PROCEEDING

The 2nd International Conference of Medical and Health Sciences (ICMHS) and The 2nd Life Sciences Conference (LSC) 2016

"Towards a Better Quality of Life through Interdisciplinary Research"

Yogyakarta, 9th-10th December 2016
The Alana Hotel and Convention Center
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**Committee of ICMHS & LSC 2016**

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Welcome to Jogja, sugeng rawuh!
For the second time, the Faculty of Medicine and Health Sciences Universitas Muhammadiyah Yogyakarta is going to conduct the 2nd International Conference of Medical and Health Sciences (ICMHS) this December in vibrant Yogyakarta, Indonesia. This year we are going to collaborate with the Life Sciences Society of Pakistan for their 2nd Life Sciences Conference (LSC) with Dr. Zahid Iqbal as the general secretary.
This year’s conference theme “Towards a better quality of life through interdisciplinary research” will be celebrating an era of seamless interdisciplinary integration and collaboration in scientific innovations with the involvement of more extensive topics and disciplines in the conference. We aim to exhibit the products of that kind of approach in solving challenges, improving the quality of life, and creating sustainable developments.
We are happy to announce that our conference is filled with Invited speakers from Pakistan, United States of America, Uni Emirates Arab, Malaysia and Indonesia. Presentations will be conducted in oral as well as poster that covers topics from medicine, public health, dentistry, pharmacy, biomedical to agriculture. To put more credibility to the conference we are collaborating with Isra Medical Journal and the Asian Journal of Agriculture and Biology to publish selected papers from the event. Other paper will be published in the ISBN Proceeding book.
The last but not least, enjoy the conference, start networking and sharing ideas, and let immerse yourself to the heritage cultural ambient of Jogja, sumonggo!

Yogyakarta, 1st December 2016

dr. Iman Permana, M.Kes, Ph.D.
Assalamu’alaikum Wr. Wb.

Science, especially in the areas of health and life growing more rapidly. We need to work together in the research of various disciplines to the advancement of science and to provide benefits to human life.

After successfully organized international scientific meeting last year, the Faculty of Medical and Health Sciences Universitas Muhammadiyah Yogyakarta, held the second scientific meeting ICMHS along with “2nd Life Sciences Conference”. In this second scientific meeting, FIKIK UMY collaborates with various researchers, among others from Pakistan, Malaysia, and the United States. Taking the theme “Towards a better quality of life through interdisciplinary research” we hope to establish cooperation with various parties to be able to contribute ideas to the civilization of human life.

Finally, we congratulate the scientific meeting in the city of Yogyakarta Indonesia. Enjoy the beautiful city of Yogyakarta with priceless historical relics. We hope that this meeting can run smoothly and provide benefits to the advancement of knowledge.

Wassalamu’alaikum Wr. Wb.

Yogyakarta, 1st December 2016

Assalaamu’alaikum Wr. Wb.

Ladies and Gentlemen,

Welcome to the 2nd International Conference on Medical and Health Science in conjunction with the 2nd Life Sciences Conference 2016
Welcome to Yogyakarta City of Tolerance

Our Faculty of Medicine and Health Sciences has been doing such international conference almost every year for the last ten years. This and other previous conferences are the things that supporting our vision as an excellence and Islamic university, a young and global university. We will always try to keep monitoring the development of science through sending more lecturers to do the sabbatical leave overseas, doing international research collaborations and also the international conference. Each department should do this strategy of internationalization so that each department has its own network. Faculty of medicine and health science is one of the most progressive units in implementing this strategy by inviting international experts on a regular basis. This program will certainly strengthen our vision.

International conference on medicine and health sciences is a smart choice to offer our lecturers access to the most recent development of the subjects. The participants will also gain the same knowledge and latest information on medicine and health sciences. As everyone knows that the development of science and technology are faster today compared to the previous period. Information technology, computer, and other development have fastened the transformation of medicine and health science into the different and more complex stage.
Cellular technology, for instance, can be used for several functions including those that directly impacts our daily life. There is no long distance call anymore today because cellular phone can do everything we need to contact other people far from where we stand anytime anywhere. People will finally innovate cellular phone for the sake of personal health services. We will in the future using our simple cellular phone to detect our body temperature, blood pressure, even how much fat we have in our body and how much it is supposed to be. We may also be able to check the health of our body without leaving our house and order medicine without going into the drug store. Everything is almost possible as long as we think hard for the better of people in the future. Enjoy the conference and don’t forget to visit our rich tourist destinations, mountains, beaches or caves (underground waterways).

Thank you
Wassalaamu’alaikum Wr. Wb.

Prof. Dr. Bambang Cipto, MA
The 2\textsuperscript{nd} International Conference of Medical & Health Sciences and The 2\textsuperscript{nd} Life Sciences Conference 2016

\textbf{Keynote Speech}

by Head of Provincial Health Office Special Region of Yogyakarta in International Conference of Medical and Health Sciences and Life Sciences Conference

The Alana Hotel and Convention Center, Yogyakarta, December 9-10, 2016

The honorable:
- Rector of Muhammadiyah University of Yogyakarta,
- The Dean of Medical and Health Sciences Muhammadiyah University of Yogyakarta,
- The chairman of organizing committee of the international conference of medical and health,
- Distinguished guests and colleagues.

\textit{Assalamu'alaikum Warahmatullahi Wabarakatuh,}
First of all, we thank God for His blessings that today we may attend the International Conference of Medical Health Towards a Better Quality of Life Through Interdisciplinary Research in Yogyakarta.

My distinguished colleagues,
In Indonesia National Long Term Development Plan (2005-2024), the Indonesian Ministry of Health have determined a paradigm shift that have governed health services in health development plan. There has been a shift from Curative Health Services to Preventive and Promotive Health Services. Recently, Indonesia suffers from a triple burden of diseases as health development challenges. The triple burden of diseases are: 1) the backlog of common infections, undernutrition, and maternal mortality; 2) the emerging challenges of non-communicable diseases (NCDs), such as cancer, diabetes, heart disease; and 3) mental illness, and the problems directly related to globalization, like pandemics and the health consequences of climate change.

Dear colleagues,
Here are some data that show several health problems in Indonesia:
1. Maternal mortality rate in 2015 is 4,809 cases, infant mortality rate in 2015 is 22,267 cases;
2. Regarding to children under the age of five, the national stunting rate is 37.2% which consists of 18% for very short dan 19.2% for short (Riskesdas 2013);
The 2\textsuperscript{nd} International Conference of Medical & Health Sciences
and
The 2\textsuperscript{nd} Life Sciences Conference 2016

3. HIV testing coverage is 14\% dan antiretroviral (ARV) therapy coverage is 65.58\% (Directorate General of Disease Control and Prevention Ministry of Health, 2015);

4. Tuberculosis (TB) notification rate in 2015 is 73.5\% and tuberculosis treatment success rate is 72\% (Directorate General of Disease Control and Prevention Ministry of Health, 2015).

Distinguished guests,

Indonesia Health Development Program in 2015-2019 strengths in improving human quality life through Health Indonesia Program with family approach. The Indonesian Ministry of Health issued The Minister of Health Regulation (Permenkes) No. 39 Year 2016 as a Guideline of Implementation of Health Indonesia Program with Family Approach. This program has 12 main indicators as markers of a family health status. Currently, many health programs have been implemented by Indonesian Ministry of Health, Provincial Health Offices, and District Health Offices. However, many health problems, some as mentioned above, still become health burdens. We may ask a question whether the programs that we conducted have answered the health problems we have in Indonesia.

It would be better if all health programs that we implement based on scientific health research, especially interdisciplinary research. The research should be related to detection, prevention, and treatment of diseases or problem solving for better health.

My dear colleagues,

Being a province with speciality, Special Region of Yogyakarta placed Traditional Medicine as one of the priority programs in Provincial Medium Term Development Plan (2017-2022). We still encounter many challenges in developing Traditional Medicine, especially in providing services which are based on scientific evidence.

Distinguished colleagues,

We look forward to results of interdisciplinary research which would support health problem solving, especially by developing traditional medicine in Yogyakarta. We believe that collaboration in interdisciplinary research would improve quality of human life.

Finally,

Thank you for your attention. We wish you a successful conference.

Wassalamu’alaikum Warahmatullahi Wabarakatuh,

On behalf of
the Head of Provincial Health Office
Special Region of Yogyakarta

Drg. Pembajun Setyaningastutie, M.Kes

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SPEAKER OF INTERNATIONAL CONFERENCE

Zahid Iqbal
Al-Nafees Medical College Isra University Islamabad Campus Islamabad, Pakistan
“One Health Program for Public Health Benefit”

Prof. Dr. Abdul Khaliq
Professor, Department of Agronomy, University of Agriculture, Faisalabad
“Role of Agriculture in Poverty Alleviation of Rural Areas”

Fitri Arofati
Universitas Muhammadiyah Yogyakarta, Indonesia
“Continuing Professional Development of Practicing Nurses in Indonesia”

Tri Wahyuliati
Universitas Muhammadiyah Yogyakarta, Indonesia
“Diabetic Neuropathy - A Chance Towards A Better Treatment”

Mohammad Khalid Ashfaq
University of Mississippi, USA
“Natural Products –Use or Misuse”

Muhammad Mukhtar
American University of Ras Al Khaimah, United Arab Emirates
“Emerging Biotechnologies and Genomic Medicines in Human Health and Well-Being”

Muhammad Sasmito Djati
Brawijaya University Malang, Indonesia
“Herbal Medicine a Holistic Approach: in case of food supplement formulation of Sauropusandrogynus and Elephantopusscaberto modulate immune and hormonal system in pregnant Salmonella typhi infected mice”
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REVIEWER

1. Dr. Zahid Iqbal, Ph.D (Isra University, Islamabad, Pakistan)
2. Prof. Dr. Abdul Khaliq (University of Agriculture, Faisalabad)
3. Dr. Mohammad Khalid Ashfaq, DVM, DTVM, MS, Ph.D (University of Mississippi, USA)
4. Dr. Muhammad Mukhtar, Ph.D (American University of Ras Al Khaimah, United Arab Emirates)
5. Dr. Ir. Muhammad Sasmito Djati, MS. (Brawijaya University Malang, Indonesia)
6. Fitri Arofiati, S.Ke., Ns., MAN., Ph.D (Universitas Muhammadiyah Yogyakarta, Indonesia)
7. Dr. SN Nurul Makiyah, S.Si., M.Kes (Universitas Muhammadiyah Yogyakarta, Indonesia)
8. dr. Iman Permana, M.Kes, Ph.D (Universitas Muhammadiyah Yogyakarta, Indonesia)
9. Dr. dr. Ikhlas M. Jenie, M.Med, Sc (Universitas Muhammadiyah Yogyakarta, Indonesia)
10. Dr. dr. Arlina Dewi, M.Kes, AAK (Universitas Muhammadiyah Yogyakarta, Indonesia)
11. dr. Oryzati Hilman, M.Sc, CMFM (Universitas Muhammadiyah Yogyakarta, Indonesia)
12. Dr. Dra. Yoni Astuti, M.Kes, Ph.D (Universitas Muhammadiyah Yogyakarta, Indonesia)
13. Dr. drg. Tita Ratya Utari, Sp. Ort (Universitas Muhammadiyah Yogyakarta, Indonesia)
14. Dr. dr. Tri Wahyuliati, Sp.S, M.Kes (Universitas Muhammadiyah Yogyakarta, Indonesia)
15. Dr. Elsy Maria Rosa, M.Kep (Universitas Muhammadiyah Yogyakarta, Indonesia)
16. Dr. dr. Titiek Hidayati, M.Kes (Universitas Muhammadiyah Yogyakarta, Indonesia)
18. Dr. dr. Sri Sundari, M.Ke (Universitas Muhammadiyah Yogyakarta, Indonesia)
19. Dra. Lilis Suryani, M.Kes (Universitas Muhammadiyah Yogyakarta, Indonesia)
21. Dr. dr. Wiwik Kusumawati, M.Kes (Universitas Muhammadiyah Yogyakarta, Indonesia)
The 2nd International Conference of Medical & Health Sciences
and
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SPEAKER OF
INTERNATIONAL CONFERENCE
The Anxiety of Pregnant Mother with History of Abortion in Health Service 2 Banyumas Qualitative Study

Evicenna Naftuchah Riani¹, Wilis Dwi Pangesti², Diah Atmarina Yuliani³
¹, ², ³ University Muhammadiyah of Purwokerto, Purwokerto Indonesia
Email: yuliani_da@yahoo.com

Abstract

Pregnancy with a history of abortion had a greater level of anxiety when compared with pregnant mother who had no history of abortion. Anxiety of pregnant mother also can be happen because a wrong perceptions and lack of knowledge about childbirth, so in the minds of pregnant mother is a quite creepy and scary. The greatest anxiety for a pregnant mother is a miscarriage, especially for women who have experienced it. A woman who had a history of miscarriage or bleeding after birth is a pregnant mother with high risk pregnancy. Describing the physiological changes in pregnancy to anxiety in pregnant women with a history of abortion, describe the anxiety in pregnant women with a history abortion, and identify physiological factors in pregnancy on anxiety in pregnant women with a history of abortion in health service 2 Banyumas. This study used a qualitative method with case study design (case study). Collecting data using in-depth interviews with informants primary researcher maternal history of abortion, as many as 8 people as well as secondary informants husbands of pregnant women with a history of abortion as much as 2 people and a midwife as much as 2 people. The results showed all of the informants claimed they not sure of their pregnancy on TM 1 only. History of abortion very influential mother’s pregnancy right now. Anxiety disorders are a group of mental disorders characterized by feelings of anxiety and fear. The results showed six informants claims they have not special concerns with current pregnancy. Two informants claims they feel afraid, will be abortions again as a previous pregnancy. Pregnant women with a history of abortion had a psycologic impact that effect the current pregnancy and anxiety levels are the same as previous pregnancies and has anxiety to labour. Influential factor in changing the psycohology of pregnant women with a history of abortion are internal factors that exist in youself and family support.

Keywords: anxiety, pregnant women, abortion
INTRODUCTION

Pregnancy and labour is one of life cycles in human development from they were born until die. Every changes are stressor in life. Pregnancy and labour are minimum stressor for part of them and majority of them feels that it is happiness moment in their life. Capability to face that condition according from their age, education, maturity, personality, pregnancy and labour experience and social economic conditions.  

Anxiety in pregnant womens can be held because wrong perception and acknowledge about labour which result in their mindset it can be terrify and frighten. Anxiety can appears into tiredness, uncomfortable, worried, cant sleep tight, sensitive, hard to breath, lack consentration, doubt, under pressure and want to run away from reality. If woorried and anxiety becomes over, it can influenced to their pregnancy and can gives unnesassary effect to mother and the baby.  

The most anxiety in pregnant women is abortion, especially for women whose has experience. A women with abortion history or post partum bleeding included to high risk pregnant group.  

Commonly, women in pregnancy stage experience 3 phase of psychcological changes. First phase is on the begining of pregnancy, their concentrasion centered in their self and pregnancy reality. Most of them think if fetus isn’t real in the begining periode during pregnancy. Second phase, mothers accepts fetus which grows up as something as unseparate part in their body and should be care to their fetus. In the third phase mother start to prepare labour and take care of their childrens. Anxiety oftenly happens during pregnancy, commonly in mother with unstable soul and become klimaks on labour process. Anxiety appear, it caused by worried about savety labour process for her self and the baby.  

Preface survey result at kembaran II health center district showed that total pregnant women at kembaran II health center district are 737 peoples and found 197 in high risk pregnancy. According indepth interview with midwife coordinator at Kembaran II health center showed 8 pregnant women with abortion history whose more experienced anxiety in their pregnancy.

MATERIALS AND METHODS

This research used kualitatif method with case study approached. Collected data used deep interview in 8 pregnant womens with abortion history as primary informans. 4 pregnant women as secondary informans. They were 2 midwife and 2 husband of primary informans.
RESULT AND DISCUSSION

The results based on indepth interview of psychology changed to anxiety in pregnant women with abortion history.

Abortion history has more influence on current pregnancy. The result showed all informants said that feeling uncertain with her pregnancy on 1st trimester only.

Researchers conducted croscheck to the husband informants, all informants said mothers was not sure with their current pregnancy on 1st trimester.

Pregnant women have to do adaptation on each changes that occurred, where a source of the stress because they were do adaptation to certain conditions. Family encouragement are needed in pregnancy, this will affect the psychological on pregnant women. Family encouragement devoted in a manner suggesting attention and affection. (4) (8)

The impact of psychology abortion for pregnant women, lost and feel sorrow that were divided into 4 stages, shock and the sense of lost, looking for and yearn, disorganization and reorganize. (2)

According to disclosure of eight pregnant women, in her pregnancy they feel anxiety. It caused by informants have bad obstetri history. Researchers conducted croscheck to their husband and the midwife in the local district. Obtained pregnant women experienced anxiety in current pregnancy. (2)

Anxiety experienced by pregnant women caused by internal stress from her self. Mother experience stress in current pregnancy, because mother experienced in abortion. This stress can affected fetal development, it can be seen after baby born. Children will grow with lack of personality, it depends on the condition of stress experienced by mother. (2)

All informants said responses of their family. They were feeling happy with current pregnancy. Pregnant women told about her pregnancy to the husband and family directly after examination.

Husband and midwife at local village agree with informants. That their family were happy with her pregnancy. Informant told her pregnancy after made pregnancy test.

Anxiety is a disturbance feeling characterized by a feeling fear and worry. The result of this research showed six informants said that there was no special fear perceived that they were felt in this current pregnancy. Two informants said, they were fear with abortion experienced like their previous pregnancy.

The resulted of croscheck with secondary informants obtained all informants said they weren’t special fear with this current pregnancy.

Primary Informants were not experienced acute and chronic symptoms of anxiety. It was showed in this research, six informants said that they weren’t experienced
Sleeping disturbance at night. All informants said that they did not feel sad, asthma, and there were something wrong in their throat or difficult to swallow.

All pregnant women experienced anxiety to face labour. It based on the research, all informants said feel anxious with the current delivery process.

CONCLUSION

Anxiety on pregnant women with abortion experienced at Banyumas, kembaran 2 health center. Pregnant women with abortion history affected psychology which influenced their current pregnancy. It showed by anxiety on pregnant women with abortion history to their fetus development. They were worried if abnormality occurred to their fetus. Factors affect in psychology changes on pregnant women with abortion history is internal factor from them self and family support. Pregnant women with abortion history have level anxiety in current pregnancy. Informant feel anxiety if this current pregnancy will be as same as previous pregnancy, it is abortion. Informants have anxiety to face on labour process.

REFERENCES