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## The Relationship Between Diet and Symptoms of Gastritis Disease at the HKBP Balige Nursing Academy

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### Abstrak

*Diet is a habit of respondents eating daily and assessed how respondents eat breakfast, lunch and dinner and how respondents consume additional food every day. gastritis is an inflammatory process in the mucosal and submucosal layers of the stomach, which develops when the protective mechanism of the mucosa is filled with bacteria or other irritants. This study used an analytic research design with the aim of knowing the relationship between diet and symptoms of gastritis disease at Akper HKBP Balige. The results showed that out of 35 (61.4%) respondents with an irregular diet with gastritis symptoms there were as many as 9 (15.8%) respondents and no gastritis symptoms 26 (45.6%) respondents. Whereas from 22 (38.6%) respondents with a regular diet with gastritis symptoms there were 16 (28.1%) respondents and no gastritis symptoms 6 (10.5%) respondents. After performing the Chi Square statistical test with a confidence level of 0.001 or  $\alpha$ : 0.05, the p-value = 0.001. There is a relationship between diet and gastritis symptoms at Akper HKBP Balige.*

**Keywords :** Diet, Gastritis

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## INTRODUCTION

The age when starting lectures is the right time to be fully active. The weight of the obligation to study and move, making students prefer everything that is fast and practical so that they forget the importance of health, such as consuming fast food whose nutritional content is not complete and even contains more fat (Depkes RI, 2010).

According to (Saadah, 2018), gastritis complaints are often suffered by the community and are a condition that often occurs in everyday life. Gastritis can be caused by a person's diet in choosing food and consuming it as a reaction to physiological, psychological, cultural and social influences "

The risk of diseases arising from an incorrect or unhealthy diet has recently tended to increase, especially at the age of forty. Diseases caused by the wrong diet include diabetes mellitus, hypercholesterolemia, cancer, coronary artery disease, cirrhosis, osteoporosis, and several cardiovascular diseases. It has even been reported that premature death from these diseases is over 50% due to poor diet.

Some students experience various diseases caused by the wrong diet, including digestive tract disorders, such as ulcers (gastric pain).

According to (Schubert et al., 1992) Risk factors for gastritis are irregular diet, using aspirin or non-steroidal anti-inflammatory drugs, infection with helicobacter pylori germs, having a habit of consuming alcoholic beverages, having a smoking habit, often experiencing stress. Poor eating habits and consuming food that is not hygiene are risk factors for gastritis.

According to Karwati (2012) certain foods can cause gastritis, such as raw fruit, curry, spicy foods, acids and foods that contain a lot of cream or butter. Not that these foods cannot be digested, but because the stomach takes longer to digest the food and is slow to pass it to the rest of the intestine. As a result, stomach contents and acid stay in the stomach for a long time before being passed into the duodenum and the acid released causes heartburn and can be irritating.

In Asian countries, Indonesia ranks third after India and Thailand, totaling 123 thousand people with gastritis. The biggest sufferer of gastritis in Indonesia is Jakarta, which is 25 thousand people. The

trigger of gastritis in Jakarta is influenced by the dense population and hardworking profession, resulting in irregular eating and many suffer from gastritis (Ministry of Health, 2010).

## RESEARCH METHODS

This study is type of *Survey analitik that is* research that explain the relationship variables through hypothesis testing by using crosssectional design where the research is observing measuring at a certain time.

The instrument used in the form of a questionnaire consisting of respondent identity and questions for diet and gastritis disease with a sample of 57 people.  
 Data analysis techniques with univariate and bivariate

## RESULTS AND DISCUSSION

### Univariate Analysis

Based on the results obtained, the frequency distribution of respondents can be seen in the following table:

#### 1. Gender

**Table 1 Frequency and percentage distribution by gender**

No	Gender	Frekuensi	Presentase (%)
1	Male	26	45,6
2	Female	31	54,4
	<i>Total</i>	57	100

Based on the table above, it was found that the majority of female gender was 31 (54.4%) respondents while the minority of male gender was 26 (45.6%) respondents.

#### 2. Age

**Tabel 2 Frequency and Percentage Distribution Based on Age**

No	Age	Frekuensi	Presentase (%)
1	21	3	5,3
2	22	31	54,4
3	23	20	35,1
4	24	3	5,3
	<i>Total</i>	57	100

Based on the results of the table above, it was found that 21 years of age were 3 people (5.3%) respondents, 22 years of age were 31 people (54.4%) respondents, 23 years of age were 20 people (35.1%) respondents, while 24 years of age were 3 people (5.3%) respondents.

#### 3. Dietary Patterns

**Table 3 Frequency and Percentage Distribution Based on Diet**

No	Dietary Patterns	Frekuensi	Presentase (%)
1	Reguler	22	38,6
2	Non reguler	35	61,4
	<i>Total</i>	57	100

Based on the results of the table above, the majority of irregular eating patterns were 35 (61.4%) respondents and the minority of regular eating patterns were 22 (38.6%) respondents.

#### 4. Sympoms Gastritis

**Tabel 4. Frequency and Percentage Distribution Based on Gastritis Symptoms**

No	Symptoms Gastritis	Frekuensi	Presentase (%)
1	available	25	43,9
2	Not available	32	56,1
<i>Total</i>		57	100,0

Based on the table above, the majority of gastritis symptoms were absent as many as 32 (56.1%) respondents and the minority of gastritis symptoms were 25 (43.9%) respondents.

#### Analisa Bivariat

**Tabel 5. Tabulasi Silang Antara Pola Makan Dengan Gejala Penyakit Gastritis**

Pola Makan	Gejala Gastritis				Jumlah		Prob
	Ada		Tidak Ada		F	%	
	F	%	F	%			
Teratur	16	28,1	6	10,5	22	38,6	0,001
Tidak Teratur	9	15,8	26	45,6	35	61,4	
Total	25	43,9	32	56,1	57	100	

Based on the results of the table above, it shows that out of 35 (61.4%) respondents with an irregular diet with gastritis symptoms there were 9 (15.8%) respondents and there were no gastritis symptoms 26 (45.6%) respondents. Whereas from 22 (38.6%) respondents with a regular diet with gastritis symptoms there were 16 (28.1%) respondents and no gastritis symptoms 6 (10.5%) respondents. Based on the Chi Square test results with a confidence level of 0.001 or  $\alpha$ : 0.05, the p-value = 0.001. The calculation results show that there is a relationship between diet and symptoms of gastritis in Akper HKBP Balige.

#### Discussion

Students' diet is influenced by unhealthy lifestyles such as consuming foods that can stimulate an increase in stomach acid such as pickles, vinegar, chili sauce, as well as smoking and drinking alcohol. Age is also one of the risk factors for gastritis, especially in adolescence where adolescence is a transitional period from being very dependent on parents to a period full of responsibility and the need to be independent in adolescence (Shalahuddin, 2018). The results of research by Kusumajaya, et al (2011) explain that adolescents' perceptions of body image can determine their diet and nutritional status. There is a significant positive relationship between perceived body image and eating frequency, where the more negative the perception of body image (considering oneself fat), the more likely it is to reduce the frequency of eating.

1. Based on the results of the study, the majority of irregular eating patterns were 35 (61.4%) respondents and the minority of regular eating patterns were 22 (38.6%) respondents. According to research (Kuniyo, 2015), diet based on the amount of food consumed daily by gastritis sufferers is in the less category, most gastritis sufferers in each meal so that gastritis sufferers are in the less good category. Diet based on the type of food respondents in the category enough (57%), where consuming foods that contain protein, such as tofu, tempeh, fish. Where protein is able to neutralize stomach acid.

Diet based on the frequency of eating a person cannot directly cause gastritis, but depends on other factors, such as the quality and quantity of food consumed by respondents, Helicobacter pylori infection, and stress (Ernawati et al., 2021).

2. Relationship Between Diet and Symptoms of Gastritis Disease

Diet is a description of the type, amount, and composition of food eaten every day by one person which is characteristic of a particular community group (Harna, 2009). Diet is a way or effort in regulating the amount and type of food with certain intentions such as maintaining health, nutritional status, preventing or helping cure disease (Depkes RI, 2009).

Gastritis is a digestive tract health problem that often occurs in adolescence to old age (Uwa et al., 2019). Gastritis is an inflammatory process in the mucosal and submucosal layers of the stomach, which develops when the protective mechanism of the mucosa is filled with bacteria or other irritants (Barkah et al., 2021).

The results showed that (61.4%) of respondents with an irregular diet with gastritis symptoms were (15.8%) respondents and there were no gastritis symptoms (45.6%) respondents. While from (38.6%) respondents with a control group diet 44% experienced an unhealthy diet and 56% with a healthy diet (Y.f diliyana, 2020).

In this study, someone who has gastritis is a person who has an unhealthy diet, where eating is often late, consuming spicy, sour, ready-to-eat foods. Diet has 3 characteristic components, namely frequency of eating, type of food and portion of food where the frequency of eating is said to be good if the frequency of eating every day is 3 main meals or 2 main meals with 1 snack (Y.f diliyana, 2020).

3. Based on the results of the Chi Square test with a confidence level of 0.001 or  $\alpha$ : 0.05, the p-value = 0.001. The calculation results show that there is a relationship between diet and symptoms of gastritis.

The results of this study are in line with the results of research conducted by, (Eridha Nonita Sebayang, 2011) There is a Relationship Between Diet With Symptoms of Gastritis Disease.

## CONCLUSION

Hypnosis can be used as a major anesthetic, especially in specific cases such as multiple chemical sensitive patients, or in conditions where anesthetic medicine is not available, looking at the development of current chemical anesthetic drugs, hypnosis can also be used with chemical anesthetics, hypnosis can also be used in periooperative to reduce anxiety before surgery and reduce pain after surgery.

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