

FAKTOR – FAKTOR YANG BERHUBUNGAN DENGAN SKORING TUBERKULOSIS PARU ANAK DI DAERAH LOKUS STUNTING WILAYAH KERJA PUSKESMAS KECAMATAN TANARA TAHUN 2019

Sita Ardhya Prameswari Sayekti

Abstrak

Tuberkulosis paru anak adalah penyakit infeksi yang disebabkan oleh *Mycobacterium tuberculosis complex* yang mengenai paru-paru pada anak dan prevalensinya meningkat setiap tahunnya. Angka kejadian yang meningkat disebabkan karena tingginya angka kontak serumah, riwayat tidak diberikannya imunisasi BCG, indeks massa tubuh anak yang buruk tercermin dari status gizinya, dan status sosial ekonomi yang tercermin dari jumlah pendapatan keluarga. Tujuan penelitian ini untuk mengetahui hubungan antara kontak serumah, imunisasi BCG, indeks massa tubuh, dan status sosial ekonomi dengan kejadian penyakit tuberkulosis paru anak serta mengetahui faktor yang paling mempengaruhi kejadian penyakit tuberkulosis paru anak. Penelitian ini bersifat analitik observasional dengan desain *cross-sectional*. Sampel penelitian berupa data primer yang didapatkan dengan melakukan wawancara berjumlah 58 sampel anak berusia 24-59 bulan. Penelitian dilakukan di Puskesmas Kecamatan Tanara, pemilihan di Kecamatan Tanara karena tingginya angka stunting di Tanara sehingga meningkatkan angka kejadian tuberkulosis anak. Teknik pengambilan sampel dilakukan secara *consecutive sampling*. Penelitian ini membuktikan terdapat hubungan bermakna antara imunisasi BCG ($p=0.031$) dan indeks massa tubuh ($p=0.001$) sedangkan yang tidak bermakna signifikan adalah faktor kontak serumah ($p=0.282$) dan status sosial ekonomi ($p=0.312$) terhadap tuberkulosis paru anak menurut skoring tuberkulosis anak. Indeks massa tubuh adalah faktor yang paling berpengaruh (OR: 6.8) terhadap kejadian penyakit tuberkulosis paru anak. Kondisi stunting memberikan gambaran kekurangan energi dan protein yang berdampak terhadap kekebalan tubuh yang rendah sehingga meningkatkan risiko terjadinya penyakit tuberkulosis paru anak.

Kata Kunci: imunisasi BCG, indeks massa tubuh, kontak serumah, skoring tuberkulosis paru anak, status sosial ekonomi

FACTORS RELATES TO PEDIATRIC PULMONARY TUBERCULOSIS SCORING IN TANARA PRIMARY COMMUNITY HEALTH CARE CENTER STUNTING LOCUS AREA IN 2019

Sita Ardhya Prameswari Sayekti

Abstract

Pediatric pulmonary tuberculosis is a infection disease caused by *Mycobacterium tuberculosis complex* which affects the lungs in children and its prevalence increases every year. The increased incidence is due to history contact with tuberculosis patient, history of not being given BCG immunization, a child's poor body mass index reflected by his nutritional status, and socio economic status as reflected by the amount of family income. The purpose of this study was to determine the relationship between history contact with tuberculosis patient, BCG immunization, body mass index, and socio economic status with the incidence of pediatric pulmonary tuberculosis and know the factors that most influence the incidence of pulmonary tuberculosis in children. This study is an analytic observational cross-sectional design. The research sample in the form of primary data obtained by conducting interviews amounted to 58 samples of children aged 24-59 months. The study was conducted at the Tanara Primary Community Health Care Center, this site selection is due to the high stunting rate thus increasing the incidence of pediatric tuberculosis. The sampling technique is done by consecutive sampling. This study proves that there is a significant relationship between BCG immunization ($p = 0.031$) and body mass index ($p = 0.001$) while those that were not significant were history contact with tuberculosis patient ($p = 0.282$) and socioeconomic status ($p=0.312$) on the incidence of pediatric pulmonary tuberculosis. Body mass index is the most influential factor (OR: 6,8) on the incidence of pulmonary tuberculosis in children. Stunting provides a condition of energy and protein deficiencies that have a low immune effect thereby increasing the risk of pediatric pulmonary tuberculosis.

Keywords: BCG immunization, body mass index, history contact with tuberculosis patient, pediatric pulmonary tuberculosis scoring, socio economic status.