ABSTRAK

Resti Nuning Handayani (2025). Midwifery Care for First-Trimester Pregnant Women with Hyperemesis Gravidarum. Scientific Paper: Case Study, Diploma Three Midwifery Study Program, Malang, Department of Midwifery, Health Polytechnic, Ministry of Health, Malang, Supervisor: Lisa Purbawaning Wulandari, S.KM., M.Kes.

Hyperemesis gravidarum is a condition of excessive nausea and vomiting during the first trimester of pregnancy that can cause dehydration, electrolyte imbalance, and weight loss. This condition requires appropriate management to prevent complications that endanger the mother and fetus. The purpose of this case study is to describe midwifery care for a 16-year-old pregnant adolescent woman, 10-12 weeks pregnant, with grade 1 hyperemesis gravidarum at the Independent Midwife Practice (TPMB) in Sumariyah, S.Tr.Keb. The method used was an exploratory descriptive case study conducted following the Varney midwifery process of subjective and objective data collection, data analysis, obstetric diagnosis, identification of potential problems, planning, implementation, and evaluation. The results of the assessment obtained a frequency of nausea and vomiting 4-5 times per day, complaints of dizziness and weakness, decreased appetite, mild weight loss, and signs of mild dehydration (decreased skin turgor, dry lips). No other obstetric danger signs were found. The diagnosis in this case was G1P0000Ab000 gestational age 10-12 weeks with hyperemesis gravidarum level I. Management included monitoring vital signs and frequency of vomiting, nutrition education with small and frequent portions, adequate rest, monitoring hydration status, and administration of antiemetics (ondansetron) through physician collaboration. The results of the provision of care during 3 visits were that the frequency of vomiting decreased from 4-5 times per day to 2 times per day. Complaints of dizziness and weakness decreased, nutritional intake increased, hydration status improved without signs of severe dehydration, and body weight was relatively stable. Overall, the mother's clinical condition showed improvement during treatment. Very young maternal age, as in the case of Mrs. N, 16 years old, significantly increases the incidence of hyperemesis gravidarum, as those aged <20 years have a nearly 2.5 times higher risk of developing HG than those aged 20–30 years.

Keywords: Midwifery Care, Hyperemesis Gravidarum, Adolescent Pregnancy