HUBUNGAN USIA, PARITAS, JARAK KEHAMILAN, RIWAYAT HIPERTENSI DAN OBESITAS PADA IBU DENGAN KEJADIAN PRE-EKLAMSIA BERAT

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Article Info

Article History:
Received 21/08/2026
Revised -
Accepted 02/09/2026

Keywords:
Age
Parity
Pregnancy Interval
History od Hypertension
Obesity
Severe Preeclampsia

ABSTRAK

Hipertensi dalam kehamilan, khususnya preeklampsia berat (PEB), merupakan salah satu penyebab utama mortalitas dan morbiditas maternal. Di RSUD Ade M. Djoen Sintang, angka kejadian PEB mencapai 244 kasus pada tahun 2024, sehingga penanganan dan identifikasi faktor risikonya menjadi sangat krusial. Penelitian ini bertujuan untuk mengidentifikasi serta menganalisis hubungan antara usia ibu, paritas, jarak kehamilan, riwayat hipertensi, dan obesitas dengan kejadian preeklampsia berat di RSUD Ade M. Djoen Sintang tahun 2025. Penelitian kuantitatif ini menggunakan desain case-control dengan pendekatan retrospektif. Populasi penelitian mencakup 228 kasus persalinan tahun 2024, dengan jumlah sampel sebanyak 70 responden (35 kelompok kasus PEB dan 35 kelompok kontrol) yang dipilih menggunakan teknik purposive sampling. Data sekunder diperoleh dari rekam medis pasien dan dianalisis secara univariat serta bivariat menggunakan uji Chi-Square. Distribusi frekuensi menunjukkan mayoritas responden berusia berisiko (<20 atau >35 tahun) sebesar 64,3%, paritas berisiko (>3 anak) sebesar 60,0%, jarak kehamilan berisiko (<2 tahun) sebesar 72,9%, memiliki riwayat hipertensi sebesar 68,6%, dan tidak mengalami obesitas sebesar 85,7%. Hasil uji bivariat mengindikasikan adanya hubungan yang signifikan antara usia (p = 0,012), paritas (p = 0,001), jarak kehamilan (p = 0,030), dan riwayat hipertensi (p = 0,019) dengan kejadian PEB. Sebaliknya, tidak ditemukan hubungan yang signifikan antara obesitas dengan kejadian PEB (p = 0,734). Usia, paritas, jarak kehamilan, dan riwayat hipertensi terbukti secara signifikan berhubungan dengan kejadian preeklampsia berat, sedangkan obesitas tidak menunjukkan hubungan signifikan. Peniadaan risiko melalui edukasi perencanaan kehamilan, deteksi dini saat pemeriksaan antenatal, serta manajemen riwayat kesehatan reproduksi sangat direkomendasikan untuk menekan angka kejadian PEB.

ABSTRACT

Hypertension during pregnancy, particularly severe preeclampsia (SPE), represents one of the leading causes of maternal mortality and morbidity. At Ade M. Djoen Regional Hospital, Sintang, the incidence of SPE reached 244 cases in 2024, making effective management and identification of its risk factors highly crucial. This study aimed to identify and analyze the relationship between maternal age, parity, pregnancy interval, history of hypertension, and obesity with the incidence of severe preeclampsia at Ade M. Djoen Regional Hospital, Sintang in 2025. This quantitative study utilized a case-control design with a retrospective approach. The study population comprised 228 delivery cases in 2024, with a

sample size of 70 respondents (35 in the SPE case group and 35 in the control group) selected using a purposive sampling technique. Secondary data were extracted from patient medical records and analyzed univariately and bivariately using the Chi-Square test. Results: Frequency distribution revealed that the majority of respondents were at high-risk maternal age (<20 or >35 years) at 64.3%, had high-risk parity (>3 children) at 60.0%, had a high-risk pregnancy interval (<2 years) at 72.9%, had a history of hypertension at 68.6%, and were non-obese at 85.7%. Bivariate analysis indicated a significant relationship between age (p = 0.012), parity (p = 0,001), pregnancy interval (p = 0.030), and history of hypertension (p = 0.019) with the incidence of SPE. Conversely, no significant relationship was found between obesity and the incidence of SPE (p = 0.734). Age, parity, pregnancy interval, and history of hypertension were significantly associated with the incidence of severe preeclampsia, whereas obesity demonstrated no significant association. Risk mitigation through pregnancy planning education, early detection during antenatal care, and proper management of reproductive health history are strongly recommended to reduce the incidence of SPE.

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