

ANALISIS DESKRIPTIF FAKTOR RISIKO RESISTENSI PADA TERAPI PENCEGAHAN TUBERKULOSIS DI INDONESIA

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ABSTRAK

Tuberkulosis (TB) tetap menjadi masalah kesehatan global yang signifikan, dengan Indonesia menempati peringkat kedua sebagai negara dengan beban TB tertinggi di dunia. Tantangan utama dalam pengendalian TB adalah munculnya kasus TB resisten obat (MDR-TB), yang memerlukan strategi pencegahan efektif seperti Terapi Pencegahan Tuberkulosis (TPT). Penelitian ini bertujuan untuk mengetahui gambaran kejadian resistensi TB antara pasien yang mendapatkan TPT dan yang tidak mendapatkan TPT di Indonesia., serta mengidentifikasi faktor-faktor risiko yang berkontribusi. Metode penelitian menggunakan pendekatan deskriptif kuantitatif dengan desain cross-sectional retrospektif. Data diperoleh dari Survei Kesehatan Indonesia (SKI) tahun 2023, dengan sampel sebanyak 39.828 responden yang terdiri dari pasien TB yang menerima TPT dan tidak menerima TPT. Analisis data dilakukan secara univariat untuk menggambarkan karakteristik responden, termasuk faktor sosial demografi, ekonomi, perilaku, klinis, dan akses fasilitas kesehatan. Hasil penelitian menunjukkan bahwa resistensi TB terjadi baik pada kelompok yang menerima TPT (7.375 kasus) maupun yang tidak menerima TPT (1.438 kasus). Faktor risiko utama resistensi meliputi jenis kelamin laki-laki, usia produktif (>15 tahun), status gizi kurus, tingkat pendidikan rendah, pekerjaan tidak tetap, serta kebiasaan merokok pasif. Hambatan akses seperti ketiadaan obat di fasilitas kesehatan, jarak tempuh yang jauh, dan biaya transportasi yang tinggi juga berkontribusi terhadap ketidakefektifan TPT. Kesimpulan penelitian ini menunjukkan bahwa kejadian resistensi TB tetap terjadi pada kelompok yang menerima maupun yang tidak menerima TPT. Resistensi dipengaruhi oleh berbagai faktor, termasuk karakteristik individu, kondisi sosial ekonomi, perilaku, kondisi klinis, serta hambatan dalam akses dan layanan kesehatan. Oleh karena itu, pengendalian resistensi TB memerlukan pendekatan menyeluruh yang mencakup edukasi, pemerataan akses layanan, dan penguatan sistem kesehatan yang responsif terhadap kebutuhan pasien.. Penelitian lanjutan disarankan untuk mengeksplorasi hubungan kausal antara faktor-faktor risiko dan kejadian resistensi guna mendukung kebijakan yang lebih tepat sasaran.

Kata kunci: Faktor Risiko, Indonesia, Resistensi Obat, Tuberkulosis, TPT .

DESCRIPTIVE ANALYSIS OF RISK FACTORS FOR RESISTANCE IN TUBERCULOSIS PREVENTIVE THERAPY IN INDONESIA

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ABSTRACT

Tuberculosis (TB) remains a significant global health issue, with Indonesia ranking second among countries with the highest TB burden worldwide. A major challenge in TB control is the emergence of drug-resistant TB (MDR-TB), which requires effective prevention strategies such as Tuberculosis Preventive Therapy (TPT). This study aims to describe the incidence of TB resistance among patients who received TPT and those who did not in Indonesia, as well as to identify contributing risk factors. This research employed a quantitative descriptive approach with a retrospective cross-sectional design. Data were obtained from the 2023 Indonesia Health Survey (SKI), involving a sample of 39,828 respondents consisting of TB patients who received and did not receive TPT. Univariate analysis was conducted to describe respondent characteristics, including sociodemographic, economic, behavioral, clinical, and healthcare access factors. The results showed that TB resistance occurred in both groups—those who received TPT (7,375 cases) and those who did not (1,438 cases). The main risk factors for resistance included male gender, productive age (>15 years), undernutrition, low education level, unstable employment, and passive smoking habits. Barriers to access, such as unavailability of medication at healthcare facilities, long travel distances, and high transportation costs, also contributed to the ineffectiveness of TPT. The study concludes that TB resistance continues to occur in both patients who received and those who did not receive TPT. Resistance is influenced by various factors, including individual characteristics, socioeconomic conditions, behavioral patterns, clinical conditions, and barriers to accessing healthcare services. Therefore, controlling TB resistance requires a comprehensive approach that includes education, equitable access to services, and strengthening of health systems that are responsive to patient needs. Further research is recommended to explore causal relationships between risk factors and resistance incidence to support more targeted policy development.

Keywords: Risk Factors, Indonesia, Drug Resistance, Tuberculosis, TPT.