

# ANALYSIS OF RISK FACTORS INFLUENCING THE INCIDENCE OF PNEUMONIA IN TODDLERS IN THE WORK AREA OF BATURRADEN II PUBLIC HEALTH CENTER

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## ABSTRACT

**Background:** Pneumonia is the causes of death in children. Baturaden District is an area with a high incidence of pneumonia, with the prevalence rate of 4%. Pneumonia in under-five children can be caused by a variety of factors. The aim of this study was to identify factors influencing the incidence of pneumonia in under- five children in the work area of the Puskesmas Baturaden II.

**Methods:** This study is a quantitative analysis observational study with a case- control design using a total of 108 samples consisting of 54 case samples and 54 control samples. Questionnaires, documents and stationery served as research tools. The independent variables used were nutritional status, DPT and measles immunization status, exclusive breastfeeding, vitamin A provision, floor type, wall type, ceiling condition of the house, window opening habits, presence of smokers in the house, and use of mosquito coils. Data analysis was univariate analysis, bivariate analysis with chi-square test, and multivariate analysis with multiple logistic regression test.

**Results:** Analysis showed that exclusive breastfeeding (p value = 0.003), the presence of smokers in the home (p value = 0.008), and the use of mosquito coils (p value = 0.045) influenced incidence pneumonia in under-five children. Nutritional status, DPT and measles vaccination status, vitamin A administration, floor type, wall type, ceiling condition, and the use of mosquito coils had no effect on the incidence of pneumonia (p value > 0.05). Exclusive breastfeeding is the most influential variable in this study with an OR value of 5.524 (1.755-17.384).

**Conclusion:** Exclusive breastfeeding is the most influential risk factor for the incidencide of pneumonia in under-five children in the working area of Puskesmas Baturaden II. Therefore, a mother needs to increase understanding and awareness to provide exclusive breastfeeding to under-five children so that under-five children's immunity is in good condition.

**Keywords:** Under-five children, Risk factor, Physical environment, Pneumonia

## INTRODUCTION

Pneumonia is an infection of the respiratory tract of the lungs (Ministry of Health of the Republic of Indonesia, 2022). Pneumonia is mostly caused by microorganisms, such as viruses or bacteria (Sari & Cahyati, 2019). Pneumonia in toddlers is characterized by coughing and/or signs of difficulty breathing (Ministry of Health of the Republic of Indonesia, 2022).

Pneumonia is the leading cause of child death worldwide. In 2019, pneumonia killed 740,180 children under the age of 5. The highest mortality rates from pneumonia occur in low- and middle-income countries (WHO, 2021). The World Health Organization (WHO) states that Indonesia ranks 8th in the world, making it the second-leading cause of infant mortality after diarrhea (Ministry of Health of the Republic of Indonesia, 2022). Central Java Province is the province with the 5th highest coverage of pneumonia in toddlers, which is 37.6% (Ministry of Health of the Republic of Indonesia, 2022). One of the areas in Central Java Province where many cases of pneumonia are found is Banyumas Regency with a prevalence of 3.61%. The 2021

Banyumas Regency Health Profile shows that 1,537 out of 97,885 toddlers suffer from pneumonia (43.5%). The number of pneumonia cases found increased compared to the previous year in 2020, namely 160 toddlers out of 88,764 toddlers suffered from pneumonia (5.0%). Baturraden District is one of the areas with quite high pneumonia cases with a prevalence of 4% (Banyumas Regency Health Office, 2022). According to data recorded in the 2017-2021 case summary of Baturraden II Health Center, pneumonia is ranked 8th out of 10 health problems in the Baturraden II Health Center work area, namely 152 cases in 2021. This figure has increased compared to the previous year, namely 113 cases in 2020 and 47 cases in 2019 (Baturraden II Health Center, 2021). The results of a preliminary study conducted at Baturraden II Health Center showed that the number of pneumonia cases in toddlers found during January-December 2022 was 105 cases.

Pneumonia is a serious problem because it can be transmitted through the air and the immune system of toddlers is still not perfect, causing the transmission of pneumonia infection to

be very easy. Based on the increasing trend of pneumonia incidence in toddlers, a study was conducted to determine the risk factors that influence the incidence of pneumonia in toddlers in the Baturraden II Health Center work area.

## RESEARCH METHOD

The type of research used is quantitative analytical observational research with a case control design. The study was conducted in the working area of Baturraden II Health Center during October 2022-March 2023. The case population in this study were outpatients of toddlers at Baturraden II Health Center in January-December 2022, with a

minimum sample of 54 toddlers and a consecutive sampling technique. The control population in this study were toddlers who were neighbors of toddlers with pneumonia who had never been clinically diagnosed with pneumonia in January-December 2022, with a minimum sample of toddlers and a purposive sampling technique.

The independent variables used were nutritional status, DPT and measles immunization status, exclusive breastfeeding, vitamin A provision, floor type, wall type, ceiling condition of the house, window opening habits, presence of smokers in the house, and use of mosquito coils.

## RESULTS AND DISCUSSION

Table 1. Relationship between exclusive breastfeeding. P value = 0.000 and the presence of smokers in the house (p value = 0.015) with the incidence of pneumonia in toddlers in the Baturraden II Health Center work area.

| Variabel   |                | Pneumonia |      |         |      | Total |      | OR<br>(95%<br>CI)          | p<br>value |
|--|----------------|-----------|------|---------|------|-------|------|----------------------------|------------|
|  |                | case      |      | control |      |       |      |                            |            |
|  |                | n         | %    | n       | %    | n     | %    |                            |            |
| Nutritional<br>status  | Malnutrition   | 9         | 16,7 | 4       | 7,4  | 13    | 12   | 2,500<br>(0,720-<br>8,680) | 0,237      |
|  | Good nutrition | 45        | 83,3 | 50      | 92,6 | 95    | 88   |                            |            |
| Not getting<br>Vitamin A<br>Immunization<br>status<br>DPT and<br>measles | Incomplete     | 1         | 1,9  | 0       | 0,0  | 1     | 0,9  | -                          | 1,000      |
|  | complete       | 53        | 98,1 | 54      | 100  | 107   | 99,1 |                            |            |

| Variabel                                      |                                   | Pneumonia |      |         |      | Total |      | OR<br>(95%<br>CI)           | p<br>value |
|---|-----------------------------------|-----------|------|---------|------|-------|------|-----------------------------|------------|
|   |                                   | case      |      | control |      |       |      |                             |            |
|   |                                   | n         | %    | n       | %    | n     | %    |                             |            |
| Exclusive<br>breastfeeding                    | Not<br>exclusive<br>breastfeeding | 23        | 42,6 | 5       | 9,3  | 28    | 25,9 | 7,271<br>(2,503-<br>21,126) | 0,000      |
|   | breastfeeding                     | 31        | 57,4 | 49      | 90,7 | 80    | 74,1 |                             |            |
| Giving vitamin<br>A                           | Not getting<br>vitamin A          | 1         | 1,9  | 0       | 0,0  | 1     | 0,9  | -                           | 1,000      |
|   | Getting vitamin A                 | 53        | 98,1 | 54      | 100  | 107   | 99,1 |                             |            |
| Floor type                                    | Not eligible                      | 7         | 13   | 4       | 7,4  | 11    | 10,2 | 1,862<br>(0,512-<br>6,773)  | 0,525      |
|   | eligible                          | 47        | 87   | 50      | 92,6 | 97    | 89,8 |                             |            |
| Wall type                                     | Not eligible                      | 5         | 9,3  | 2       | 3,7  | 7     | 6,5  | 2,653<br>(0,492-<br>14,315) | 0,434      |
|   | eligible                          | 49        | 90,7 | 52      | 96,3 | 101   | 93,5 |                             |            |
| Condition of<br>the ceiling of<br>the house   | Not eligible                      | 33        | 61,1 | 22      | 40,7 | 55    | 50,9 | 2,286<br>(1,058-<br>4,940)  | 0,054      |
|   | eligible                          | 21        | 38,9 | 32      | 59,3 | 53    | 49,1 |                             |            |
| The<br>habit of<br>opening<br>windows         | No                                | 20        | 37   | 10      | 18,5 | 30    | 27,8 | 2,588<br>(1,072-<br>1,070)  | 0,053      |
|   | Yes                               | 34        | 63   | 44      | 81,5 | 78    | 72,2 |                             |            |
| The<br>presence of<br>smokers in<br>the house | Yes                               | 42        | 77,8 | 29      | 53,7 | 71    | 65,7 | 3,017<br>(1,309-<br>6,956)  | 0,015      |
|   | No                                | 12        | 22,2 | 25      | 46,3 | 37    | 34,3 |                             |            |
| Use of<br>mosquito<br>coils                   | Yes                               | 11        | 20,4 | 5       | 9,3  | 16    | 14,8 | 2,507<br>(0,807-<br>7,789)  | 0,176      |
|   | No                                | 43        | 79,6 | 49      | 90,7 | 92    | 85,2 |                             |            |
| Total   |                                   | 54        | 100  | 54      | 100  | 108   | 100  |                             |            |

(Source: Processed Primary Data, 2023)

Table 2. Results of Multivariate Analysis

| Variabel                             | p value | OR    | 95% CI       |
|--------------------------------------|---------|-------|--------------|
| Exclusive breastfeeding              | 0,003   | 5,524 | 1,755-17,384 |
| The habit of opening windows         | 0,363   | 1,609 | 0,577-4,486  |
| The presence of smokers in the house | 0,008   | 3,942 | 1,419-10,950 |
| Use of mosquito coils                | 0,045   | 4,230 | 1,032-17,341 |

(Source: Processed Primary Data, 2023)

Table 3 Breastfeeding influenced variables that influence the incidence of pneumonia in toddlers in the Baturraden II Health Center work area are exclusive breastfeeding, the presence of smokers in the house, and the use of mosquito coils. Exclusive breastfeeding is the most influential variable in this study with an OR value of 5.524 (1.755-17.384).

## DISCUSSION

The results of the multivariate analysis showed that the variables that influenced the incidence of pneumonia in toddlers in the Baturraden II Health Center work area were exclusive breastfeeding, the presence of smokers in the house, and the use of mosquito coils.

Exclusive breastfeeding for the first 6 months of a baby's life is the best. Exclusive breastfeeding is giving pure breast milk to babies without additional food and drinks from birth until the baby is 6 months old (Pramulya, Wijayanti & Saparwati, 2021). Exclusive breastfeeding is known to provide great protection for babies because it plays a very important role in preventing allergies and inflammation and increasing the immunity of toddlers. Infants under 6 months who do not receive exclusive

breastfeeding are at risk of developing infectious diseases, such as pneumonia (Vicasco & Handayani, 2020). The results of the study showed that exclusive breastfeeding had an effect on the incidence of pneumonia in toddlers in the Baturraden II Health Center work area (p value <0.05) with an OR value = 5.524 (1.755-17.384). The results of this study are in line with the study conducted by Mardani, Pradigdo & Mawarni (2018), that a history of exclusive breastfeeding had an effect on the incidence of pneumonia in the Gombong II Health Center work area (p value <0.05) with an OR value = 3.115 (1.247-7.787). However, the results of this study are not in line with the study conducted by Januariana, Khairatunnisa & Sari (2020), that exclusive breastfeeding had no effect on the incidence of pneumonia in toddlers in Tunas

Harapan Village, Gunung Meriah District, Aceh Singkil Regency (p value >0.05).

The habit of smoking indoors is one of the causes of poor air quality, which endangers the health of other family members, especially toddlers (Wulandari et al., 2020). Cigarette smoke inhaled by smokers or inhaled by family members around smokers contains toxic and carcinogenic substances, so the effects on passive smokers are almost the same as active smokers. Cigarette smoke can cause irritation of the respiratory tract by sulfur dioxide, ammonia, and formaldehyde, which can increase lower respiratory tract infections in toddlers (Leonardus & Anggraeni, 2019).

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mortality rates from pneumonia occur in low- and middle-income countries (WHO, 2021). The World Health Organization (WHO) states that Indonesia ranks 8th in the world, making it the second-leading cause of child mortality after diarrhea (Ministry of Health of the Republic of Indonesia, 2022).

The presence of smokers in the house affects the incidence of pneumonia in toddlers in the Baturraden II Community Health Center work area (p value <0.05) with an OR value of 3.942 (1.419-10.950). The results of this study are in line with research conducted by Hasanah & Santik (2021), which stated that family members' smoking habits influence the incidence of pneumonia in toddlers (p value <0.05) with an OR value of 3.619 (1.290-10.150). However, the results of this study are not in line with research conducted by Kasundriya et al. (2020), which stated that the presence of smokers in the home does not affect the incidence of pneumonia in toddlers (p value >0.05). Mosquito coils contain compounds such as carbon monoxide, hydrogen cyanide, heavy

metals, free radicals, and can irritate the respiratory tract in toddlers if the smoke is inhaled (Kusumawati, Suahartono & Dewanti, 2017). The smoke produced by mosquito coils carries a higher risk than the smoke produced by cigarettes (Norkamilawati, Anwary & Ernadi, 2022). The use of mosquito coils affects the incidence of pneumonia in toddlers (p value  $<0.05$ ) with an OR value of 4.230 (1.032-17.341). The results of this study are in line with research conducted by Sari, Rahardjo & Joko (2018), which found that the use of mosquito coils affects the incidence of pneumonia (p value  $<0.05$ ) with an OR value of 9.750 (1.158-82.108). This study is inconsistent with research conducted by Suryani, Hadisaputro & Zain (2018), which found that the use of mosquito coils does not affect the incidence of pneumonia (p value  $>0.05$ ). Variables that do not have a significant relationship and do not affect the incidence of pneumonia in toddlers are nutritional status, DPT and measles immunization status, vitamin A administration, floor type, wall type, ceiling condition, and window opening habits (p value  $>$

0.05). Nutritional status, complete immunization, and vitamin A are one way to improve toddler immunity, physical environmental factors of the house (Minister of Health Decree No. 829 of 1999 concerning Housing Health Requirements).

## **CONCLUSION AND SUGGESTIONS**

The community, especially mothers of toddlers, are expected to be aware of providing exclusive breastfeeding to their children so that the child's immunity is in good condition. In addition, family members are advised to prevent toddlers from exposure to cigarette smoke and mosquito coils. Baturraden II Health Center officers also need to improve monitoring and early detection of risk factors for pneumonia in toddlers so that the incidence of pneumonia in toddlers can decrease. Further researchers can conduct further research on risk factors that influence the incidence of pneumonia in toddlers using a cohort research design, where researchers compare exposed and unexposed groups based on disease status, so that clearer research results are obtained.

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