

ABSTRAK

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LAPORAN KASUS PADA IBU HAMIL RESIKO TINGGI DENGAN HIPERTIROID DAN KOMPLIKASI STRES DI PUSKESMAS KEDURUS KOTA SURABAYA

xvi + 102 halaman + 2 tabel + 5 lampiran

Kehamilan risiko tinggi dapat membahayakan ibu maupun janin apabila tidak ditangani secara tepat. Hipertiroid dapat menimbulkan komplikasi seperti preeklamsia, persalinan prematur, gangguan pertumbuhan janin, serta dapat memicu stres dan kecemasan pada ibu. Kombinasi usia >35 tahun, riwayat hipertiroid, dan komplikasi stres dapat meningkatkan risiko kehamilan. Tujuan laporan kasus ini mendeskripsikan asuhan kebidanan komprehensif pada ibu hamil risiko tinggi dengan hipertiroid dan komplikasi stres di Puskesmas Kedurus Surabaya. Laporan ini menggunakan metode deskriptif dengan pendekatan *case report*. Subjek Ny. D usia 46 tahun G7P4A2 usia kehamilan 20–22 minggu dengan riwayat hipertiroid sejak 2015. Pengambilan kasus dilaksanakan April–Mei 2026 di Puskesmas Kedurus menggunakan manajemen kebidanan Varney dalam format SOAP. Hasil pengkajian menunjukkan ibu mengeluh pusing, mual, nyeri perut bawah, sulit tidur, dan cemas. Tekanan darah 95/60 mmHg, IMT 27,03 kg/m² (obesitas). Pemeriksaan fisik menemukan pembesaran kelenjar tiroid dan eksoftalmus, TFU 21 cm, DJJ 154x/menit. Laboratorium: TSH 0,01 mIU/L, T3 3,8 ng/mL, T4 15,2 ng/dL. Skor EPDS 19/30 (kecemasan sedang) dan skor KSPR total 22 (risiko tinggi). Analisa data: G7P4A2 usia kehamilan 20–21 minggu, janin tunggal, hidup, intrauterin, letak kepala, dengan hipertiroid dan komplikasi stres. Penatalaksanaan meliputi pemantauan ibu dan janin, edukasi hipertiroid, anjuran obat antitiroid (PTU 3x1), Fe dan kalsium 1x1, konseling relaksasi napas dalam, serta kolaborasi dengan dokter spesialis dan psikolog. Setelah tiga kali kunjungan, kondisi ibu membaik, tekanan darah normal, stres menurun, dan janin tetap baik. Asuhan kebidanan menyeluruh mencakup aspek fisik dan psikologis sangat diperlukan untuk mencegah komplikasi lebih lanjut.

Kata Kunci: Asuhan Kebidanan, Hipertiroid, Kehamilan Risiko Tinggi, Komplikasi Stres

ABSTRACT

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CASE REPORT ON HIGH-RISK PREGNANCY WITH HYPERTHYROIDISM AND STRESS COMPLICATION AT KEDURUS COMMUNITY HEALTH CENTER, SURABAYA CITY

xvi + 102 pages + 2 table + 5 appendices

High-risk pregnancies can endanger both the mother and the fetus if not managed properly. Hyperthyroidism can lead to complications such as preeclampsia, preterm labor, and fetal growth restriction, and can trigger stress and anxiety in the mother. The combination of being over 35 years of age, a history of hyperthyroidism, and stress-related complications can increase pregnancy risks. The objective of this case report is to describe comprehensive midwifery care for a high-risk pregnant woman with hyperthyroidism and stress-related complications at the Kedurus Community Health Center in Surabaya. This report uses a descriptive method with a case report approach. The subject, Mrs. D, is a 46-year-old woman (G7P4A2) at 20–22 weeks of gestation with a history of hyperthyroidism since 2015. The case was conducted from April to May 2026 at the Kedurus Community Health Center using Varney's midwifery management in the SOAP format. The assessment results showed that the mother complained of dizziness, nausea, lower abdominal pain, difficulty sleeping, and anxiety. Blood pressure was 95/60 mmHg, and BMI was 27.03 kg/m² (obese). Physical examination revealed an enlarged thyroid gland and exophthalmos; fundal height (TFU) was 21 cm, and fetal heart rate (FHR) was 154 beats per minute. Laboratory results: TSH 0.01 mIU/L, T3 3.8 ng/mL, T4 15.2 ng/dL. EPDS score 19/30 (moderate anxiety) and total KSPR score 22 (high risk). Data analysis: G7P4A2, gestational age 20–21 weeks, singleton, live, intrauterine, cephalic presentation, with hyperthyroidism and stress-related complications. Management included monitoring of the mother and fetus, education on hyperthyroidism, recommendation of antithyroid medication (PTU 3 times daily), iron and calcium 1 time daily, deep breathing relaxation counseling, and collaboration with a specialist physician and psychologist. After three visits, the mother's condition improved, blood pressure normalized, stress levels decreased, and the fetus remained well. Comprehensive midwifery care addressing both physical and psychological aspects is essential to prevent further complications.

Keywords: Midwifery Care, Hyperthyroidism, High-Risk Pregnancy, Stress-Related Complications.