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The Adherence of Low Salt Diet of Elderly with Hypertension



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Abstract

The problem of elderly hypertension is very complex, especially the problem of a low-salt diet. Non-adherence of the diet will have a negative impact on the elderly and cause many complications. This was a descriptive study which aimed to observe the adherence of low-salt diet in elderly with hypertension. The population in this study was elderly with hypertension at the Srikandi elderly Posyandu and Brontoseno Elderly Posyandu in the Working Area of Sananwetan Health Center, Gedog Village, Sananwetan District, Blitar City as many as 60 people. The sample in this study was 50 people. The sampling technique used simple random sampling. The instruments used respondent characteristics questionnaire and a low-salt diet adherence questionnaire that the researchers made themselves based on references. The general data in this study was gender, marital status, last education, length of time suffering from hypertension and routine internal pressure control. The specific data in this study was the adherence diet of elderly with hypertension. The results of this study indicated that almost half of the respondents as many as 46% (23 respondents) were in the category of less compliant with the low-salt diet and a small proportion of the respondents were compliant with the low-salt diet, 14% (7 respondents). Based on the results of this study, more in-depth interventions are still needed, especially to increase adherence to a low-salt diet in elderly hypertension.

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INTRODUCTION

Hypertension is a major public health problem worldwide because of its increasing prevalence. The increased incidence of hypertension contributes to morbidity and mortality because hypertension is well known and is the most common risk factor for cardiovascular and cerebrovascular disease (Farapti, et al., 2020). The lifetime risk for hypertension for middle-aged and elderly individuals has a prevalence of 90% and the prevalence of hypertension continues to increase with age (Shim et al., 2020).

Elderly hypertension is a health problem that causes other serious cardiovascular problems. The World Health Organization (WHO) reports that hypertension is a high-risk condition that causes death from stroke and coronary heart disease. Usually, people think that hypertension is a common disease and cannot be treated quickly, especially in this day and age where economic needs are increasing and the difficulty of finding a job affects an unhealthy life and especially poor eating patterns without knowing the right diet (Devi & Putri, 2021). Elderly health problems in the family are very complex, one of which is hypertension. Hypertension and its complications (Hemorrhagic Stroke) deserve attention because it is the highest cause of death in Indonesia. Hypertension is still quite high and even tends to increase along with lifestyle and patient non-adherence with hypertension diet, because most people still think that hypertension is an ordinary disease and not dangerous (Veronika et al., 2017). The incidence of hypertension according to data from the World Health Organization (WHO) in 2011 recorded 1 billion people, with two-thirds of them living in developing countries with low and moderate incomes. Hypertension will continue to increase the larger the population which can lead to an increase in the burden of health costs (InaKii et al., 2021). Indonesia is in the list of countries with the highest prevalence of hypertension in the world, along with Myanmar, India, Sri Lanka, Bhutan, Thailand, Nepal and the Maldives. The prevalence of hypertension will continue to increase, and it is predicted that by 2025 as many as 29% of adults in the world will have an attack (Devi & Putri, 2021).

Data from Riskesdas Balitbangkes (2018) states that hypertension in Indonesia is a health problem with a high prevalence of 34.1%. The population of Blitar City in 2018 with an age range of 15-59 years was 91,000 people with a hypertension prevalence of 30.3%. In 2019 the prevalence of hypertension rose to 40.7%. Based on

the preliminary study that has been carried out, data obtained in Sananwetan District is the sub-district with the highest number of hypertension sufferers in Blitar City, namely 17,184 cases in 2021 (Mutaqqin et al., 2021).

An unbalanced diet is one way to reduce hypertension. Food factors (dietary adherence) are important things to note in people with hypertension. Diet adherence with hypertension sufferers found respondents in the non-adherent diet category, namely 56.7% and respondents who adhered to the diet, namely 43.3% (Nita & Oktavia, 2018). A study conducted by Yuliana, Anestia, Handayani, & Fitria, 2014 on hypertension sufferers showed that as many as 65% of respondents were disobedient in implementing a low-salt diet and as many as 35% were compliant in implementing a low-salt diet (Putri, 2022).

This hypertension does not only have an impact on the physical but also has an impact on the psyche, where someone who suffers from hypertension will feel anxious, and cannot control their emotions. When the individual's psychology is low, there is a serious threat, most of which are forms of depression and anxiety related to hypertension. When a person has negative feelings in the body, the body will produce hormones that can increase blood pressure, this increase in blood pressure will trigger complications of the disease and can have an impact on a low quality of life (InaKii et al., 2021).

Medication and diet are necessary to control blood pressure. Patients need to be given an understanding that drugs cannot cure hypertension, because hypertension cannot be cured, but can be controlled by changing lifestyles and adhering to diets (low salt diet, caffeine diet, saturated fat food diet, doing sports, reducing weight, not smoking or drinking alcohol and increasing consumption of fruits and vegetables and taking medication as directed). Adherence in undergoing a diet for patients becomes a problem in itself when the rules must be followed by patients regularly and for a very long time. Long-term adherence to meal plans is also a major challenge for hypertensive patients, if patients do not adhere to a hypertensive diet it will increase morbidity and mortality rates as well as complications from other diseases. Patients with hypertension should comply with the hypertension diet in order to prevent further complications. Patients with hypertension must continue to follow the hypertension diet every day regardless of the presence or absence of illness and symptoms. This is intended so that the blood pressure condition of

people with hypertension remains stable so that they can avoid hypertension and its complications (Devi & Putri, 2021).

There is still a high number of cases of hypertension in Sananwetan District, it is necessary to conduct research related to hypertension. Preliminary studies and interviews conducted by researchers at the elderly Posyandu in Gedog Village, Sananwetan District, Blitar City obtained data that 10 elderly people said they still consumed fried foods, salted fish and salted eggs. It is difficult for the elderly to maintain their diet because they have been used to it since they were young. Based on the description above, researchers are interested in conducting research with the title Low Salt Diet Adherence in Elderly Hypertension at the Elderly Posyandu, Gedog Village, Sananwetan District, Blitar City. The results of this study are expected to be a reference in the management of elderly hypertension, especially those related to a low-salt diet. This study is also useful as input considering the high non-adherence to a low-salt diet in elderly with hypertension in Gedog Village, Sananwetan District, Blitar City.

METHODS

This was a descriptive study that describes adherence to a low-salt diet in elderly with hypertension. The population in this study were elderly with hypertension at the Srikandi elderly Posyandu and Brontoseno elderly Posyandu in the Working Area of the Sananwetan Health Center, Gedog Village, Sananwetan District, Blitar City as many as 60 people. The sample of the study was based on the formula for calculating the number of samples, with the total of 50 people. The sampling technique used simple random sampling. The inclusion criteria in this study were (1) the elderly who became respondents, (2) the elderly who took the pre and post tests, (3) the elderly who took part in educational counseling and lectures until they were finished. The instruments used respondent characteristics questionnaire and a low-salt diet adherence questionnaire made by the researchers themselves based on references. This study was conducted from April to May 2023.

RESULT

Table 1: Frequency Distribution of Respondents by Gender, Last Education, Marital Status, Length of Suffering from Hypertension, Routine Blood Pressure Control in Elderly Hypertension in the Work Area of the Sananwetan Health Center, Gedog Village, Sananwetan District, Blitar City, May 2023.

Variable		Frequency	Percentage
Education	No school	1	2
	Elementary school	27	54
	Junior high school	8	16
	Senior High School	8	16
	Academy/college	6	12
Total		50	100
Long Suffering from Hypertension	< 1 year	9	18
	> 1 years	41	82
	Total	50	100
Routine Blood Pressure Control	Routine	43	86
	Not a routine	7	14
	Total	50	100

Based on table 1 shows that most of the respondents with elementary school education level, namely 54% (27 respondents). The frequency of respondents based on the duration of suffering from hypertension was that almost all respondents had hypertension for more than 1 year, namely 82% (41 respondents) and almost all respondents had routine blood pressure control, namely 86% (43 respondents).

Table 2: Distribusi Frekuensi berdasarkan Kepatuhan Diet Rendah Garam pada Lansia Hipertensi di Wilayah Kerja Puskesmas Sananwetan, Kelurahan Gedog, Kecamatan Sananwetan, Kota Blitar

No	Kepatuhan Diet Rendah Garam	Frequency	Percentage (%)
1	Less obedient	23	46
2	Just comply	20	40
3	complied	7	14
Total		50	100

Table 2 shows that almost half of the respondents were less compliant with the low-salt diet, namely 46% (23 respondents) and a small proportion of the respondents adhered to the low-salt diet, 14% (7 respondents).

DISCUSSION

Table 2 shows that almost half of the respondents were less compliant with the low-salt diet, namely 46% (23 respondents). The results showed that almost all respondents had suffered from hypertension for more than 1 year. In general, respondents did not comply with the hypertension diet. This can be influenced by the knowledge or attitudes of people with hypertension themselves. Lack of knowledge due to lack of information obtained by sufferers, both from health workers and print or electronic media. The negative attitude factor that often arises is due to boredom and the unfamiliarity of hypertension sufferers to follow a hypertension diet, which is caused by the respondent's own culture which has been inherent since birth so it is very difficult to get rid of (Nita & Oktavia, 2018). Researchers just assumed that the longer they suffer from hypertension by administering a low-salt diet for a long time, of course, it will cause a feeling of saturation in the elderly. This is what causes many elderly people to be disobedient to having a low salt diet.

Factors that influence patient adherence to the diet include education level, knowledge level, income level, ease of access to health facilities and the availability of health insurance that relieves patients in paying for medical expenses. Often respondents have not completely reduced salt consumption and are still quite frequent to consume fast food because it is practical and tastes more delicious if the respondent consumes food with a limited amount of salt intake (Wahyudi et al., 2020).

The results showed that more than half of the respondents had elementary school education, namely 54% (27 respondents). Hypertension sufferers with low levels of education (not attending school/elementary school) tend to be more common than hypertensive sufferers with secondary/higher education.

The results of Kharisyanti Fika's research, (2017) showed that there was a significant

relationship between education level and hypertension. Hypertension sufferers with a low level of education (not in school/elementary school) tend to be more common than those with secondary education or higher education. This is also in line with research conducted by Sugiharto et al, (2018) education level can affect a person's ability and knowledge in implementing healthy lifestyle behaviors, especially hypertension. Because the elderly are senile, they forget that salt can trigger hypertension. According to the researchers' assumptions, there is a relationship between the knowledge of the elderly and a low-salt diet on hypertension. research results and theories that support so that the lack of knowledge about diet in the elderly can be caused, among other things, by a decline in the ability to digest the information received (Nita & Oktavia, 2018).

CONCLUSION

Respondents with low adherence to the low salt diet were 46% (23%) and the number of respondents with good adherence was 14% (7 respondents).

SUGGESTION

1. Suggestion for educational institutions
This research is expected to be used as a reference in making study materials, especially gerontology and community courses.
2. Suggestion for Public Health Center
This research can be used as input for the puskesmas to be more intense in managing the elderly Posyandu, especially in paying attention to diet for the elderly.
3. Suggestion for elderly posyandu
The results of this study can be used as input for cadres that there are problems in the elderly, especially the problem of a low-salt diet.
4. Suggestions for further research
The results of this study can be used as a basis for further research related to dietary patterns in elderly hypertensives.

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CONFLICT OF INTEREST

The authors have no conflict of interest in publishing the article.

AUTHOR CONTRIBUTIONS

All authors fully contribute to research activities starting from drafting activities, tabulating data management, writing drafts of manuscripts and analysis. Each author makes a positive contribution to this activity from start to finish, including publishing articles in this journal.

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