

## Evaluasi Gangguan Pendengaran yang Berhubungan Dengan Paparan Bising di Lapangan "X" Pada Pekerja Industri Minyak dan Gas Lepas Pantai PT "M" Tahun 2018

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### Abstrak

Paparan kebisingan merupakan penyebab paling umum gangguan pendengaran, menyebabkan noise induced hearing loss (NIHL). Penelitian ini mengevaluasi gangguan pendengaran yang berhubungan dengan paparan bising dikaitkan dengan usia, masa kerja, lama paparan, pemakaian alat pelindung diri, kebiasaan merokok, hobi berhubungan kebisingan dan penyakit Diabetes Mellitus, hyperlipidemia dan hipertensi pada pekerja. Ini adalah penelitian observational cross sectional meneliti variabel independen, variabel dependen dan variabel perancu pada waktu bersamaan. Menggunakan data sekunder perusahaan melalui pengamatan, pengukuran dan questioner. Hasil pengukuran kebisingan area berpotensi kebisingan menunjukkan potensi kebisingan terendah adalah 63 dBA dan tertinggi 110, 6 dBA, tingkat kebisingan area field berkisar 84.88 - 93 dBA. Kebisingan di area nonfield tertinggi 79.5 dBA. Paparan bising efektif di bawah 80 dBA, baik di area field maupun nonfield; 7.1% pekerja bekerja > 20 tahun, didapatkan hubungan antara masa kerja > 20 tahun, terjadinya gangguan pendengaran pekerja sebanyak 5.6%, 40.5% pekerja berusia > 40 tahun, didapatkan hubungan antara usia pekerja dengan kejadian gangguan pendengaran. 42.9% pekerja memiliki kebiasaan merokok, tidak didapatkan hubungan antara perilaku merokok dengan gangguan pendengaran. Tingkat pemakaian APT pada pekerja didapatkan sebanyak 90.5% pekerja yang selalu memakai APT, tidak ada hubungan antara pemakaian APT dengan gangguan pendengaran. Tidak didapatkan hubungan antara hobi dengan terjadinya gangguan pendengaran Tidak didapatkan hubungan antara status kesehatan berupa profil lipid pekerja (kolesterol total, HDL, LDL, dan trigliserida), kadar glukosa darah pekerja dan tekanan darah dengan gangguan pendengaran.

**Kata Kunci:** gangguan pendengaran, paparan kebisingan, usia, masa kerja, pekerja industri

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Exposure to noise is the most common cause of hearing loss, leading to noise induced hearing loss (NIHL). This study evaluated hearing loss associated with noise exposure related to age, length of employment, length of exposure, the use of personal protective equipment, smoking habits, hobbies associated noise and diabetes mellitus, hyperlipidemia and hypertension in workers. This is a cross-sectional observational study examined the independent variable, the dependent variable, and confounding variables at the same time. Using the company secondary data, through observation, measurement and questionnaire. Noise measurement results indicate that the potential area of potential noise is 63 dBA as the lowest noise and the highest is 110, 6 dBA, field noise level area ranging from 84.88 - 93 dBA. Nonfield noise area 79.5 dBA. Exposure effective noise below 80 dBA, either in the field or nonfield area; 7.1% of workers worked > 20 years, working life > 20 years, the hearing loss of workers 5.6%, workers aged > 40 years 40 is 5%. 42.9% of workers have a smoking habit, not found a relationship between smoking behavior with hearing loss. HPD consumption levels in workers earned as much as 90.5% of the workers who always wear APT, there is no relationship between the use of HPD with hearing loss. There were no relationship between hobby with hearing loss. As well as no relationship found between workers health status such as lipid profile (total cholesterol, HDL, LDL, and triglycerides), worker glucose blood levels and blood pressure with hearing

loss. <br />Keywords: hearing loss, noise exposure, age, years of service, industry workers</em>