

## ABSTRAK

Obesitas sentral dapat menyebabkan hipertensi. Hipertensi meningkatkan risiko terserang penyakit kardiovaskular. Indeks obesitas sentral yang digunakan adalah rasio lingkaran pinggang pinggul (RLPP) dan rasio lingkaran pinggang tinggi badan (RLPTB).

Penelitian ini penting untuk melihat korelasi indeks obesitas sentral terhadap tekanan darah (TD) pada mahasiswa yang merupakan biarawan dewasa muda. Penelitian ini observasional analitik dengan rancangan penelitian *cross-sectional*. Populasi penelitian ini seluruh mahasiswa Kampus IV Universitas Sanata Dharma Yogyakarta yang memenuhi kriteria inklusi, yaitu 79 responden, 62 responden tidak merokok, 17 responden merokok. Data RLPP dan RLPTB diperoleh dari pita ukur dan pengukur tinggi badan, data tekanan darah dari tensimeter digital. Data yang didapat dianalisis dengan uji normalitas *Kolmogorov-smirnov* dan *Shapiro Wilk*, lalu dilakukan uji *Spearman* pada taraf kepercayaan 95%.

Kesimpulan penelitian ini ada korelasi berkekuatan sangat lemah tidak bermakna antara RLPP terhadap TDS ( $r = 0,054$  ;  $p = 0,633$  ), korelasi berkekuatan lemah bermakna antara RLPP terhadap TDD ( $r = 0,330$  ;  $p = 0,003$  ), korelasi sangat lemah tidak bermakna antara RLPTB terhadap TDS ( $r = 0,186$  ;  $p = 0,102$  ), korelasi lemah bermakna antara RLPTB terhadap TDD ( $r = 0,387$  ;  $p = 0,000$  ), merokok merupakan salah satu faktor yang dapat meningkatkan TD.

**Kata kunci :** obesitas sentral, tekanan darah, mahasiswa, biarawan

### ABSTRACT

*Central obesity can cause hypertension. Hypertension increases the risk of cardiovascular disease. Waist to Hip Ratio (WHR), Waist To Height Ratio (WtHR) used as central obesity index.*

*This research is important to see correlation between central obesity on blood pressure (BP) in the young adult student with friars background. This research was an observational analytic and cross sectional research. The population were all student of Campus IV Sanata Dharma University which completing the inclusion criteria amount 79 respondents, 62 non-smoker respondent, 17 smoker respondent. WHR and WtHR data were obtained from measuring tapes and height measurements, BP data from digital tensimeter. The obtained data were analyzed using Kolmogorov-smirnov and Shapiro Wilk normality test, then Spearman test was performed at 95% CI.*

*The result of this study is there are very weak correlation between WHR on SBP ( $r = 0,054$  ;  $p = 0,633$  ), weak correlation between WHR on DBP ( $r = 0,330$  ;  $p = 0,003$  ), very week correlation between WtHR on SBP ( $r = 0,186$  ;  $p = 0,102$  ), weak correlation between WtHR on DBP ( $r = 0,387$  ;  $p = 0,000$ ), and smoking is one of the factor that can increase BP*

**Keyword :** *central obesity, blood pressure, student, friars*

