Gambaran Kejadian Stroke Berdasarkan Diagnosis Dokter Pada Penduduk Usia ≥15 Tahun di Provinsi DKI Jakarta

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Abstrak

Stroke merupakan salah satu penyakit tidak menular yang prevalensinya terus meningkat setiap tahunnya. Prevalensi stroke di DKI Jakarta meningkat dari 9,7‰ pada tahun 2013 menjadi 12,2‰ pada tahun 2018. Berdasarkan penelitian–penelitian terdahulu, faktor yang dapat mempengaruhi kejadian stroke dapat berbeda satu sama lain. Selain itu penelitian terkait faktor risiko stroke pada penduduk usia ≥15 tahun masih sedikit di DKI Jakarta. Penelitian ini bertujuan untuk menggambarkan faktor-faktor apa saja yang dapat menyebabkan kejadian stroke pada penduduk usia ≥15 tahun di DKI Jakarta menurut data Riskesdas 2018. Sampel penelitian ini adalah penduduk usia ≥15 tahun sebanyak 7.552 di DKI Jakarta. Penelitian ini menggunakan desain studi cross-sectional dengan analisis univariat dan bivariat. Hasil penelitian yang didapatkan adalah terdapat hubungan yang signifikan antara usia ≥55 tahun (POR=5,50; 95% CI= 3,84 – 7,88), jenis kelamin perempuan (POR=0,64; 95% CI= 0,45 – 0,91), merokok (POR= 1,90; 95% CI= 1,34 – 2,7), kurang aktivitas fisik (POR= 2,07; 95% CI= 1,46 – 2,94), hipertensi (POR= 11,19; 95% CI= 7,70 – 16,24), dan diabetes melitus (POR=4,97; 95% CI= 3,23 – 7,65) terhadap kejadian stroke. Optimalisasi program pengendalian penyakit tidak menular, edukasi dan promosi terkait risiko kejadian stroke, pemanfaatan media sosial untuk memperluas penyebaran informasi, mendorong pola hidup sehat, dan mengikuti program rehabilitasi dan pemulihan pasca-stroke dapat membantu untuk mencegah terjadinya stroke dan efek yang ditimbulkan pasca stroke. <hr /> Stroke is considerStroke is considered as one of the non-communicable diseases with a consistently increasing prevalence annually. The prevalence of stroke in DKI Jakarta escalated from 9.7‰ in 2013 to 12.2‰ in 2018. Previous studies have revealed that the factors influencing stroke occurrence may vary. Furthermore, limited research has been conducted regarding the risk factors of stroke among individuals aged ≥15 years in DKI Jakarta. This study aims to describe the factors contributing to stroke incidence among individuals aged ≥15 years in DKI Jakarta based on the Riskesdas 2018 data. The study sample consisted of 7,552 individuals aged ≥15 years in DKI Jakarta. This study used a cross-sectional study design with univariate and bivariate analysis. The study findings revealed significant associations between age ≥55 years (POR=5.50; 95% CI=3.84-7.88), female gender (POR=0.64; 95% CI=0.45-0.91), smoking (POR=1.90; 95% CI=1.34-2.7), low physical activity (POR=2.07; 95% CI=1.46-2.94), hypertension (POR=11.19; 95% CI=7.70-16.24), and diabetes mellitus (POR=4.97; 95% CI=3.23-7.65) in relation to stroke incidence.. Optimizing non-communicable disease control programs, education and promotion regarding stroke risk, utilizing social media for widespread information dissemination, promoting

healthy lifestyles, and participating in post-stroke rehabilitation and recovery programs can help prevent stroke occurrence and mitigate its post-stroke effects.ed as one of the non-communicable diseases with a consistently increasing prevalence annually. The prevalence of stroke in DKI Jakarta escalated from 9.7‰ in 2013 to 12.2‰ in 2018. Previous studies have revealed that the factors influencing stroke occurrence may vary. Furthermore, limited research has been conducted regarding the risk factors of stroke among individuals aged ≥15 years in DKI Jakarta. This study aims to describe the factors contributing to stroke incidence among individuals aged ≥15 years in DKI Jakarta based on the Riskesdas 2018 data. The study sample consisted of 7,552 individuals aged ≥15 years in DKI Jakarta. This study used a cross-sectional study design with univariate and bivariate analysis. The study findings revealed significant associations between age ≥55 years (POR=5.50; 95% CI=3.84-7.88), male gender (POR= 1,56; 95% CI= 1,09 – 2,21), smoking (POR=1.90; 95% CI=1.34-2.7), low physical activity (POR=2.07; 95% CI=1.46-2.94), hypertension (POR=11.19; 95% CI=7.70-16.24), and diabetes mellitus (POR=4.97; 95% CI=3.23-7.65) in relation to stroke incidence.. Optimizing non-communicable disease control programs, education and promotion regarding stroke risk, utilizing social media for widespread information dissemination, promoting healthy lifestyles, and participating in post-stroke rehabilitation and recovery programs can help prevent stroke occurrence and mitigate its post-stroke effects.