ABSTRAK

ALYA AGUSTINA. *Asuhan Gizi Klinik pada Pasien Gagal Ginjal Kronik Hemodialisa dengan Komplikasi Anemia, Hiperkalemia dan Hipertensi Grade II di RSUD Raden Mattaher Jambi.* Dibimbing oleh pembimbing I Yessi Alza, S.ST, M.Biomed dan pembimbing II Falinda Oktariani, M.Pd

Gagal ginjal kronik merupakan kondisi penurunan fungsi ginjal yang bersifat progresif dan irreversible, yang pada stadium lanjut memerlukan terapi hemodialisa. Kondisi ini sering disertai komplikasi seperti anemia, hiperkalemia, dan hipertensi yang dapat memperburuk status gizi pasien. Penurunan nafsu makan akibat gejala klinis seperti mual, muntah, dan sesak napas berkontribusi terhadap asupan zat gizi yang tidak adekuat sehingga meningkatkan risiko malnutrisi. Penelitian ini bertujuan untuk menggambarkan proses asuhan gizi klinik pada pasien gagal ginjal kronik hemodialisa dengan komplikasi anemia, hiperkalemia, dan hipertensi *grade* II di RSUD Raden Mattaher Jambi. Penelitian ini menggunakan desain studi kasus dengan teknik analisis data deskriptif pada satu pasien rawat inap. Proses asuhan gizi dilakukan berdasarkan Proses Asuhan Gizi Terstandar (PAGT) yang meliputi tahap asesmen, diagnosis, intervensi, serta monitoring dan evaluasi selama lima hari. Hasil pengkajian menunjukkan pasien mengalami status gizi kurang berdasarkan persentil LILA (83%), dengan asupan energi dan zat gizi tergolong defisit berat. Data biokimia menunjukkan adanya anemia, peningkatan ureum dan kreatinin, serta hiperkalemia. Diagnosis gizi yang ditegakkan meliputi asupan oral tidak adekuat, perubahan nilai laboratorium, serta perilaku makan tidak sesuai dengan rekomendasai diet. Intervensi gizi diberikan melalui pengaturan diet sesuai kebutuhan pasien gagal ginjal kronik hemodialisa, pembatasan cairan dan elektrolit, serta edukasi gizi. Hasil monitoring menunjukkan adanya perbaikan asupan makan, kondisi klinis, dan pemahaman pasien terhadap diet yang diberikan. Penerapan asuhan gizi klinik yang sistematis dan terstandar mampu membantu memperbaiki kondisi gizi dan klinis pasien gagal ginjal kronik dengan komplikasi, serta berperan dalam mendukung proses penyembuhan dan peningkatan kualitas hidup pasien.

Kata kunci: gagal ginjal kronik, hemodialisa, asuhan gizi klinik, anemia, hiperkalemia, hipertensi

ABSTRACT

ALYA AGUSTINA. *Clinical Nutrition Care for Patients with Chronic Kidney Disease Undergoing Hemodialysis with Complications of Anemia, Hyperkalemia, and Stage II Hypertension at the Raden Mattaher Jam*bi. Supervised by Supervisor I Yessi Alza, S.ST, M.Biomed and Supervisor II Falinda Oktariani, M.Pd.

Chronic kidney disease is a condition characterized by progressive and irreversible decline in kidney function, which in advanced stages requires hemodialysis therapy. This condition is often accompanied by complications such as anemia, hyperkalemia, and hypertension, which can worsen the patient's nutritional status. A decreased appetite due to clinical symptoms such as nausea, vomiting, and shortness of breath contributes to inadequate nutrient intake, thereby increasing the risk of malnutrition. This study aims to describe the clinical nutrition care process for patients with chronic kidney disease on hemodialysis who have complications of anemia, hyperkalemia, and stage II hypertension at Raden Mattaher General Hospital in Jambi. This study employs a descriptive design using a case study approach on one in-patient. The Standardized Nutritional Care Process (NCP), which includes the assessment, diagnosis, intervention, and monitoring and evaluation stages over a five day period. The assessment results indicated that the patient had malnutrition based on the LILA percentile (83%), with energy and nutrient intake classified as severely deficient. Biochemical data revealed anemia, elevated urea and creatinine levels, and hyperkalemia. The established nutritional diagnoses include inadequate oral intake, abnormal laboratory values, and eating habits that do not align with dietary recommendations. Nutritional interventions were provided through dietary management tailored to the needs of a patient with chronic kidney disease on hemodialysis, fluid and electrolyte restriction, and nutritional education. Monitoring results showed improvements in dietary intake, clinical condition, and the patient's understanding of the prescribed diet. The implementation of systematic and standardized clinical nutrition care can help improve the nutritional and clinical status of patients with chronic kidney disease and complications, and plays a role in supporting the healing process and improving patients' quality of life.

Keywords: chronic kidney disease, hemodialysis, clinical nutrition care, anemia, hyperkalemia, hypertension