

INTISARI

Pasien Diabetes Melitus (DM) berisiko mengalami komplikasi kardiovaskular (CV), termasuk komplikasi mikrovaskular, dan aterosklerotik. Pada pasien DM tipe 2, pengelompokan faktor risiko CV, sering kali disertai dengan resistensi insulin sehingga menyebabkan peningkatan morbiditas dan mortalitas. Manajemen terapi antihipertensi dapat membantu menurunkan risiko komplikasi pada pasien DM tipe 2. Ketaatan terapi dapat diukur secara objektif maupun subjektif yaitu dengan menggunakan metode MPR dan kuesioner MARS-5 berbahasa Indonesia. Perhitungan risiko *atherosclerotic cardiovascular disease* (ASCVD) dihitung menggunakan kalkulator *Framingham risk score* (FRS BMI). Penelitian ini bertujuan untuk mengetahui hubungan ketaatan terapi antihipertensi dengan terkontrolnya tekanan darah dan risiko ASCVD pada pasien DM tipe 2 komorbid hipertensi di Puskesmas Kabupaten Sleman. Penelitian ini menggunakan metode observasional analitik dengan rancangan *cross sectional*. Pengambilan sampel dilakukan secara *non-probability* dengan teknik *purposive sampling*. Jumlah responden yang memenuhi kriteria inklusi sebanyak 100 responden.

Tidak ada hubungan yang bermakna antara tingkat ketaatan terapi antihipertensi terhadap terkontrolnya tekanan darah pada pasien DM tipe 2 dengan komorbid hipertensi di Puskesmas Kabupaten Sleman, baik secara perhitungan MPR (OR=0,52; 95%CI=0,177-1,473; *p-value*=0,209) maupun MARS-5 (OR=0,944; 95%CI=0,426-2,093; *p-value*=0,887). Penelitian ini juga menemukan tidak adanya pengaruh signifikan antara tingkat ketaatan terapi antihipertensi terhadap risiko ASCVD pada pasien DM tipe 2 dengan komorbid hipertensi di Puskesmas Kabupaten Sleman, baik secara perhitungan MPR (OR=0,884; 95%CI=0,296-2,644; *p-value*=0,825) maupun MARS-5 (OR=0,664; 95%CI=0,282-1,563; *p-value*=0,347). Penelitian ini menyimpulkan bahwa tidak ada hubungan yang bermakna terkait pengaruh ketaatan terapi antihipertensi terhadap terkontrolnya tekanan darah dan risiko ASCVD pada pasien DM tipe 2 dengan komorbid hipertensi di Puskesmas Kabupaten Sleman.

Kata kunci: *Adherence*, *ASCVD risk*, *MARS-5*, *Medication Possession Ratio*, Tekanan Darah

ABSTRACT

Atherosclerosis and microvascular problems are among the cardiovascular (CV) issues that patients with diabetes mellitus (DM) are susceptible to. Insulin resistance frequently coexists with the clustering of CV risk factors in individuals with type 2 diabetes, increasing morbidity and mortality. Patients with type 2 diabetes may experience a lower risk of complications with the treatment of antihypertensive therapy. The Indonesian version of the MARS-5 questionnaire and the MPR method can be used to measure therapy adherence both objectively and subjectively. The Framingham risk score (FRS BMI) calculator is used to calculate the risk of atherosclerotic cardiovascular disease (ASCVD). In type 2 DM patients at Community Health Centers in Sleman Regency who also have concomitant hypertension, the purpose of this study is to ascertain the association between blood pressure management, adherence to antihypertensive medication, and ASCVD risk. An observational analysis and a cross-sectional design were used in this investigation. The sampling was done in a non-probabilistic way using purposeful sampling. A total of one hundred responders met the criteria for inclusion.

According to MPR calculation (OR=0.52; 95%CI=0.177-1.473; p-value=0.209) and MARS-5 (OR=0.944; 95%CI=0.426-2.093; p-value=0.887), there was no significant relationship between the level of antihypertensive therapy adherence and blood pressure control in type 2 DM patients with comorbid hypertension at Community Health Centers in Sleman Regency. Additionally, by using MARS-5 (OR=0.664; 95%CI=0.282-1.563; p-value=0.347) and MPR calculation (OR=0.884; 95%CI=0.296-2.644; p-value=0.825) for type 2 diabetes patients with comorbid hypertension at Community Health Centers in Sleman Regency, this study found no significant relationship between the degree of antihypertensive therapy adherence and ASCVD risk. This study finds that in type 2 DM patients with concomitant hypertension at Community Health Centers in Sleman Regency, there is no significant link between the influence of antihypertensive medication adherence on blood pressure control and ASCVD risk.

Key words: *Adherence, ASCVD risk, Blood Pressure, MARS-5, Medication Possession Ratio*