Abstract-Objective: In women, blood pressure generally increases after menopause. Those who have menopause have a higher risk of hypertension compared to premenopausal. One of the risk factors that can lead to hypertension is diet. Diet in the form of lots of fatty foods, sodium, and cholesterol. Prevention of hypertension can be done by arranging a balanced diet. The purpose of this study to determine the relationship of diet with the incidence of Hypertension in Women. Method: This research uses a correlation analytic method with a cross-sectional approach. The population in this study are all women with menopause as much as 114 people, with the number of respondents in this study were 114 postmenopausal women using total sampling. Retrieving data using the chi-square formula. Result and discussion: It was found that 60.6% of respondents have no good diet also has hypertension, with 0.559 value \( \rho > 0.05 \), the Ha rejected the conclusion shows no relationship between diet respondents with hypertension in menopausal women. Advice for respondents for blood pressure checked regularly and adjust your diet appropriately so that the amount of food consumed by the recommended dietary allowance figures.
I. INTRODUCTION

One of the results of health development in Indonesia is increasing life expectancy. WHO (World Health Organization) estimates that the life expectancy of the people of Indonesia in 2020 will reach 262.2 million people and menopausal age was estimated at 30.3 million people. Currently, the life expectancy of women Indonesia has been quite successful for our nation's life expectancy has increased, life expectancy is carrying the burden for the community the elderly population increases. This means that the risk groups in the community to be higher (Notoatmodjo, 2007). Indonesia has been found in as many as 8-10% of the elderly in which the number of women more than the number of men. About half of all women stop menstruating between the ages of 45-50 years of menstruation quarter again will continue to pass before the age of 45 years (Admin, 2007).

In women, blood pressure generally increases after menopause. Those who have menopause have a higher risk of hypertension compared to premenopausal. So far concluded that hormonal and biochemical change after menopause are a major cause changes in the blood pressure. Changes in these hormones make women experience increased sensitivity to salt and weight gain. Both of these could potentially lead to higher blood pressure (HDI, 2017).

Many factors contribute to the occurrence of hypertension include risks that can not be controlled (major) and risk factors that can be controlled (minor). Risk factors that can not be controlled (major) such as heredity, gender, race and age. While the risk factors that can be controlled (minor), namely obesity, lack of activity, smoking, drinking coffee, sensitivity sodium, low potassium levels, alcoholism, stress, employment, education and diet (Suhandak, 2010).

Hypertension would be a serious problem because if not treated as early as possible will develop and lead to dangerous complications such as heart disease, congestive heart failure, stroke, visual impairment, and kidney disease. Hypertension can be prevented by avoiding factors that cause hypertension by dietary adjustments, proper lifestyle, avoid coffee, smoking, alcohol, reduce excessive salt intake and enough activity such as regular exercise (Dalimartha, 2008).

A healthy diet is a way of setting the amount and type of food with a specific purpose such as maintaining health, nutritional status, prevent or help cure the disease. As a result of the aging process, someone has a decreased sense of taste and taste sensitivity resulting in reduced appetite. This resulted in the use of spices or salt in an amount more (Arisman, Suhendra 2004 and 2011).

In connection with the health status in postmenopausal women, this time with improved health care by the government also possible the improvement of health, the female menopause. One place by government health services for postmenopausal women is an integrated development (Posbindu) elderly. Posbindu elderly is the development of government policy through health care for menopausal women health centers which that operate through programs involving the community and social organizations in its implementation.

II. METHODS

This study uses a correlation analytic method, while the form of a cross-sectional approach for the approach, observation or data collection at a time at a time (Notoatmodjo, 2010). The population in this study were all postmenopausal mothers who are in Posbindu "M" Village Sukarame Sukarame District of Tasikmalaya District, amounting to 114 people. Sample selection is done by total sampling.
III. RESULT

Table 3.1 Frequency distribution Eating in Women menopause in Posbindu "M"

<table>
<thead>
<tr>
<th>No.</th>
<th>Dietary habit</th>
<th>f</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Well</td>
<td>48</td>
<td>42.1</td>
</tr>
<tr>
<td>2.</td>
<td>Not good</td>
<td>66</td>
<td>57.9</td>
</tr>
<tr>
<td></td>
<td>amount</td>
<td>114</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 3.1 is known that the frequency of menopause Diet Women in Posbindu "M" Village Sukarame District of Tasikmalaya District Sukarame most in the category of good eating patterns as many as 66 people.

Table 3.2 Frequency Distribution Hipertensipada Female menopause in Posbindu "M"

<table>
<thead>
<tr>
<th>No.</th>
<th>Blood pressure</th>
<th>f</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Hypertension</td>
<td>72</td>
<td>63.2</td>
</tr>
<tr>
<td>2.</td>
<td>not Hypertension</td>
<td>42</td>
<td>36.8</td>
</tr>
<tr>
<td></td>
<td>amount</td>
<td>114</td>
<td>100</td>
</tr>
</tbody>
</table>

From table 3.2 it is known that the frequency of Hypertension in Women menopause in Posbindu "M" Village District of Sukarame District Sukarame most in the category of hypertension as many as 72 people.

Table 3.3 Tabulation SilangHubungan Diet With Genesis of Hypertension in Women menopause in Posbindu "M"

<table>
<thead>
<tr>
<th>Dietary habit</th>
<th>Hypertension in Women menopause</th>
<th>Total</th>
<th>ρ value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hypertension</td>
<td>not</td>
<td></td>
</tr>
<tr>
<td></td>
<td>f</td>
<td>%</td>
<td>f</td>
</tr>
<tr>
<td>Well</td>
<td>32</td>
<td>66.7</td>
<td>16</td>
</tr>
<tr>
<td>Not good amount</td>
<td>40</td>
<td>60.6</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>63.2</td>
<td>42</td>
</tr>
</tbody>
</table>

Based on Table 3.3 shows that out of 114 respondents, a woman with a good diet has hypertension as many as 32 people (66.7%), women with eating well does not have hypertension as many as 16
people (33.3%), women with a pattern eating is not good either do not have hypertension as many as 26 people (39.4%) and most women with good eating patterns also have hypertension as many as 72 people (63.2%). Based on the statistical test using the chi-square test was obtained ρ value 0.559 (> 0.05), the Ha denied means there is no connection between diet respondents with hypertension in postmenopausal women at Posbindu "M" Village Sukarame Sukarame District of Tasikmalaya regency.

IV. DISCUSSION
1. Overview Diet menopause Women with hypertension incidence in Posbindu Melati

Based on the research results in Table 3.1 on 114 women about their diets at menopause in women Posbindu Desa Melati Sukarame Sukarame District of Tasikmalaya Regency Year 2017 with a good diet as many as 48 people (42.1%) and good eating habits are not as many as 66 people (57.9%). According to an analysis by the respondent state investigators are not good eating habits more than a good diet but to get enough vegetables easily. This happens because most respondents prefer fatty foods even though they know that food is a cause of hypertension.

Results were by (Muhammadun 2010) Foods to be avoided and restricted as follows:

a. Foods high in saturated fat (brain, kidney, lung, coconut oil and lard)
b. The food was processed using sodium salt (biscuits, crackers, chips, and eat dried and salted)
c. Food and beverages in cans (sardines, sausage, cornet, canned vegetables, and fruit)
d. Eating preserves (jerky, pickles, shredded, boiled, shrimp chips, salted egg, and peanut butter)
e. Full cream milk, butter, cheese, mayonnaise, as well as animal sources are high in cholesterol such as red meat (beef/lamb) yolk/skin
f. Condiments such as ketchup, Meji, shrimp paste, tomato sauce, chili sauce, taco, and seasonings.

2. Genesis of Hypertension in Women picture menopause in Posbindu Melati

Based on the research 3.2hasil table 114 women about menopause hypertension in women in Posbindu Desa Melati Sukarame Sukarame District of Tasikmalaya Regency Year 2017 with hypertension were 72 people (63.2%), and hypertension as many as 42 people (36.8%). This shows that very many women experience menopause hypertension caused by various factors that are not a good diet, stress, and obesity. This is in line with the World Health Organization, 2011 Most of the causes of hypertension is unknown, but it has to do with heredity, obesity, smoking, and diet is not good. If not immediately addressed hypertension can lead to heart attacks, stroke, even kidney failure.

3. Eating relationship with the Genesis of Hypertension in Women menopause in Posbindu Melati

According to table 3.3 hasil bivariate analysis using Chi-square test was obtained ρ value 0.559 (> 0.05), the Ha rejected. This means that there is no connection between diet and hypertension in postmenopausal women at Posbindu Melati.

This is supported by research conducted by Nor (2010) with the title of the factors associated with hypertension in Samarinda Ilir subdistrict health center Sidomulyo 2010. The research method uses analytic research with a cross-sectional study. The research sample of 100 people and the sampling by using accidental sampling using a questionnaire and a 24-hour
recall. The results using statistical test by using Chi-Square is obtained there is no relationship between diet and hypertension at the health center Samarinda Sidomulyo namely with (p = 0.325).

But these results conflict with the Farlina study (2009) which states there is a significant correlation between the relationship with hypertension diet. From the result of analysis by using statistical tests independent t-test calculation results obtained t value = 7.609 and p = 0.000 (p <0.05). The results of this study also contradict Taufik’s research (2015) with the title of relationship lifestyle and eating habits with hypertension in the elderly in the village of New Sawangan Depok. This research is analytic with a cross-sectional design. The test results with the chi-square statistics show there is a relationship between physical activity, intake of fat and sodium intake with the incidence of hypertension (r <0.05).

From these data, it can be concluded that the diet is not to be one of the main causes of hypertension in the elderly in Desa Melati Posbindu Sukarame Sukarame District of Tasikmalaya regency. Possible other factors not examined in this study that may affect the level of hypertension in the elderly in Desa Melati Posbindu Sukarame Sukarame District of Tasikmalaya Regency is genetic, stress, obesity, excessive salt intake, lack of exercise, smoking and alcohol consumption.

V. CONCLUSION

There is no relationship between diet and the incidence of hypertension in menopausal women is indicated by ρ value equal to 0.559.

REFERENCES


Kuswita. (2012). Gambaran Pengetahuan Wanita Menopause Tentang Masa Klimakterium


