuai dengan kondisi klinis, hasil pemeriksaan laboratorium, dan analisis asupan makan terakhir.

Hasil:

Tiga dari empat pasien mengalami peningkatan asupan, perbaikan kondisi klinis, dan kapasitas fungsional serta kualitas hidup pasien. Status nutrisi pasien tidak mengalami perburukan selama perawatan,

Kesimpulan:

Terapi Medik gizi yang adekuat pada pasien TB dapat mempertahankan status nutrisi pasien dan mendukung perbaikan kondisi klinis, kapasitas fungsional, serta kualitas hidup pasien.

.....Background:

Pulmonary tuberculosis (pulmonary TB) is a chronic infectious disease with high morbidity and mortality. Changes in metabolism due to infection with Mycobacterium Tuberculosis and activation of the neurohormonal system contribute to the occurrence of malnutrition, which can have a negative effect on the prognosis of patients with pulmonary TB. Patients with pulmonary TB have decreased functional capacity and quality of life. Early medical nutrition therapy will support the recovery process of pulmonary TB patients.

Case :

In this case series, four cases of pulmonary TB patients were presented with various risk factors, including pulmonary TB disease, miliar TB, COPD et causa lung TB, and TB meningitis. Deficiency of macro and micronutrient intake, hypoalbuminemia, increased CRP, decreased hemoglobin (Hb), decreased functional capacity and quality of life were found at the beginning of examination. Nutrition medical therapy is given

individually, according to clinical conditions, results of laboratory examinations, and analysis of recent food intake.

Result :

Three out of four patients experience increased intake, improvement of clinical conditions, functional capacity and quality of life. The nutritional status of patients did not experience worsening during treatment.

Conclusion:

Adequate nutritional medical therapy in TB patients can maintain patient nutritional status and support improvement of clinical conditions, functional capacity, and quality of life.