

## **RELATIONSHIP FAMILY SUPPORT WITH ADHERENCE TAKING MEDICINE PATIENTS HEART FAILURE RE-TREAT HOSPITALITY**

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### **ABSTRACT:**

**Objective:** To find out the relationship between family support and medication adherence for heart failure patients re-treatment in Kemuning Room, RSUD Jombang

**Methodology:** The study design was correlation analytic with a cross-sectional approach. The population in this study was 120 people. The sample size was 107 respondents. Consecutive sampling technique. The independent variable is family support using a questionnaire and the dependent variable is medication adherence for heart failure patients undergoing re-treatment, MMAS-8 scale. Furthermore, the analysis test uses the Spearman rank statistical test with  $\alpha = 0.05$

**The main findings:** the majority (58.1%) respondents supported good families totaling 62 people, the majority (51.6%) respondents taking medication for heart failure patients undergoing re-treatment were high adherents totaling 55 people. The results of the Spearman rank test found  $0,000 < 0.005$ . The conclusion in this study the relationship of family support with adherence to taking medication for heart failure patients who undergo re-treatment in Kemuning Room Jombang Regional Hospital.

**Application of research:** The results of this study can be applied in the treatment of

heart failure patients by involving family support.

**Novelty:** Family support is not only needed for patients with scheduled or conceptual therapy, but it is also important for patients with a high risk of recurrence until death.

**KEYWORDS:** Family support, medication adherence, heart failure

### **PRELIMINARY:**

Congestive heart failure, also called heart failure, is when the heart cannot pump enough blood to the organs. The heart works, but not as it should. Heart failure is almost always a chronic, long-term condition. As you get older, the more common congestive heart failure becomes an increased risk if you are overweight, have diabetes, smoke, and abuse alcohol or use cocaine. If the liver begins to fail, fluid can gather in the body manifesting as swelling (edema), usually in the lower legs and ankles. Fluid can also collect in the lungs causing shortness of breath (AHA, 2014).

Cardiovascular disease is the leading global cause of death, accounting for 17.3 million deaths per year, a figure that is expected to grow to more than 23.6 million by 2030. Heart disease is the number one cause of death in the United States, killing more than 375,000 per year. About 735,000 people in the United States experience a heart attack every year and around 120,000 dies. About 635,000 people in the US have their first heart attack

each year and around 300,000 have a heart attack (AHA, 2014). In Indonesia, heart failure ranks eighth out of ten chronic diseases that often arise in Indonesia (Riskesdas, 2014). Congestive heart failure is a progressive disease with symptoms that greatly affect the vital condition of heart failure patients (Andriyanto, 2014). Based on data from the medical records of Kemombang Hospital, Jombang Public Hospital, it was known that from January to September 2016 the number of heart failure patients was 302, in 2015 there were 322 heart failure patients, in 2014 there were 352 heart failure patients. Based on a preliminary study in the Kemuning Room of Jombang Regional Hospital on November 15, 2016, it was found that out of 10 respondents who were compliant to take medication only 3 (30%) patients had heart failure and were not compliant to take medication only 7 (70%) patients had heart failure.

Non-adherence of patients in taking drugs is common in patients with heart failure nearly one in four patients do not complete drug therapy given before seven days after the patient is treated (Jackevicius, 2010). Non-adherence with heart failure treatment has been associated with an increased risk of morbidity and death, for example, non-adherence with taking diuretics in the same year after being treated with heart failure can increase the risk of death by 12% -25%.

According to Sacket in Niven (2009) adherence is the extent to which patient behavior is in accordance with the provisions given by health professionals. Adherence is a positive attitude of an individual which is indicated by a meaningful change in accordance with the objectives set. Disobedience is a condition for individuals or groups who actually want to do it but can be prevented from doing so by factors that obstruct adherence to recommendations. Some variables that influence the level of adherence

are Demographic factors such as age, sex, socioeconomic status and education, disease factors such as disease severity and symptom loss due to therapy, service program factors such as program complexity and unpleasant side effects, psychosocial factors such as intelligence or the level of knowledge, attitudes towards health workers, acceptance, or denial of illness, religious or cultural beliefs and financial and other costs.

The low awareness of the family to have a heart check or adherence to take heart medication regularly and to have an unhealthy diet and lack of exercise is a trigger for an increase in heart disease cases (Hamid, 2013). The family is the main support system for heart patients in maintaining their health, the family plays an important role in care and prevention (Ridwan, 2010). Family support is a form of service behavior performed by the family, both in the form of emotional support (attention and affection), appreciation support (appreciating and giving positive feedback), information support (advice, advice, information) and support in the form of instrumental (assistance labor, money and time) (According to Bomar, 2010). Social support can be given to family members in caring for and improving their health status by providing comfort, attention, appreciation, and assistance or providing services with an attitude to accept the conditions (Tumenggung, 2013).

## RESEARCH METHODS:

The study design was correlational analytic with a cross-sectional method. The population in this study All post MRS heart failure patients averaged per month in the Kemuning Room of Jombang Regional Hospital as many as 120 people. The sample in this study was a part of post MRS heart failure patients in Kemuning Room Jombang Regional Hospital as many as 107 people. In the study, researchers used consecutive sampling. The

variables in this study are independent variables, namely family support and dependent adherence to taking medication for heart failure patients. Test analysis using the Spearman rank statistical test with  $\alpha = 0.05$

## LITERATURE REVIEW:

Family social support is a process of relationship between family and social environment (Setiadi, 2008).

### Family Support Concepts

According to Friedman (1998) in Setiadi (2008), there are four types of family social support, namely:

1. Instrumental support, namely the family is a source of practical and concrete help.
2. Informational support, ie the family functions as a collector and disseminator (disseminator of information).
3. Appraisal support, ie the family acts as feedback, guides and mediates problem-solving and as a source and validator of family identity.
4. Emotional support, namely the family as a safe and peaceful place for rest and recovery and to help control emotions.

According to Purnawan (2010) the factors that influence family support are :

### 1. Internal factors

- a. Stage of development
- b. Education or level of knowledge
- c. Emotional factors
- d. Spiritual

### 2. External factors

- a. Family Practice
- b. Socio-economic factors
- c. Cultural background

### The Concept of Patient Adherence

Patient adherence as the extent of patient behavior with the provisions provided by health professionals (Niven, 2010).

According to Niven (2010), there are 5 factors that support patient adherence, namely:

1. Education
2. Accommodation
3. Modification of environmental and social factors
4. Changes to the therapeutic model
5. Increase the interaction of health professionals with patients.

### Indicators of medication adherence

Patient adherence in taking drugs can be measured using various methods, one method that can be used is to consist of three aspects, namely the frequency of forgetfulness in taking drugs, intentionally stopping taking drugs without being known by the medical team, the ability to control yourself to continue taking drugs (Morisky, 2010).

## DISCUSSION:

Table 1. Frequency distribution of respondents' general data

No	General data	n	%
1	<b>Age</b>		
	20-40 year	31	29.0
	41-59 year	76	71.0
2	<b>Education</b>		
	Elementary school	41	38.7
	Secondary school	62	58.1
	University	4	3.2
3	<b>Sex</b>		
	Male	90	83.9
	Female	17	16.1
	Total	107	100.0

Table 2. Frequency distribution of special data

No	Variable Data	n	%
1	<b>Family Support</b>	<b>Frequency</b>	<b>Percentage (%)</b>
	Less	14	12.9
	Sufficiently	31	29.0
	Good	62	58.1
2	<b>Adherence medicine Taking</b>	<b>Frekuensi</b>	<b>Percentage (%)</b>
	Low	14	12.9
	Intermediate	38	35.5
	High	55	51.6
	Total	107	100.0

### **Family support for heart failure patients undergoing re-treatment**

Table 2 shows that the majority (58.1%) of respondents supported good families totaling 62 people, adequate family support totaling 31 people (29%) and lacking family support totaling 14 people (12.9%).

Family support is the attitude, actions and family acceptance of a sick or healthy family. Family members see that people who are supportive are always ready to provide help and assistance if needed. According to Friedman (1998) in Ahmadi (2009).

Family support is important for someone. In this study, family support was largely high. This is what makes heart failure patients taking medication undergoing re-treatment.

The results of the tabulation of the data contained in the appendix tabulation of each parameter which includes informational support, assessment support, and awards, instrumental support, emotional support shows that the average per parameter is informational support (72.25%), assessment support and appreciation (68.75%), instrumental support (70.75%), emotional support (72.25%).

According to Ahmadi (2009) informational support, namely the family functions as a collector and disseminator (disseminator) of information about the world. Explaining suggestions, suggestions, information that can be used reveals a problem. The form of support provided by the family is encouragement, giving advice or overseeing daily diet or medication. Family support is also an individual feeling that gets attention, liked, valued and included in the community. The benefit of this support is that it can suppress the emergence of a stressor because the information provided can contribute to specific suggestions for actions on individuals. Aspects of this support are

advice, suggestions, suggestions, instructions and information.

The patient's family will provide correct information about the benefits of adherence to taking medication for heart failure so that there is no recurrence or even death due to heart failure.

According to Ahmadi (2009) assessment or appreciation support, namely, the family acts as feedback guidance, guides and mediates problem-solving, as a source and validator of family member identity including providing support, appreciation, attention.

Appraisal or appreciation support because respondents can judge that the family gives high support, especially the family gives appreciation if taking medication for heart failure and the family gives good attention every time I take medication for heart failure.

According to Ahmadi (2009) Instrumental support namely the family is a source of practical and concrete help. Includes direct assistance such as in the form of money, equipment, time, environmental modification or helping with work when experiencing stress.

Instrumental support because respondents can assess that the family provides high support, especially the Family provides time and facilities if I need to take or buy heart failure medication and Family helps with a small fee every time I want to control.

Setiadi (2008) Emotional support, namely husband or family as a safe and peaceful place for rest and recovery and to help control emotions.

Emotional support because respondents can assess that the family provides high support, especially giving confidence that makes motivated to exercise control and family closeness makes me feel cared for so motivated to control.

Based on table 1 shows that the majority of respondents aged 41-59 years were 76 people (71%).

The more age, the maturity level and strength of someone will be more mature in thinking. In terms of the trust of people who are not yet mature trusted by people who have not yet matured (Wawan, 2011).

Heart failure patients who undergo good hospitalization about family support, especially in taking the medication regularly, so patients can take medication because of strong family support and the availability of families to deliver to the hospital during control while undergoing hospitalization.

Based on table 1 shows that almost half the respondents had secondary education totaling 62 people (58.1%). Based on table 5.10 shows that out of 107 respondents secondary education affected good family support a number of 41 respondents (38.7%).

Education means guidance given by someone to someone else for something so they can understand. It is undeniable that the higher a person's education the easier they will receive information and in the end the more knowledge he has. Conversely, if someone's level of education is low, it will hinder the development of one's attitude towards acceptance, information and values that are just introduced. (Mubarok, 2012).

Respondents with secondary education (SMA) can think more mature that respondents feel there is support from their families to take medication for heart failure, due to strong family support and the availability of families to deliver to the hospital while undergoing hospitalization. Patients with high school education get good support from families because patients think positively about the importance of taking heart failure medication.

Adherence to taking medication for heart failure patients undergoing re-treatment able 2 shows that the majority (51.6%) of respondents taking medication for heart failure patients undergoing re-treatment were high obedient as many as 55 people, adherence to

taking medication for heart failure patients undergoing re-treatment were 38 middle adherents (35.5 %) and adherence to taking medication for heart failure patients undergoing re-treatment is low adherence of 14 people (12.9%).

Adherence comes from the basic word obedient, which means discipline and adherence. According to Sacket in Niven (2009) adherence is the extent to which patient behavior is in accordance with the provisions given by health professionals. Adherence is a positive attitude of an individual which is indicated by a meaningful change in accordance with the objectives set. Disadherence is a condition for individuals or groups who actually want to do it but can be prevented from doing so by factors that obstruct adherence to recommendations.

Adherence of someone in taking drugs is influenced by individual patients which include attitudes or motivation of patients in achieving healing and patient confidence in the benefits of the drugs consumed. In addition, family support also affects patient adherence in taking medicine, the family is the part of the closest and inseparable sufferer that will lead to his confidence to deal with and manage his illness better. The form of emotional support from other family members is an important factor in adherence to medical programs. Families can reduce anxiety and can be disobedient in taking medication.

Table 3 Cross-tabulation of the relationship of family support with medication adherence for heart failure patients undergoing re-treatment in Kemuning Room Jombang Regional Hospital

	Medication adherence						Total	
Family Support	low		Moderate		high			
	Σ	%	Σ	%	Σ	%		
Less	14	12.9	0	0	0	0	14	12.9
Sufficiently	0	0	21	19.4	10	9.7	31	29
Good	0	0	17	16.1	45	41.9	62	58.1
Total	14	12.9	38	35,5	55	51.6	107	100
ρ = 0.000   α = 0.05								

Relationship of family support with medication adherence for heart failure patients undergoing re-treatment

Based on table 3 shows that of the 62 respondents of good family support, the majority of adherence to take medication for heart failure patients undergoing re-treatment were 45 respondents (41.9%).

From the Spearman rank, statistical test results obtained a significant number or probability value (0.000) significantly lower than the significant standard of 0.05 or ( $r < \alpha$ ), then  $H_0$  data is rejected and  $H_1$  is accepted which means there is family support with adherence to taking medication for heart failure patients undergoing re-treatment in Kemuning Room Jombang Public Hospital.

The family is the main support system for heart patients in maintaining their health, the family plays an important role in care and prevention (Ridwan, 2010). Family support is a form of service behavior performed by the family, both in the form of emotional support (attention and affection), appreciation support (appreciating and giving positive feedback), information support (advice, advice, information) as well as instrumental support (assistance labor, money and time) (According to Bomar, 2010). Social support can be given to family members in caring for and improving their health status by providing comfort, attention, appreciation, and assistance or providing services with an attitude to accept the conditions (Tumenggung, 2013).

Family support is needed to improve medication adherence in patients with heart failure, this is because respondents who get family support will be more motivated and not lazy to take heart failure medication

#### CONCLUSION:

1. Family support in the Kemuning Room of Jombang Regional Hospital is mostly good.

2. Adherence to taking medication for heart failure patients undergoing re-treatment is high in the Kemuning Room of Jombang Regional Hospital.
3. There is a relationship of family support with adherence to taking medication for heart failure patients undergoing re-treatment in the Kemuning Room of Jombang Regional Hospital.

#### SUGGESTION:

The results of this study are expected to gain knowledge and experience as well as field skills in research specifically related to the level of adherence to taking medication for heart failure patients undergoing re-treatment.

#### RECOGNITION:

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