

Original Research Article

Overview of Self-Management in Hypertension Patients in the Working Area of Sidomulyo Samarinda Health Centre

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Abstract

Background: Hypertension or high blood pressure that many people know can cause death without complaints and is so dangerous that it gets the nickname "the silent killer." Individuals affected by hypertension can be managed if treated appropriately. One way to control blood pressure is with good self-management. **Objective:** This study aims to identify the description of Self Management in Hypertension patients in the working area of Sidomulyo Samarinda Health Center. **Methods:** The method used is a survey method with a quantitative approach. Using a consecutive sampling technique, as many as 100 respondents were in the Samarinda Sidomulyo Health Centre Working Area. The instrument used in measuring knowledge is the Hypertension Self-Management Behaviour Questionnaire (HSMBQ). **Results:** The results of the study regarding the description of self-management in Hypertension Patients showed that most respondents had sufficient self-management, as many as 85 respondents (85.0%) greater than respondents who had good self-management, as many as 11 respondents (11.0%) and respondents who had poor self-management as many as four respondents (4.0%). **Conclusion:** most respondents have sufficient Self-management due to hypertensive patients who rarely do physical activity, with the majority of female respondents who work as housewives.

Keywords: *self-management, Hypertension*

1. INTRODUCTION

Hypertension is when systolic and diastolic blood pressure is above 120/80 mmHg, called elevated blood pressure. Hypertension can cause an increase in the causes of cardiovascular, cerebrovascular, and renovascular diseases to become hazardous cases in Indonesia. Because there are no typical symptoms of this disease and it occurs silently, it is called the silent killer (Barudin, 2021). In the medical world, hypertension is a severe condition and risks increasing

mortality. This disease is the leading cause of premature death of one billion people around the globe (Ademe et al., 2019).

According to data from the World Health Organisation (WHO, 2021), the prevalence of hypertension varies according to a country's location and income level. Adults with hypertension rose from 594 million in 1975 to 1.13 billion in 2015, with low- and middle-income countries experiencing the most significant increase. This increase is primarily due to the rise in population risk factors for hypertension. The Basic Health Research Survey (2018) found that 34.1% of the Indonesian population has hypertension. In Indonesia, only one-third of people with hypertension are diagnosed, while the other two-thirds are not (MOH RI, 2023). Based on measurement data in districts and cities in East Kalimantan Province, the prevalence of hypertension in adults over 18 years of age is 39.30%. Samarinda City has a diagnosed prevalence of hypertension of 36.10%, according to the 2018 Riskesdas statistics (Riskesdas, 2018).

People with hypertension cannot be cured entirely. For affected individuals, blood pressure will be manageable if treated appropriately. One way to manage blood pressure is with good Self-management, such as taking care of yourself and switching from maladaptive to adaptive behavior. Self-management skills are efficient for lowering blood pressure in patients with hypertension (Laili et al., 2021).

Self-management is an individual's ability to maintain behaviors and manage illness in daily life to reduce and carry the risk of disease. Healthy blood pressure balance (Aprilatutini, et al., 2021). Self-integration, such as regular exercise, low-salt and low-fat diet, weight control, smoking cessation, and stress management in hypertensive patients, are factors that influence the self-management process of the condition. Self-control measures, such as keeping an eye on symptoms of high blood pressure and cooperating with medical professionals in necessary self-care. Hypertensive patients who practice self-control often monitor their blood pressure. Taking prescribed blood pressure medication as prescribed. Hypertensive self-management or self-care behaviors can result in beneficial lifestyle modifications for hypertension, lowering the risk of consequences such as coronary artery disease and stroke.

The benefits of self-management in treating hypertensive patients can increase their capacity and awareness to reduce blood pressure effectively (Rachmawati, 2021). The results of research (Isnaini & Lestari, 2018) Self Management has a positive effect on blood pressure. The results of other researchers conducted by (Sagala, 2019) prove that Self-management can reduce blood pressure in patients with hypertension, but pharmacological therapy must still be given.

2. METHOD

This research design is a descriptive study with a population of hypertensive patients in the Sidomulyo Puskesmas work area. Respondents in this study totaled 100 respondents with consecutive sampling techniques. The inclusion criteria in this study were patients diagnosed with hypertension. In contrast, the exclusion criteria were hypertensive patients with chronic diseases (stroke, diabetes mellitus, cancer) and hypertensive patients who have speech, hearing,

and vision disorders. The data collection tools used were medical record data as secondary data and the Hypertension Self-Management Behaviour Questionnaire (HSMBQ) questionnaire consisting of 40 questions (Igarashi, 2019).

3. RESULT AND DISCUSSION

Table 1 shows that most of the respondents were 46-63 years old, most of the respondents were female (67%), the education level of most of the respondents was female.

Table 1 Demographics of respondents

Variable		Description	
		amount	%
Age	(17-25) Years	1	1
	(26-35) Years	23	23
	(36-45) Years	24	24
	(46-63) Years	32	32
	(56-65) Years	20	20
Gender	Man	33	33
	Woman	67	67
Education	Not School	6	6
	Elementary	29	29
	Junior High School	30	30
	High School	24	24
	College	11	11
Suffering from hypertension for a long time	< 5 years	63	63
	≥ 5 years	37	37
Occupation	Doesn't work	8	8
	Housewife	45	45
	Self-employed	39	39
	Farmer	4	4
	Laborer	4	4
Degree of Hypertension	Degree 1	35	35
	Degree 2	49	49
	Degree 3	9	9
	Degree 4	7	7

Respondents were in junior high school (30%), most respondents were diagnosed with hypertension <5 years (63%), most respondents were housewives (45%), and most respondents were diagnosed with grade 2 hypertension (49%).

Table 2 shows that the respondents had sufficient self-management as many as 85 respondents or equal to (85.0%), followed by good self-management respondents as many as 11 respondents or equal to (11.0%), and respondents who had less self-management as many as four respondents or equal to (4.0%).

Table 2. Frequency Distribution of Respondents Based on self-management

<i>Self-Management</i>	F	%
Good	11	11.0%
Enough	85	85.0%
Less	4	4.0%

Table 3 shows the assessment of self-management indicators. From the results of the study obtained data, Most respondents have sufficient self-integration (91%), sufficient self-regulation (77%), interaction with good health workers (74%), adequate blood pressure monitoring (67%), and regulatory compliance (52%).

Table 3 Indicators self-management

Variable		Description	
		amount	%
Self integration	Good	4	4
	Enough	91	91
	Less	5	5
Self-regulation	Good	12	12
	Enough	77	77
	Less	11	11
Health Care Interaction	Good	19	19
	Enough	74	74
	Less	7	7
Blood Pressure Monitoring	Good	16	16
	Enough	67	67
	Less	17	17
Regulatory Compliance	Good	38	38
	Enough	52	52
	Less	10	10

Based on the results of research conducted by researchers on hypertensive patients measured using the Hypertension Self Management Behaviour Questionnaire (HSMBQ) questionnaire, which has five aspects. Aspect 1 measures how a person's lifestyle, with the results obtained, more patients with hypertension have sufficient self-management in self-integration, as many as 91 respondents (91.0%). Aspect 2 measures patients' behavior in tracking signs and symptoms of hypertension; with the results, more patients with hypertension have sufficient self-management in self-regulation, as many as 77 respondents (77.0%). Aspect 3 measures how patients cooperate with health agencies, with the results obtained more patients with hypertension have sufficient Self-management in health worker interactions as many as 74 respondents (74.0%). Aspect 4 measures how the patient's blood pressure for

Modify self-management strategies; with the results obtained, more patients with hypertension have sufficient self-management blood pressure monitoring as many as 67 respondents (67.0%). Aspect 5 measures the level of compliance with the recommended rules; with the results obtained, more patients with hypertension have sufficient self-management in compliance with the regulations suggested by as many as 52 respondents (52.0%). As well as the overall results obtained, most respondents have sufficient self-management as many as 85 respondents (85.0%), more significant than respondents who have good self-management as many as 11 respondents (11.0%), and respondents who have poor self-management as many as four respondents (4.0%).

From these data, the researcher concluded that sufficient self-management is caused by hypertensive patients who rarely integrate themselves with a lack of maintaining a healthy lifestyle, such as the habit of consuming foods that can increase blood pressure, smoking habits, and consumption of alcoholic beverages and lack of physical activity such as exercise. Most hypertensive patients in the Samarinda Sidomulyo Health Centre Working Area have sufficient self-management. In general, the condition of hypertensive patients has an impact on reducing self-management. The following research was conducted by (Nabila et al., 2022), who found that most respondents had Self-management of hypertension in the moderate or sufficient category. This study also states that several factors influence self-management, namely economy, education, perception of disease, knowledge, increasing age, self-efficacy to carry out certain activities, and when there are obstacles to activity and family support.

4. CONCLUSION

From the results of research on the description of self-management in hypertensive patients, as much as One hundred respondents with the majority of patients in the aspect of self-integration have sufficient self-management, the majority of patients in the element of self-regulation have adequate self-management, the majority of patients in the part of health worker interaction have sufficient self-management, the majority of patients in the aspect of monitoring

blood pressure have good self-management, the majority of patients in the element of compliance with recommended rules have sufficient self-management. From the overall results obtained, patients with hypertension have self-management is sufficient.

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