## ABSTRAK

**Introduction:** Hipertensi merupakan komplikasi umum pada pasien Chronic Kidney Disease (CKD) yang menjalani hemodialisa dan berisiko meningkatkan kejadian kardiovaskular. Penelitian ini bertujuan menganalisis faktor-faktor klinis yang berhubungan dengan hipertensi pada pasien CKD yang menjalani hemodialisa di RSUD Toto Kabila Kabupaten Bone Bolango.**Method:** Penelitian ini menggunakan desain kuantitatif observasional analitik dengan pendekatan *cross-sectional*. Sampel sebanyak 30 responden ditentukan dengan teknik total sampling. Data dikumpulkan melalui lembar observasi dan rekam medis, kemudian dianalisis menggunakan uji univariat dan bivariat. **Result:** Seluruh responden (100%) pasien CKD yang menjalani hemodialisa mengalami hipertensi berdasarkan tekanan darah pra-hemodialisa. Sebagian besar responden mengalami Interdialytic Weight Gain (IDWG) (66,7%) dan menunjukkan aktivasi sistem renin–angiotensin–aldosteron (RAAS) (79,2%), serta mayoritas merupakan pasien hemodialisa kronik. Kepatuhan diet bervariasi, dengan sebagian besar responden tergolong patuh, namun masih ditemukan tingkat kepatuhan sedang hingga rendah. **Discussion:** Hipertensi pada pasien hemodialisa dipengaruhi oleh kelebihan cairan interdialitik dan durasi terapi. Kesimpulannya, pengendalian IDWG dan pemantauan klinis berkelanjutan penting untuk menurunkan risiko hipertensi pada pasien hemodialisa.



**Kata kunci:** faktor klinis hipertensi, hemodialisa, penyakit ginjal kronik,

## ABSTRACT

Introduction: Hypertension is a common complication among patients with Chronic Kidney Disease (CKD) undergoing hemodialysis and may increase the risk of cardiovascular events. This study aimed to analyze clinical factors associated with hypertension among CKD patients undergoing hemodialysis at Toto Kabila Regional General Hospital in Bone Bolango Regency. Method: This study employed a quantitative, observational-analytic design with a cross-sectional approach. A total of 30 respondents were selected using a total sampling method. Data were collected through observation sheets and medical records and analyzed using univariate and bivariate tests. Result: All respondents (100%) with CKD undergoing hemodialysis experienced hypertension based on pre-hemodialysis blood pressure measurements. Most respondents experienced Interdialytic Weight Gain (IDWG) (66.7%) and showed activation of the renin-angiotensin-aldosterone system (RAAS) (79.2%). In addition, the majority of respondents were chronic hemodialysis patients. Dietary adherence varied, with most respondents classified as adherent; however, moderate to low levels of adherence were still found. Discussion: Hypertension among hemodialysis patients was influenced by interdialytic fluid overload and the duration of therapy. In conclusion, controlling IDWG and conducting continuous clinical monitoring are essential to reduce the risk of hypertension among patients undergoing hemodialysis.



Keywords: clinical factors of hypertension; hemodialysis; chronic kidney disease