

Knowledge and Family Support Regarding Regular Medication Taking in Tuberculosis Resistant Patients

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Knowledge and family one factor in success treatment of Multidrug-Resistant Tuberculosis (MDR TB), and is support orientation to function enhancement regularity in take anti-tuberculosis medication (OAT). Regularity is behavior Good especially in drink medication that has been given. Patient Resistant Tuberculosis (R-TB) is patients who do not complete drink drug so that bacteria the develop which results resistant. Study aim For know connection knowledge and support family to regularity taking OAT in R-TB patients at Persahabatan Hospital . Study with cross sectional technique . Sample of 104 respondents with purposive sampling method . Research results univariate showing majority 46-55 years old , male , college high or not working . Analysis results bivariat Spearman's rho method is obtained exists relationship knowledge and family with regularity drink medication in patients resistance tuberculosis . Advice on the need improved awareness in patients , evidence support family That real during operate treatment period long and digging related matters with regularity drink medicine .

INTRODUCTION

Pulmonary Tuberculosis (TB) is an infectious disease of the lungs, the disease spreads through droplets when sufferers cough, sneeze or talk. (WHO, 2020) . Tuberculosis disease that is not treated or completed, the bacteria in the sufferer's body will become resistant, resulting in Multidrug-Resistant Tuberculosis (MDR-TB) resulting in the patient's treatment taking longer. Globally, there are 150,359 confirmed cases of MDR TB with resistance (WHO, 2020) . Nationally in Indonesia there were 7,921 cases of MDR TB (RI, 2021) . The number of MDR TB cases in the East Jakarta area has increased by 12.34%, compared to 32,570 cases in 2018 (Government of the Republic of Indonesia, 2022) .

Research from Mashidayanti, Nurlily, & Kartinah (2020) shows the regularity of taking medication with the number of MDR TB patients being 70.6% regular, 11.8% moderately regular and 17.6% irregular. Comparative research results stating that irregular medication taking is related to knowledge in Junita, Debatara, & Kusnandar (2022) stated that data on MDR-TB respondents based on knowledge stated that 53.3% had low knowledge. The conclusion is that more than half of the majority of MDR TB respondents have low knowledge of the relationship between the level of knowledge and adherence to taking medication (Dwi et al., 2019) . The results of research on family support for the regularity of taking medication in Ainiyah et al. (2019) stated that there was a significant relationship between the role of the family and compliance of MDR TB

patients in treatment at RSUD Dr. Soetomo Surabaya (Soekotjo et al., 2019) . The results of family support for MDR TB patients in treatment include informational, assessment, emotional and instrumental family support (Kridaningsih et al., 2021a) .

The Friendship Central General Hospital (RSUP Persahabatan) is a type A hospital which was built on November 7 1963, which has become a national reference for respiration so that the services of the Friendship Hospital make a special contribution to the management of respiration located in East Jakarta (Bustamam & Setiawan, 2021) . Obtained data on the prevalence of MDR TB (2021), a total of 272 patients were treated. The prevalence rate for MDR TB (2022) is a total of 379 patients treated, consisting of new patients who have no history of treatment from patients who failed, changed the drug guide for 18-24 months, changed the OAT SO guide, died, dropped out of the drug (lost to follow up) .), relapse, change of treatment location, suspected of having a history of close contact with MDR TB patients.

METHOD

Design study This using cross sectional with side non-probability techniques namely purposive sampling (P et al., 2019) . Study aim For know exists connection level knowledge and support family to regularity drink anti- tuberculosis drugs in patients resistance tuberculosis at Persahabatan Hospital. Study This carried out at the MDR TB Polyclinic, RSUP Persahabatan on 4 October 2022 - 30 March 2023 with population of 140 with a sample of 104 respondents take care walk in space taking MDR TB drugs (Hanif et al., 2020a) . Variable study level knowledge and support family to regularity drink medicine . Data collection with questionnaire, data analysis was carried out with data tabulation and submission hypothesis (Febrianto et al., 2019a) . H1 was tested with p value <0.05. Statistical tests used analysis Spearman's rho statistics (Hanif et al., 2020b)

RESULTS

No	Respondent Characteristics	Frequency (f)	Percentage (%)
1.	Age	18	17
	17-25 years old	24	23
	26-35 years old	27	26
	36-45 years old	35	34
	46-55 years old		
	Total	104	100%
2.	Gender	53	51
	Man	51	49
	Woman		
	Total	104	100%
3.	Education	3	3
	Not finished elementary school yet	11	11
	elementary school	38	36
		52	50

	middle/high school		
	College		
	Total	104	100%
4.	Work	4	4
	Employee Civil Servants	28	27
	Entrepreneur	10	9
	Doesn't work	62	60
	Total	104	100%

Table 1. Distribution Frequency respondents at the MDR-TB Polyclinic, Persahabatan Hospital , East Jakarta

The results of table 1 show that the frequency distribution of respondent characteristics shows that all respondents with R-TB took OAT at the MDR TB Polyclinic, Persahabatan Hospital, East Jakarta. The majority of respondents were 46-55 years old as much as 34%, men as many as 51%, university students as many as 50%, and not working as many as 59.6%.

Knowledge Level Category	Frequency (f)	Percentage (%)
Good	79	74%
Enough	12	11.5%
Not enough	13	12.5%
Total	104	100%

Table 2. Frequency distribution of respondents' knowledge level at the MDR TB Polyclinic at Persahabatan Hospital, East Jakarta

The results in table 2 show that the frequency distribution of knowledge levels of 104 respondents has a good level of knowledge of 74% regarding the regularity of taking OAT.

Category Support Family	Frequency (f)	Percentage (%)
Good	91	87
Not enough	13	13
Total	104	100%

Table 3. Frequency distribution of respondents for family support at the MDR TB Polyclinic, Persahabatan Hospital, East Jakarta

The results from table 3 show that there is a frequency distribution of respondents with family support, out of 104 respondents who have good family support of 87% regarding the regularity of taking OAT.

Category Regularity Taking Medicine	Frequency (f)	Percentage (%)
Regular	82	78.8
Irregular _	22	21.2
Total	104	100%

Table 4. Frequency distribution of respondents' regularity in taking anti-tuberculosis medication (OAT) at the MDR TB Polyclinic at Persahabatan Hospital

The results from table 4 show that the frequency distribution of respondents who regularly drink OAT from 104 respondents has a good regularity of 78.8%.

Knowledge	Regularity				Total		Spearman's rho	
	Good		Not enough		N	%	P	R
	N	%	N	%				
Good	68	65.4	22	10.6	79	76	0.001	0.355
Enough	10	9.6	2	1.9	12	11.5		
Not enough	4	3.8	9	8.7	13	12.5		
Total	82	82	22	22	104	100		

Table 5. Relationship between level of knowledge and regularity of taking OAT in TB resistant patients at the MDR TB Polyclinic, RSUP Persahabatan

Analysis of the results from table 5 based on the Spearman's rho test on the level of knowledge and the regularity of taking OAT, obtained a p-value = 0.001 < 0.05 with a contingency coefficient of 0.355, so it was concluded that there was a significant relationship between the level of knowledge and the regularity of drinking OAT, which was relatively low.

Family	Regularity				Total		Spearman's rho	
	Good		Not enough		N	%	P	R
	N	%	N	%				
Good	81	77.9	10	9.6	91	87.5	0.001	0.659
Not enough	1	1.2	12	11.5	13	12.5		
Total	82	82	22	22	104	100		

Table 6. Relationship between family support and regularity of taking OAT in TB resistant patients at the MDR TB Polyclinic, Persahabatan Hospital

the Spearman's rho test of family support and regular OAT drinking resulted in a p-value = 0.001 < 0.05 with a contingency coefficient of 0.659 so it was concluded that there was a significant relationship between family support and regular OAT drinking which was relatively strong.

DISCUSSION

Univariate Discussion of Knowledge

The knowledge of respondents in the research is that respondents know, understand, apply, analyze, systematic and evaluation of knowledge is very important for R-TB respondents, this understanding is the basis for R-TB respondents in regularly taking OAT by taking medication regularly for 6-24 months . This is in line with the theory of Notoatmodjo (2014) in Fadlilah & Aryanto (2020) states that knowledge is the result of curiosity through sensory processes, especially in the eyes and ears regarding the target object. This research is not in line with research by Junita et al. (2022) majority 53.3%. MDR-TB respondents had low knowledge.

The researchers concluded that there was no correlation between age, gender, education and occupation with the respondent's level of knowledge. The patient's knowledge is supported by information sources from various media which is supported by age, education and environment and the researcher concludes that the respondent's low level of knowledge is supported by the

respondent's low level of education, the respondent not working and additionally from the environmental factors where the respondent lives. (Sundari et al., 2023) .

Family Univariate Discussion

The family support of the respondents in this study was that the respondents were always supported by the family in reminding them to take medication at regular times every day, and the family was always ready, accompanying, providing support and assistance during the duration of treatment. This research is in line with the theory of Rismayanti et al. (2021) which states that family support is the attitude, actions and acceptance of the family towards family members who need help. There are no comparative journals so that researchers can conclude that family support is real evidence for sick family members, especially R-TB patients, in regularly taking medication so that infection or resistance to the drug does not occur (Febrianto et al., 2019b) .

Researchers found that respondents who had less family support were due to a correlation between the respondent's education and family support, but there was no correlation between age, gender and employment with family support. The results of the interview showed that the respondent was a migrant to the capital city, there was no family who was aware and supportive, and the respondent did not want his family members to be infected by the disease suffered by the respondent.

Univariate discussion of regularities

The regularity of respondents in this study is the activities and events experienced by respondents when taking medication which are carried out regularly at the same time and carried out every day. This research is in line with the theory from KBBI (2016) which states that regularity is an activity, situation or a process that occurs repeatedly or more regularly or the process is in the form of good and real things in accordance with what has been planned. This research is not in line with research by Beda Ama & Suhermi (2020) which stated that 78.6% had irregular medication intake with the occurrence of MDR-TB and 21.4% had good regularity.

Based on the results obtained, the researchers concluded that R-TB respondents had less regularity due to the side effects of OAT, were bored with the length of treatment, felt tired, struggled alone in healing, the amount of medication given, lack of motivation to recover and lack of system support from the environment or families and respondents who have good regularity because these respondents are continuously reminded by their families to take their medication on time (Kridaningsih et al., 2021b) .

Bivariate discussion of knowledge level

the Spearman's rho test research obtained a p-value = 0.001 < 0.05 with a coefficient of 0.355, which concluded that there was a relatively low relationship between the level of knowledge and the regularity of taking OAT . This research is in line with research by Hasina et al. (2023) that with the Spearman's rho test, the p-value was 0.030 or <0.05 and had a correlation coefficient = 0.287, which means there is a relationship between knowledge and low medication adherence. The level of knowledge is a factor that can measure a person's obedience to something that is within him. Both practically, theoretically and indirectly through behavioral awareness of direction, rules and motivation. This level of knowledge is supported by the person's age, education, occupation and surrounding environment. The level of knowledge can also influence a person's regularity in taking OAT (Junita et al., 2022) .

This research is in contrast to research by Felicia, Nani Fattiya Suryani (2021) The results of the Spearman's rho statistical test showed a p-value of 0.0655 (p = >0.05), which means there is no relationship between knowledge and adherence to taking advanced anti-tuberculosis medication

(OAT) in pulmonary TB sufferers. There is no relationship between knowledge about multidrug resistance for tuberculosis and adherence to taking medication in tuberculosis patients at the Oebobo Helath Center Government Clinic of Kupang City with a p-value of $0.338 > 0.05$ (Djuma et al., 2018) .

People who have less knowledge will be at risk of contracting ongoing tuberculosis (MDR TB) compared to people who have good knowledge (Windiyarningsih & Badaruddin, 2021) .

Researchers concluded that the level of knowledge of R-TB respondents could influence the long-term regularity of taking OAT because the level of knowledge is a factor that can be measured in the regularity of respondents taking medication. Researchers concluded that respondents with less knowledge were new patients, because the patient had delayed seeking treatment for more than 2 months, respondents only suspected that the cough they were experiencing was just an ordinary cough, researchers concluded that the droplets in the respondent had become immune so that the diagnosis of MDR-TB started from the respondent's environment and the presence of a family who has a history of MDR TB/TB resistance, then there are respondents who are disobedient or irregular in taking medication according to the doctor's instructions for 6 - 24 months, recurrence, failure in category 1 treatment, dropping out of treatment (loss of follow up) and have been treated but the results are unknown (los follow up). Respondents stated in their interviews that undergoing treatment was unpleasant, respondents did not have the motivation to recover, the length of treatment and this knowledge is the most important group regarding information about R-TB disease which requires taking medication regularly so that it can prevent death. (Haryati et al., 2022) .

Bivariate discussion of family support

The research results that have been tested for Spearman's rho show a p-value = $0.001 < 0.05$ with a correlation value of 0.659, indicating that there is a strong relationship between family support and the regularity of drinking long-term OAT. One of the factors that influences the determination of the treatment program a patient receives is the family (Pitters, Kandou, and Nelwan, 2019). The success of treatment is supported by the existence of a family's socio-economic relationship so that there is compliance in treatment. This is shown by the p value of 0.0349 or <0.05 , which means that there is a significant relationship to the success of treatment with family support, namely psycho-socio-economic (Bhatt et al., 2019) . The role of the family and compliance of MDR TB patients in treatment (Ainiyah et al., 2019) . The role referred to in this research is family support for MDR TB patients in treatment in the form of informational, assessment, emotional and instrumental family support. This could be related to family support in compliance with the treatment of pulmonary TB patients with the prevention of MDR TB in outpatients. Research from Wahidahwati (2020), the results of the Spearman's rho test obtained a p-value of 0.000 or <0.05 with a value of $r = 0.962$, which means that there is a very strong influence between family support in the treatment of pulmonary TB patients on preventing more MDR TB (Andani & Savitri, 2022) .

This research is in contrast to the research of Sofiana et al. (2022) stated that there was no relationship between family support and compliance with taking tuberculosis medication. The presence or absence of family support and treatment compliance in tuberculosis patients is because family support is not a strong reason for respondents to fully comply or not comply with the implementation. Patient compliance could be influenced by other factors. One of these factors is that patients accidentally delay taking medication so that they end up forgetting. This can be seen from the aspect of punctuality or regularity in taking medication. The results of this study were that there were still patients who answered that they forgot to take medication. This is supported by the age factor, because age is a determining factor in patient non-compliance with treatment. In old age, a person's adherence to taking medication is higher because he is busier with work and can seek treatment regularly (Sebayar, 2020) .

Researchers concluded that 13% of respondents who had a lack of family support were respondents

who always sought treatment independently without family support , did not have a family, lived alone in urban areas, their families did not accept the respondent's illness, respondents who lived overseas alone, and their families who did not provide system support to the respondent, and the respondent was self-motivated to recover in treatment without support and assistance from the family.

CONCLUSION

The results of the research that has been carried out can be concluded that the majority are in the 45-55 year old category, male, have a tertiary education, and are unemployed. Knowledge level is good and support family is good . There is connection level knowledge and support family to regularity taking OAT in R-TB patients .

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