Factors affecting Prevention Practices Of Urinary Tract Infection To Menoposemother In Health Center

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Abstract. This study aims to determine the factors that influence the practice of urinary tract infection prevention in menopausal woman. Analyzing factors affecting urinary tract infection prevention practice to menopausal mother in health center. This research is an explanatory research using a quantitative approach with a cross sectional study. The results of the research was a large part of respondents have a good sense in the prevention UTI by 87.5%, while rest of 12.5% don't meet the requirement of good prevention practices UTI. Based on the results of logistic regression (OR= 17.228 and the value of p 0.000 value) at factor support of her husband so that there is a significant relationship between the husband support factor with UTI prevention practices in mother menopause.

1. Introduction
According to Andara, changes in monopausal mather’s caused by effect of reduced esterogen hormon inflict depletion in the vaginal well, blood vessels capillary under the skin will also be seen. In the end, since epithelial vagina to be atrophy and because absence of capillay blood result in the surface of the vaginal become sallow. In addition, rugae vagina will be much reduced resulting in surface is to be slippery, [1,2] as a result often women complained dyspareunia (pain to time coitus), so lazy to intercourse. [3] Changes that occur in organ menopausal caused by age and physical factors, psychic factors can affect the life. Menopausal woman who experience problems with Urinary Tract Infection (UTI) are characterized by symptoms of pain during urination and frequent sudden urination, pain and heat while urinating over the bladder until the lower back. Other symptoms are felt like anyang- anyangen (want to urinate, but no or little urine comes out) thick urine like tea color,[4,5,6] sometimes red if there is blood, pain in the waist, fever or shiver that can indicate infection has reached the kidneys up to urinary tract complications, urinary tract obstruction, sepsis up to multisystems bacterial infection. Low esterogen levels lead to thinning of the bladder and urinary tract tissue resulting in decreased control of the bladder, inflict increased vaginal PH, altered vaginal flora and increased bacterial colonization with unfavorable flora such as E. Coli,[7,8,9] inflicting in cross channel infections reproduction of the lower genital tract infection (vaginal and cervix) and even external organisms can reach the uterine, fallopian tubes, ovaries and surrounding areas infection can be widespread and life threatening, [10,11] where this condition occurs when the mother’s menopause is more at risk of appeal to non menopausal mothers The results of interviews
with 12 menopausal mothers about the effort to prevent urinary tract infections were found as much as 46.6% (7 respondents) did not know how to prevent UTI 33.3% (5 respondents) said not knowing how to cure the right. The incidence of whiteness recorded in the district Sidoarjo during the year 2015-2017. Things that are suspected influent in the practice of urinary tract infection prevention are the respondent’s characteristics of respondents: knowledge, beliefs, affordability of service, husband support, peer support based on these reasons it is very necessary to examine what factors affect that practice of urinary tract infection prevention (UTI) in menopausal mothers at public health.

2. Experimental Method
This research included the explanatory study with quantitative approach of survey method. The population used by all menopausal mothers in working area of puskesmas Taman is 1,127 people. Sample used with age criteria of respondents 50-59 years old, already menopausal and willing to be respondents using probability sampling with simple random sampling technique then obtained a sample of 265 respondents. Types of data used in this study data primary and secondary data, the primary data obtained using the interview directly with the guide questionnaire that contains the practice of prevention UTI and characteristic of respondents containing about education, employment, income, knowledge, attitudes, support husband and peer support. Secondary data from the data obtained from health center or other institutions that support research. The research instrument used questionnaires to obtain information from respondents after that tested the validity and reliability with the selection of subjects who have the same characteristics. Processing techniques and data analysis with the presentation ranging from editing, scoring, coding, tabulating then perform univariate analysis with the aim of describing each variable studied separately by creating a frequency table of each variable Bivariate analysis to analyze data of two variables that aims to find the meaning of relationship between independent variables with dependent variable through cross tabulation analysis of crosstabs. The statistical test used is chi square which is used to test the comparative hypothesis of two samples when the data is in nominal from and the sample is larger than 25.

3. Results and Discussion
Analysis of factor that influence the practice of menopausal mother in prevention of UTI by Chi Square
1. The Relationship Between Education and The Practice of Menopausal Mother. The percentage of poor menopausal woman in intervention of UTI was higher in secondary education (81.0%) than in primary education by 64.8%. Based on the result of statistical test with 5% significance level obtained p value equal to 0.206. This shows no relationship between education with the practice of menopausal mother in prevention of UTI
2. The Relationship Between Jobs and The Practice of Menopausal Mother, The percentage of poor menopausal group of mothers doing UTI prevention was more common in the group of mothers with private employment (67.1%), compared with the mothers group employed as civil servants (28.4%). Based on statistical test result with significance level 5% got p value 0.505. This shows there is no relation between employee with practice of mother of menopausal in prevention of UTI
3. The Relationship Between Income and The Practice of Menopausal Mother. The percentage of poor menopausal group of women doing UTI prevention was more prevalent in the group of mothers with less earnings than the UMR (63.3%), compared to the group of mothers who earned more than the UMR (33.8%). Based on statistical test results with a significant level of 5% in get p value of 1,000 this shows no relationship between income with the practice of menopausal mother in prevention of UTI
4. The Relationship Between Knowledge and The Practice of Menopausal Mother. The percentage of poor menopausal group of mothers doing UTI prevention was more common in the group of mothers with poor knowledge (84.2%), compared with well informed mothers group (61.1%). Based on the results of statistical tests with 5% significance level obtained p value of 0.002. This
shows there is a relationship between mother’s knowledge menopause with maternal practices in UTI prevention

5. The Relationship Between Attitude and The Practice of Menopausal Mother. Percentage of group of bad menopause mother did prevention of UTI mostly found in the group of mothers with unfavorable attitude (83.1%), compared with group mother with good attitude (57.4%). Based on statistical test result with significance level 5% got p value 0.000. This suggests there is a relationship between the attitude of the mother of menopause with the practice of menopause mother in prevention of UTI.

6. The Relationship Between Trust and The Practice of Menopausal Mother. Percentage of the mother menopause unfavorable prevent ISK more found on the mother with confidence disagree (67.9%), compared with mother of trust agree (65.2%). Based on the statistical test with significance level 5% obtained the value of P 0.077. Shows on relationship between the attitude of mother menopause with practice mother menopause in the prevention UTI.

7. The Relationship Between Support Husband and The Practice of Menopausal Mother. Percentage of menopause group of women doing UTI prevention was more prevalent in the maternal group with the support of husbands (100%), compared with the group of mothers who did not get husband support (40.8%). Based on statistical test results with a significant level of 5% obtained p value of 0.000. This suggests there is a relationship between the support of the husband with the practice of menopause mother in the prevention of UTI.

8. The Relationship Between Peer Group and The Practice of Menopausal Mother. The percentage of poor menopause group of mothers doing UTI prevention was more prevalent in the maternal group with no support (100%), compared to the maternal group who received peer support (60.9%). Based on statistical test results with a significant level of 5% obtained p value of 0.000. This suggests there is a relationship between the support of friends with the practice of menopause mother in the prevention of UTI.

9. The Relationship Between Affordability Health Care and The Practice of Menopausal Mother. The percentage of poor menopause group of women performing UTI prevention is more prevalent in the maternal group with affordability difficult health services (69.7%), compared to the maternal group with affordability (63.0%). Based on the results of statistical test with 5% significance level obtained p value of 0.302. This suggests there is a relationship between health service benefits with the practice of menopause mother in prevention of UTI.

| Variables       | Prevention Practices UTI |  |  |  |  |  |  |
|-----------------|--------------------------|---|---|---|---|---|---|
| knowledge       | 1.251                    | .521| 5.759 | 1 | 0.016| 3.492 | 1.258 | 9.699 |
| Beliefs         | -21.5                    | 3.488| 0.000 | 1 | 0.995| 0.000 | 0.000 | 0.000 |
| Peer support    | 20.23                    | 5.605| 0.000 | 1 | 0.997| 6.122 | 0.000 | 0.000 |
| Husband support | 1.405                    | 0.432| 10.607| 1 | 0.001| 4.077 | 1.750 | 9.498 |
| constant        | -21.5                    | 5.605| 0.000 | 1 | 0.997| 0.000 | 0.000 | 0.000 |

The table 1 shown that from some independent variables after analyzed by using logistic regression test with known enter method independent variable which become predictor of menopause mother practice in prevention of UTI is knowledge with value adjusted OR or Exp (B) 3.492 with P 0.016 and support of husband with value adjusted OR or Exp (B) 4.077 with P 0.001 means that good maternal menopause knowledge has probability of 3,492 times of good UTI prevention practice compared with
less knowledge, and good husband support husband support has the possibility of 4,077 times the practice of prevention of UTI well than without the support of husband.

4. Conclusion
The most influential factor is knowledge, where good mother knowledge has a better chance 3,492 times in UTI prevention practice, while good husband support has opportunity 4,077 times practice of prevention of UTI good from not getting husband support. Factor related to dependent variable are knowledge of mother of menopouse, attitude, support of husband and friend support. Factor unrelated to the dependent variable are employment, education, income, affordability to health services and beliefs of the menopause mother.

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