

MIDWIFERY CARE MANAGEMEN OF PULMONARY TUBERKULOSIS PATIENT AT RSU HAJI MEDAN 2025

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ABSTRACT

Background: Pulmonary tuberculosis remains a major public health problem, particularly among elderly individuals who are more vulnerable due to decreased immune function and the presence of chronic health conditions. Comprehensive healthcare management is essential to improve treatment adherence and support patient recovery. **Objectives:** This study aimed to describe the implementation of comprehensive midwifery care for a 61-year-old male patient with pulmonary tuberculosis in the Ar-Rijal Ward at Haji General Hospital Medan, North Sumatra Province. **Methods:** This study employed a descriptive case study design. Data were collected through interviews, physical examinations, direct observations, and medical record reviews. The care process included assessment, planning, implementation, and evaluation of comprehensive midwifery interventions. **Results:** The patient presented with a prolonged productive cough, weight loss, fatigue, night sweats, decreased appetite, and mild shortness of breath. Diagnostic examinations confirmed pulmonary tuberculosis. Comprehensive midwifery care focused on monitoring the patient's condition, providing health education, supporting nutritional needs, encouraging medication adherence, and promoting infection prevention measures. Following the implementation of care, the patient demonstrated improved understanding of the disease and greater commitment to completing treatment. **Conclusions:** Comprehensive midwifery care contributes to improving patient knowledge, treatment adherence, and overall health outcomes in elderly patients with pulmonary tuberculosis. Continuous monitoring and family involvement are important factors in supporting successful recovery and long-term treatment compliance.

Keywords: Pulmonary Tuberculosis, Midwifery Care, Elderly Patient, Case Study.

INTRODUCTION

Pulmonary tuberculosis (TB) remains a significant public health challenge worldwide, particularly in developing countries. The disease is caused by *Mycobacterium tuberculosis* and primarily affects the lungs, leading to symptoms such as prolonged cough, weight loss, night sweats, fatigue, and decreased physical capacity. Older adults are among the populations most vulnerable to tuberculosis because aging is often accompanied by reduced immune function and the presence of chronic health conditions. These factors can increase the risk of infection, complications, and delayed recovery.(Nurannisyah *et al.*, 2025)

Successful tuberculosis management requires not only medical treatment but also comprehensive healthcare support, including monitoring, health education, nutritional guidance, and encouragement of treatment adherence. Healthcare providers play an important role in ensuring that patients understand their condition and consistently follow the prescribed therapy. Continuous care is particularly important because tuberculosis treatment generally takes a long period and requires strong patient commitment. (Shavira *et al.*, 2023)

This case study aimed to describe the implementation of comprehensive midwifery care for a 61-year-old male patient diagnosed with pulmonary tuberculosis in the Ar-Rijal Ward of Haji General Hospital Medan, North Sumatra Province. Through a descriptive case study approach, data were collected using interviews, physical examinations, clinical observations, and medical record reviews. The findings are expected to provide insight into the importance of holistic care in improving patient understanding, treatment adherence, and overall health outcomes among elderly patients with pulmonary tuberculosis.(Pratiwi, Hadisaputro and Suhartono, 2024)

METHODS

This study employed a descriptive research design using a case study approach. The purpose of this design was to provide a detailed description of the implementation of midwifery care for a patient with pulmonary tuberculosis. The study was conducted in the Ar-Rijal Ward of Haji General Hospital Medan, North Sumatra Province, from January to March 2025. The subject of this study was one male patient, Mr. M, aged 61 years, who had been diagnosed with pulmonary tuberculosis. The participant was selected using purposive sampling based on predetermined inclusion criteria, including being diagnosed with active pulmonary tuberculosis, aged 60 years or older, and willing to participate in the study.(Rasyid, 2025)

Data were collected through direct interviews with the patient and family members, physical examinations, clinical observations, and documentation review of the patient's medical records. The collected data included demographic information, medical history, clinical symptoms, physical examination findings, diagnostic test results, and the implementation of midwifery care. (Sains, 2023)

The research was conducted through several stages, namely assessment, identification of problems and nursing diagnoses, planning of interventions, implementation of care, and evaluation of outcomes. Comprehensive care focused on monitoring the patient's condition, providing health education, supporting nutritional needs, encouraging adherence to anti-tuberculosis medication, and preventing disease transmission.(Sari and Setyawati, 2022)

RESULTS AND DISCUSSIONS

The study was conducted on Mr. M, a 61-year-old male patient diagnosed with pulmonary tuberculosis and admitted to the Ar-Rijal Ward at Haji General Hospital Medan. During the initial assessment, the patient complained of a productive cough that had persisted for more than three weeks, accompanied by fatigue, decreased appetite, weight loss, night sweats, and occasional shortness of breath. These symptoms had gradually affected his daily activities and overall quality of life.(Nurannisyah *et al.*, 2025)

Physical examination revealed a weakened general condition and reduced nutritional status. The patient appeared thin and reported a history of progressive weight loss over the previous months. Respiratory assessment identified abnormal breath sounds, indicating involvement of the pulmonary system. Vital signs were monitored regularly throughout the hospitalization period to assess the patient's response to treatment and detect any complications. Diagnostic investigations supported the diagnosis of pulmonary tuberculosis. Chest radiography showed abnormalities consistent with pulmonary infection, while sputum examination confirmed the presence of *Mycobacterium tuberculosis*. Based on these findings, the patient continued anti-tuberculosis therapy according to the prescribed treatment regimen.(Septiani, Airlangga and Java, 2024)

Comprehensive midwifery care was provided through a systematic process that included assessment, planning, implementation, and evaluation. Interventions focused on monitoring respiratory status, promoting adequate nutritional intake, providing health education regarding pulmonary tuberculosis, encouraging adherence to anti-tuberculosis medication, and educating the patient about infection prevention measures. Family members were also involved in the educational process to provide additional support during treatment.(Agustina, 2023)

Following the implementation of care, the patient demonstrated improved understanding of the disease process, treatment regimen, and preventive measures. The patient expressed a greater commitment to completing the prescribed medication schedule and showed increased awareness regarding the importance of maintaining personal hygiene, adequate nutrition, and regular follow-up examinations. Although complete recovery requires long-term treatment, positive progress was observed in the patient's knowledge, attitude, and treatment compliance during the observation period.(Rahma *et al.*, 2024)

CONCLUSIONS

The findings of this study indicate that the patient experienced clinical manifestations commonly associated with pulmonary tuberculosis, including prolonged productive cough, weight loss, fatigue, night sweats, and mild dyspnea. These findings are consistent with previous studies stating that such symptoms are among the most common indicators of pulmonary tuberculosis infection. The d process occurs when *Mycobacterium tuberculosis*

infects lung tissue, causing inflammation and impaired respiratory function.(Informasi *et al.*, 2024)

Comprehensive midwifery care played a significant role in supporting the patient's recovery process. Continuous monitoring enabled early identification of changes in the patient's condition, while health education improved the patient's understanding of the disease and treatment regimen. Previous studies have reported that patient education and regular supervision contribute positively to treatment adherence and therapeutic success, particularly among elderly patients who often require additional support during long-term therapy(Surbakti *et al.*, 2025)

Nutritional support was also an important component of care because pulmonary tuberculosis is frequently associated with weight loss and poor nutritional status. Adequate nutrition helps strengthen the immune system and supports the body's ability to respond to infection. Furthermore, educating the patient and family regarding infection prevention measures contributed to reducing the risk of disease transmission within the household and community. Overall, the results of this case study demonstrate that comprehensive, patient-centered, and continuous midwifery care can improve patient knowledge, treatment adherence, and health outcomes in individuals with pulmonary tuberculosis. These findings support existing evidence emphasizing the importance of holistic healthcare approaches in the management of tuberculosis, particularly among older adults.(Nurannisyah *et al.*, 2025)

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CONFLICT OF INTEREST AND FUNDING DISCLOSURE

The author declares that there are no financial, personal, institutional, or professional conflicts of interest related to the conduct, analysis, interpretation, or publication of this study. The research was performed independently and objectively, and the author did not receive any influence from external parties that could affect the scientific integrity or credibility of the findings presented in this manuscript. The author confirms that no commercial company, pharmaceutical industry, healthcare organization, governmental institution, or private sponsor was involved in the design, implementation, data collection, analysis, interpretation, or reporting of this study. All conclusions presented in this manuscript were derived solely from the findings obtained during the research process and were not influenced by any external interests.(Sembiring *et al.*, no date)

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AUTHOR CONTRIBUTIONS

The author was solely responsible for all aspects of the research process and manuscript preparation. The study was conceptualized and designed by the author, who identified the research problem, formulated the objectives, conducted the literature review, and developed the methodological framework for the case study. The author independently carried out data collection through patient interviews, physical examinations, direct observations, and medical record reviews. In addition, the author was responsible for assessing the patient's condition, identifying healthcare needs, planning and implementing comprehensive midwifery interventions, monitoring patient progress, and evaluating the outcomes of care provided throughout the observation period.(Sinaga *et al.*, 2024)

Furthermore, the author performed data organization, interpretation, and analysis, ensuring that all findings were accurately documented and presented. The author also compared the study findings with relevant theories, scientific literature, and previous research to develop meaningful discussions and conclusions. The manuscript was entirely written, reviewed, edited, and finalized by the author. This included the preparation of the introduction, research methods, results, discussion, conclusion, suggestions, abstract, references, and supplementary.(irawan, I., *et al* (2025) sections. The author carefully reviewed the final manuscript to ensure accuracy, originality, scientific rigor, and compliance with academic standards.(Nurannisyah *et al.*, 2025)

The author has read and approved the final version of the manuscript and accepts full responsibility for the integrity, validity, and authenticity of all data and information presented in this study. The author also confirms that the work is original and has not been published or submitted elsewhere for publication. (Rengkung *et al.*, 2025)

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