

UPAYA PENANGGULANGAN TUBERKULOSIS DI RUMAH TAHANAN NEGARA/ LEMBAGA PEMASYARAKATAN SE EKS KARESIDENAN SURAKARTA

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ABSTRAK

Lembaga pemasyarakatan (lapas) dan rumah tahanan negara (rutan) merupakan salah satu *reservoir* untuk transmisi *Mycobacterium tuberculosis*. Insidensi tuberkulosis (TB) lapas/ rutan adalah 5-70 kali lebih besar dibandingkan di masyarakat umum. Tingginya kasus TB di lapas/ rutan disebabkan oleh kepadatan penghuni, tahanan yang umumnya berasal dari kelompok risiko tinggi terinfeksi TB, penyakit komorbid, perokok dan riwayat kontak dengan pasien TB. Tujuan penelitian adalah mendeskripsikan pelaksanaan program penanggulangan tuberkulosis dan determinan kejadian infeksi TB di rutan/ lapas se-eks karesidenan Surakarta. Perlakuan dan pelayanan kesehatan pada tahanan, narapidana atau anak didik pemasyarakatan merupakan sebagai salah satu tolak ukur keberhasilan pembangunan di bidang hukum baik secara nasional ataupun internasional. Penyakit TB menempati urutan ke-4 penyakit yang paling banyak diderita napi dan tahanan serta merupakan salah satu penyebab utama kesakitan dan kematian di Lapas dan Rutan seluruh Indonesia. Penyebab masalah TB di Lapas dan Rutan : kurangnya jumlah dan kompetensi petugas kesehatan, sarana klinik dan laboratorium belum memadai, belum semua Bapas terlibat dalam program pengendalian TB, mekanisme jejaring internal antar Rutan, Lapas dan Bapas dalam pengobatan TB belum terkoordinasi dengan baik, Pencegahan dan Pengendalian Infeksi TB belum dilaksanakan sesuai standar, lemahnya pencatatan, pelaporan dan sistem monitoring evaluasi, kurangnya dukungan manajemen Lapas dan Rutan, peningkatan kasus HIV yang berdampak dalam peningkatan kasus TB. Langkah strategis dalam upaya pengendalian TB di lapas dan rutan adalah memperkuat komitmen, membangun kapasitas sumber daya, meningkatkan penemuan kasus TB, diagnosis dan pengobatan kasus TB sesuai standar nasional, mengembangkan system informasi untuk surveilans, kegiatan monitoring dan evaluasi, promosi kesehatan di lingkungan rutan, lapas dan bapas, menangani kasus TB kebal obat, meningkatkan upaya pencegahan pengendalian infeksi TB serta pembiayaan.

Kata kunci: Lapas/ rutan, Tuberkulosis, DOTS, Sputum BTA

TUBERCULOSIS PREVENTION PROGRAM EFFORTS IN SURAKARTA STATE CORRECTIONAL INSTITUTION/ PRISONS

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ABSTRACT

State correctional institution/ prison is one reservoir for transmission of Mycobacterium tuberculosis. The incidence of TB in state correctional institution/prison is 5-70 times greater than in the general population. High incidence of TB in state correctional institution/prison due to the density of residents, prisoners are generally derived from high-risk groups are infected with TB, co-morbid diseases, smokers and history of contact with TB patients. The purpose of research is to describe the implementation of tuberculosis control programs and determinants incidence of TB infection in the crease/ prisons throughout the former Surakarta residency. Treatment and health services in detention, the inmate or a correctional protege as one measure of the success of development in the field of law, both nationally and internationally. TB disease ranks fourth most common disease that prisoners and detainees and is one of the major causes of morbidity and mortality in prisons all over Indonesia. The cause of the problem of TB in prisons: the lack of the number and competence of health personnel, means of the clinic and the laboratory have not been adequate, not all Bapas involved in TB control programs, mechanisms of internal network between detention, prisons and Bapas in the treatment of TB not well coordinated, Prevention and TB Infection control has not carried out according to standards, poor record keeping, reporting, and monitoring system of evaluation, lack of management support prisons, the increase of HIV cases that have an impact on the increase in TB cases. A strategic step in the effort to control TB in prisons and detention centers is to strengthen the commitment, capacity building resources, increase of weaving cases of TB, diagnosis and treatment of TB cases according to national standards, developing information systems for surveillance, monitoring and evaluation, health promotion in the crease, prisons and Bapas, handling cases of drug-resistant TB, enhance efforts to prevent TB infection control and financing.

Keywords: state correctional institution/ prison, tuberculosis, DOTS, AFB sputum smear