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Quality of Life among Pulmonary Tuberculosis Patients: Descriptive Study at Situ Community Health Center Sumedang Regency in 2023

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ABSTRACT

Tuberculosis (TB) is an infectious disease that remains a public health problem. Pulmonary tuberculosis disease not only affects the physical condition of the patient, but also their psychological condition which can cause anxiety and affect their quality of life. This study aims to determine the relationship between anxiety levels and the quality of life of pulmonary tuberculosis patients at the Situ health center in Sumedang Regency. The type of research used is quantitative and uses a cross sectional design, with a total sample of 44 people. Research instruments was using the The World Health Organization Quality of Life (WHOQOL-BREF) to measure quality of life. The results showed that most of the respondents, had a moderate level of quality of life as much as 65,9%. Tuberculosis patients often feel inferior due to the stigma that arises from society so that patients often isolate themselves because they are ashamed of their illness. As a result, pulmonary tuberculosis patients will feel that they are useless, hopeless, afraid, sad, angry, and other feelings arise coupled with the length of treatment making patients feel anxious and affecting their quality of life. The results of this study are expected to be used as input to improve and develop services to pulmonary tuberculosis patients in a comprehensive manner for the Situ Community Health Center.



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1. PENDAHULUAN

Tuberculosis (TB) is an infectious disease that is still a public health problem in the world, including in Indonesia. Pulmonary tuberculosis (TB) is an infectious disease that attacks the lung parenchyma caused by TB germs (Mycobacterium tuberculosis). The disease can spread to other parts of the body such as the kidneys, bones and lymph nodes. Tuberculosis is one of the highest causes of morbidity and mortality. The number of patients for Tuberculosis disease increases every year, the WHO Global TB Report in 2020, 10 million people in the world suffer from Tuberculosis (TB) and causes 1.2 million people to die each year. And Indonesia is one of the countries with the highest TB burden in the world with an estimated number of people falling ill from TB reaching 845,000 with a death rate of 98,000 or the equivalent of 11 deaths / hour. (Ministry of Health, 2022).

Pulmonary tuberculosis disease greatly affects the psychological condition of the patient (Tolilou, Terok & Podung, 2013). Not a few patients when diagnosed with pulmonary tuberculosis feel fear in themselves, in the form of fear of treatment, death, drug side effects, transmitting the disease to others, losing their jobs, being rejected and discriminated against, and others. There are also studies that found high levels of psychological distress among patients suffering from pulmonary tuberculosis disease can lead to the formation of a stressor that pressurizes and threatens the patient's life, causing anxiety (Nuraeni, 2015).

Anxiety factors are one of the aspects that affect quality of life. According to WHO, quality of life is a person's perception in the context of culture and norms according to where the person lives in relation to goals, expectations, standards and concerns during his life. WHO developed an instrument to measure a person's quality of life from 4 aspects, namely physical, psychological, social and environmental. Quality of life can also be defined as a term that refers to a person's emotional, social, and physical well-being and ability to carry out activities of daily living. Quality of life can be categorized into poor quality of life, moderately poor quality of life, good quality of life and moderately good quality of life.

Based on data from a preliminary study at the Situ Health Center, conducted on April 6, 2023, 50 people were identified as suffering from pulmonary tuberculosis who were undergoing intensive and advanced treatment. As for the results of interviews with 5 pulmonary tuberculosis patients regarding the level of anxiety with quality of life, a number of interviewees said they felt shocked when they first received a diagnosis of pulmonary tuberculosis, they also said that previously they did not know where this disease came from, they felt anxious because they did not know how they could be infected with the bacteria that cause pulmonary tuberculosis, worried that they would infect other family members, anxious because it turned out that the treatment was so long and had to be intensive. Some of them feel that they will be ostracized and can no longer socialize with neighbors or with other people, but there are also those who accept their situation accompanied by efforts. Based on the description above, the researcher is interested in examining the description of the quality of life in pulmonary tuberculosis patients at the Situ Health Center, Sumedang Regency in 2023.

2. METODE

The type of research used is quantitative with a descriptive survey design, this research was conducted at the Situ Health Center, Sumedang Regency in June 2023. The population in the study were tuberculosis patients who took intensive and continued treatment at the Situ Health Center, Sumedang Regency. The sample in this study was a total of 44 patients who took treatment. Data analysis in this study included univariate analysis. The instrument in this study used a questionnaire. The WHOQOL-BREF instrument is a summary of the World Health Organization Quality of Life (WHOQOL)-100 which consists of 26 questions. WHOQOL-BREF consists of two parts derived from overall quality of life and general health, and one part consisting of 24 questions derived from WHOQOL. The validity test conducted by WHO in the journal (Sari, 2019) is an item validity test by calculating the correlation of the score of each item with the score of each dimension of WHOQOL-BREF. The results obtained are that there is a significant relationship between the item score and the dimension score (r = 0.409 - 0.850), so it can be stated that the WHOQOL - BREF measuring instrument is a valid measuring instrument in measuring quality of life (Sari, 2019).

3. RESULT AND DISCUSSION

3.1 Results

A. Univariate Analysis

1) Frequency Distribution of Quality of Life of Pulmonary Tuberculosis Patients

Table 2.

Frequency Distribution of Quality of Life of Pulmonary Tuberculosis Patients at the Situ Health
Center, Sumedang Regency in 2023

Quality of Life	Frequency (f)	Percentage (%)
Good	2	4,5
Moderate	29	65,9
Poor	13	29,5
Total	44	100

Source: Primary Data, 2023

Based on the analysis of table 1 above, it can be seen that the frequency distribution of the quality of life of pulmonary tuberculosis patients at the Situ Health Center in Sumedang Regency is mostly in the good enough category as many as 29 (65.9%).

3.2 Discussion

A. Overview of Quality of Life in Pulmonary *Tuberculosis* Patients at the Situ Health Center, Sumedang Regency in 2023

According to the WHO, quality of life is an individual's perception of their position in life, in the context of the values and culture to which they belong, and also in relation to their life goals, expectations, standards, and concerns. The issues encompassing quality of life are broad and complex, including physical health, psychological status, level of independence, social relationships and the environment in which they live.

In patients with pulmonary TB there is a decrease in several system functions, such as the respiratory system and digestive system. According to research (Ita, 2020) which states that pulmonary TB disease has an impact on a person's low quality of life, because pulmonary TB disease affects all parts of quality of life, which include: general health perceptions, physical conditions, psychological health, social roles and the environment.

Based on the results of the study, it was found that the quality of life of pulmonary tuberculosis patients at the Situ health center in Sumedang Regency was mostly in the good enough category as many as 29 (65.9%). The results of this study are in line with research (Putri, 2015) said that TB patients who undergo treatment, both compliant and non-compliant, experience a decrease in various physical, social, psychological, and environmental functions. So that a person suffering from TB disease will experience a decrease in quality of life. This should be a concern that in addition to the treatment aspects that are emphasized in TB management programs, social, psychological and environmental aspects must also be developed so that the quality of life of TB patients can be improved.

The researcher concluded that in this study it was found that most patients had a fairly good quality of life, this was because in the results of the questionnaire most had good social relationships, one of which was thanks to family support, because pulmonary tuberculosis patients had to take long treatment would experience psychological pressure and feel worthless to family and society, so this is where the importance of the role of family for patients, if the social support is positive, then the patient will have a high or good quality of life as well.

4. CONCLUSIONS

Based on the results of research and discussion regarding the overview of quality of life among pulmonary tuberculosis patients at the Situ Health Center, Sumedang Regency in 2023, the researchers can conclude that the quality of life of pulmonary tuberculosis patients at the Situ Health Center, Sumedang Regency in 2023 is mostly in the category of good quality of life as many as 29 (65.9%).

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