

ABSTRAK

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ANALISA INDUKSI MATURITAS PARU (IMP) PADA PERSALINAN
PREMATUR TERHADAP STATUS ASFIKSIA NEONATORUM DI RSUD
DR. SAYIDIMAN MAGETAN

xv + 56 Halaman + 7 tabel + 6 Lampiran

Asfiksia neonatorum merupakan salah satu penyebab kematian bayi baru lahir. Kematian bayi baru lahir akibat asfiksia neonatorum di RSUD dr. Sayidiman Magetan sebesar 43,75%. Hal ini sering terjadi pada bayi prematur akibat ketidakmatangan paru-paru dan kurangnya produksi surfaktan. Agar paru-paru bayi prematur mampu beradaptasi dengan pernapasan setelah kelahiran, maka dilakukan Induksi Maturitas Paru (IMP). Penelitian ini bertujuan mengetahui perbedaan status asfiksia neonatorum pada persalinan prematur antara yang diberi IMP dengan yang tidak diberi IMP.

Jenis penelitian ini adalah penelitian survei, dengan rancangan *cross sectional*. Populasi semua data ibu bersalin prematur yang tercatat pada Buku Register Persalinan RSUD dr. Sayidiman Magetan selama Januari 2024-Februari 2025 sebanyak 121 ibu, besar sampel 93 ibu, teknik sampling adalah *proportional random sampling*, diperoleh besar sampel ibu bersalin prematur yang diberi IMP 44 ibu dan ibu bersalin prematur yang tidak diberi IMP 49 ibu. Variabel bebas adalah IMP dan variabel terikat adalah status asfiksia neonatorum. Instrumen penelitian ini adalah data sekunder dari Buku Register Persalinan. Analisis data dengan uji *Chi-Square*, dengan tingkat ketepatan yang diinginkan ($\alpha=0.05$).

Berdasarkan hasil penelitian diperoleh, pada persalinan prematur yang diberi IMP, bayi yang tidak asfiksia sebanyak 35 (79,5%) dan bayi yang asfiksia sebanyak 9 (20,5%). Sedangkan pada persalinan prematur yang tidak diberi IMP, bayi yang tidak asfiksia sebanyak 13 (24,5%) dan bayi yang asfiksia sebanyak 36 (75,5%). Hasil uji *Chi-Square* didapatkan 26,090, *p-value* 0,000, dan 0% cell yang memiliki frekuensi harapan < 5 .

IMP efektif menurunkan kejadian asfiksia neonatorum pada persalinan prematur. Diharapkan setiap ibu hamil dengan risiko persalinan prematur mendapatkan IMP sebagai upaya preventif untuk meningkatkan kesiapan paru-paru bayi sebelum kelahiran. Langkah ini bertujuan menekan angka kejadian asfiksia neonatorum serta meningkatkan kualitas hidup bayi prematur dan mencegah kematian bayi baru lahir.

Kata kunci: Prematur, Asfiksia neonatorum, Induksi Maturitas Paru (IMP)

Daftar bacaan: 18 buku (2014-2022), 15 jurnal (2019-2024)

ABSTRACT

Eni Rahayu

ANALYSIS OF LUNG MATURITY INDUCTION (LMI) IN PREMATURE LABOR ON NEONATORY ASPHYXIA STATUS AT DR. SAYIDIMAN MAGETAN

xv + 56 Pages + 7 tables + 6 Appendices

Asphyxia neonatorum was one of the leading causes of neonatal death. The neonatal death rate due to asphyxia neonatorum at RSUD dr. Sayidiman Magetan was 43.75%. This often occurred in premature infants due to pulmonary immaturity and insufficient surfactant production. To help the lungs of premature infants adapt to breathing after birth, Lung Maturity Induction (LMI) was performed. This study aimed to determine the difference in the status of asphyxia neonatorum in premature deliveries between those who received LMI and those who did not.

This research was a survey study with a cross-sectional design. The population consisted of all data from premature delivery cases recorded in the Delivery Register Book at RSUD dr. Sayidiman Magetan from January 2024 to February 2025, totaling 121 mothers. The sample size was 93 mothers, and proportional random sampling was used. The sample consisted of 44 mothers who received LMI and 49 mothers who did not receive LMI. The independent variable was LMI, and the dependent variable was the status of asphyxia neonatorum. The research instrument was secondary data from the Delivery Register Book. Data analysis was performed using the Chi-Square test with a desired level of significance ($\alpha = 0.05$).

Based on the research results, in premature deliveries that received LMI, there are 35 (79.5%) non-asphyxiated infants and 9 (20.5%) asphyxiated infants. Meanwhile, in premature deliveries that did not receive LMI, there are 13 (24.5%) non-asphyxiated infants and 36 (75.5%) asphyxiated infants. The Chi-Square test result is 26.090, with a p-value of 0.000, and 0% of cells have an expected frequency of less than 5.

LMI is effective in reducing the incidence of asphyxia neonatorum in premature deliveries. It is expected that every pregnant woman at risk of premature delivery will receive LMI as a preventive measure to improve the readiness of the baby's lungs before birth. This step aims to reduce the incidence of asphyxia neonatorum, improve the quality of life for premature infants, and prevent neonatal death.

Keywords: Premature birth, Neonatal asphyxia, Lung Maturity Induction (LMI).

References: 18 books (2014-2022), 15 journals (2019-2024)