Jurnal Ners dan Kebidanan, Volume 5, No. 1, April 2018 DOI: 10.26699/jnk.v5i1.ART.p058–061

PERCEPTION OF SUPERVISOR TAKING MEDICINE ABOUT THE SIDE EFFECT OF TUBERCULOSIS MEDICATION FOR PATIENTS

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Abstract: DOTS strategy is a short-term treatment guide with direct supervision by supervisor taking medicine for tuberculosis patients. Supervisors should know, understand, and be able to distinguish between mild and severe side effects of anti-tuberculosis drugs. The failure of Tb treatment depends on supervisor taking medicine. Currently, never been known the perception of supervisor taking medicine about tuberculosis medication side effect. The purpose of the study to know the perception of the supervisor taking medicine about side effects for clients Tb treatment program in Blitar City. The research design used a descriptive. These result studies show the perception supervisor taking medicine about the side effects as much as 54.5% is the right category and as much as 45.5% is the wrong category. The right category perception may be the supervisor taking medicine ever receive information of tuberculosis medication side effect at the public health center while take a drug. Recommendations for health workers are providing appropriate information to the supervisor taking medicine can be improved with technique counseling and training so that improve knowledge and expertise in the management of medication side effects.

Keywords: perceptions, supervisor taking medicine, Tuberculosis

INTRODUCTION

Tuberculosis is a disease caused by Mycobacterium Tuberculosis, which is usually transmitted by droplets from one individual to others and forms colonization in the alveoli. According to Millennium Development Goals (MDGs), TB currently impacts to around 582,000 people. Every year about 100,000 people die from Tuberculosis as the third cause of death. One person can infect around 10 to 15 people by releasing tuberculosis germ into the air that can be inhaled others each year (www.undp.org accessed on September 18, 2016). Germs can also enter the body through the gastrointestinal tract, through ingestion of unpasteurized tainted milk, or skin lesions (Crowin, 2009: 545).

Tuberculosis is a disease of global concern. Various control measures so that incidence and death tuberculosis decreased, but tuberculosis is estimated to still affect 9.6 million people and cause 1.2 million deaths by 2014 (WHO, Global Tuberculosis Report, 2015). According to Ministry of Health of RI (2016) the number of cases of tuberculosis as much as 330,910 cases, increased when compared in 2014 which amounted to 324,539 cases. The case highest number is found in the province with large populations that is West Java, East Java, and Central Java. Tuberculosis cases in these three provinces accounted for 38% of all new cases in Indonesia. The tuberculosis patient in East Java ranks second in Indonesia as much as 21,036 cases (Dinas Kesehatan

Provinsi Jawa Timur, 2014:13). The new tuberculosis patient in Blitar city in 2014 as much as 205 cases, of which 70 of them are the bacil acid-resistant (+) (Dinas Kesehatan Kota Blitar, 2015).

Irregular treatment, inadequate use of anti-tuberculosis drugs, or intermittent treatment causing resistant germs. Tuberculosis patients be a source of transmission of germs in the community. One effort to control the failure of Tuberculosis treatment in early 1990 WHO developed a Tb control strategy known as the DOTS strategy (Directly Observed Treatment Short). WHO recommended the DOTS as a Tb control strategy since 1995. The main focus of DOTS is the discovery and cure of patients, a priority given to infectious type TB patients as a strategy will break the chain of transmission and reduce the incidence of Tb in the community. Finding and curing patients is the best way to prevent TB transmission (Kemenkes, 2014: 4). To ensure regularity of treatment required the supervisor taking medicine (Bahasa: Pengawas Minum Obat / PMO). PMO may come from health cadres, teachers, the woman leader, community leaders, or family members. The task of PMO is to monitor the Tb patients to take medication regularly until the completion of treatment, giving encouragement to the patient to get regular medication, remind the patient to check the sputum at a scheduled time, and provide counseling to family members who have symptoms of TB to go to the Public Health Center (Kemenkes, 2014: 31).

A preliminary study to supervisor taking medicine (PMO) for Tb patient who registered at Public Health Center of Blitar City on October 12-16, 2016 that 6 of 10 PMO said to know some side effects of Anti Tuberculosis drugs such as nausea, no appetite, and reddish urine, But, they have not been able to distinguish between mild and severe side effects of Anti Tuberculosis drugs. Based on descriptions, interested to describe of the perceptions of Supervisor Taking Medicine About the Side Effects of Tuberculosis medication for Tb patients.

METHODS

This research design used a descriptive. The research subject was the supervisor of taking medicine who registered at Public Health Center of Blitar City as much as 44 peoples selected using the saturated sampling method. Data collection was done by filling out questionnaires which are developed based on the knowledge of supervisor taking medicine in the subject home on June 2 - 10, 2017. Data analysis was descriptive.

RESULT

Table 1 General characteristic of supervisor taking medicine who registered at the Public Health Center of Blitar City, June 2017 (n = 44)

No.	Characteristic	f	%
1	Age		
	• 17-27 y.o.	9	20.5
	• 28 -38 y.o.	12	27.3
	• > 38 y.o.	23	52.2
2	Sex		
	• Male	21	47.7
	• Female	23	52.3
3	Education		
	• Junior School	18	40.9
	• Senior School	20	45.5
	• College	6	13.6
4	Occupation		
	• Farmers	7	15.9
	• Enterpreneur	27	61.4
	• Government	4	9.1
	• Other	6	13.6
5	Get the information		
	• Yes	37	84.1
	• No	7	15.9

Table 2 Perception of supervisor taking medicine about mild and severe side effects of medication for Tb who registered at the Public Health Center of Blitar City, June 2017 (n = 44)

No	Perception Category	Side effects			
		Mild		Severe	
		f	%	f	%
1.	Correct	27	61.4	26	59.1
2.	Wrong	17	38.6	18	40.9
	Total	44	100.0	44	100.0

DISCUSSION

The correct perception of supervisor taking medicine about side effects

The correct perception of supervisor taking medication possible are the mature aged (89.5% is more than 28 years old), has senior school and undergraduate education (59.1%), have enough income (70.5% as entrepreneur and government employee), and get information about drug side effects (84.1%) (table 1). The correct perception is the ability of the supervisor taking medicine to choose a correct alternative answer about the side effects mentioned in the questionnaire.

Perception is a cognitive process used by a person to interpret and understand the world around him (Gybson, et al, 1995: 56). Some mild side effects of anti-tuberculosis drugs namely no appetite, nausea, abdominal pain, joint pain, tingling to burning on the feet or hands, redness in urine, influenza syndrome (fever, chills, weakness, headache, bone pain) (Kementerian Kesehatan, 2014). Supervisor taking medicine chosen the answer of the reddish color of the urine as the mild side effects of anti-tuberculosis drugs and a statement stating that is a mild side effect of the anti tuberculosis drug. He has a correct perception because has knowledge about medication side effect for Tb patients. The right perception that is owned after receiving information from health workers at the Puskesmas when taking medication. The perceptions of supervisor taking medicine as a family effort to prevent transmission to other family members (Suprajitno, Mugianti, & Sholikhah, 2015) and improve healing.

As many as 61.4% and 59.1% (table 2) of supervisor taking medicine have the correct perception. The correct perception is influenced by a selective factor. Selective is the ability to choose stimuli or information that benefit or support his action and ignore the harm (Hidayat, 2009: 71-72). The correct perception to show his role as the supervisor taking medicine. The role is knowing a side effect in order to be able to act reasonably against the complaints of patients and overcome the side effects during home sufferers.

The wrong perception of supervisor taking medicine about side effects

The supervisors taking medication that have wrong perceptions about mild side effects of 38.6% and severe side-effects of 40.9% (table 2). The wrong perception may be due to immature age (20.5% aged 17 - 27 years old), junior school (40.9%), have a small income (29.5% as farmers and others), and have not get information about side effects (15.9%) (table 1). The wrong perception of the reddish color of the urine as the natural side effects of in a treatment. Whereas, reddish in the urine as a sign of commencement of kidney damage.

The severe side effects of anti-tuberculosis drugs such as rash with or without itching, hearing loss (without cerumen), balance disorder, icterus without causes, nausea vomiting (suspected liver dysfunction If accompanied by jaundice), visual impairment, acute renal failure, decreased urine production (Kementerian Kesehatan, 2014). The decrease of urine production in Tb patient is a severe side effect of medication of anti-tuberculosis drugs and the renal failure is the wrong perception. The wrong perception possible because the health workers only explain the mild side effects that often occur and rarely explain the severe side-effects. So, the

supervisor taking medicine less know the severe side effects.

The factor a cause of the wrong perception is a stereotype. A stereotype is generalizing, simplifying, and apprehend from the self-angle the example is age (Hidayat, 2009: 71-72). The opinion of Notoadmodjo (2007) that the increase of one's age will occur physical and psychological changes. The physical change occurs due enhancement of organ functions. The psychological change marked of a person's thinking level matures and matures, but occurs a physical decline and one's memory. Supervisor taking medicine who aged 17-27 years old possible have not been able to think mature so that has the wrong perception although had received information from health workers at Public Health Center about side effects of anti-tuberculosis drugs. Also, the level of maturity on this aged is still lacking which is possible still in productive age so that more focused on work.

CONCLUSIONS

The perception of supervisor taking medication about the side effects of anti-tuberculosis drugs for tuberculosis patients in the correct category as much as 60% and wrong category as much as 40%. Factors that can influence the perception of the supervisor taking medicine that is age, education, income, and information ever obtained.

SUGGESTION

The knowledge as the basis of the perception of supervisor taking medication about the side effects of anti-tuberculosis drugs should be owned and improved by a way of health education and counseling while drug taking at Public Health Center. So, health workers are providing appropriate information to the supervisor taking medicine can be improved with technique counseling and training so that improve knowledge and expertise in the management of medication side effects.

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