

The Relationship Between Age and Gender and the Incidence of Hypertension in the Internal Ward of Massenrempulu General Hospital, Enrekang Regency

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Abstract

Hypertension is a degenerative disease. Generally, blood pressure increases slowly with increasing age. WHO recorded that in 2012 there were at least 839 million cases of hypertension, estimated to be 1.15 billion in 2025 or around 29% of the total world population. The aim of the study was to determine the relationship between age and gender with the incidence of hypertension at Massenrempulu General Hospital, Enrekang district. The type of research used is a cross-sectional design. The population in this study were all patients in the Internal Room at Massenrempulu General Hospital, Enrekang Regency in 2015, namely 272 people. The sample studied was 51 people using the nonprobability sampling method with accidental sampling technique. The research was carried out from 14 to 31 March 2016. Data was collected using a questionnaire and then statistical analysis was carried out using the chi square test with the alternative Fisher exact test with a significance level of $\alpha = 0.05$. The results of the study showed that of the 51 respondents studied, based on age, the most respondents were high risk, namely 35 people (68.6%), based on gender, the most respondents were women, namely 27 people (52.9%), and the majority of respondents experienced hypertension, namely 36 people (70.6%). Based on the research results, it was concluded that there was a relationship between age and the incidence of hypertension, with a value of $p = 0.001 < 0.05$, and there was a relationship between gender and the incidence of hypertension, with a value of $p = 0.002 < 0.05$. It is recommended that health service officers always strive to provide information to the public by providing health education in an effort to develop strategies to prevent, reduce or control morbidity rates among hypertension sufferers in their work areas.

Introduction

Hypertension is a condition where blood pressure exceeds normal limits. People are considered to be suffering from hypertension if their systolic pressure is above 140 mmHg (millimeters of mercury) and can also be accompanied by a diastolic pressure above 90 mmHg on two or three examinations (Suheimi & Utari, 2023).

Hypertension or high blood pressure is caused by blood vessels (Mali & Elfi, 2020) which tighten, causing blood pressure to increase. Blood pressure can reach 140/90 mmHg while the normal limit for upper blood pressure is between 100-120 mmHg and lower pressure 70-85 (Prisusanti et al., 2021; Sisti et al., 2023; Ji et al., 2022). Most patients have prehypertensive blood pressure before they are diagnosed with hypertension, which occurs between the ages of the third and fifth decades (Ningtias et al., 2021; Ott & Schmieder, 2022; Moin et al., 2021).

In general, hypertension sufferers are people over 35 years old, but currently it is possible for young people to suffer from it (Carey et al., 2022). Most primary hypertension occurs at the age of 25-35 years and only 20% occurs under the age of 20 years. This is because people of

productive age rarely pay attention to health, such as unhealthy diet and lifestyle such as smoking (Gangadi et al., 2021).

The prevalence of hypertension in men is the same as in women (Prajayanti & Sari, 2020). However, women are protected from cardiovascular disease before menopause (Ryczkowska et al., 2023). Women who have not experienced menopause are protected by the hormone estrogen which plays a role in increasing HDL levels (Flores et al., 2021; El Khoudary et al., 2021; Beazer & Freeman, 2022). high HDL cholesterol levels are a protective factor in preventing the process of atherosclerosis. This causes an increase in female hypertension sufferers at the age of menopause (Ghazi & Bello, 2021). Some experts still have different conclusions, there are varying comparisons between men and women.

Men often experience signs of hypertension in their late twenties, while women often experience hypertension after menopause (Duarte et al., 2022; Ghazi & Bello, 2021; Yulinda & Kusumawardani, 2023). One of the causes is due to differences in hormones between the two sexes. Production of estrogen hormones decreases during menopause, women lose their beneficial effects so blood pressure increases (Rahayu, 2021). The World Health Organization (WHO) recorded that in 2012 there were at least 839 million cases of hypertension, estimated to be 1.15 billion in 2025 or around 29% of the total world population. Around 80% of the increase in hypertension cases occurred, especially in developing countries (Mills et al., 2020).

At the national level, it is known that 24.5% of the Indonesian population over 10 years old consume salty food every day, once or more (Khoiry et al., 2022; Andarwulan et al., 2021). Meanwhile, the prevalence of hypertension in Indonesia is among the population aged 18 years and over (Sudikno et al., 2023). of that number, in 2007 as many as 31.7% suffered from hypertension, while in 2013 as many as 25.8% and some others experienced stroke complications. Meanwhile, the rest experienced heart disease, kidney failure and blindness. Hypertension is the 3rd cause of death after stroke and tuberculosis Basic Health Research, 2013 (Martini et al., 2022; Ameer, 2022).

Based on data in South Sulawesi, among residents 18 years and over in 2007 the number of hypertension sufferers was 32.0%, while in 2013 it was 30.1% (Ministry of Health, 2013). Based on the explanation above, researchers are interested in conducting research with the title "The Relationship between Age and Gender and the Incident of Hypertension at Massenrempulu General Hospital, Enrekang Regency".

Methods

The research incorporated a quantitative method and utilized a cross-sectional design to study linkages between age and gender on hypertension cases. The use of a cross-sectional design was suitable because it allows researchers to measure variables and outcomes simultaneously during a particular time to determine relationships between demographic characteristics and health outcomes. The research study took place at Massenrempulu General Hospital Internal Ward situated in Enrekang Regency during two weeks from March 14 to March 31, 2016 for data collection. All patients who received treatment at the Internal Ward of the hospital during 2015 formed the target population with a total of 272 individuals.

The researchers utilized accidental sampling as their non-probability sampling method to choose 51 individuals from the total 272 patients study group. The researchers conducted accidental sampling by choosing any participants who appeared during collection time when satisfying the study requirements thus suitable when random selection is impractical due to time limitations or barriers to accessibility. Respondents answered survey questions with a structured questionnaire that contained demographic data including individual ages and genders and educational backgrounds alongside clinical data about hypertension incidence.

Researchers grouped the participants into high-risk age categories and low-risk age categories following hypertension risk criteria standards. The questionnaire divided participants between male and female categories. The research used both univariate and bivariate statistical approaches for data examination. The sample variables regarding education level and occupational status and demographic features including age group and gender together with hypertension status were assessed by univariate analysis techniques.

The evaluation used Bivariate analysis through Chi-Square test with Fisher’s Exact alternative test to determine relationships between independent variables (age and gender) and dependent variable (hypertension incidence). The analytical threshold equaled $\alpha = 0.05$ so research outcomes demonstrated statistical significance whenever the associated p-value reached values under 0.05. This research design delivered a brief yet powerful framework to discover relationships between demographic characteristics and hypertension rates in the internal medical ward patients while providing useful public health information to apply in hospital-based populations.

Result and Discussion

Based on the results of data processing, the following will present univariate analysis and bivariate analysis.

Univariate Analysis

Last education

Table 1. Distribution of Respondents Based on Last Education in the Internal Room Massenrempulu General Hospital, Enrekang Regency

Last Education	n	%
Elementary School	10	19,6
Junior High School	15	29,4
Senior High School	23	45,1
College	3	5,9
Total	51	100,0

Source: Primary Data

Table 1 shows that the most recent education of respondents was high school, namely 23 people (45.1%), and the least was college, namely 3 people (5.9%).

Work

Table 2. Distribution of Respondents Based on Work in the Internal Space Massenrempulu General Hospital, Enrekang Regency in 2016

Work	n	%
Civil servants	3	5,9
Self-employed	19	37,3
Laborer	9	17,6
IRT	13	25,5
Student	2	3,9
Doesn't work	5	9,8
Amount	51	100,0

Source: Primary Data

Table 2 shows that the majority of respondents' occupations are self-employed, namely 19 people (37.3%), and at least 2 people (3.9%) still have student status.

Age

Table 3. Distribution of Respondents Based on Age in the Internal Room of Massenrempulu General Hospital, Enrekang Regency, 2016

Age	n	%
High Risk	35	68,6
Low Risk	16	31,4
Amount	51	100,0

Source: Primary Data

Table 3 shows that the age of most respondents is those with high risk, namely 35 people (68.6%), while the age of respondents with low risk is 16 people (31.4%).

Gender

Table 4. Distribution of Respondents Based on Gender in the Internal Room of RSU Massenrempulu, Enrekang Regency, 2016

Sex	n	%
Man	24	47,1
Woman	27	52,9
Amount	51	100,0

Source: Primary Data

Table 4 shows that the gender of most respondents was female, namely 27 people (52.9%), while male respondents were 24 people (47.1%).

Hypertension Occurrence

Table 5. Distribution of Respondents Based on the Incident of Hypertension in the Internal Room of RSU Massenrempulu Enrekang Regency in 2016

Hypertension Occurrence	n	%
Hypertension	36	70,6
Not Hypertension	15	29,4
Amount	51	100,0

Source: Primary Data

Table 5 shows that the majority of respondents experienced hypertension, namely 36 people (70.6%), while respondents who did not experience hypertension were 15 people (29.4%).

Bivariate Analysis

Relationship between Age and the Incident of Hypertension

Table 6. Relationship between age and the incidence of hypertension in the internal space Massenrempulu General Hospital, Enrekang Regency in 2016

Respondent's Age	Hypertension Occurrence		Total	p Value
	Hypertension	Not Hypertension		

	n	%	n	%	n	%	
High Risk	30	85,7	5	14,3	35	100,0	0,001
Low Risk	6	37,5	10	62,5	16	100,0	
Amount	36	70,6	15	19,4	51	100,0	

Source: Primary Data

Table 6 shows that there were 35 respondents with high-risk age, 30 people who had hypertension (85.7), and 5 people who did not have hypertension (14.3%). Meanwhile, respondents with a low-risk age were 16 people, 10 people did not have hypertension (62.5%), and 6 people had hypertension (37.5%).

After carrying out the Fisher's exact test, the value of $p = 0.001 < 0.05$ was obtained, which means that there is a relationship between age and the incidence of hypertension.

Relationship between Gender and the Incident of Hypertension

Table 7. Relationship between gender and the incidence of hypertension in the internal room Massenrempulu General Hospital, Enrekang Regency in 2016

Gender	Hypertension Occurrence				Total		p Value
	Hypertensio		Not Hypertension				
	n	%	n	%	n	%	
Man	22	91,7	2	8,3	24	100,0	0,002
Woman	14	51,9	13	48,1	27	100,0	
Amount	36	70,6	15	29,4	51	100,0	

Source: Primary Data

Table 7 shows that 24 respondents were male, 22 people had hypertension (91.7), and 2 people did not have hypertension (8.3%). Meanwhile, 27 respondents were female, 14 people had hypertension (51.9), and 13 people did not have hypertension (48.1%).

After carrying out Fisher's exact test, the p value = $0.002 < 0.05$, which means that there is a relationship between gender and the incidence of hypertension.

Conclusion

Based on the research results, it was concluded that there was a relationship between age and the incidence of hypertension, with a value of $p = 0.001 < 0.05$, and there was a relationship between gender and the incidence of hypertension, with a value of $p = 0.002 < 0.05$. It is recommended that health service officers always strive to provide information to the public by providing health education in an effort to develop strategies to prevent, reduce or control morbidity rates among hypertension sufferers in their work areas.

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