

Characteristics of type ii diabetes mellitus patients at trading general hospital, Simalungun regency

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ABSTRACT

Complications caused by diabetes are becoming a more serious problem so controlling blood glucose intensively can reduce diabetes mortality by reducing complications that arise. This study aims to determine the characteristics of Type II Diabetes Mellitus Patients at the Trade Area General Hospital, Simalungun Regency in 2016. With this type of descriptive research, this research was carried out at the Trade Area General Hospital, Simalungun Regency from July to September 2016 with a total population of 40 people using the following techniques: sampling, namely total sampling where all the population is used as a sample. The results of this study indicate that the younger a person has diabetes mellitus, the less the number of diabetes mellitus sufferers, the greater the number of diabetes mellitus sufferers by women, there are fluctuations in the duration of the disease in the Toba and Simalungun tribes, while the Javanese suffer longer. diabetes mellitus, the incidence rate has decreased. The duration of the disease with adherence to taking medication did not have a significant difference compared to the duration of the disease with adherence to diet. The duration of the disease with dietary adherence is a significant difference between adherents and non-adherents, where the tendency is not to comply with dietary rules. It is hoped that Efarina University through the Bachelor of Nursing study program can provide counseling about Diabetes Mellitus, specifically Type II Diabetes Mellitus, both in the community and in hospitals. It is recommended that the hospital pay more attention to the diet of patients with Type II Diabetes Mellitus and the administration of diet according to the portion and condition of the patient in this study can be explored by the information that has been conveyed by researchers regarding Type II Diabetes Mellitus sufferers.

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INTRODUCTION

The World Health Organization (WHO) predicts an increase in the number of diabetes patients in Indonesia from 8.4 million in 2000 to around 21.3 million in 2030. America (Pratiwi, 2007). WHO

data reveals, the global burden of Diabetes Mellitus in 2000 was 135 million, where this burden is expected to continue to increase to 366 million people after 25 years (2025). In 2025, Asia is expected to have the largest diabetes population in the world, namely 82 million people, this number will increase to 366 million people after 25 years (Purnomo, 2009).

Diabetes Mellitus is a collection of symptoms that arise in someone who experiences an increase in blood sugar levels due to absolute or relative deficiency of the hormone insulin. Implementation of the diet should be accompanied by physical exercise and changes in behavior about food (Suyono, 2008). Diabetes mellitus (DM) is a cause of death because of the cardiovascular disease it causes, diabetics have a 2-3 times higher risk than the non-DM population (Siregar, 2010). Diabetes Mellitus (DM) is a chronic disease with an increasing prevalence worldwide, including in Indonesia, especially among adults. The increase in the prevalence of DM is followed by an increase in the prevalence of obesity which is influenced by lifestyle changes and unhealthy dietary patterns (Almatsier, 2009).

The most common case of diabetes is type 2 DM, which generally has a background disorder in the form of insulin resistance. Type 2 DM can occur due to several factors including genetic factors, obesity caused by lifestyle, lack of activity, and overeating. Besides that, there are demographic factors where there is an increase in population, urbanization, the population aged over 40 years is increasing. As well as factors reducing infectious diseases and malnutrition. When viewed from these factors, it can be concluded that in the next 1 or 2 decades the frequency of type 2 DM will increase dramatically (Soegondo, 2009).

The complications caused by diabetes are a more serious problem than the diabetes problem itself. The complications that arise are often related to high blood glucose levels. So, controlling blood glucose intensively can reduce diabetes mortality by reducing complications that arise (Yoo and Kim, 2009).

Based on the results of research and surveys conducted by researchers, the researchers wished to find out the characteristics of Type II Diabetes Mellitus Patients at the Trade Regional General Hospital, Simalungun Regency in 2016.

Formulation of the problem, From the background above, the formulation of the research problem is what are the characteristics of Type II Diabetes Mellitus sufferers at the Trade Area General Hospital of Simalungun Regency in 2016.

RESEARCH METHOD

Types of research

This type of research is cross sectional, which is a research design by making observations at the same time (Hidayat.AA, 2009). This is intended to determine the characteristics of Type II Diabetes Mellitus sufferers at the Trade Hospital of Simalungun Regency in 2016.

Location and Time of Research

The research was conducted at the Trade Hospital of Simalungun Regency. This research was conducted from July - September 2016.

Population and Sample

The population in this study were all Type II Diabetes Mellitus patients who visited the Trading Hospital, both inpatients and outpatients in the period March-July 2016, namely 40 people. The sample size in this study is the entire population sampled. By using the total sampling technique, the entire population is used as a research sample, namely 40 people.

RESULTS AND DISCUSSIONS

Based on the results of research conducted regarding the Characteristics of Type II Diabetes Mellitus Patients at the Trade Area General Hospital of Simalungun Regency in 2016, it can be discussed as follows:

Characteristics of Age and Duration of Disease, Adherence to Taking Medication and Diet Compliance in Patients with Type II Diabetes Mellitus at the Trade Area General Hospital, Simalungun Regency, 2016

From the results of table 5.1.9 above, it can be seen that of the 4 (10%) respondents who were aged 35-45 years, the majority were disobedient to the diet, namely 3 people (7.5%), while the minority adhered to the diet, namely 1 person (2.5%), out of 14 (35%) respondents aged 46-56 years the majority were disobedient to the diet, namely 8 people (20%) while the minority adhered to the diet, namely as many as 6 people (15%), out of 22 (55%) respondents who were aged > 56 years the majority did not adhere to the diet as many as 17 people (42.5%) while the minority adhered to the diet as many as 5 people (12.5%).

Gender Characteristics with Disease Duration, Medication Compliance and Diet Compliance in Patients with Type II Diabetes Mellitus at the Trade Area General Hospital, Simalungun Regency, 2016

From the cross table it can be seen that the number of people with diabetes mellitus is more suffered by women. When viewed from the duration of the disease, we can conclude that in the period of 6-10 years there has been a two-fold increase in diabetes mellitus in women. However, if seen from the adherence to taking medication, that is the comparison between men and women, it can be concluded that men are slightly more compliant with taking medication than women. When compared with diet adherence, it can be seen that men tend to be disobedient to diets compared to women. This can be seen from the comparison between the number of obedient and non-adherent diets between men and women.

Characteristics of Tribes with Disease Duration, Adherence to Taking Medication and Diet Compliance in Patients with Diabetes Mellitus Type II at the Regional General Hospital of Perdagangan Simalungun Regency in 2016

If you look at the results of the cross table between ethnic groups and the duration of the disease, it can be concluded that the Toba and Simalungun tribes have fluctuations in the duration of the disease in the Toba and Simalungun tribes, while in the Javanese the longer they suffer from diabetes mellitus, the incidence rate decreases. Whereas the Mandailing and Minang tribes tend not to experience a significant decrease and increase in incidence when viewed from the duration of diabetes mellitus. When viewed from adherence to taking medication, there is no significant difference between adherents and non-adherents when viewed from ethnic background. From the results of the cross table between tribes with dietary adherence, there is a significant difference between those who do not comply with those who adhere to dietary rules in the Javanese tribe.

Characteristics of Disease Duration with Medication Compliance and Diet Compliance in Patients with Type II Diabetes Mellitus at the Trade Area General Hospital, Simalungun Regency, 2016

It can be concluded that the duration of the disease with adherence to taking medication does not have a significant difference compared to the duration of the disease with adherence to diet. The duration of the disease with dietary adherence is a significant difference between adherents and non-adherents, where the tendency is not to comply with dietary rules.

Increasing the duration of DM is associated with poorer control of blood sugar levels. This is related to the progressive decrease in insulin secretion caused by damage to pancreatic beta cells (Khattab et al, 2010). The results of research regarding the risk factors for disease duration with the incidence of type 2 DM are still varied, as is the study of Siddiqui et al (2013) which showed that

although blood glucose control was worse at a longer disease duration, there was no statistically significant difference between disease duration and diabetes mellitus. control of blood sugar levels.

CONCLUSION

From the age characteristics it can be seen that the younger a person has diabetes mellitus, the less the number of people with diabetes mellitus. When viewed from adherence to taking medication, it can be seen that the longer a person suffers from diabetes mellitus, the higher the tendency to not adhere to taking medication. Likewise adherence to diet. The longer a person suffers from diabetes mellitus, the higher the tendency to disobey the diet.

From the cross table it can be seen that the number of people with diabetes mellitus is more suffered by women. When viewed from the duration of the disease, we can conclude that in the period of 6-10 years there has been a two-fold increase in diabetes mellitus in women. However, if seen from the adherence to taking medication that the comparison is between men and women, it can be concluded that men are slightly more compliant with taking medication than women. When compared with diet adherence, it can be seen that men tend to be disobedient to diets compared to women. This can be seen from the comparison between the number of obedient and non-adherent diets between men and women.

If you look at the results of the cross-table between tribes and the duration of the disease, it can be concluded that the Tobu and Simalungun tribes have fluctuations in the duration of the disease in the Toba and Simalungun tribes, while the Javanese tribe suffers from diabetes mellitus for longer time, so there is a decrease in the incidence rate. Whereas the Mandailing and Minang tribes tend not to experience a significant decrease and increase in incidence when viewed from the duration of diabetes mellitus.

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