

THE DESCRIPTION DASH DIET (DIETARY APPROACHES TO STOP HYPERTENSION) MEASURES IN ELDERLY HYPERTENSION IN ISMI MEDIKA CLINIC, KACAGAN VILLAGE, BERBEK DISTRICT, NGANJUK REGENCY

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ABSTRACT

Hypertension is often suffered by the elderly so it is recommended to be able to control hypertension well, to prevent more severe diseases. One way to control hypertension is to regulate diet with the DASH diet method. The DASH diet (Dietary Approach to Stop Hypertension) which diet includes emphasizing several food components and nutrients in the form of fruits, vegetables, low-fat dairy products, grains, poultry, fish, and nuts. The purpose of this study was to determine the DASH Diet Action (Dietary Approaches To Stop Hypertension) in the Elderly with Hypertension at the Ismi Medika Clinic, Kacagan Village, Berbek District, Nganjuk Regency. This study used a descriptive design which was carried out on June 1-2, 2024 at the Ismi Medika Clinic, Berbek District, Nganjuk Regency. The population in this study were 20 elderly with hypertension who visited the Ismi Medika Clinic. A sample of 20 respondents using the Total sampling technique. The research variable is the DASH diet action. Data collection using a questionnaire. The results of this study indicate that out of 20 respondents, a small portion, namely 3 respondents (15%) have good actions, a small portion, namely 5 respondents (25%) have sufficient actions, and the majority, namely 12 respondents (60%) have less actions. Based on the results of this study, the majority of respondents' DASH diet actions are in the less category. This can be influenced by age, last education, occupation, whether they have a history of hypertension, how long they have suffered from hypertension. To improve Actions about the DASH diet, namely education about the DASH diet, explaining in detail what the DASH diet is, its principles, and its benefits for health, especially in controlling blood pressure.

Keywords: Action, DASH Diet, Elderly, Hypertension

BACKGROUND

Elderly or often called elderly is a group that has reached the age of 60 years and above who are susceptible to health problems (Festy, 2018). These problems increase as a person gets older. The increase in age experienced by the elderly causes all systems and functions to decline. One of the functions that experiences a decline is physiological function. This decline in function gives rise to non-communicable and infectious diseases. Some of the non-communicable diseases experienced by the elderly include hypertension, arthritis, stroke, and diabetes (Sakitri & Astuti, 2022).

Hypertension is a degenerative disease. Generally, blood pressure increases slowly with age (Setiawan & Sunarno, 2022). In the elderly, hypertension is very susceptible, so it is recommended to be able to control hypertension well, to prevent more severe diseases. Efforts to prevent and treat hypertension need to be done to prevent complications such as coronary heart disease, stroke, and kidney failure. Hypertension cannot be cured but can be controlled. Hypertension control can be done by changing lifestyle, conducting routine blood pressure checks. One way to control hypertension is to regulate diet with the DASH diet method. The DASH diet (Dietary Approach to Stop Hypertension)

which includes an emphasis on several food components and nutrients in the form of fruits, vegetables, low-fat dairy products, grains, poultry, fish, and nuts. This diet also focuses on reducing salt and fatty food consumption (Febriana & Heryyanoor, 2023). Based on the results of the interview on November 17, 2023 at the Ismi Medika Clinic, Kacangan Village, Berbek District, Nganjuk Regency using the interview technique of 5 elderly people, 3 of whom have a diet that likes a strong salty taste, and 2 of whom reduce foods that contain excessive salt.

Data from the World Health Organization, around 1.13 billion elderly people in the world suffer from hypertension. The number of elderly people with hypertension in the world continues to increase every year, and in 2025 it will increase to 1.5 billion elderly people who will suffer from hypertension. Based on data from the Ministry of Health in 2018, the incidence of hypertension ages 15-24 years was 8.7%, ages 25-34 years was 14.7%, ages 35-44 years was 24.8% and in the elderly in Indonesia for ages 55-64 years was 45.9%, ages 65-74 years was 57.6% and 63.8% for ages over 75 years. The prevalence of elderly hypertension in East Java in 2020 was 35.6% or around 3,919,489 residents (Kesehatan, 2023). According to the Nganjuk District Health Office, in 2022 the number of elderly people with hypertension aged >60-69 years was 201,558 people. Meanwhile, hypertension sufferers who visit the Ismi Medika clinic in Kacangan Village, Berbek District, Nganjuk Regency average 20 people per month (Sakitri & Astuti, 2022).

The increasing number of elderly hypertension sufferers has caused the importance of carrying out the DASH diet. The DASH diet measures provided are effective to carry out. (Febriana & Heryyanoor, 2023). This is in accordance with research conducted (Apriliana, Rohana, & Simorangkir, 2017) shows the implementation of the DASH diet that has been carried out in the good category and obtained a significant decrease in blood pressure in the elderly. Efforts to improve action on elderly hypertension are carried out through Health education through communication, information and education. Providing education to elderly hypertension can improve the knowledge, attitudes, and actions of the elderly in carrying out the DASH diet.

The DASH (Dietary Approach to Stop Hypertension) diet, which includes an emphasis on several food components and nutrients in the form of fruits, vegetables, low-fat dairy products, grains, poultry, fish, and nuts. This diet also focuses on reducing the consumption of salt and fatty foods (Fatmawati; Suprayitno; Prihatin, 2023). The DASH diet was low in saturated fat, trans fat, and cholesterol and rich in nutrients associated with lowering blood pressure, especially potassium, magnesium, calcium, protein, and fiber (Kemenkes, 2023). DASH (Dietary Approach to Stop Hypertension) is a dietary pattern recommended in the Seventh Report of The Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC 7) for all hypertensive patients. The DASH diet includes high fresh fruits and vegetables, low-fat dairy products, low-fat and low-cholesterol, whole grains, fish, poultry, and nuts, beans and reduces consumption of red meat, sugar and sweet drinks. Based on the DASH Diet 9 is also rich in potassium, magnesium, calcium, fiber, and slightly higher in protein. The use of DASH is an approach to stop hypertension, namely a diet rich in fruits, vegetables and low-fat dairy foods significantly lowers blood pressure. JNC VII recommends the DASH eating pattern, a diet rich in fruits, vegetables, and low-fat dairy products with reduced levels of total fat and saturated fat. Recommended sodium is 2.4 g (100 mEq) per day. Many hypertension patients do not apply the diet properly.

The purpose of this research was to Description DASH Diet (DIETARY APPROACHES TO STOP HYPERTENSION) Measures In Elderly Hypertension In Ismi Medika Clinic, Kacangan Village, Berbek District, Nganjuk Regency

METHOD

This study uses a descriptive design which was carried out on June 1-2, 2024 at the Ismi Medika clinic, Berbek sub-district, Nganjuk district. The population in this study were 20 elderly people with hypertension who visited the Ismi Medika clinic. The study employed total sampling, involving all 20 elderly patients with hypertension who visited the clinic during the study period. The research variable is the DASH diet action. Data collection using a questionnaire.

RESULTS

1. Characteristics Respondent

Table 1. Distribution of Characteristics Respondent

Variable	F	%
Age		
60-74 Years	11	55
75-84 Years	5	25
85-89 Years	4	20
≥ 90 Years	0	0
Gender		
Man	11	55
Woman	9	45
Education		
No school	0	0
Elementary School	19	95
Middle School	1	5
High School	0	0
University	0	0
Profesion		
Farmer	9	45
Private	0	0
Self-employed	1	5
Civil servants	0	0
Unemployed	10	50
Long Suffering		
≤ 10 years	6	30
>10 Years	14	70

Based on the results of the study, most of them were male, namely 11 respondents (55%), aged 60-74 years, namely 11 respondents (55%), had suffered from hypertension for >10 years, namely 14 respondents (70%). Almost all of them had elementary school education, namely 19 respondents (95%), half of the respondents were unemployed, namely 10 respondents (50%),

2. Distribution of DASH Diet Actions (Dietary Approaches To Stop Hypertension) in Elderly Hypertensive Patients at Ismi Medika Clinic, Kacangan Village, Berbek District, Nganjuk Regency

Table 2 Frequency Distribution of DASH Diet Actions (Dietary Approaches To Stop Hypertension) in Elderly Hypertensive Patients at Ismi Medika Clinic, Kacangan Village, Berbek District, Nganjuk Regency on 01-02 June 2024

No	DASH Diet Action	f	%
1.	Good	3	15
2.	Enough	5	25

3.	Less	12	60
	Total	20	100

Based on table 2, it shows that of the 20 respondents, most of them, namely 12 respondents (60%), had inadequate action, almost half of them had adequate action, namely 5 respondents (25%), and a small portion had good action, namely 3 respondents (15%).

DISCUSSION

Based on the research results, it can be seen that the results of the study from 20 respondents. Most of them, namely 12 respondents (60%) have DASH Diet Actions in the category of Less Actions. Of the 12 respondents who have DASH Diet Actions in the category of Less, half of them, namely 6 respondents (50%) are male and female. Most of them, namely 8 respondents (67%) are aged 60-74 years, all 12 respondents (100%) have elementary school education, most of the 7 respondents (58%) are unemployed, almost all of the 9 respondents (75%) have a history of hereditary hypertension, Most of the 8 respondents (67%) have suffered from hypertension for >10 years.

Gender is one of the genetic factors that influence a person to behave, apart from environmental factors (Falah, 2019). In general, it can be said that genetic and environmental factors are determinants of the behaviour of living things including human behaviour. Heredity is a basic concept or capital for the development of the behaviour of living things. While the environment is a condition or is a field for the development of such behaviour. So it can be concluded that gender is one of the genetic factors that influences a person's behaviour including health behaviour (Notoadmojo, 2018).

According research (Pebrisiana, Tambunan, & Baringbing, 2022) As a person gets older, it is more likely that they will suffer from hypertension. This could be caused by changes in the structure of large blood vessels and also by a decrease in the body's resistance. In line with research (Laili, Muchsin, & Erlina, 2022) Age can affect the level of understanding and compliance of hypertension sufferers in implementing DASH actions. As age increases, a person also experiences a decline in cognitive function and tends to ignore their health. When entering adulthood, a person is more aware of the consequences that will be borne if they take action, so they become more careful.

In addition, the last level of education also has a big influence on the DASH diet in elderly with hypertension, almost all respondents had the last education of elementary school. This is like the research that was conducted (Rosa & Natalya, 2023) explains that the majority of respondents are elementary school graduates. Education influences an action because education influences our way of thinking and the way of thinking will influence an action.

Research conducted by (Pebrisiana, Tambunan, & Baringbing, 2022) shows that many patients with hypertension are unemployed, this is because the average respondent has a low level of education and this is also due to other factors, namely due to illness, so that these patients are forced to stop working because of conditions that do not allow it. According to theory (Swarjana, 2022) Jobs have an impact on a person's economy, because if they have a better job then that person will get a high salary and be able to always eat fresh fruits and vegetables and regularly check their blood pressure, whereas if someone has a low-level job then the income they get is very low so they are unable to support their family.

Based on research (Sihombing, et al., 2023) If a history of hypertension is found in both parents, then the suspicion of hypertension in a person is quite large. This happens because of the inheritance of traits through genes. states that genetics are proven to be a risk factor for hypertension. A person whose parents have a history of hypertension is twice as likely to suffer from hypertension than someone whose family does not have a history of hypertension. The health belief model was developed by Becker in 1974 and is used to determine individual actions regarding compliance and disease prevention. This model emphasizes that individual perceptions of the efficacy and vulnerability of treatment can influence individual health behaviour choices. For example, people with hypertension believe that if they have not felt the impact of this disease, then hypertension is not a dangerous disease, so that

attitudes/behaviours arise that do not comply with medical advice. The cause of this behaviour is the patient's belief that hypertension is not a dangerous disease.

Based on research (Laili, Muchsin, & Erlina, 2022) states that the length of time a person suffers from hypertension can influence someone to have a tendency to understand the condition they are experiencing, but in its application it allows sufferers to get bored and inconsistent so that they need to be reminded, accompanied and continue to carry out control. When someone does not routinely or never controls and checks their blood pressure, they will be more likely to adopt an unhealthy lifestyle and not comply with DASH because they are unaware of their blood pressure so they cannot control and control their blood pressure, one of which is through the application of DASH.

Based on the results of this study, the DASH diet action on elderly with hypertension at the Ismi Medika clinic in Kacang Village, Berbek District, Nganjuk Regency, the results obtained were mostly lacking. This is influenced by several factors, namely gender, age, education, occupation, whether they have a history of hypertension, and how long they have suffered from hypertension. Based on the results of the study above, gender and age factors can also affect the level of understanding and compliance of hypertensive patients in implementing DASH because the elderly will experience physical changes so that they can experience decreased cognitive function and have a tendency to ignore their health so that the elderly do not carry out the DASH diet action. In addition, low levels of education can affect knowledge which makes it difficult or slow to receive information about health and low awareness to behave healthily and if the elderly do not have a job, they will have difficulty meeting basic needs such as healthy food and to achieve optimal health, having a history of hypertension may result in ignoring their health so that they definitely do not maintain their diet because they see their parents not recovering from hypertension. The factor of how long they have suffered from hypertension also affects the DASH diet action because someone who has suffered from a disease for a long time tends to feel bored following the treatment that is carried out so that it affects the elderly's actions to carry out the DASH diet action.

CONCLUSION

Description of DASH Diet Action (Dietary Approaches To Stop Hypertension) in Elderly Hypertensive Patients at Ismi Medika Clinic Kacangan Village Berbek District Nganjuk Regency from 20 respondents, Most of them, namely 12 respondents (60%), had inadequate action, almost half of them had adequate action, namely 5 respondents (25%), and a small portion had good action, namely 3 respondents (15%). It is expected that health service agencies provide counseling on the DASH diet and monitor the implementation of the DASH diet for the elderly with hypertension by involving the family. Families are expected to provide motivation and always monitor the DASH diet actions carried out by elderly hypertensive patients.

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