CHANGE OF BEHAVIOR AND IMPROVEMENT OF COMMUNITY SKILLS IN PREVENTING AND CONTROLLING BLOOD LIPID LEVELS DURING THE COVID 19 PANDEMIC AREA OF PALEMBANG SOCIAL HEALTH CENTER

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Abstract
Manifestations of lifestyle changes are physical activity, and changes in unhealthy eating patterns including a diet high in fat, carbohydrates, and low fiber intake one of the reasons for degenerative diseases, namely dyslipidemia. The cause of changes in blood lipid profiles is a diet that can be influenced by nutritional knowledge and a person's attitude. The older the age, the lower the body's metabolic function. For this reason, the target of this community service activity is the elderly. The purpose of this study was to determine the knowledge and skills of the community through education about healthy lifestyles in an effort to prevent dyslipidemia and control blood lipid levels in members and cadres of the Teratai Elderly Integrated Healthcare Center in the Work Area of the Palembang Social Health Center. The activity was carried out at the Integrated Healthcare Center which has elderly members under the guidance of the Palembang Social Health Center. Community service activities were carried out 2 times in Nutrition Education in the form of espionage and counseling for Integrated Healthcare Center members and 1 training for Posyandu cadres. From the results of measuring cholesterol levels, 10 people (32.25%) with cholesterol levels above normal. In addition, this community service activity is expected to increase the knowledge of nutrition and health for elderly Integrated Healthcare Center members and Teratai Integrated Healthcare Center cadres about balanced nutrition and how to make fruit and vegetable smoothies in preventing dyslipidemia.

Keywords: Change, Behavior, Skills, Content, Lipid.

INTRODUCTION

Manifestations of lifestyle changes are physical activity, and changes in unhealthy eating patterns including a diet high in fat, carbohydrates, and low fiber intake. One of the triggers of degenerative diseases is dyslipidemia (Hernawati, 2009).

The National Basic Health Research (RISKESDAS) in 2013 showed the prevalence of dyslipidemia as seen in cholesterol levels of 35.9% of the Indonesian population aged 15 years (based on NCEP ATP III, with cholesterol levels of 200 mg/dl). RISKEDAS data also shows that 15.9% of the population aged 15 years had a very high proportion of LDL (≥ 190 mg/dl), 22.9% had HDL levels less than 40 mg/dl, and 11.9% had very high triglyceride
levels (≥ 500 mg/dl). Abnormal levels of cholesterol and LDL are one of the factors that cause dyslipidemia.

Management of dyslipidemia can use the Dietary Approaches to Stop Hypertension (DASH) diet. According to Ridwan Arif (2014) the DASH diet focuses on increasing sources of high-fiber foods and decreasing consumption of saturated fat foods. In addition to the DASH diet, according to the Indonesian Association of Cardiovascular Specialists (PERKI), the management of dyslipidemia includes 2 therapies, namely pharmacological with the use of cholesterol-lowering drugs and non-pharmacological with Therapeutic Lifestyle Changes (TLC) (PERKI, 2013).

The results of Susyani and Muzakar’s research (2019) on the effect of nutritional counseling on blood lipid levels of dyslipidemic patients at Siti Khodijah Hospital, Sekip Health Center, and Palembang City Social Health Center, it was found that all samples were in the elderly category. The results of this study are used as the basis for conducting Community Service for the Elderly at the Teratai Posyandu at the Palembang Social Health Center. In addition, it is also supported by the results of research by Lina and Tri (2006) which states that there is a relationship between total cholesterol levels and age, and that at an older age, total cholesterol levels are higher. This is because the older a person is, the LDL receptor activity decreases.

The older the age, the lower the body's metabolic function. For this reason, the target of this community service activity is the elderly, specifically members of the Lotus Lansia Posyandu in the work area of the Palembang Social Health Center.

IMPLEMENTATION METHOD

The activity was carried out at the Posyandu which has elderly members under the guidance of the Palembang Social Health Center. Community service activities carried out 2 times Nutrition Education in the form of counseling and counseling for Posyandu members and 1 training for Posyandu cadres. Prior to nutrition education, participants were given a posttest to see the extent of their knowledge in understanding nutrition and health regarding nutrition and health management, especially dyslipidemia. increase the knowledge of the participants.

RESULTS AND DISCUSSION

This Community Service activity was carried out on Friday, Monday, Tuesday, November 13-17, 2020 at the house of Mrs. Ida as the head of the Lotus Posyandu Group which is located at Jalan Sosial KM 5, Sukabangun Village, Sukarami District, Palembang City, South Sumatra. The community service activity was attended by 60 Teratai Posyandu members including posyandu cadres.

This community service activity was carried out during the covid 19 pandemic. So the implementation procedures in the field continued to apply the health protocol by doing social distancing, keeping a distance, washing hands, and wearing masks.

To convey the purpose and intent of this service, it was conveyed directly by Mrs. Susyani, S.SiT, M.Kes as well as opening the Community Service activity at the Teratai Posyandu.
The activity is in the form of Nutrition Education in the form of counseling on nutrition and health which discusses the regulation of balanced nutritious food and the diet of people with dyslipidemia, which is followed by a question and answer session with the participants. This education is provided by nutritionists who are competent in their fields, namely Mrs. Terati, SKM, M.Si and Mrs. Imelda Telisa, S.Gz, MP.

In addition to nutrition education, there were also measurements of cholesterol levels using an easy touch tool by laboratory staff, from 60 people including cadres and posyandu participants, 31 people wanted cholesterol levels checked. The results of the examination of cholesterol levels found 10 people (32.25%) with cholesterol levels above normal and 21 people with normal cholesterol levels. In addition, to increase the knowledge of cadres, several cadre training was carried out:

a. How to make feeding formula in the form of fruit and vegetable smoothies. This training is aimed at improving the skills of the Teratai Posyandu cadres and enriching their knowledge of various fruit and vegetable smoothies that can prevent dyslipidemia and can help keep blood cholesterol levels within normal limits.
b. Training on how to manage food and diet for people with dyslipidemia. This training was given to posyandu cadres with the help of pocketbooks, so that the cadres could explain to posyandu participants including the general public how to regulate food and diets for dyslipidemia sufferers during the COVID-19 pandemic, including skills in making nutritious and balanced food menus.
CONCLUSION

From the results of measuring cholesterol levels, 10 people (32.25%) with cholesterol levels above normal. There was an increase in participants' knowledge of 17.75 points. In addition, this community service activity is expected to increase the knowledge of nutrition and health for elderly posyandu members and Teratai posyandu cadres about balanced nutrition and how to make fruit and vegetable smoothies in preventing dyslipidemia.

REFERENCES