

**STRENGTHENING THE ROLE OF THE FAMILY IN USING
INNOVATION TO PREVENT DECUBITUS ULCUSES IN
BED-BED PATIENTS WHO EXPERIENCE TOTAL STROKE**

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ABSTRACT

Background: Bed-ridden patients with ischemic stroke who do not receive maximum care and attention from family members tend to get less mobilization assistance and eventually suffer for a long-term immobilization causing decubitus ulcer. Health education by nurses to families needs to be done to provide knowledge about the importance of paying attention to bed-ridden patients to prevent the lack of information about care for patients suffering from ischemic stroke. The purpose of this study was to review article the family role development in preventing decubitus ulcer for bed ridden patients with ischemic stroke. Methods: The design used in this research was scoping review design, there were 15 published articles were used as sample. Data collection and data processing in the form of authenticity tables. Results: The results of the literature review that have been carried out show that several ways that families can do to prevent the occurrence of decubitus ulcers, namely the combination of changing positions every 2 hours by applying olive oil can optimally prevent the occurrence of decubitus ulcers. Conclusion: From several articles that have been reviewed, it is said that the development of the role of the family which aims to prevent the occurrence of pressure ulcers in bedridden patients who have a total stroke that can be done includes providing information using social media, one of which is a special WhatsApp group for families who have one of their family members suffering from stroke disease

Kata Kunci : Family Role, Decubitus, Stroke.

INTRODUCTION

The family is the party that provides the facilities needed by one of the family members who is in a sick condition in fulfilling their various needs and achieving the success of appropriate treatment measures performed on the family members (1). Family members need knowledge about the prevention of decubitus ulcers. Decubitus ulcers are damage to an anatomical structure and function of the skin normal because of pressure from external parties related to protruding bones and healing cannot occur in a short time (1). So far, patients on bed rest rarely get special attention so they are very at risk of complications such as decubitus. The family does not know how to treat and prevent it decubitus experienced by a patient who suffers from stroke such as personal hygiene, caring for the skin, adjusting positions to minimize pressure, and friction that occurs on the skin, so it is very important to know about how to prevent decubitus in a family that has a family member who suffers stroke (1).

Decubitus ulcers are often owned by patients who have suffered a stroke, and are even ranked at the top (1). The incidence of decubitus ulcers always increases every year, according to data from the National Pressure Ulcer Advisory Panels (NPUAP) showing there are 2.5 million patients each year and an estimated 60,000 people die each year from strokes and resulting in decubitus (2).

Amount The population in the Association of Southeast Asian Nations (ASEAN) in 2015 was 1000 people and showed 2.1-31.3% of the 8.3 ASEAN population had decubitus ulcers due to stroke. The incidence of decubitus in Indonesia is quite high, from data obtained from the Indonesian Health and Demographic Survey (SKDI) in 2016, stroke patients who experienced the incidence of decubitus is 6.1 out of 1000 population, with a reported prevalence of around 5-11% in acute wound healing, 15-25% healing over a long period of time, and 7-12% homecare care, in 2017 in East Java 55.3% of decubitus incidents (3), and in Pamekasan Regency in February 2019 to be precise at the Moh. Noer, there were 3 patients who had decubitus ulcers (1).

Decubitus is a wound caused by damage to skin tissue due to too long pressure (1). Decubitus ulcers can be caused by injuries to the skin or tissue caused by pressure on the tissue by protruding bones for a long time (3). Wounds like this appear in the area around the skin on the back that is used for too long to lie down. So that it results in the appearance of damaged skin or dead skin that damages the tissue under the skin, this damage can also occur in the muscles up to the bone (1). Other factors that contribute to the development of decubitus ulcers include the addition of heat in bedridden and wheelchair patients. Ignoring these problems will risk a decrease in blood flow and blockage of blood flow which causes protruding bones, resulting in hypoxia in the tissue and can kill the tissue (1).

The role of the family in patients with bed rest is very important, so that patients with bed rest can carry out their activities properly. Patients who experience bed rest need more attention from other family members, especially in taking care of the skin in bed rest patients. In general, patients with bed rest do not get the maximum service and attention from their family members, causing the patient to not get mobilization assistance and eventually the patient is immobilized for a long time in bed. Health education will strengthen family knowledge about the importance of caring for patients who experience bed rest, when families do not know enough information about the care of patients suffering from total

stroke. The lack of a family's role makes patients receive less attention so researchers are looking for a solution by developing families that have a role in preventing decubitus ulcers for stroke sufferers who experience bed rest. With this development, it is hoped that patients will receive mobilization assistance from family members and can reduce the risk of decubitus. This study aims to look at the development of the role of the family in efforts to prevent decubitus ulcers for bed rest patients who have had a total stroke.

METHODS

Research design is an important part of a study, requires maximum accuracy because it affects the accuracy of the results a study. This study uses a design quantitative scoping review, quantitative method systematic review is research methods used to synthesize the results of research with using a quantitative approach. Quantitative method scoping review used with a meta-analytic approach, namely technique perform data aggregation to obtain deep statistical power identification of causal relationships between risk factors or treatment with an effect. This study describes, explains, and outlines the results of a review of existing and published research articles. Results review review of the articles that have been implemented will be made in the form a description related to the type of development to meet the patient's needs who suffered a stroke to avoid decubitus.

RESULTS

This study uses a quantitative scoping review method. The quantitative scoping method is a research method used to synthesize the results of research using a quantitative approach. The quantitative scoping review method is used with a meta-analytic approach, namely the technique of aggregating data to gain statistical power in identifying causal relationships between risk factors or treatments with an effect. This study describes, explains, and outlines the results of a review of existing and published research articles. The results of the review of the articles that have been carried out will be made in the form of a description related to the type of development to meet the needs of patients suffering from stroke to avoid decubitus. The number of articles obtained and explained with certain keywords, search results from several articles using the keywords "Family Role" AND "Development of Ulcus Decubitus" AND "Ulcus Decubitus" AND "Stroke", using the google sholar database with elections from 2015 to 2021. Search results using the keyword "Family Roles" AND "Ulcus Decubitus Development" found 10 articles, then search results using the keywords "Family Roles" AND "Ulcus Decubitus" found 10 articles, and search results using the keyword "Family Roles" AND "Stroke" found 15 articles, which consisted of descriptive studies and experiments.

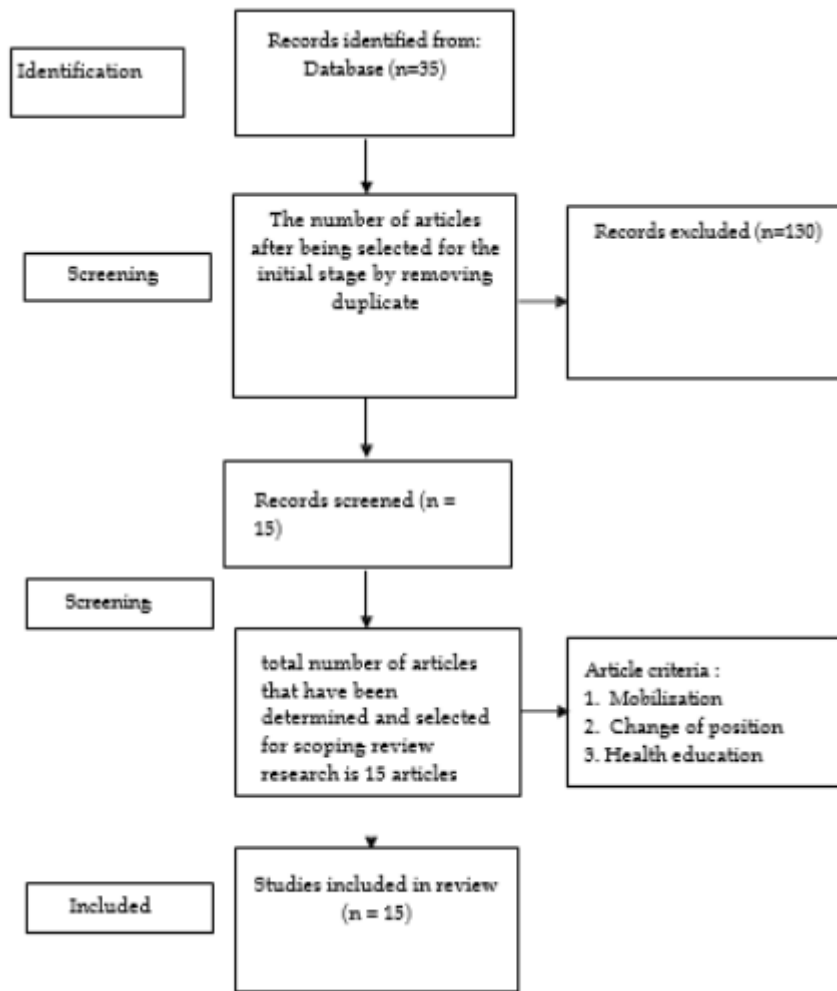
Furthermore, the researcher selected and sorted several articles necessary and adapted to the criteria and objectives of the research:

1. Articles about Mobilization.
2. Articles that contain changes in position.
3. Articles about Health Education.

The second stage is article selection, as many as 15 articles collected by researchers have the same goal, but the years and research methods are different, and are carried out in different ways.

The third stage is part of the continuation of article selection, which is carried out by researchers to determine the feasibility of an article to be used as material for scoping review.

Figure 1: Flow diagram (PRISMA) of the process of identifying and including references.



DISCUSSIONS

1. The role of the family in mobilization

Total stroke sufferers will not get mobilization independently, whereas according to author's name (3), total stroke sufferers in mobilizing need family assistance and mobilization is a therapeutic intervention to help activate muscles that experience weakness, family assistance is needed in mobilizing so that one of the families suffering from stroke can avoid stroke. there is a wound decubitus ulcer.

Mobilization in patients with long bed rest can prevent static blood flow, by moving, blood flow becomes smooth, systolic blood pressure increases, and full term (MAP) becomes normal. This condition will increase overall blood flow including blood flow to areas of the skin that were previously stressed due to bed rest so that tissue metabolism returns to normal so that decubitus ulcers can be prevented or repaired. Mobilization in stroke patients can be done by changing the position of the right side to the left side. The

results of the articles that have been reviewed show that changing positions every 2 hours can prevent decubitus ulcers in stroke patients (4). Progressive mobilization of levels I and II can also improve the patient's haemodynamic status and is able to prevent the occurrence of decubitus ulcers so that routine mobilization will be able to reduce the incidence of decubitus ulcers in stroke patients (4).

Various preventive measures that can be taken to prevent decubitus ulcers from occurring include improving the patient's general condition, proper maintenance and care of the skin, and good and comfortable bedding. Treatments carried out by nurses to prevent decubitus occur include providing anti-decubitus mattresses and small pillows as a support. In addition, decubitus treatment is also inseparable from nursing actions that can be carried out in stroke patients to prevent decubitus from occurring, namely by mobilizing or positioning. Transferring is a person's ability to move freely, easily, regularly and has the goal of meeting the needs of a healthy life and the importance of independence. This bed shift is a positioning arrangement given to reduce pressure and friction on the skin, keeping the head of the bed as high as 30 degrees or less will reduce the chance of decubitus due to friction, changing position / or changing bed / sleeping alternately (Laraswati et al ., 2021). The results of the research development, namely in mobilization is lying down, namely adding a corset to the patient's bed base to prevent the risk of decubitus and injury to tilt the patient to the right and to the left.

2. The role of the family in changing positions

Total stroke sufferers find it difficult to change position independently, whereas according to Alimansur et al., (2015), total stroke sufferers need help from their family to improve blood circulation and prevent decubitus, ignoring position changes in one of the families who suffering from a stroke is a mistake, the family should be obliged to change the position of the family who has suffered a stroke so that blood circulation runs smoothly and can prevent decubitus ulcers.

Then another non-pharmacological action to prevent pressure sores is to do massage. Massage is a massage patted on certain parts of the body with the hands or special tools to improve circulation, metabolism to release adhesions and improve blood circulation as a way of treatment. The purpose of the massage action is to increase circulation in the area being massaged, increase relaxation, maintain the condition of the skin. Nursing interventions changing position and skin massage in stroke patients can prevent decubitus ulcers in stroke patients. These two nursing interventions can reduce tissue pressure and can be an effective measure to prevent decubitus ulcers (Setiadi & Muflihatin, 2017).

3. The role of the family in providing education

Treatment of stroke patients, which includes mobilization exercises and other treatments, takes a long time and even has to be continued with home care, therefore cooperation between those who carry out the treatment, patients and families is needed. Good cooperation will increase the effectiveness of stroke care so that decubitus ulcers can be prevented, in this case according to Santoso, 2015, providing education to families and patients will increase their understanding of how to treat and prevent decubitus injuries, health workers are obliged to provide health education to the patient's family , as a form of knowledge on how to handle, care for, and provide support to sick families, so that sufferers do not get decubitus ulcers.

Health education is an important part of efforts to prevent decubitus. The role of the nurse educator is carried out by assisting patients in increasing their level of knowledge about health, so that there is a change in the behavior of the client after health education is carried out. The results of the article reviewed by Sunaryati (2015) in Agustina and Rasid (2020) show that there is a significant difference between giving coconut oil and health education about repositioning to prevent decubitus. This shows that providing health education to patients and families can increase their understanding of decubitus and how to prevent it.

According to Alimansur and Santoso (2020) in carrying out the treatment process, collaboration between nurses and patients and families is a very important part of achieving the success of treatment goals so that in efforts to prevent decubitus ulcers, the provision of education to patients and families or patient representatives is urgently needed. The information provided is in the form of a definition of decubitus ulcers, signs and symptoms, and how to prevent decubitus ulcers from occurring. Good health education will be able to change the behavior of patients and families in the care of stroke patients. An understanding of this will make patients and families participate in efforts to prevent decubitus stroke patients, whereas so far the patient's family has been given health education only using leaflet media. The results of the research development are the provision of health education using social media, one of which is in the form of a special WhatsApp group for families who have a family member who has suffered a stroke.

4. Development of the role of the family in preventing decubitus ulcers in bed rest patients who have had a total stroke / The importance of family role in prevention, treatment and management of stroke?

The role of the family is very neglected in caring for a family who has suffered a stroke because of the busyness of each family. The role of the family is very important in preventing decubitus ulcers, which can be done by the people in the Pamekasan Regency area in preventing decubitus by providing information using social media, one of which is in the form of a special WhatsApp group for families who have a family member who has suffered a stroke.

CONCLUSION

From several articles that have been reviewed, it is said that family role development aims to prevent the occurrence of decubitus ulcers in bed rest patients who experience total stroke which can carried out includes providing information using social media, one of which is in the form of a special whatsapp group for families who have a family member who has a stroke which contains notifications of reminders to change position by applying olive oil every 2 hours and good bed shifts to avoid decubitus and injury.

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