

Pola Pemberian ASI dan Diare pada Anak Usia 6–24 Bulan

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Abstrak

Diare merupakan salah satu penyebab utama kematian anak secara global. Air susu ibu (ASI) diketahui dapat mencegah diare pada anak sehingga *World Health Organization* merekomendasikan pemberian ASI eksklusif untuk seluruh bayi. Namun, cakupan ASI eksklusif di Indonesia masih rendah sehingga risiko diare pada anak masih tinggi. Penelitian ini bertujuan menilai hubungan pola pemberian ASI dan diare pada anak usia 6–24 bulan. Penelitian observasional dengan studi potong lintang ini dilakukan tanggal 20 Januari–31 Januari 2017. pada 160 ibu dengan anak usia 6–24 bulan yang mendapat ASI yang datang ke posyandu di Puskesmas Talang Ubi, Kabupaten Penukal Abab Lematang Ilir. yang buka selama penelitian dilakukan, lahir tunggal, aterm, berat badan lahir ≥ 2.500 gram, gizi baik, tidak menderita kelainan kongenital. Data dikumpulkan menggunakan kuesioner untuk mengetahui pola pemberian ASI dan MP ASI serta prevalensi, periode, dan lama diare dalam tiga bulan terakhir. Data dianalisis dengan uji kai-kuadrat, Fisher eksak, Mann-Whitney U, Kruskal-Wallis, ANOVA, serta uji normalitas Kolmogorov Smirnov. Penelitian ini mendapatkan hubungan waktu inisiasi pemberian ASI, ASI eksklusif, lama pemberian ASI, serta frekuensi dan lamanya menyusui dengan prevalensi dan lama diare ($p < 0,05$), tetapi tidak mendapatkan hubungan waktu inisiasi pemberian ASI, pemberian ASI eksklusif, lama pemberian ASI, frekuensi pemberian ASI, dan lama menyusui dengan frekuensi diare ($p > 0,05$). Dapat disimpulkan bahwa pola pemberian ASI dapat menurunkan prevalensi dan mempersingkat lama diare pada anak usia 6–24 bulan. [MKB. 2017;49(3):165–71]

Kata kunci: ASI, ASI eksklusif, diare, MP ASI

Breastfeeding Pattern and Diarrhea in Children Aged 6–24 Months

Abstract

Diarrhea is one of the leading causes of global childhood mortality. Breast milk was known to have a protective role against childhood diarrhea that the World Health Organization (WHO) recommends exclusive breastfeeding for all infants. However, the coverage of exclusive breastfeeding in Indonesia is still small, leading to a higher risk of childhood diarrhea. The aim of this study was to assess the correlation between breastfeeding pattern, complementary feeding, prevalence, frequency, and diarrhea duration in children aged 6–24 months. This observational cross-sectional study was conducted in the period of 20 January–31 January 2017 on 160 mothers who breastfed their child who was, at the time of the study, 6–24 months old. These were children who visited the Posyandu (Integrated Health Post) of Talang Ubi Public Health Center (Puskesmas Talang Ubi), Penukal Abab Lematang Ilir district at the time of the study, singleton, full term, birth weight $\geq 2,500$ grams, well-nourished, and did not have any congenital abnormalities. Data were obtained through questionnaires that collected information on breastfeeding pattern, complementary feeding, and the prevalence, frequency, and diarrhea duration in the last three months. Data were statistically analyzed using chi-square, Fisher's exact, Mann-Whitney U, Kruskal-Wallis, and ANOVA tests as well as Kolmogorov Smirnov normality test. This study found the correlation between breastfeeding initiation, exclusive breastfeeding, breastfeeding duration, frequency and duration of lactation, with the prevalence and diarrhea duration ($p < 0.05$), but did not find the correlation between breastfeeding initiation, exclusive breastfeeding, breastfeeding duration, frequency and duration of lactation with diarrhea frequency ($p > 0,05$). Therefore, this study concludes that the pattern of breastfeeding reduces the prevalence of diarrhea and shortens diarrhea duration in children aged 6–24 months. [MKB. 2017;49(3):165–71]

Key words: Breastfeeding, complementary feeding, diarrhea, exclusive breastfeeding

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