A QUALITATIVE STUDY ON IMPLEMENTATION OF ORAL AND DENTAL HEALTH SERVICES FOR PREGNANT WOMEN IN PUSKEMAS SUKAMAKMUR BOGOR REGENCY

Studi Kualitatif Tentang Pelaksanaan Layanan Kesehatan Mulut dan Gigi Untuk Wanita Hamil di Puskesmas Sukamakmur Kabupaten Bogor

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ABSTRACT

Background: Changes in the oral cavity during pregnancy might affect the fetus. If a pregnant woman suffers from a periodontal infection, she is exposed to low birth weight or premature 19.2 times compared to healthy pregnant women. The effects is as big as smoking or alcohol abuse. This study aims to analyze the quality of the oral and dental health service for pregnant women in Puskesmas Sukamakmur according to PMK No 89 of 2015. Method: The design of the research is a qualitative study, by employing RAP in Puskesmas Sukamakmur Bogor Regency in April 2019. Data collection was conducted by in-depth interviews, secondary data and observation. The informants involved in the research were the Head, Dental Clinic Coordinator, KIA Coordinator, midwives, and pregnant women in the working area of Puskesmas Sukamakmur. Result: The research shows that Puskesmas Sukamakmur is supported by adequate human resources and there is no financial and facilities problem. Dental examination are not included in the SOP for ANC there by pregnant women who are referred are only those with dental problems. Conclusion: Based on the analysis of the result, Puskesmas Sukamakmur is not ready yet to perform oral and dental service for pregnant women. Socialization the importance of dental health in pregnant women has not been evenly distributed. Support is needed from Dinas Kesehatan and also Kementrian Kesehatan should include an oral assessment to the guidelines of ANC.

Keywords: Quality, Readiness, Dental Examination, Antenatal Care, Puskesmas
INTRODUCTION

Pregnancy and dental-oral health are interrelated. Pregnancy is a natural process causing changes in physiology, anatomy and hormones (Rani dkk., 2015). The hormonal changes and poor dental-oral health affect the fetus development (Eka, dkk., 2005; Hajikazemi, et al., 2008). During pregnancy, there are changes in the oral cavity due to hormonal changes, dietary changes, behavioral changes and various complaints such as cravings, nausea, and vomiting (Sajjan, et al., 2015). Pregnant women are very susceptible to gingival and periodontal disease as a result of ignoring oral and dental hygiene (Lu, et al., 2015). Changes in pregnancy also affect the quality of life of pregnant women (Claas, 2009). Pregnant women must recognize the importance of maintaining oral health during pregnancy so that it can avoid the occurrence of oral problems that can affect pregnancy. In line with this, improving oral and dental health as well as health promotion can reduce the occurrence of oral diseases (Bugrant, 2012).

Changes in oral cavity during pregnancy might affect the fetus. If a pregnant woman suffers from periodontal infection, she is exposed to low birth weight or premature birth. A research at Hasan Sadikin Hospital, Bandung (Kemenkes, 2012) reveals a correlation between patients with chronic marginal periodontitis and low birth weight (LBW). Pregnant women with chronic periodontitis are at a risk of 10.9 times more likely to have LBW babies, even pregnant women who suffer from periodontal infections, have a risk LBW babies as much as 19.2 times compared to healthy pregnant women, Dr. Steven Off enbacher, Direktur Center of Oral and Systemic Diseases di University of North Carolina states that the risk is as big as the effects of smoking or alcohol abuse (Kemenkes, 2018).

Data of Riskesdas of Ministry of Health of Republic of Indonesia in 2018 (Riskesdas, 2018) presents that the proportion of dental-oral health problems was 57.5% and only 10.2% of those problems were treated by dental health officers. It means that dental treatment for pregnant women should be considered and improved through community-based health efforts (upaya kesehatan berbasis masyarakat/UKBM) and Health Centers. Government through The Regulation of Minister of Health Number 89 of 2015 concerning Oral and Dental Health Efforts establishes the activities of oral and dental health service for pregnant women in First Level Health Facility (FKTP) which include: a. Communication, Information, and Education on oral and dental healthcare; b. early detection on oral and dental problems; and c. referring pregnant women when they need curative approach for their oral and dental conditions (Peraturan Menteri Kesehatan Republik Indonesia Nomor 89 Tahun 2015 Tentang Upaya Kesehatan Gigi dan Mulut).

A research conducted by Wulan et al, in Bahu Health Center, Manado in 2013 shows that only 3.8% of pregnant women checked their oral and dental health to dental clinic for periodontal problems such as gingivitis and periodontitis. The research also suggests that only 20% from 50 pregnant women conducted dental check to dentist due to dental problems (Wulan, dkk., 2013). The behavior is related to influencing factors such as personal factor, economy status, and knowledge on the correlation between pregnancy and oral and dental health (Kemenkes, 2012). Another research conducted by Rani and Petter (2015), suggests the low utilization of oral and dental health care by the respondents. The research presents that 32.4% of the respondents have never visited any dentist, 35.5% of the respondent visited the dentist more than 1 year ago, 32.4% of the respondents visited the dentist more than 2 years ago (Rani and Petter, 2015).
Puskesmas Sukamakmur is one of the primary health care in Bogor Regency that has dentist, dental nurse and has Maternity Home. Researcher aim to identify the quality of Puskesmas Sukamakmur in performing oral and dental health service for pregnant women.

METHOD

The design of the research is qualitative method, or a research that intends to acquire holictic understanding of the phenomena experienced by the subjects of research (Matha et al., 2016) by employing RAP (Rapid Assesment Procedure) or a rapid research to obtain in-depth information about dental and oral health services for pregnant women. The research was conducted in Puskesmas Sukamakmur, Bogor District, West Java. The research was carried on in April 2019. The population of the research was the Head of Puskesmas Sukamakmur, Dental Clinic Coordinator, Maternal and Child Health Clinic Coordinator, midwives of Maternal and Child Health Clinic in Puskesmas Sukamakmur, and pregnant women in the working area of Puskesmas Sukamakmur. The samples of qualitative research were selected based on suitability, adequacy and saturation. The sources of data were primary and secondary data. Primary data were obtained from interview and observation, while secondary data were obtained from data analysis from documents in Puskesmas Sukamakmur. The informants involved in the research were the Head of Puskesmas Sukamakmur, Dental Clinic Coordinator, Maternal and Child Health Clinic Coordinator, midwives of Maternal and Child Health Clinic in Puskesmas Sukamakmur, and pregnant women in the working area of Puskesmas Sukamakmur. The process of implementing oral and dental service for pregnant women:

1. Input
   Sukamakmur has adequate number of dentist, dental nurse, midwives and has no problem in dental equipment and fund, but the knowledge about the importance of oral and dental health for pregnant women has not been evenly distributed. Meanwhile, the regulation about performing oral assessment has not included yet to the guidelines of ANC

2. Process
   Pregnant women who come to Puskesmas Sukamakmur to check their pregnancy have to have oral assessment. But the procedure is not programed yet. As the result, only pregnant women with dental problem reffered to Dental Clinic. When they were asked about willingness

RESULT

Puskesmas Sukamakmur has not ready yet providing oral and dental service for pregnant women. This can be seen from:
1. There is no oral assessment included in procedure of ANC (PMK No. 97 of 2014). The regulation for providing oral and dental service for pregnant women was regulated in PMK No. 89 of 2015 concerning oral and dental efforts.
2. Socialization for midwife about the importance of oral and dental health for pregnant women has not been evenly distributed. It makes midwife never reffer pregnant women that come to KIA to dental clinic unless they have dental problem.

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to perform oral and dental health service become the fixed procedure of ANC, all of the responden showed positive answer and no one objected.

3. Output

The number of pregnant women referred to dental clinic was not well documented by midwife of Maternal and Child Health Clinic while at Dental Clinic, the pregnant women were recorded as general patients.

DISCUSSION

Regulation of the Minister of Health of Republic of Indonesia Number 89 of 2015 concerning oral and dental health service includes oral and dental health service for pregnant women. The treatments include health counseling, given as communication, information, and education on oral and dental health service; early detection on oral and dental problems; and referring pregnant women when they need curative approach for their oral and dental conditions. Checklist for oral and dental health service for pregnant women which should be updated monthly can be found on page 58 (Peraturan Menteri Kesehatan Republik Indonesia Nomor 89 Tahun 2015 Tentang Upaya Kesehatan Gigi dan Mulut).

The socialization of dental health service for pregnant women to the Person in Charge of Dental Care Clinic had been carried out by the Department of Health of Bogor Regency a few years ago, but there was no evaluation on the program and the activities has been discontinued, furthermore, maternal and child health clinic has never been informed to include oral and dental health service for pregnant women to the SOP of ANC. Consequently, the campaign for oral and dental health service for pregnant women seems to be carried out only by Dental Care Clinic.

Regulation of the Minister of Health of Republic of Indonesia Number 97 of 2014 concerning antenatal, perinatal, and postpartum health service, contraceptive services, and sexual health services outlines the guidelines for integrated antenatal care. Standardized antenatal care consists of: weight and height measurement, blood pressure measurement, Nutritional Status (Arm Circumference), fundal height measurement, observation on appearance of fetal and Fetal Heart Rate (FHR) measurement, perform screening on tetanus immunization status and apply tetanus toxoid vaccine if necessary, suggest iron supplement, and perform laboratory check (routine and incidental) for: blood group, hemoglobin level in blood, protein level in urine, blood sugar level (in suspected pregnant women), blood test for Malaria (in endemic areas), syphilis test (in high risk area), and HIV test (in epidemic area). Based on the guidelines mentioned, dental and oral assessment is not included in SOP for ANC (Peraturan Menteri Kesehatan Republik Indonesia Nomor 97 tahun 2014 tentang pelayanan kesehatan masa sebelum hamil. masa hamil, persalinan, dan masa sesudah melahirkan, penyelenggaraan pelayanan kontrasepsii, serta pelayanan kesehatan seksual).

Midwives at Puskesmas Sukamakmur stated that they haven’t got any information about the importance of dental and oral health service for pregnant women, so that only pregnant women having dental problems were referred to Dental Health Clinic.

CONCLUSION

Puskesmas Sukamakmur is not ready yet to perform oral and dental health in pregnant women. There is no oral assessment included in procedure of ANC (PMK no 97 of 2014). The regulation for providing oral and dental service for pregnant women was regulated in PMK No. 89 of 2015 concerning oral and dental efforts.

Socialization for midwife about the importance of oral and dental health for
pregnant women has not been evenly distributed. It makes midwife never refer pregnant women that come to KIA to dental clinic unless they have dental problem.

As there is no oral assessment in fix procedure of ANC, pregnant women referred to Dental Care Clinic of Puskesmas Sukamakmur are those with dental problems so that counseling, early examination and referral of curative actions for pregnant women have not been performed completely.

RECOMMENDATION

1. Puskesmas Sukamakmur should include oral assessment to the fix procedure of ANC.
2. Support is needed from Department of Health, Bogor Regency to the Person in Charge of Maternal and Child Health Clinic to promote the importance of oral health service during pregnancy.
3. Ministry of Health should include oral assessment for pregnant women at Dental Care Clinic to The Guidelines of Integrated Antenatal Care.

CONFLICT OF INTEREST

Any important information or ideas obtained in the research process will be kept confidential and not used for personal gain. There are no conflicts of interest or other relationships or connections with companies, or institutions that are related to the manuscript.

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