

Midwifery Care On Pregnant Women With Early Detection of Chronic Energy Deficiency In Tm I In Pekanbaru Karya Bakti Primary Clinic 2019

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**Abstract**- Chronic Energy Deficiency (KEK) in pregnant women is still a problem in Indonesia because KEK as a condition where a person experiences nutritional deficiencies (calories and protein) that lasts long and years, with marked weight less than 40 kg or looks thin and with arm circumference or (MUAC) less than 23.5 cm. Objective: increase knowledge and insights on midwifery care for pregnant women with early detection of Chronic Energy deficiencies in Trimester I at the Pratama Karya Bakti Clinic in Pekanbaru City using the SOAP approach and documentation method. Case Method Midwifery care for pregnant women with early detection of chronic energy deficiency Trimester I by providing health education (PENKES) and supplementary foods such as milk, fruits and vegetables. Conclusion: from midwifery care to Mrs. T G2P1A0H1 age 30 years gestation 6 weeks 3 days, with early detection of chronic energy deficiency in general good condition, after midwifery care for 2 days visit to the patient the results obtained in the last study are early detection of chronic energy deficiency which can gradually both with the help of consuming additional food. Suggestion: the need for the involvement of health workers to overcome the early detection of chronic energy shortages in the city of Pekanbaru so that no more pregnant women who experience complications.

Keywords: Midwifery care Pregnant women with early detection of chronic energy deficiency

## 1. Introduction

Pregnancy is a time in which a woman has been stalled for some time of menstruation until after the birth process. This sometimes occurs for approximately 9 months, or 40 weeks, or 280 days. While a normal pregnancy will last for 38-40 weeks (Istianti, 2013) .Kebutuhan nutrition in pregnant women should have to pay attention to nutrition for the body which is necessary for the unborn fetus, such as the need for carbohydrates proteins, ions, folic acid, calcium and a series of vitamins are essential for healthy fetal development (Winarsih, 2018).

Energy is the most important nutritional factors during pregnancy that can affect birth weight. The amount of energy needed during pregnancy requires about 80,000 kcal or 300 kcal per day during the first trimester of pregnancy and the less improvement compared to the energy needs of Trimester II and III (Arisman, 2010).

Energy needs in trimesters 2 and 3 increases until the end of pregnancy. Additional energy during the second trimester in maternal tissues need for expansion, which increase blood volume, the growth of the uterine cavity and payudarah, as well as the accumulation of fat. Throughout the third trimester, additional energy is in use for the growth of the fetus and placenta (Meriana and Bambang, 2012).

Pregnant women should require an additional 285 kcal of energy needs of adult women who are not pregnant at 1900 to 2400 Kcal / day. For that, it needs to supply energy from foods consumed (Winarsih, 2018).

The importance of the nutritional needs of pregnant women aiming to meet the nutritional needs of the mother and fetus. In addition, the need for adequate nutrition is also aimed at preparing the mother during delivery so as not to cause problems or health problems and prepare the mother to be able to provide a reserve of energy (500 calories) required for the activity of the baby. If the women's nutritional needs are not fulfilled by pregnant women, it will display some nutritional problems in pregnant women (Winarsih, 2018).





Nutritional problems often faced by pregnant women namely Chronic Energy Deficiency (KEK) and Nutritional Anemia. Chronic Energy Deficiency (KEK) is a condition that is caused due to an imbalance between energy intake and protein nutrients, so the nutrients in the body need not be fulfilled, the prevalence of pregnant women KEK in 2013, namely 24.2% (MOH, 2013), And is one of the indirect causes of maternal mortality in Indonesia in 2012, estimated at 37% and anemia by 40% in pregnant women (Winarsih, 2018).

According to the Ministry of Health of Indonesia (2014), Article 6, paragraph (1) and (2) the authority of midwives in health care during pregnancy include one vital sign checks, examination of the nutritional status. The purpose in doing the examination of nutritional status, especially to address the problem of energy deficiency Chronic (KEK) and checks the status of anemia if pregnant women with less chronic energy (KEK) is not resolved would risk including maternal mortality sudden in the perinatal period, or the risk of having a baby with birth weight low (LBW). (MOH, 2013).

According to (MoH RI, 2016). The maternal mortality rate is useful to describe the nutritional status and health of the mother, either pregnant or during delivery and in the puerperium. According to (Proverawati, et al, 2009) factors that affect the nutrition of pregnant women are mothers habits and outlook towards food, economic status, knowledge of nutrients in the food, health status, activity, ambient temperature, weight, age.

Based on the above, the authors are interested in a case study entitled "midwifery care in pregnant women with early detection of chronic energy deficiency in Pekanbaru city clinic devoted work in 2019".

## 2. Method

The method used is a case study with obstetrics care in pregnant women with chronic energy deficiency early detection of the first trimester with the provision of health education (Penkes) and supplementary food such as milk, fruits and vegetables.

# 3. Result

## a. First visit

The first study was conducted in Ny. T G2P1Ao on May 9, 2019 at 19:00 pm. Ny subjective data. T the age of 30 years, weight 40 kg before pregnancy, objective data B after a pregnant 41 kg height 159 cm, 23.5 cm lilac. Informing the examination results to the mother and the family that the general state of good mother, mother Told To conduct regular inspection of the ANC, told the mother about the SEZ.

KEK is one of malnutrition, which is a pathological condition due to lack or excess relative or absolute one or more nutrients, or a situation where someone is malnourished (calories and protein) that lasts a long time or menaun, with marked weight less than 40 kg or looked thin and with upper arm circumference (MUAC) of less than 23.5 cm explained to the mother the signs and symptoms of SEZ

- weight <40 kg or looked thin and MUAC less than 23.5cm.</li>
- height <45 cm</li>
- tired, tired, lethargic, weak, weak
- lips pale
- shortness of breath
- increased heart rate
- bowel obstruction
- decreased appetite
- sometimes dizziness
- drowsiness

Advise the mother to eat nutritious foods that contain a lot of calories and protein, such as vegetables, fruit, milk or other animal foods, because the mother was nursing Firstly it needs the





intake of food that mothers should consume a lot.

Advise the mother to rest enough to take a nap of at least 2 hours and a minimum of 8 hours sleep a night. BB checks and LILA within 2 days, and asked the mother how his condition at this time.

Penatalaksanaa care to inform and provide care on early detection of chronic energy deficiency in Ny. T with Leaflet.

# b. Second visit

The second study conducted in Ny. T G2P1A0 on May 12, 2019 at 19:00 pm. Ny subjective data. T the age of 30 years, the mother said no complaints, the mother feel better shape than previous visits, and the mother had started drinking milk that has been given and consume more vegetables.

The general state of good mother, blood pressure 110/70 mm Hg, pulse  $81 \times 1$ , breathing 20  $\times 1$ , a temperature of 36.6 ° C, maternal weight 40 kg, 23.5 cm LILA mother, the mother does not pale eyelids, cleanliness is good, happy mother breastfeeding is smooth, drip

Giving praise to the mother in order to improve the mother's regular diet and emphasis on eating vegetables and fruits and milk of pregnant women. KIE give to mothers on maternal nutrition:

Although mothers still breastfeeding the first child, expected mothers can improve their healthy lifestyle by eating food that is nutritious and meminun vitamins and eat vegetables and fruits so that the nutrients needed for the body's mother met.

Upper Arm Circles (LILA) reflecting growth of fat tissue and muscle that does not affect many body fluids. These measurements are useful for screening protein malnutrition that is normally used by the MOH for detecting pregnant women with the risk of delivering low birth weight when MUAC <23.5 cm (Wirjatmadi B, 2007). MUAC measurements intended to determine whether a person suffers from chronic energy deficiency. WUS LILA threshold with KEK risk in Indonesia is 23.5 cm. If the size is less than 23.5 cm or MUAC tape red section indicates that the woman has a risk of KEK, and is expected to give birth to low birth weight

Provide support / support to the mother so that the mother did not give up and sad. Encouraging mothers maternal weight that certainly will rise if the mother eats regularly.

#### 4. Discussion

In Ny.T is Ao H1 G2 P1 pregnant 10 weeks 2 days, with early detection of chronic energy deficiency. According to the authors of pregnancy is considered normal if there are no complications during pregnancy and pregnancy and maternal and fetal condition both during the pregnancy. The data analysis is concluded between the data of subjective and objective data which is used in the action or therapy according to the patient's condition. This is in accordance with the opinion (Saminem, 2009) diagnosis of pregnancy is Ao G2 P1 pregnant 10 weeks 2 days with early detection of chronic energy deficiency. Based on that there is no gap between theory.

Orphanage in Ny. "T" is not all examination such as examination of normal pregnant women, just general condition, vital signs, eye, mammary, abdominal This is caused by the focus of care to pregnant mothers to see BB and LILA. In theory midwifery care of pregnant women includes the general state examination, vital signs, physical examination (face, mouth, teeth, neck, chest, breast, back, waist, abdomen, bladder, upper and lower extremities).

Examination Results HB Ny. T ie 11.1 g%. normal maternal Hb according to the author for examination in HB levels get 11.1 g% and can be defined non-anemic mothers. This is in accordance with the opinion Physiological (Romauli, 2011). normal hemoglobin levels> 11 g%, if less than 11 g% mom said Anemia. Based on this it is not in getting the gap between theory and practice.

Orphanage during pregnancy penulismelakukan management in Ny. T as ashuan that is given for a normal pregnancy because there is less weight problem and LILA within normal limits, the care given is like the IEC about danger signs of pregnant women, signs of labor, childbirth preparation. According to the author the provision of IEC in pregnant women is a necessity because of the presence of the IEC routine every visit ANC can be detected as early as possible complications or risks that will happen, remind her to rest, describing the carbohydrate-containing foods with lieflet like, rice, bread, potatoes, protein such as beef, chicken, eggs, vitamins and minerals, fruits, mineral water and milk.





#### Conclusion 5.

After doing a case study of midwifery care in pregnant women at the clinic that is Ny.T pratama devotion works Pekanbaru city, followed by a home visit in getting the results that during the twoday visit, the authors did not find the gap between theory and practice, the assessment was obtained mother ation afraid his diminished because they feed the baby first with 1.4 years of age. in 2 days monitoring visits have been given comprehensive information and care to mothers FE tablet, nutrition for pregnant women, the need for rest, feeding, and regular prenatal care. The author expects the extension services to nursing mothers to increase knowledge on how to improve the nutrition of the mother by multiplying the dining-nutritious foods, such as vegetables, fruits, pregnant women to drink milk, and eat regularly FE tablet. Memperbanyakan displaying banners on compliance with nutrition in pregnant women. Opens characterize the class of pregnant women and mothers who are at high risk hamilmana to be given more effective care to avoid complications during pregnancy. It is expected that the case studies that have been done to add the source of insight, knowledge, and students can also do counseling about the importance of early detection KIE chronic energy deficiency in pregnant women. and could be referenced as the development of the science of midwifery care to pregnant women and serve as guidelines for the next case study. It is expected that these results can be a reference in research for professors or students with the importance of early detection of chronic energy deficiency in pregnant women.

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