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Identification of Diet with Anemia Incidence in Pregnant Women in Puuwatu

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Abstract. *Anemia is a health problem that is experienced by many pregnant women and can cause problems for both the mother and the baby she is carrying. Anemia in pregnant women not only affects the growth and development of the fetus but also causes placental disorders such as hypertrophy and infarction that interfere with function. The purpose of this study was to determine the relationship between the prevalence of anemia in the working area of the Puuwatu Health Center and eating habits. This study used a quantitative research design with a descriptive approach and a purposive sampling strategy. The population in this study were pregnant women in the working area of the Puuwatu Health Center with a total of 41 respondents. Based on the findings of anemic pregnant women, there were 26 (61.9%) anemic pregnant women whose diet was poor, and there were 15 (35.7%) anemic pregnant women whose diet was good. Based on the research findings, it can be concluded that the majority of pre-pregnant women. A small proportion of respondents had bad eating patterns, namely 26 people (61.9 percent), while only a small number of respondents had good eating patterns, namely 15 people (35.7 percent).*

Introduction

In Indonesia, anemia is a major problem with nutrition. The risk of iron deficiency anemia results in decreased work productivity, decreased immunity to disease, weight gain related to pregnancy and premature birth. According to [1.]

Anemia during pregnancy is a serious health problem because of the high prevalence and potential complications that can affect the mother and fetus. Placental disorders such as hypertrophy and infarction, which interfere with function and affect fetal growth and development, are caused by anemia in pregnant women [2].

The mother's diet will affect the fetus in the womb, so it is important to pay attention to it during pregnancy. By consuming staple foods, the pattern of eating staple foods follows the guidelines of balanced nutrition. The development of the placenta, blood vessels and new tissues in the fetus, staple food is a very important source of energy for pregnant women [3.]

Anemia is a condition in which the body lacks hemoglobin. Hemoglobin is a metalloprotein, precisely a protein that contains iron in red blood cells which functions as a carrier of oxygen from the lungs throughout the body. Anemia caused by a deficiency of iron, which is needed to make hemoglobin (Hb), is called iron deficiency anemia. The hyperdynamic state, characterized by a rapid and strong pulse, palpitations, and ringing in the ears, is characterized by generally weak symptoms of anemia. Increased iron requirements, inadequate iron intake, infections, gastrointestinal bleeding, and a number of other factors can all contribute to iron deficiency anemia. Anemia caused by iron deficiency can be diagnosed through history, physical examination, and other tests. Iron can be given orally, intramuscularly, or through blood transfusions to treat iron deficiency anemia [4.]

According to WHO criteria, pregnant women with anemia are divided into three categories based on their severity, namely mild anemia (Hb level 10-10.9 g/dl), moderate anemia (Hb level 7 9.9 g/dl), and severe anemia (7 g/dL). /dl). Of the 26 respondents who suffered from anemia, 13 people (50 percent) were in moderate degrees. This information is consistent with the findings of a study conducted by Ramesh and Shah, who found that 52.83% and 43.8% of pregnant women were multiparous, respectively. women suffer from moderate anemia. 12,15 This is in line with the Uche-Nwachi theory in Trinidad and Tobago, which states that anemic women with at least one child are 3.2 times more likely to suffer from anemia [5].

Methods

In retrospective research, the research design is based on observing past events with the intention of finding factors related to the causes [6.] This study used a quantitative research design with a descriptive approach and a purposive sampling strategy. The population in this study were pregnant women in the working area of the Puuwatu Health Center with a total of 41 respondents.

Results

Table 1. Frequency distribution based on the characteristics of the respondents

Characteristics of the respondents	Frequency (f)	Percentage (%)	Mean ±Std. Deviation
Age (y.o)			
20-29	25	61	1.4390 ±.50243
30-39	16	39	
Education			
Junior High School	5	12,2	
Senior High School	30	73,2	
Academy/ University	6	14,6	
Occupation			
Government employees	30	73,2	
Entrepreneur	6	14,6	
Housewife	5	12,2	

Based on the results of this study, it showed that there were 25 (61.0%) respondents aged 20-29, while those aged 30-39 were 16 (39.0%). The highest level of education is high school with 30 (73.2%) people, undergraduate with 6 (14.6%) and junior high school with 5 (12.2%) people.

Table 2. Frequency Distribution of Respondents to Diet in Pregnant Women with Anemia

Dietary	N	%
Kurang	26	61,9
Baik	15	35,7
Total	41	100

Table 2. Shows that the research variable that results in pregnant women who are anemic is the research variable for pregnant women with anemia, anemia whose diet is lacking as many as 26 (61.9%) people, and 15 pregnant women with anemia, or 35.7%, eat well.

Discussion

The variables in this study showed that 26 (61.9%) pregnant women with anemia had a poor diet, and 15 (35.7%) anemic pregnant women with a good diet.Showing that the research variable for pregnant women with the incidence of anemia was the result of anemic pregnant women whose eating patterns were lacking as many as 26 (61.9%) people, including respondents aged 20-33 years, junior and senior high school education. There are 15 (35.7%) of anemic pregnant women who eat well and are respondents aged 26-39 years, high school and undergraduate education, civil servant jobs and self-employed.

Gravida, age, parity, education level, economic status, and adherence to diet and Fe tablets are several factors that contribute to the occurrence of anemia during pregnancy [8.] A good diet consists of a variety of foods in the right way. the amount and dose that do not meet the healthy needs of a person; an unbalanced diet will result in an imbalance of nutrients entering the body, which can lead to malnutrition or vice versa; an unbalanced pattern of use also binds the body [9.]

Nutrition A mother's well-being, the quality of her pregnancy, and the safety of her child are all very important during pregnancy. According to [10]. improving the nutritional status of pregnant women is beneficial not only for the mother but also for the developing baby both inside and outside the womb. Nutritional intake during pregnancy remains a concern for the mother's health, and pregnant women must accept that optimal health, growth and development, as well as good nutrition and the quantity and quality of nutrients consumed, are very important for perfect health [7.] During pregnancy, the nutritional needs of pregnant women must be met significantly.

Women who are less than 20 years pregnant need additional nutrients that are quite large because apart from being used for their own growth and development, they also have to share them with the fetus they contain. Meanwhile, individuals over the age of 35 years. requires considerable energy to support an ongoing pregnancy, This is because organ function becomes less effective and requires optimal function. Women who are less than 20 years pregnant need quite a lot of additional nutrients because apart from being used for their own growth and development, they are also required to share them with the fetus they are carrying. 35 year olds need a lot of energy because their organs are getting weaker and need to work properly, so they need more energy to maintain pregnancy [10.]

This is in line with research supported by Wigutomo Gozali's research, which showed a significant relationship (p 0.05) between the prevalence of anemia in pregnant women and their diet. Given the side effects of perception, scientists say that pregnant women who rarely eat will generally experience pain [8]. found that out of 30 respondents, half (50%) ate badly and almost half (26.7%) suffered from anemia. This finding is also consistent with the findings of this study. The chi-square test yields a p-value of 0.035. Knowledge, culture of each region, socioeconomic and social environment, and diet all have a significant impact.

Improving diet, Practicing During pregnancy, pregnant women can help prevent and treat anemia by adopting healthy eating habits and eating foods that are high in protein, iron, and folic acid [11].

CONCLUSIONS AND SUGGESTIONS

Based on the research findings, the following conclusions can be drawn: the majority of pregnant women who responded had a poor diet—as many as 26 (61.9%), while only 15 (35.7%) had a healthy diet.

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