

**ASUHAN KEBIDANAN PADA IBU HAMIL NY. I UMUR 33 TAHUN USIA
KEHAMILAN 13 MINGGU G3P2A0 DENGAN HIPERTENSI KRONIK
DI PUSKESMAS SENTOLO 1 KABUPATEN KULON PROGO
YOGYAKARTA**

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RINGKASAN

Latar Belakang : Adaptasi fisiologis kardiovaskuler selama hamil berperan penting dalam mendukung pertumbuhan dan perkembangan janin secara optimal. Namun, apabila terjadi *respons maladaptif* yang diawali oleh gangguan proses *invasi trofoblast* pada jantung dapat berkembang menjadi hipertensi dalam kehamilan, termasuk hipertensi kronik. Penanganan dilakukan secara farmakologis dan nonfarmakologis.

Tujuan : Mengidentifikasi Asuhan Kebidanan Kehamilan dengan Hipertensi Kronis di Puskesmas Sentolo 1 pada tahun 2024.

Hasil : Setelah dilakukan pendampingan pada Ny. I mendapatkan hasil pada saat kunjungan pertama tekanan darah ibu 142/90 mmHg dengan keluhan susah tidur, kadang mual, dan pusing. Setelah dilakukan asuhan kebidanan dengan kolaborasi dokter spesialis kandungan, melakukan edukasi mengonsumsi pisang ambon, merendam kaki dengan air hangat, kolaborasi dengan YANKESTRAD untuk dilakukannya akupresure, edukasi mendengarkan musik klasik mozart, dan menghirup aromaterapi lemon mendapatkan hasil penurunan tekanan darah menjadi 120/82 mmHg, tidak mual dan nafsu makan sudah meningkat, akan tetapi keluhan sulit tidur dan pusing ringan masih ada.

Kesimpulan : Asuhan diberikan pada Ny. I belum sesuai standar dan tidak semua keluhan teratasi.

Kata Kunci : Hipertensi Kronik, Kehamilan, Multigravida

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**MIDWIFERY CARE FOR PREGNANT WOMAN MRS. I 33 YEARS OLD
13 WEEKS OF PREGNANCY G3P2A0 WITH CHRONIC
HYPERTENSION AT SENTOLO 1 PUBLIC HEALTH CENTER KULON
PROGO REGENCY, YOGYAKARTA**

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SUMMARY

Background: Cardiovascular physiological adaptations during pregnancy play a crucial role in supporting optimal fetal growth and development. However, if a maladaptive response occurs, initiated by a disruption in the trophoblast invasion process in the heart, it can develop into gestational hypertension, including chronic hypertension. Treatment involves both pharmacological and non-pharmacological approaches.

Objective: To identify midwifery care for pregnancies with chronic hypertension at Sentolo 1 Community Health Center in 2024.

Results: After providing support to Mrs. I, her blood pressure was 142/90 mmHg during her first visit, with complaints of insomnia, occasional nausea, and dizziness. Following midwifery care in collaboration with an obstetrician, education on consuming Ambon bananas, soaking her feet in warm water, collaboration with YANKESTRAD for acupressure, education on listening to Mozart classical music, and inhaling lemon aromatherapy, her blood pressure decreased to 120/82 mmHg. She no longer felt nauseous, and her appetite had increased. However, complaints of insomnia and mild dizziness persisted.

Conclusion: The care provided to Mrs. I was not up to standard, and not all of her complaints were resolved.

Keywords: Chronic Hypertension, Pregnancy, Multigravida

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