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Relationship Between Knowledge And Family Support On Hypertension Medication In Simpang Tanah Lapang Village Community

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Abstract

Hypertension is a disease characterized by increased blood pressure above normal limits and is most often suffered by the elderly. Treatment that can be done for hypertension sufferers is to comply with taking hypertension medication, and it is very difficult to do so that family support is needed in carrying it out. This study aims to determine the significant relationship between family support and compliance in taking hypertension medication in the elderly in Kuantan Hilir District. This study was conducted using an analytical observational method along with a cross-sectional research model. The results of this study showed that patients with a good family support category were 46 people (82.1%) and non-compliant in taking hypertension medication with a total of 10 people (17.9%). There is a significant relationship between family support and compliance in taking hypertension medication in the elderly in Kuantan Hilir District. The higher the family support given, the more compliant the patient is in taking hypertension medication.

Keywords ; knowledge, family, support

INTRODUCTION

The prevalence of hypertension is highest in Africa at 27% and Southeast Asia ranks 3rd highest with a prevalence of 25% of the total population (Maulidah et al., 2022). In addition, hypertension is a disease with a very high mortality and morbidity rate in the world. Hypertension has become a major problem in public health in Indonesia and in several countries (SHELEMO, 2023). Based on the prevalence of hypertension in Indonesia, it reached 34.11% of the proportion of history of taking medication and the reasons for not taking medication (Marhani et al., 2023). The number of pain is increasing day by day, one of the causes is due to the misuse of drugs (Meilina et al., 2019). The prevalence of hypertension in the elderly is quite high, namely 45.9% in the age group of 55-64 years, 57.6% in the age group of 65-74 years and 63.8% in the age group of 75 years and above (Fitriana, 2024). Based on data from the World Health Organization (WHO) in 2015, it shows that around 1.13 billion people

in the world have hypertension, meaning that 1 in 3 people in the world is diagnosed with hypertension (J et al., 2020).

The epidemiological transition in Indonesia has caused a shift in disease patterns, where chronic degenerative diseases have increased. Degenerative diseases are chronic non-communicable diseases such as heart disease, diabetes, hypertension and cholesterol (Meilina et al., 2020). The number of people with hypertension continues to increase every year, it is estimated that by 2025 there will be 1.5 billion people affected by hypertension, and it is estimated that every year 9.4 million people die due to occupational diseases and the affordability of access to health services (Purwono et al., 2020). The role of knowledge in the compliance of hypertension patients is very important to know the definition of complications (Sahadewa S et al., 2019)

Some of the risk factors that can cause an increase in hypertension cases are elderly patients with a history of high blood pressure in the family, obesity, consuming foods high in salt, and lifestyle habits. Risk factors that can be changed are: Smoking; Excessive salt consumption; Overweight/obesity (obesity); Lack of physical activity; Excessive alcohol consumption; and Stress (Shahzad et al., 2024).

One of the management of hypertension patients is by conducting pharmacological management (Purwanti et al., 2023). Purnawinadi and Lintang (2020) stated that hypertensive patients must be able to control blood pressure regularly in consuming antihypertensive drugs so that blood pressure remains optimal. This is one of the challenges for families, because patients with hypertension need long treatment, especially for elderly hypertensive patients (Purnawinadi & Lintang, 2020). Massa and Manafe (2021) stated that in elderly patients, the length of treatment will cause boredom or saturation of the treatment undergoing and decreased memory will also be a problem when administering drugs with the right dosage of drugs (Massa, 2022). Another effort that can be made to ensure that drugs are consumed correctly, namely socialization activities, can also provide knowledge to psasien about the safe use of drugs (Meilina et al., 2024).

It is hoped that through this activity the community can use drugs rationally In addition, the importance of pharmaceutical services is also responsible to patients related to pharmaceutical preparations with the intention of achieving definite results to improve the quality of life of patients in carrying out pharmaceutical services, hospitals must maintain the quality of services provided because it greatly affects patient satisfaction (Za et al., 2022). Drugs must always be used correctly to provide optimal clinical benefits (JASMINE, 2014).

Therefore, one of the important factors in advanced health for hypertensive patients is to comply with the rules of taking medication. An obedient attitude is a condition for the effectiveness of hypertension therapy and has the greatest potential to improve hypertension control (Marhani et al., 2023). Compliance is where the patient follows the advice that has been given by the doctor on how to use the correct medication. Non-adherence to medication is one of the biggest public health problems and is considered the leading cause of hypertension. Lack of adherence to

antihypertensive drugs is the main reason for poor hypertension control (Widyaningrum et al., 2019).

The large number of hypertensive patients who experience recurrence and undergo hospitalization shows that there is still a lack of adherence to treatment. Adherence to medication is very important in the treatment of hypertension patients because it can reduce the recurrence of hypertension and is indispensable to achieve controlled blood pressure (Veradita & Faizah, 2022). Factors that influence compliance behavior are very diverse, including education, occupation, age, interests, experience, environmental culture, information and family support (Nuzul et al., 2024). One of them is social (family) support. Family support can be understood as the help and protection provided to a person, family support has been shown to be positive in providing health outcomes for various medical conditions, including patients who are undergoing hospitalization (Terima Jaya Zega & Faqih Purnomosidi, 2023).

Based on the results of interviews conducted by researchers on hypertensive patients who experienced recurrence and underwent hospitalization in Simpang Tanah Lapang Village, Kuantan Hilir District, data were obtained that patients only take hypertension medication if their blood pressure increases and if they have disrupted activities, while the family plays a role as an introduction to health services (Susanti et al., 2022). In the process of treating hypertension for a long time, the role of the family in providing support is a very meaningful factor for the patient. The attitude of obedient to taking medication will increase if the hypertensive patient gets support from his family. Hypertensive patients will be motivated and will experience increased courage due to supportive families, so that patients have an obedient attitude in consuming their hypertension drugs (Puteri Anjalina et al., 2024). Medication adherence can be seen from the patient's diligence in taking medication according to schedule, medication is taken every day and medication is used up on time. Assessment of treatment adherence can also be seen in patient self-reports, drug counts, pharmaceutical records, drug levels and treatment monitoring systems (Sumiasih et al., 2020). Family support is also associated with improved blood pressure in sick families in the form of emotional support, reward support, and informational support (Veradita & Faizah, 2022). Specifically, the presence of strong family support has been shown to be associated with decreased mortality (Lubis et al., 2024). Poulter et al. (2019) stated that non-compliance in consuming hypertension drugs can worsen the patient's condition, which can cause complications in the cardiovascular system, especially for elderly patients (Wanta et al., 2024).

Therefore, people with hypertension need close people such as family to increase medication adherence (Widyaningrum et al., 2019). The level of adherence to taking medication in hypertensive patients will be successful if the family takes part in providing support to the patient (Widyaningrum et al., 2019). Patients with hypertension need the closest people such as family to provide support so that patients feel cared for and loved, especially for patients who consume drugs for a long period of time. The presence and cooperation of family members can keep hypertensive patients compliant in treatment (Wanta et al., 2024). Wintariani et al., (2022) also stated that in addition to

the nuclear family and support from close people such as relatives, it is also one way to increase adherence in taking medication in people with hypertension (Hidayah et al., 2023). Martina et al., (2022) also reported that motivation to treat hypertensive patients will increase when families provide support. Things that can be done by family or relatives to provide support in treatment are by providing information and instructions about hypertension control, as well as directly providing encouragement and attention to the elderly to be routine in treatment. Not only that, families also need to provide financial support so that patients can routinely check blood pressure at existing health facilities to support health (Ayaturahmi et al., 2022)

Several previous studies have been conducted related to the role of family in the compliance of hypertensive patients to consume anti-hypertensive drugs. Research conducted by Nurbaiti (2019) shows that there is a relationship between family support and adherence to consuming medication in elderly people with hypertension. The same results are also shown by the research of Fiqh (2019), stating that there is a significant relationship between family support and medication adherence in the elderly who experience hypertension at the Batua Health Center with a significant value. Joyce states that treatment can be achieved by building relationships with others with the aim of helping and supporting both individuals, families, or communities to prevent or overcome illness.

One of them is the relationship between family and patient (Wanta et al., 2024). Based on the description above, this study focuses on the family as individuals or close people to explain the relationship between family support and medication adherence in hypertensive patients who experience recurrence in the work area of the Kuantan Hilir District Health Center, so that health workers can determine future plans and strategies so that the incidence of hypertension recurrence can be reduced.

METHOD

This research was carried out by an observational analytical method through a crosssectional design carried out in Simpang Tanah Lapang Village, Kuantan Hilir District. The population used in this study was hypertension patients with inclusion criteria from 35-80 years old as many as 56 people. The instrument used in collecting samples is a questionnaire given directly to respondents. This questionnaire was conducted to find out the relationship between knowledge and family support on patients' obedient attitudes in taking antihypertensive drugs in the Kuantan Hilir District area based on the results of the respondents' answers. The family support variable was measured using a questionnaire adopted from Nursalam (2019), which consisted of 12 question items with several subdomains in them. The questions included emotional support and appreciation 4 items, namely questions 1 - 4, instrumental support 4 items, namely questions 5 - 8, information support 4 items, namely questions number 9 - 12 (Mariatul et al., 2024).

The scale used is the likert scale with positive questions. Each question has four choices with the following answer criteria: always = 4, often = 3, sometimes = 2, never

= 1. Meanwhile, the measurement of medication adherence in hypertensive patients uses the Morisky Medication Adherence Scale (MMAS) medication adherence questionnaire which consists of 8 questions sourced from the research (Sih Winulang et al., 2023). The categories are as follows: items 1 – 8 value 1 if the answer is "Yes", item 1 – 8 value 0 if the answer is "No". The data analysis in this study uses univariate and bivariate data analysis. Univariate analysis is presented with a frequency distribution table in the form of percentages for gender, age, education, occupation, and income. Meanwhile, bivariate analysis was used to determine the relationship or correlation between family support and medication adherence of hypertensive patients. The statistical test in this study uses the Pearson Corelation test (Utami et al., 2024).

RESULT AND DISCUSSION

The characteristics of the respondents were obtained based on data including name, age, gender, and educational background, occupation, and type of drugs used as listed in Table 1.

Table 1 Respondent Demographic Data		
Data Demographics	Sum (n)	Percentage (%)
Gender		
Girl	21	37,5
Man	35	62,5
Age		
35-47 year	7	12,5
48-53 year	17	30,3
54-67 year	22	39,3
68-74 year	10	17,9
Education		
TK	1	1,7
SD	7	12,5
SMP	25	44,6
SMA	21	37,5
S1	2	3,7
Work		
IRT	20	35,7
Private employees	11	19,7
Self employed	5	8,92
PNS	4	7,15
Farmer	16	28,6
Self employed		
Candesartan	18	32,2
Bisoprolol	16	28,6

Amlodipin	22	39,2
Total	56	100 %

Based on the results of the study in table 1 above, it can be seen that hypertension sufferers are most suffered by men compared to women. The prevalence of hypertension is higher in men than in women, but women are protected from cardiovascular disease before menopause, women who have not experienced menopause are protected by the hormone estrogen which plays a role in increasing High Density Lipoprotein (HDL) levels. This is because hypertension has a higher risk of occurring in women after menopause with an age range of >45 years (Podungge, 2020).

Table 2
Respondent Demographic Data

Compliance	Sum	Percentage
Obedient	34	60,8
Non-compliant	6	10,9
Non-compliant	16	28,3

Source: 2024 research results

In addition, this can also be caused because in men there are lifestyle habits and cigarette use can be a trigger for hypertension. The results of the study based on the age of the respondents were most obtained in respondents with an age range of 54-67 years, namely 22 people (39.3%). This is more when compared to hypertensive patients with other age ranges. It is stated that the elderly >55 years old have a higher prevalence of hypertension than the age range of <55 years (Baringbing, 2023). Based on the demographic data of the respondents' last education obtained, starting from the level of kindergarten to undergraduate education, the results of the last education of the respondents were obtained with the majority of junior high and high school education. It is stated that the patient's attitude of obedience in the treatment process or taking antihypertensive drugs is not only influenced by the level of education.

Based on demographic data from respondents' work, it has been obtained with the result that the majority of work in the treatment process or taking antihypertensive drugs is not only influenced by the level of education. Based on demographic data from work in the treatment process or taking antihypertensive drugs is not only influenced by the level of education.

Based on demographic data from respondents' jobs, it has been obtained that the majority of respondents' jobs are housewives (IRT) and self-employed where the results

have the same number of frequencies amounting to 42 people (36.5%). The results obtained are from the frequency distribution of female genders which allows for a relationship with work as a housewife (IRT) and self-employed. The higher the work, the easier it will be for a person to get good health information and services and the knowledge they have will increase (Baringbing, 2023).

Based on demographic data, the type of drug used by hypertension patients with the most is Amlodipine which amounted to 22 people (39.3%). The results of this study are to find out the types of antihypertensive drugs that are often used by hypertensive patients in the Kuantan Hilir District Health Center area. Based on data on the use of antihypertensive drugs at the Kuantan Hilir District Health Center, the most widely used drug is amlodipine. Amlodipine is a calcium channel inhibitor (CCB) drug that is recommended when the first-line agent is chosen as a treatment for hypertension that has contraindications or is ineffective for patients (Alawiyah & Mutakin, 2017). The factors that influence the patient's obedient attitude include behavior, motivation, belief, and various other things. A person's education will influence how they behave and act, so that it will be easier for a person to find and receive information (WIjayanti et al., 2022).

Family support for taking antihypertensive drugs was measured by a questionnaire with 12 questions. Family support data can be seen in tables 2 and 3 below.

Table 3
Family support

Family support	Sum	Percentage
Good	32	57,3
Enough	16	28,7
less	8	14,3

Source: 2024 research results

Based on the table above, the survey of hypertension patients was stated in the category of sufficient family support. Some hypertension patients who come to the health center alone without a companion. This does not make it a problem for the patient because his family can still provide support afterwards. The results of the analysis in this study regarding family support on patients' obedient attitudes in taking antihypertensive drugs can be stated that patients with a good family support category amounted to 32 (57.3%) and a sufficient family support category amounted to 16 (28.9%) and a category with poor family support amounted to 8 (14.3%).

The patient's obedient attitude in taking antihypertensive drugs shows that family support at the Kuantan Hilir District Health Center is in the good category, this is because the family already understands the diseases suffered by hypertensive patients and the family expects the patient to have a good health condition by making efforts so

that the disease does not recur or complications so that the family continues to pay attention and provide support to the patient in carrying out treatment Hypertension. The high level of compliance was 34 people (60.8%) and moderate compliance was 6 people (10.9%) and moderate non-compliance was 16 people (28.3%) of families with poor non-compliance with the implementation of medication.

The analysis using the Pearson statistical test obtained a significance value (p) = 0.000 and a coefficient value (r) = 0.783. Based on the results of the analysis using the Pearson statistical test, a significance value (p) of $0.000 < 0.05$ was obtained, then H_1 was accepted, meaning that there was a relationship between family support and medication adherence in hypertensive patients. The value of the correlation coefficient (r) of 0.783 means that there is a strong relationship between family support and medication adherence, with the direction of the relationship being positive because the value (r) is positive, meaning that the higher the family support, the greater the person's adherence to medication compliance.

CONCLUSION

Based on research from 56 hypertension respondents, the results were obtained as many as 57.2% of hypertension patients received good family support, 60.8% of hypertension patients at the Kuantan Hilir District Health Center. The value of the correlation coefficient (r) is 0.783 which means that there is a strong relationship between family support and medication adherence, with the direction of the relationship being positive because the value (r) is positive, meaning that the higher the family support, the greater a person's adherence to medication compliance.

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