



Conference Paper

A Descriptive Study of Self Care among Patient with Congestive Heart Failure in Kraton Hospital, Pekalongan District

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Abstract

Background: Heart failure is a cardiovascular disease that has an increased incidence and prevalence. The risk of death from congestive hearth failure ranges from 5-10% per year in mild heart failure which will increase to 30-40% in severe heart failure. In addition, heart failure is a disease that most often requires re-treatment in a hospital, and outpatient treatment must be performed optimally, one of the factors that influence the incidence of hospitalization for heart failure patients is the independence of patients in self-care. Objectives: The purpose of this study was to find out the description of self care in congestive heart failure patients at Kraton Hospital Pekalongan District. Methods: The research model used in this study was descriptive qualitative with sampling using purposive sampling. The inclusion criteria in this study were patients with heart failure with NYHA I-III with stable conditions, patients hospitalized, who were hospitalized with rehospitalization, heart failure patients who were willing to become participants, not having cognitive impairment., patients with NYHA I-III with stable conditions. For exclusion criteria in this study were heart failure patients with comorbidities such as stroke, kidney failure and heart failure patients who were treated in the ICU. The sample in this study was five respondents. This research was conducted by interviewing heart failure patients about their experience in self care. Results: The results of this study obtained 4 themes are knowledge about self care, the implementation of self care, barriers in carrying out self care and social support in doing self care. Conclusion: patients consider that self care is very important but they have not been able to do self care optimally because they feel unsure of themselves. Therefore we need an intervention aimed at improve self-care behavior in patients with congestive heart failure.

Keywords: congestive hearth failure, self care, self care management

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1. Introduction

Heart disease is a disease that causes the highest mortality rate. Based on data from WHO in 2015 estimated death due to heart disease increased to 20 million people and will continue to increase until 2030, an estimated 23.6 million people will die from heart

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disease. In Indonesia data on death from heart disease in 2015 amounted to 2, 43%. One heart disease that increases mortality is Congestive Heart Failure (WHO, 2015). The risk of death from heart failure ranges from 5-10% per year in mild heart failure which will increase to 30-40% in severe heart failure. In addition, heart failure is a disease that most often requires re-treatment in a hospital, and outpatient treatment must be carried out optimally (Miftah, 2004).

Heart failure patients often return to the hospital due to recurrence. The cause of majority recurrence is caused by the patient not taking the recommended therapy, for example not being able to carry out treatment therapy appropriately, violating dietary restrictions, disobeying medical follow-up, excessive physical activity, and unable to recognize symptoms of recurrence. Research from Majid (2010) said that one of the factors that influence the incidence of hospitalization for heart failure patients is the independence of patients in self-care (Majid, 2010).

Self-care is a major factor in efforts to improve health and prevent recurrence in heart failure patients. Research conducted by Britz and Dunn (2010) states that some patients report that patients do not carry out self-care optimally as they have been taught such as adhering to medication given, low-salt diets, regular physical activity, fluid restriction, daily weight monitoring, recognize early symptoms and signs of heart failure.

a study conducted by prihatiningsih (2018) on self-care for heart failure patients found that Self-care behavior in patients with heart failure has not been adequate so an intervention that is aimed at is very much needed improve self-care behavior especially in dimensions self-maintenance. Literature study conducted by researchers shows there is still little research about self-care for heart failure patients in Indonesia so researchers are interested in researching that matter

2. Methods

2.1. Study design

a qualitative phenomenology approach focuses on experiences - subjective experiences regarding self care in patients with heart failure.

2.2. Sample

The population used in this study was patients with heart failure at RSUD Kraton Pekalongan Regency. The sampling technique was purposive sample, namely the

sampling technique with the consideration that the person is considered to know the most about what is expected by the researcher so that it is easier for researchers to explore the situation or object to be studied (Notoadmojo, 2010)

The inclusion criteria in this study were patients with heart failure with NYHA I-III with stable conditions, hospitalized, rehospitalization, willing to become participants, not having cognitive impairment. For exclusion criteria in this study were heart failure patients with comorbidities such as stroke, kidney failure and heart failure patients who were treated in the ICU. The sample in this study was five respondents. This research was conducted by interviewing heart failure patients about their experience in self care.

2.3. Data collection procedure

Data collection methods used in this study were interviews. The aim is to obtain information through question and answer between the interviewer and the interviewee (Swarjana, 2012). The type of interview used in this study is structured interviews. Researchers used interview guidelines that contained self-management management, self-curing maintenance and self-care confidence. The researcher recorded the interview with the respondent then transcribed the results of the recording. After that the researchers made a matrix of the results of the recording.

3. Results

The results of the study conducted on 5 participants obtained 4 themes namely patient knowledge about self-care, self-care implementation, barriers to self-care, support in self-care. Patient knowledge about self-care.

3.1. Patient knowledge about self care

Based on the results of a study of 5 participants in getting results that participants have previously gained knowledge about how to do self-care. This knowledge was given by nurses when patients were hospitalized for the first time. However, patients do not remember much about what to do to do self-care.

"In the past the nurse told me that when she was home, she should be able to take care of her food... so don't salty (lots of salt), and have to exercise every morning." (P2)



3.2. Implementation of Self Care

Patients cannot perform optimally in carrying out self care as patients do not exercise physical activities such as walking for 30 minutes every day, s patients sometimes eat with foods that contain high salt intake and containing MSG. not weighing every day, most patients have not been able to recognize the symptoms that appear in the condition of heart failure, the patient feels unsure of himself to self-care. as stated in P1, P3.

"If you don't eat salt in a restaurant, it tastes bad, so if you are mass it must be given salt" (P1)

"Sometimes sports sometimes don't... depending on the mood, bro..." (P3)

3.3. Obstacles to self-care

Based on the results of a study of 5 participants related to barriers to self-care is self, participants stated that sometimes forget what to do, and feel lazy when they want to exercise and resign to their condition and do not want to recover. like the expression participant 5 below

"How else, bro... if you want to get out of lazy sports... this is my disease for a long time, so it's just my resignation... (P5).

I don't like sports and are sometimes lazy too and I'm not sure....(P2)

3.4. Support self-care

Support in self-care comes from families, especially couples and children. Sometimes you are always reminded if you forget to take medication and must avoid eating high in salt

"Yes, my family is very supportive... I sometimes remind you if you forget to take medicine... especially your wife and child... (P4)

my family really supports me mas... every day I am actually always reminded to take care of my health...(P1)

4. Discussion

In this study, it was found that self care in patients with heart failure in the Kraton District Hospital in Pekalongan Regency was performed optimally. Non-compliance, incapacity

and unwillingness are factors that play a role in inhibiting the implementation of self care. Research conducted by Britz and Dunn (2010) states that some patients report that patients do not carry out self-care optimally as they have been taught such as adhering to medication given, low-salt diets, regular physical activity, fluid restriction, daily weight monitoring, get to know early symptoms and signs of congestive heart failure. The inability of patients with congestive heart failure to do self care is caused by the lack of understanding of heart failure patients regarding the treatment regimen they must undergo. In this study, the level of self care that is still low in patients with heart failure caused by patients due to lack of understanding and ignorance of patients about proper care to be done in patients with congestive heart failure.

One of the obstacles in the implementation of self care by heart failure patients is that they are not sure of what to do. Self-confidence in self-care is an important factor affecting self-care and intervention. Self-confidence must be considered as a way to improve self-care. One study found that self-care confidence was more important than cognition in predicting self-care for heart failure patients. Bellone at all researching about self-confidence has also proven to be important. Vellone et al found that confidence in the ability to care for themselves contributed to the self-care of heart failure patients

Social support from people around is also very important in patients to conduct self-care behavior. Behavioral change is a complex process that is influenced by factors such as knowledge, self-efficacy, attitudes, skills, motivation and social support. Research conducted by Shahreari, et, all (2013) on Effects of a family support program on self-care behaviors in patients with congestive heart failure showed results that increasing self-care in patients with congestive heart failure can be done with family support interventions.

Another study conducted by Zamanzadeh, et, all (2013) on Aids educational intervention for Hearth Failure patients in Iran: The effect on self-care behaviors shows that health education can be used in interventions to change self-care behavior in congestive heart failure patients. This shows that social and educational support are factors that contribute to improving self-care in patients with congestive heart failure.(Shariari, 2012)

5. Conclusion

The results showed that in part large respondents have treatment behavior inadequate self. This can be seen that patients do not yet have a strong knowledge about self care for patients with congestive heart failure, other than that hambtan in doing self care is the inability and unwillingness of patients in conducting self care and patients do not

have the confidence or confidence to do self care. in this study patients received social support, especially from family. Therefore we need an intervention aimed at improve self-care behavior in patients with congestive heart failure.

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