

THE USE OF TRADITIONAL MEDICINE BY WOMEN WITH HYPERTENSION IN WEDI

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ABSTRACT

One of the non-communicable diseases that becomes a major risk factor for cardiovascular disease is hypertension. The prevalence of women with hypertension in Wedi district is 38.9%. This study aims to explore how women who have hypertension use traditional medicine in Wedi District. This type of research is qualitative with a phenomenological approach. The results of this study include: The definition of high blood pressure disorder is when a person has a blood pressure of more than 140 or more than the normal blood pressure of 120, but when checked repeatedly, the blood pressure is not stable. In addition, direct causes of hypertension such as disease, age, and gender. Meanwhile, indirect causes such as food and drinks, body conditions, and psychological disorders. Meanwhile, signs and symptoms of hypertension include physical disorders and psychological disorders. Hypertension may cause organ malfunction, activity disruption, and psychological disorders. Thus, the first aid taken is varied, such as seeking treatment at health care facilities, seeking treatment at health workers, seeking treatment at traditional health workers (Nakestrad), and self-medicating. Furthermore, traditional skills-based therapy can be done, including dry cupping, walking on gravel, self-soothing therapy, etc. Meanwhile, jamu can also be used to maintain blood pressure, such as jamu beras kencur, jamu hipertensi saintifik, etc. They also use some medicinal plants, including kenikir leaves, papaya leaves, etc. It can be concluded that not all women know about hypertension, and their efforts to maintain their blood pressure greatly vary both conventionally, traditional medicine (skills, herbs, and medicinal plants), and self-medicate.

Keywords: High blood pressure disorder (hypertension), cardiovascular, women, traditional medicine

INTRODUCTION

Cardiovascular disease represents a significant global health concern, accounting for a considerable proportion of deaths worldwide. As indicated by data released by the Ministry of Health, high blood pressure (hypertension) and heart disease collectively account for approximately one-third of all deaths, with high blood pressure (hypertension) representing the second leading cause of death after stroke (Kemenkes RI, 2018). Hypertension is defined as a systolic blood pressure greater than or equal to 140 mmHg and a diastolic pressure greater than or equal to 90 mmHg (Price and Wilson, 2006). The prevalence of hypertension in Central Java Province is 37.57% while in women it is 40.17%, higher than in men 34.83% (Kemenkes RI, 2018). In Klaten Regency, hypertension cases were reported as 36.2% in 2022 (Dinas Kesehatan Kabupaten Klaten, 2023).

Blood pressure can be affected by many factors, changeable or unchangeable. One of the changeable factors is lifestyle, which is also strongly influenced by their knowledge about

disease, while unchangeable factors are genetic. Preliminary studies conducted by researchers at the Puskesmas Wedi from July to early August 2023 obtained data on the total population of Wedi District aged 15-59 years, are 29,300 people with 11,021 men and 18,279 women. In 2021, there were 7,941 people with hypertension, including 4,646 women and 3,295 men. A year later, data showed there was an increase of 11,132 people with hypertension, 7,112 women and 4,020 men. The number of hypertension cases in the Wedi community has risen over the past two years (Dinas Kesehatan Kabupaten Klaten, 2023).

The Wedi Health Center has a one-stop service post program that accommodates patients with hypertension with a comprehensive approach to treatment, combining conventional and traditional medicine. The program provides counseling and training on how to manage hypertension through a range of strategies, including self-care and lifestyle modifications. It also involves family medicinal plant self-management (Asman Toga) cadres, and other community-based resources. It is essential to observe how the community, particularly women with hypertension, gain insight into the methods they use to overcome these disorders through traditional means, including the utilization of traditional medicine based on herbs and other medicinal plants, as well as traditional skills-based therapy, which women commonly use to address hypertension disorders (Dinas Kesehatan Kabupaten Klaten, 2023).

Based on those descriptions, the researcher will undertake a study of the attempts of women with hypertension through traditional medicine.

METHODS

This study employs a qualitative descriptive research design with a phenomenological approach to investigate the experiences of women in Wedi District who have been diagnosed with hypertension and have sought treatment through traditional medicine, consisting of all women aged 15-59 with a total of 7,112 women. The sampling method employed in this study was purposive sampling. Purposive sampling is a non-probability sampling technique based on the selected subject's characteristics (Hendriansyah, 2015). According to Abdussamad (2021), guidelines used as data collection methods in field research are:

1. In-depth interview

Lists of questions are:

- a. How is the understanding of women with hypertension in Wedi District about hypertension?
- b. How do they use traditional skills-based therapy to maintain their blood pressure?
- c. How do they use jamu to maintain their blood pressure?
- d. How do they use medicinal plants to maintain their blood pressure?

2. Observation

The researcher observes how women with hypertension in Wedi District use traditional medicine (jamu and medicinal plants).

3. Documentation study

Documents used in this study are written, pictures, materials, tools, videos, and others about how women with hypertension in Wedi use traditional medicine (jamu and medicinal plants).

Data analysis from in-depth interviews was analyzed descriptively. The triangulation technique is used to test credibility in this study. The triangulation technique is a technique for checking data from various sources in various ways and times (Djam'an & Komariah, 2013).

RESULTS AND DISCUSSION

This study was conducted on women with hypertension in Wedi District with 12 informants representing Canan, Pesu, Kalitengah, and Karangasem Villages.

Table 1. Informants by age group experiencing high blood pressure (Hypertension) at Canan, Pesu, Kalitengah, and Karangasem Villages

No	Age	Quantity
1	15 – 30	0
2	31 – 60	12
3	> 60	0
Total		12

Table 2. Informants by occupation based on work that experiences high blood pressure issues (Hipertensi)

No	Occupation	Quantity
1	Student	0
2	Entrepreneur	2
3	Farmer	3
4	Teacher	1
5	Civil servant	1
6	Homewife	5
Total		12

Four sub-phenomena studied on how women with hypertension in Wedi:

1. Women's knowledge of hypertension

The data obtained from all informants revealed that the majority of individuals were aware that the definition of hypertension is when a person's blood pressure exceeds 140 or the normal tension of 120 and is not stable upon repeated checks. The symptoms of hypertension experienced by informants include dizziness, stiff shoulders, headache, head-to-neck stiffness, temporary palpitations, nausea, flatulence, swollen legs, heavy legs, cramps in the legs, tired legs, tingling in the legs, cramps in the hands, stiff hands, aches in the waist, and sleepiness. Notably, there are instances where individuals with hypertension do not experience the physical symptoms commonly associated with the condition, such as dizziness, blurred vision, insomnia, and other complaints. In addition to the physical symptoms previously mentioned, psychological disorders may also manifest, including irritability, anxiety, lethargy, fear, and stress. Furthermore, the results of social activities, such as work, are often disrupted and characterized by a lack of motivation and productivity. Subjects understand the clinical manifestations of hypertension often affect organs (difficulty speaking, difficulty moving hands and feet, blindness, stroke, death); activity disruption (walking with a cane, difficulty walking, daily activities disruption); social activity disruption (do not dare to go to the market/do travel, keep asking for help); and psychological disorders (anxiety, fear of not recovering and unable to sleep). First aid efforts made by women with high blood pressure disorders are: (Siku dkk., 2024)

- a. Go to health facilities: clinics, health centers, hospitals, polindes (village maternity clinic or village birth center)
- b. Go to doctors or local midwives
- c. Seek treatment at Nakestrad: Hattra
- d. Self-treatment: jamu (hypertension herbal medicine, cinnamon, turmeric, garlic bay leaf); practicing skills (praying to heal, walking, scraping, self-foot massage); self-control (reducing salty foods, regulating diet, eating vegetables, drinking water and sweet tea, maintaining health and sleeping hours).

2. Women with hypertension using traditional skills-based therapy.

Table 3. Traditional skills-based therapy done by women with hypertension

Traditional skills-based therapy		Parts of body	Benefits
Traditional physical-based therapy	Dry Cupping	Back	Feeling fresh
	Walking upon gravel	Foot and sole	Good for blood circulation
		- Calf	- Feeling fresh
		- Sore body part	- Helps to improve the quality

	Scrapings	- Foot - Back - Whole body	of sleep
	Leisure walking	Foot and sole	As recreation
	Exercising	Limbs	- For diet - Flatten the belly
	Massage	- Whole body - Foot	- Feeling fresh - Reduce stiffness
Self-calming therapy	Praying	Mind	Calming mind
	Yoga	Whole body	Relaxing

3. Women with hypertension using jamu

Table 4. Jamu recipe used by women with hypertension (self-made)

Type of jamu	Composition	Dose	Frequency
Jamu of cinnamon turmeric	- Cinnamon - Fresh tumeric - Water	- 1-2 pcs - 1 thumb-sized piece - 300 mL	Once daily (in the morning)
Jamu of bay leaf garlic	- Dried Indonesian bay leaf - Garlic - Sugar - Water	1 st Dose : - 5 pieces - 1 clove - ½ tablespoon - 600 mL 2 nd Dose : - 7 pieces - 2 cloves - ½ tablespoon - 600 mL	Twice daily (in the morning and afternoon)

Table 5. Jamu recipe used by women with hypertension (bought in the market)

Type of jamu	Composition	Dose	Frequency
Jamu of rice kencur	- Rice flour - Kencur - Ginger - Cinnamon - Cardamom - Clove - Palm sugar - Salt - Water	- 100 g - 100 g - 100 g - 4 cm - 5 pcs - 5 pcs - 500 g - a pinch - 2 L	Once weekly (in the morning)
Jamu of turmeric tamarind	- Turmeric - Tamarind - Cinnamon - Palm Sugar - Salt - Water	- 200 g - 200 g - 4 cm - 500 g - a pinch - 2 L	Once weekly
Scientific Jamu of hypertension	- Celery - Centella herb - Java tea - Java ginger - Turmeric - chamber bitter herb - Water	- 15 g - 9 g - 9 g - 9 g - 9 g - 9 g - 1 L	Once weekly
Jamu of hypertension (Mrs. N1)	- Soursop leaf - Moringa leaf	- 9 pcs - 7 stems	Once daily (in the morning)

	- Water	- 1 L	
Jamu of hypertension (Mrs. N2)	- Soursop leaf	- 9 pcs	Once daily (in the morning)
	- Moringa leaf	- 7 stems	
	- Andrographis herb	- 100 g	
	- Water	- 1 L	
Jamu bitter taste	- Andrographis herb	- 100 g	Once weekly (in the morning)
	- God's crown	- 100 g	
	- heart-leaved moonseed	- 100 g	
	- Papaya leaf	- 9 pcs	
	- Water	- 1 L	
Jamu of Java Ginger turmeric	- Java Ginger	- 250 g	Once daily (in the morning)
	- Turmeric	- 200 g	
	- Fennel	- 100 g	
	- Black cumin seed	- 100 g	
	- Water	- 1 L	

4. Women with hypertension using medicinal plants

Several medicinal plants are consumed by informants to lower their blood pressure. They usually boil, brew, and drink by themselves. The parts of medicinal plants used also vary, some use leaves, herbs, flowers, fruits, and even seeds. Medicinal plants consumed include cosmos leaves, papaya leaves, celery leaves, pepper elder leaves, tea, palm sugar, chayote, cucumber, melon, watermelon, bitter melon, papaya, banana, rosella flowers, butterfly pea flowers, mahogany seeds, and purslane herbs (Siku dkk., 2024).

It was found that not all informants knew about the factors that cause hypertension. A total of 7 out of 12 informants stated that the factors causing hypertension disorders are diseases, including sugar disease and heart disease. This statement is an opinion that changes in high blood sugar levels will stick to the blood vessels (Tanto & Hustrini, 2014). According to WHO (2013), one of the factors causing hypertension is heart disease, due to the condition of the heart that is no longer able to pump the blood needed by the body due to damage to the heart muscle or heart's electrical system. Other informants said that the factors that cause hypertension disorders are due to body conditions such as fatigue and lack of sleep. This statement follows that sympathetic activity in blood vessels makes a person experience significant changes in cardiac output at night (Javaheri et. al., 2017).

Moreover, it was found that informants lacked knowledge about the signs and symptoms of hypertension. 9 out of 12 feel some physical symptoms from head to shoulder, including stiff head to neck, stiff shoulders, headache, and dizziness. This statement follows Salvataris et. al. (2022), that pain from head to shoulder, stiffness, and dizziness are caused by an increase in pressure on the walls of the blood vessels in the neck area where the blood vessels carry blood to the brain so that when there is an increase in vascular pressure to the brain, it results in an emphasis on the nerve fibers of the neck muscles.

In addition, the result showed that informants did not all know the consequences of hypertension. Informants stated that due to hypertension, organ malfunction such as blindness may occur. This statement follows Hanssen et. al. (2022) that when blood pressure is high, the walls of the arterial blood vessels in the retina become thick and narrow so that blood flow to the tissue layer becomes limited, over time this damage to the retinal blood vessels due to hypertension will damage the visual nerve.

It was also found that informants did not all know about hypertension management using traditional skills-based therapy. Some informants said that they often do self-calming therapies such as prayer and yoga. They said that praying is done every day in the hope of being given health and a calm mind. This statement follows Purnamayanti (2021), who states that self-calming therapy can reduce high blood pressure by controlling constriction and relaxation of blood vessels in the vasomotor center of the spinal cord.

Based on the results of the study, it was found that informants did not all know about hypertension management using jamu and medicinal plants. Informants said that cosmos leaves and papaya can help to manage hypertension. This follows the opinion of Rahayu (2015) that papaya leaves and fruits have phytochemical compounds such as annonaceous acetogenin in petiole tissue that have high potential as antioxidant, helping to overcome hypertension and obesity. They also use celery to manage their hypertension, which follows Kemenkes RI (2011), that celery contains phytochemicals such as flavonoids and apiin, which have antihypertensive and diuretic properties. Informants said that pepper elder can help manage hypertension, relieve dizziness, and lower cholesterol levels. This statement is under the opinion of Nwokocha CR et. al. (2012) that pepper elder contains phytochemical compounds such as flavonoids and alkaloids, which are useful as antihypertensives. Informants said that palm sugar can help to manage hypertension and low blood sugar levels. This statement is per the opinion of Sarkar et. al. (2023) that palm sugar contains higher potassium than green vegetables and bananas. Informants said that chayote can help to manage hypertension following the opinion of the Herbal Preparation Reference (2007) that chayote contains phytochemical compounds such as saponins, alkaloids, and tannins, which are useful as antihypertensives. Informants said that melon can help manage hypertension. This statement follows Kowalski R (2010), who found that based on tests at Integrated Research and Testing Laboratories Unit 1 of Gajah Mada University, in 5 g of melon fruit, there is a potassium content of 3,790 ppm, equal to 18.95 mg. Potassium is a chemical compound that plays a role in maintaining the normal functioning of muscles, the heart, and the nervous system. Potassium is the main regulator of blood pressure. Informants said that Morinda can help manage hypertension. This statement follows the Herbal Preparation Reference (2007) that Morinda contains phytochemical compounds such as monodol, scopoletin, and xeronim alkaloids, which are useful to help reduce blood sugar levels and lower blood pressure.

CONCLUSION

Based on the results of research on the efforts of women experiencing high blood pressure disorders (hypertension) by traditional medicine in Wedi District, the following conclusions were obtained:

1. Traditional skills-based therapy, including dry cupping, walking upon gravels, scrapings, leisure walking, exercising, massage, and self-calming therapy;
2. Jamu used for therapy such as jamu of rice kencur, jamu of cinnamon turmeric, jamu turmeric tamarind, jamu of bay leaf garlic, scientific jamu of hypertension, jamu of hypertension (Mrs. N1), Jamu of hypertension (Mrs. N2), jamu bitter taste, dan jamu of java ginger turmeric.
3. Medicinal plants used for therapy include cosmos leaves, papaya leaves, celery leaves, pepper elder leaves, tea leaves, palm sugar, chayote fruit, melon fruit, morinda fruit, bitter melon fruit, papaya fruit, banana fruit, watermelon fruit, cucumber, rosella flowers, butterfly pea flowers, mahogany seeds, and purslane herb.

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