

COPING MECHANISM RELATED TO BODY IMAGE IN GGK PATIENTS UNDERGOING HEMODIALYSIS

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ABSTRACT

Coping mechanism is one of the ways that is done to adapt to stress. Coping mechanisms used by hemodialysis patients are problem-centered coping i.e. confrontation and problem solving, emotionally centered coping such as seeking social support, acceptance, distance keeping, self-control. The research design to be used is descriptive. With the technique of sampling is a purposive sample where the number of sam is as many as 78 people. The results of the study known coping mechanism Coping mechanism chronic renal failure patients who followed hemodialysis therapy majority maladaptive as many as 49 people (62.8%) adaptive 29 people (37.2%). It is recommended that nurses educate new patients or older patients to continue to provide education to maintain adaptive individual coping, and to be able to change the perception of maladaptive individuals.

Keywords : Coping Mechanism, Chronic Renal Failure Patients

1. Introduction

Kidney failure patients are patients with kidney conditions losing their ability to filter fluids and food waste. To be able to maintain the quality of life of kidney failure patients must undergo kidney replacement therapy commonly called hemodialysis (Irna, 2015).

In the United States, the incidence and prevalence of kidney failure is increasing, and the number of people with kidney failure treated with dialysis and transplantation is projected to increase from 340,000 in 1999 and 651,000 in 2015 (Cinar, 2009 in Hirmawaty, 2016). In Indonesia alone according to *the Indonesian Renal Registry (IRR)* in 2016 about 15,353 kidney failure patients undergoing hemodialysis. In North Sumatra, 1-3 of its 10,000 inhabitants suffer from chronic renal failure.

Who mentioned that 2,622,000 people had undergone *End – Stage Renal Disease (ESRD)* treatment at the end of 2015, as many as 2,029,000 people (77%) of them underwent dialysis treatment and 593,000 people (23%) undergoing kidney transplantation while cases of kidney failure in Indonesia, every year is still fairly high because there are still many Indonesian people do not maintain their diet and health. A survey conducted by PERNEFRI (Indonesian Society of Nephrology) in 2015, the prevalence of chronic renal failure in Indonesia is about

12.5% meaning that about 18 million adults in Indonesia suffer from chronic kidney failure disease (Neliya, 2016).

In Indonesia, patients who have chronic chronic failure and who undergo hemodialysis therapy have increased, from a survey conducted by the Indonesian Society of Nephrology (Wurara, Kanine & Wowiling, 2015) there were 18 million people in Indonesia suffering from chronic kidney disease, *Indonesia Renal Registry* data in 2015 the number of hemodialysis patients 2148 inhabitants while in 2008 the number of hemodialysis patients increased by 2260 inhabitants. In East Java, according to data dinkes East Java ranges from 1-4 out of 10,000 residents have chronic renal failure and for Ponorogo slightly higher, 2-4 out of 10,000 residents have chronic renal failure.

Hemodialysis is a process that functionally replaces impaired renal function by removing excess fluid and/or accumulation of endogenous or exogenous toxins (Suharyanto, 2014). According to Sudoyo (2015), hemodialysis is carried out by draining blood in an artificial kidney tube (dialiser) consisting of two separate components.

Coping mechanism is one way to adapt to stress (Saam & Wahyuni in Taluta, Mulyadi & Hamel, 2014). One can overcome stress and anxiety by moving the source of coping in an environment of economic capital, problem solving capabilities, social support and cultural beliefs (Stuart in Taluta, Mulyadi & Hamel, 2014). The phenomenon occurs in patients undergoing regular hemodialysis treatment or therapy, most patients feel anxious because of the long and long dialysis process, so the patient needs an effective coping or problem solving mechanism to be able to reduce or overcome anxiety.

The coping mechanism used by hemodialysis patients at Hasan Sadikin Hospital Bandung in 2015 according to Herwina is a problem-centered coping of 26.8% namely confrontation and problem solving, emotionally centered coping as much as 19.5% such as seeking social support, acceptance, distance keeping, self-control.

From the results of interviews with several families and hemodialysis patients at Rasyida Hospital, they were able to use different coping mechanisms. Some patients and their families have been questioned about their condition and received support from the family, as seen from the way the family asks and seeks as much information as possible about matters related to hemodialysis patients, but there are some patients who still deny and remain silent to deal with the problems they are facing with a lack of family knowledge and curiosity and

tend to follow the wishes and ignore the advice of doctors and nurses. Other factors that cause changes in coping in patients are problems of the patient's perception of the condition of his body, problems of the patient's self-image

2. Methodology

The design of this research is descriptive. This research was conducted in the Hemodialysis Unit of the University Hospital of North Sumatra. The technique of sampling in this study is using *purposive sampling* techniques with a total of 78 samples.

The instruments in this study were questionnaires. The coping mechanism questionnaire was given using 20 statements with a choice of answers using the Likert scale with alternative answers Strongly Agreed scored 4, Agree score 3, Disagree score 2 and Strongly disagree score 1.

Data collection is done through stages: after the proposal is approved, researchers submit a letter of application for permission to the University Hospital of North Sumatra to conduct research. Once approved, the researchers met with prospective respondents to provide an explanation of the purpose and purpose of the study. Prospective respondents are given Informed Consent and questionnaire sheets and sign the consent sheet. Questionnaires that have been filled out are collected to researchers and rechecked for data processing. After all the data is complete the researchers face the hospital training section to report that the research has been completed. Data processing procedures are carried out through the stages of editing, coding, scoring and tabulating and the data is analyzed so that the results obtained in the form of frequency distribution.

3. RESULTS

No.	Age	Amount	Percentage
1.	15-25 Years Old	6	7.7
2.	25-35 Years Old	18	23.1
3.	35 Years	54	69.2

Total	78	100.0
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Table 1. Age Frequency Distribution

N^o.	Gender	Amount	Percentage
1.	Male	47	60.3
2.	Women	31	39.7
	Total	78	100.0

Table 2. Gender Frequency Distribution

N^o.	Old Hemodialysis	Amount	Percentage
1.	<1 Year	11	14.1
2.	1-2 Years Old	20	25.6
3.	2 Years	47	60.3
	Total	78	100.0

Table 3. Hemodialysis Old Frequency Distribution

N^o.	Characteristics of Respondents	Amount	Percentage
1.	Civil Servants	16	20.5
2.	TNI/POLRI	6	7.7
3.	Self employed	26	33.3
4.	Private Employees	11	14.1

5.	Housewives	19	24.4
	Total	78	100.0

Table 4. Working Frequency Distribution

No.	Coping Mechanism	Amount	Percentage
1.	Adaptive	29	37.2
2.	Maladaptive	49	62.8
	Total	78	100.0

Table 5. Frequency Distribution of Coping Mechanism of Hemodialysis Patients

4.DISCUSSION

Coping mechanism is one way to adapt to stress (Saam & Wahyuni in Taluta, Mulyadi & Hamel, 2014). One can overcome stress and anxiety by moving the source of coping in an environment of economic capital, problem solving capabilities, social support and cultural beliefs (Stuart in Taluta, Mulyadi& Hamel, 2014). The results of the study known coping mechanism Coping mechanism chronic renal failure patients who followed hemodialysis therapy majority maladaptive as many as 49 people (62.8%) adaptive 29 people (37.2%).

The coping mechanism used by hemodialysis patients at Hasan Sadikin Hospital Bandung in 2015 according to Herwina is a problem-centered coping as much as 26.8% namely confrontation and problem solving, emotionally centered coping as much as 19.5% such as seeking social support, acceptance, keeping distance, self-control.

According to Stuart & Sundeen (2014) The characteristics of adaptive coping mechanism is being able to control emotions in him by talking to others, doing constructive activities, having a wide perception, being able to receive the support of others, and being able to solve problems effectively. While the characteristics of maladaptive coping are behaviors tend to be destructive, perform unhealthy activities such as drugs, alcohol, not being able to think anything or disorientation, behavior tends to avoid or withdraw, and can not solve problems.

In this study if it is linked to demographic data then adaptive respondents are respondents with female gender and male respondents are the majority maladaptive. According to the assumption female researchers use feelings more when it will be associated with a problem,

are better able to hold emotions and tend to want to find out solutions from others, or ask the opinions of others, whereas men tend to be emotional, feel if there is a problem that afflicts feel very emotional and feel themselves weak and afraid of being considered inferior by others.

5. CONCLUSION

Coping mechanism Coping mechanism of Chronic Renal Failure patients who follow hemodialysis therapy the majority of maladaptive as many as 49 people (62.8%) adaptive 29 people (37.2%).

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