

# Treatment Compliance TB Patients with The Event of MDR TB In MDR TB Polyclinic RSUD Dr. M. Yunus Bengkulu

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**Abstract**— The decline in the number of cases of disease incidence and prevalence of pulmonary TB become one of the MDGs must be jointly fought until 2025. Positive TB patients can be cured if patients take medication as recommended or routinely follow the advice of treatment for two months regularly to prevent transmission actively, and this is called compliance. The goal of treatment is to ensure healing and prevent the occurrence of resistant primer that can harm patients and may complicate healing, for the use of DOTS, which means that short-term treatment of tuberculosis with strict supervision by health workers or family of the patient. One major cause of treatment failure is due to disordered patients taking the drug; success taking the medication depends on the Supervisory Swallowing Drugs (PMO). Another obstacle in the lack of awareness of patients taking the drug one of them is still low education level; this has resulted in a lack of understanding about the treatment of patients so the motivation to recover or treatment will be reduced. This research was conducted in order to determine treatment compliance TB patients with the event of TB MDR in TB MDR Polyclinic Dr. M. Yunus Bengkulu, especially increasing the desire and patient adherence to remain in treatment that is not broken. This study uses a qualitative method to the design used the intrinsic case study, data collection is done through search multiple sources and performs the first observations with interviews directly on the family and MDR-TB patients as many as ten key informants. The data analysis is done by creating a transcript of the interview; this is done to understand the complexity of the cases studied. The next procedure is that the interpretive stage is to create a report based on the results research meaning or learning an unusual situation. The results of the analysis are documented with supporting a social theory or related to research topics include the results of previous studies to illustrate the problem as a whole. The results showed that the influence of motivation in patients who undergo treatment of MDR TB devastating for patients, for treatment of MDR-TB is not accessible without the motivation and support of the family. Many people say that the family is their primary motivation to recover from illness. Additionally, in this study, it was found that the PMO for patients with MDR-TB is critical because without PMO most people would be negligent in performing the treatment process. The patient will not be able to undergo treatment due to side effects that make them feel uncomfortable, and treatment is done every day without a break. Many people say that the family is their primary motivation to recover from illness. Additionally, in this study, it was found that the PMO for patients with MDR-TB is critical because without PMO most people would be negligent in performing the treatment process. The patient will not be able to undergo treatment due to side effects that make them feel uncomfortable, and treatment is done every day without a break. Many people say that the

family is their primary motivation to recover from illness. Additionally, in this study, it was found that the PMO for patients with MDR TB is essential because without PMO most people would be negligent in performing the treatment process.

**Keywords**-- Motivation, Compliance, TB MDR, PM

## I. INTRODUCTION

Health development by Healthy Indonesia that aims to increase awareness, willingness, and the ability of a healthy life for everyone in order to realize the degree of the highest possible public health. It is in line with one of the global commitment Minelium Development Goals (MDGs) which the health sector has a significant role among others in reducing mortality and infectious diseases and in order eradicate / poverty. (MOH, 2010)

Tuberculosis (pulmonary TB) is a chronic infectious disease caused by Mycobacterium tuberculosis, a type of acid resistant rod-shaped bacteria (AFB) most components of Mycobacterium tuberculosis is a form of fat that germs capable resistant to acids and highly resistant to chemicals. (Gina, 2007) TB disease can affect anyone (old, young, male, female, weak, or rich) and anywhere. (Heru, 2008)

Based on hospital data Sulianti Suroso (2012) there were 583,000 cases of which caused the death of 140,000 people died because of pulmonary TB if calculated then every day 385 people die of TB.Paru in Indonesia. If one patient can infect ten people then the next year the number of people who are infected will be 5.8 million people; therefore it is clear that the mass murderer TB. Paru is dangerous and must be eradicated.

The incidence of smear-positive pulmonary TB cases in 2014 as many as 242 people, the cure rate of 96.90%, while in 2015 as many as 266 people, the cure rate of 97.74, an increase in the discovery of smear-positive pulmonary TB sufferers this is due to the result of the expansion of the DOTS (Directly Observed Treatment, Short-course Chemotherapy) development strategy of combating TB by WHO. The focus of DOTS is the discovery and cure of TB patients are accelerated with the support of international donors, which increased from KNCV (Koninklijke Nederlandse Centrale Vereniging tot Bestrijding Der Foundation) Tuberculosis (Royal Netherlands Tuberculosis Association) and the partners of the Stop TB WHO (Bengkulu Provincial Health Office 2015).

One major cause of treatment failure is due to disordered patients taking the drug; the success of taking the medication depends on a treatment (PMO). Another obstacle in the lack of awareness of patients taking the medication one of which is the level of education is still low this will result in a lack of understanding of the patient about treatment so the motivation to recover or treatment will be reduced. (MOH, RI, 2007)

Selection PMO adapted to local conditions; the PMO could come from family members due to its proximity to the patient. Each of pulmonary tuberculosis patients should be designated a PMO that has previously been given counseling before, although the PMO can help patients get the drug another important thing is still increases and oversee the patient to swallow the drug that can be implemented to take medication regularly. (Aditma, 2010). This study aims to determine the extent of the role of companion Drink Drugs with pulmonary TB patient compliance with the MDR (Multi-Drug Resistant) in RSUD Dr. M. Yunus Bengkulu.

**II. METHODS**

This study uses a qualitative method to the design used the intrinsic case study. Researchers focused on the issues of the case to be examined as a case unique or unusual happening elsewhere. Characteristics of a qualitative approach to the design of the case studies are to develop in-depth description and analysis of a case by analyzing an event, program, activity of more than one individual (Creswell, 2007).

The experiment was conducted in Bengkulu city RS.M.Yunus begins with data collection on the location of MDR TB and MDR-TB patients arrival schedule as well as the readiness of respondents in implementing Interview.

Data collection was conducted through a search of several sources of information such as observation, interview, and documentation study — research using interviews to obtain user information and informants. The sample used in qualitative research and develop small quantities at the time of the study.

The observation was first performed at RSUD Dr. M.Yunus Bengkulu city on Monday and Thursday. A fact the field found that many patients with MDR TB. Then conducted in-depth interviews with the patient and family about MDR-TB, not just one person being interviewed, but some people questioned in depth about MDR TB. During the interviews the interviewer record a conversation via a tool in today's mobile phone android equipped recorder facility. The key informants of this study are patients with MDR TB. Some key informants are ten people. The characteristic feature of key informants can be seen in the table below.

Table 1. Characteristics Overview Informants

No.	Name	Age (Years)	Status
1.	informant 1	21	Single / patient
2.	Informant 2	27	Married /patient
3.	Informants 3	58	Married / patient
4.	Informants 4	40	Married / parents
5.	Informants 5	35	Married / wife

6.	Informants 6	22	Single / child
7.	Informants 7	38	Nurse
8.	Informant 8	37	Nurse
9.	Informant 9	42	Nurse
10.	Informant 10	57	Head Chairman TB MDR Polyclinic

Besides, researchers also look for information through the study of literature by reading referential, peer-reviewed national and international journals related to the research topic. Data analysis was made by transcribing the results of an in-depth interview to the informant research, then analyzing the theme of this is done to understand the complexity of the cases studied. Theme analysis carried out after the complete picture as outlined in the transcripts of in-depth interviews to informant research; the next procedure is the stage interpretive meaning that research reports based on research or teaching unusual situations.

Analysis of qualitative research data originated under the previous data collection procedures performed at or during the research process and after the study has been completed. The results of the analysis are documented with supporting a social theory or related to the topic of research including the results of previous studies to give the full picture problem problems being faced.

**III. RESULTS**

The study was conducted at the hospital. M.Yunus Bengkulu city in TB MDR Polyclinic. That polyclinic was back slightly isolated with another room; this is because minimizing contact with other patients.

Health workers MDR-TB patients also have stringent safety, an officer using a mask three layers and use its coat when meeting with patients, as well as using handscn 2 layers before contact with the patient.

In the treatment of the patient taking as many as 14 types of drugs taken every day for two years and it should not be broken, in addition to the consumption of drugs can not be done at home. The consumption of drugs can only be done in Poli MDR-TB every day in addition to taking the drug 14 types of the patient also get treatment and get information of injection to keep the spirit in carrying out the treatment.

**The informant stated that** the cause of TB disease suffered “..I do not smoke, I get TB disease seems hereditary because my father died of the same illness. My sister also died of the same disease. So I treated the way to let my children do not participate sick...”

*Another informant revealed the following* “..I feel this pain since five years ago, I used to be a heavy smoker of approximately 12 years. Initially, I was coughing, I went to dr.E, but he says it is okay, it is just as DM, I am ordinary until five years later my family was taken to the hospital in Lampung, and my verdict exposed to TB. ”

Based on the information patients get pulmonary TB disease due to frequent contact with oaring previously had TB and other patients getting TB disease states due to the effects of tobacco consumption in the long term

**When asked who accompany taking medicine and how the role of escort to take medication. The informant stated**

".. Anytime I take medicine in health centers (puskesmas) that always reminds me to take medicine that is just my wife, but since I take medicine at the hospital, in addition to parents and wife, some nurses continuously remind me to take medicine .."

*Another informant says*

".. If I came in late, I am always on the phone by a nurse here, it is different with my time nurse at the clinic, in addition to nurses who reminds me to take medicine that is my wife and my mother .."

*Nurses say*

"Our nurse here .. will always call our patients do not forget to take medication. If late will wait every day, we are here, besides, to open our morning nurse on call if anyone comes late afternoon or evening, except that sometimes there checking the status of MDR TB at night in new patients or drop out. If the patient can not come due to illness or indeed cannot come, then we will come to the patient's home because of drug use patients 14 types for two years should not be broken. The use of injection drugs also should not be broken for eight months; this is a commitment we are here to help the patient; it also will help so as not to extend our work. "

Based on the information indicates that the role of assistance taking medicine in the process of drug use pulmonary tuberculosis, especially patients who have been in the state had TB MDR. It is seen that the role of family members wives and mothers are supporters who will always strengthen the patient for treatment of MDR-TB as well as the role of nurses to always support and remembering patients in MDR TB drug consumption for two years.

#### IV. DISCUSSION

Effect of Motivation in MDR TB treatment Motivation is the impulse that arises in a person consciously, to act specific provisions. (Ibrahim, 1999). Motivation is a mover force in achieving goals. With the human motivations will sooner or mean - really in conducting (Purwanto, 1998).

Motivation is also an encouragement for someone to behave/activities in achieving objectives. (Widiyatun, 1999). Pusher human motivation to do so as a driver or motorcycle which releases energy. Motivation is the motor itself; every job will be done.

Effect of Motivation in patients who undergo treatment of MDR-TB is very influential for patients because treatment of MDR-TB is not an easy thing without the motivation and support of the families of the patients. It will not be able to undergo treatment because side effects were not comforting and treatment of each day, many people say that the family is their primary motivation to recover from illness.

The results are consistent with the results of research conducted by Susanti (2008) found that there is a correlation between knowledge, attitude, and motivation for treatment of patients with regularity TB. Paru in Puskesmas Purbaratu Tasikmalaya with 0.05 degrees of confidence

In addition to the motivation of intrinsic in this extrinsic study motivation also influence the treatment of MDR-TB one of which is with the attitude of nurses to patients undergoing TB treatment MDR attitude shown nurses is a caring attitude towards patients withstands ready to assist the patient in the treatment process.

The influence of the PMO in the treatment of MDR TB PMO is a person whose job is to supervise, provide encouragement and ensure TB patients in order to swallow Anti-tuberculosis (OAT) regularly until complete., The terms companion to medication is someone known, trusted and approved by both health workers and patient, someone who lives close to the patient (or neighbors), willing to help people voluntarily willing trained or given counseling together - together with the patient.

In this study, the PMO for patients with MDR-TB is critical because without PMO mostly suffering would be negligent in performing the treatment process because in this study obtained information. The PMO for patients with MDR-TB is very concerned in the process of recovery of patients as they always monitor the conditions and treatment schedule patients not only monitor but workers also provide counseling and motivation to patients not to get discouraged. However, there are also some PMO was not so concerned with Keadaa patient so commonly found in patients with MDR TB disease that is caused carelessly in undergoing the treatment process.

One major cause of treatment failure is due to disordered patients taking the drug, the success of taking the medication depends on a treatment (PMO), another obstacle in the lack of awareness of patients taking the medication one of which is the level of education is still low this will result in a lack of understanding of the patient about treatment so the motivation to recover or treatment will be reduced. (MOH, RI, 2007).

Selection PMO adapted to local conditions; the PMO could come from family members due to its proximity to the patient. Each of pulmonary tuberculosis patients should be designated a PMO that has previously been given counseling before, although the PMO can help patients get the drug another important thing is still to increase and oversee the patient to swallow the drug that can be implemented to take medication regularly. (Aditma, 2010).

Patients who are undergoing treatment as MDR-TB surely regret it, if you knew this had to undergo such treatment. Why not, because it must be injected daily for 6 (six) months, besides taking medication many kinds of drugs before the officer immediately, every day for almost two (2) years, exactly 18 months after sputum conversion. Experience in hospital Friendship as DOTS-plus pilot project to treat MDR-TB is not comfortable to show how MDR-TB patients under treatment. Every day they have to come to take medication before officers immediately, for approximately 24 months. Nevertheless not guaranteed to recover 100%.

#### V. CONCLUSION

Based on the results of this study concluded that:

1. The motivation of family and the desire to recover a strong intrinsic motivation for the healing process of MDR TB

2. Extrinsic motivation supporting the healing process is a nurse or health worker.
3. Drinking companion drug will always support the patient to recover, and consistent medication is the wife's mother and a nurse who always remembering patients to take medication.

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