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IMPLEMENTATION OF BEETROOT JUICE (BETA VULGARIS L) ADMINISTRATION TO INCREASE HEMOGLOBIN LEVEL IN PREGNANT WOMEN WITH ANEMIA IN TAMANSARI VILLAGE KARANGMONCOL DISTRICT

PENERAPAN PEMBERIAN JUS BUAH BIT (BETA VULGARIS L) UNTUK MENINGKATKAN KADAR HEMOGLOBIN PADA IBU HAMIL DENGAN ANEMIA DI DESA TAMANSARI KECAMATAN KARANGMONCOL

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DOI: https://doi.org/10.62567/micjo.v2i4.1465

Abstract

Background: Anemia is a condition in which the level of red blood cells or hemoglobin in the body is below normal. In pregnant women, anemia can pose health risks to both the mother and the fetus. One of the non-pharmacological treatments that can be used is the administration of natural ingredients such as beetroot, which serves as an alternative due to its content of iron, folic acid, and vitamin C that can help increase hemoglobin levels. **Objective**: To provide an overview of the implementation of beetroot juice to increase hemoglobin levels in pregnant women with anemia. **Methods**: This study used a case study design involving one pregnant woman with anemia who met the inclusion criteria. The intervention consisted of administering 200 ml of beetroot juice per day for seven consecutive days. Evaluation was carried out by measuring hemoglobin levels before and after the intervention using the Easy Touch GCHb device. **Results**: The results showed that hemoglobin levels increased from 10.5 g/dL before the intervention to 11.8 g/dL after seven days, with an increase of 1.3 g/dL. **Conclusion**: Regular administration of beetroot juice is effective in increasing hemoglobin levels in pregnant women with anemia.

Keywords: Beetroot juice, hemoglobin, anemia, pregnant women

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1. INTRODUCTION

Anemia is a common medical condition characterized by low levels of red blood cells (erythrocytes) or hemoglobin in the body. In pregnant women, anemia is defined as a hemoglobin level below 11 g/dL. It is often caused by iron deficiency due to increased nutritional demands to support fetal and placental development. Anemia during pregnancy can lead to various complications, such as impaired fetal growth, miscarriage, prolonged labor, bleeding, and an increased risk of infection (Salma et al., 2024).

According to the World Health Organization (WHO) data from 2018, the global prevalence of anemia among pregnant women is 43.9%. The prevalence is 49.4% in Asia, 59.1% in Africa, 28.2% in the Americas, and 26.1% in Europe (Amalia & Nency, 2024). In Indonesia, the prevalence of anemia among pregnant women remains high. Based on the 2018 Basic Health Research (RISKESDAS), the prevalence of anemia among pregnant women is 48.9%. The highest prevalence occurs in the 15-24 age group, with 84.6%, followed by the 25-34 age group with 33.7%, the 35-44 age group with 33.6%, and the 45-54 age group with 24%. In Central Java, the prevalence of anemia reaches 57.1% (Annabila & Widayati, 2025).

Additionally, data from the Purbalingga District Health Office in 2022 reported 2,689 cases of anemia among 14,345 pregnant women (Wahyuningsih et al., 2024). Management of anemia during pregnancy can be done through pharmacological and non-pharmacological approaches. Pharmacological therapy typically involves iron supplementation in the form of Fe tablets, which increase hemoglobin levels. However, Fe tablets can cause side effects such as gastrointestinal discomfort, nausea, constipation, and black stools. As an alternative, non-pharmacological therapy using beetroot juice has been shown to increase red blood cell count in pregnant women (Annabila & Widayati, 2025).

Beetroot (Beta Vulgaris L) is a root vegetable known for its deep red-purple color and is rich in nutrients beneficial for health. It contains folic acid, iron, and vitamin C, which can help increase hemoglobin levels and prevent or treat anemia (Utami & Triyani, 2024). Research

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conducted by Utami & Triyani (2024) showed that consuming 200ml of beetroot juice daily for seven days increased hemoglobin levels from 9.97 g/dL to 10.96 g/dL, with an increase of 0.99 g/dL. Statistical analysis using the Paired Sample t-Test indicated that beetroot juice significantly increased hemoglobin levels in pregnant women with anemia.

Another study by Annabila & Widayati (2025) found that beetroot juice consumption increased hemoglobin levels in pregnant women from 11.1450 g/dL to 12.9650 g/dL, with an increase of 1.8 g/dL. The statistical analysis showed a p-value of 0.000 ($P < 0.05$), indicating a significant increase in hemoglobin levels. Based on this background, the author is interested in conducting research titled "The Application of Beetroot Juice (Beta Vulgaris L) to Increase Hemoglobin Levels in Pregnant Women with Anemia" as a non-pharmacological solution that is safe and natural.

2. RESEARCH METHOD

The design used in this scientific paper is a case study with a descriptive research approach. According to Ilhami et al. (2024), descriptive research is a study that aims to describe and explain a phenomenon or case systematically and in-depth. This approach requires researchers to start with a relevant theoretical foundation, present research findings clearly and structured. The strategy in this case study involves administering beetroot juice to one pregnant woman with anemia. Before the intervention, the researcher will assess the client's condition and measure hemoglobin levels using a hemoglobin testing device, the Easy Touch GCHb. Then, beetroot juice will be given regularly every morning for 7 days. After that, an evaluation will be conducted by re-measuring the hemoglobin levels of the pregnant woman to observe the increase. The hemoglobin levels will then be compared before and after the intervention.

3. RESULTS AND DISCUSSION

The location of the case study I chose is Tamansari Village, Karangmoncol District, Purbalingga Regency. This area is bordered by Karang Jambu District to the north, Rembang District to the east, Kaligondang District to the south, and Kertanegara District to the west. The selection of the case study location in Tamansari Village is based on data from the Karangmoncol Health Center, which shows cases of anemia in pregnant women in the area. According to data from the Karangmoncol Health Center in 2023, there were 21 cases of anemia out of 801 pregnant women, and this number increased to 55 cases out of 705 pregnant women in 2024. The high incidence of anemia indicates that pregnant women with anemia are quite dominant in this area.

The respondent in this case study is one pregnant woman in her third trimester with a hemoglobin level below 11 g/dL. The respondent meets the inclusion criteria, being a pregnant woman at 32 weeks of gestation with a hemoglobin level of 10.5 g/dL, classified as mild anemia. One non-pharmacological therapy for managing anemia is consuming beetroot. However, many local residents are still unaware of beetroot and its benefits. Therefore, this case study aims to introduce an alternative natural and easily applicable treatment for anemia.

Beetroot was chosen because one of its benefits is to prevent and treat anemia. In 100 g of beetroot, there is 0.80 mg of iron, 109 mcg of folate, and 4.9 mg of vitamin C (Amila et al., 2021). Iron plays a crucial role in hemoglobin formation, while folic acid supports the

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development of red blood cells, and vitamin C helps enhance iron absorption (Saraswati et al., 2024).

The preparation of beetroot juice follows Standard Operating Procedures (SOP). The process begins with washing the beetroot under running water, peeling it, and cutting it into small pieces weighing 100 g. The beetroot pieces are then blended with 35 g of sugar and 110 ml of water until smooth. The mixture is strained to separate the pulp, and the juice is poured into a measuring cup to reach 200 ml. The beetroot juice is consumed every morning after breakfast for 7 consecutive days. Hemoglobin levels were measured before the intervention and after 7 days of beetroot juice consumption using the Easy Touch GCHb device.

Table 4.1 shows the results of hemoglobin level measurements

Hari Ke-	Tanggal	Waktu (WIB)	Metode Pemeriksaan	Nilai (g/dL)	Keterangan
0	Senin, 7 Juli 2025	09.00	*Easy Touch* GCHb	10,5	Sebelum
7	Senin, 14 Juli 2025	09.00	*Easy Touch* GCHb	11,8	Sesudah

Table 4.1 shows the results of hemoglobin level measurements before the intervention, with a hemoglobin level of 10.5 g/dL, classified as mild anemia. After seven days of beetroot juice consumption, the hemoglobin level increased to 11.8 g/dL, which falls into the normal category. The data indicates an increase in hemoglobin levels by 1.3 g/dL after the intervention.

DISCUSSION

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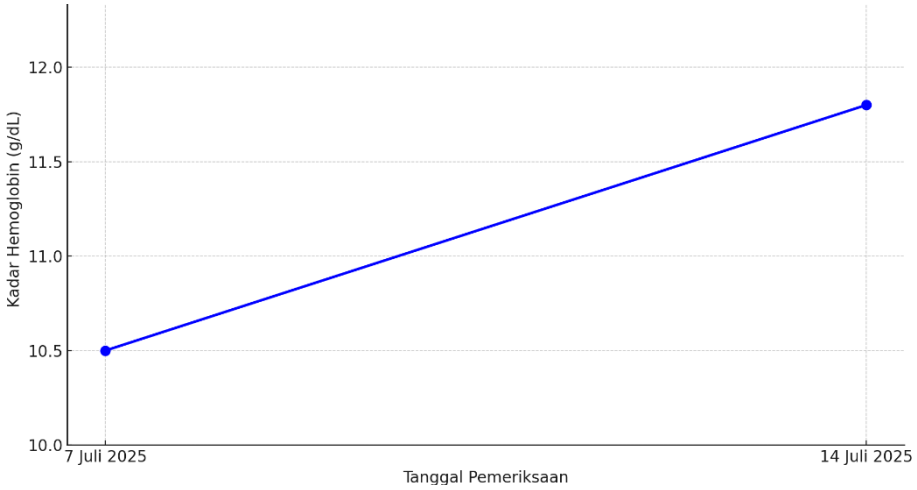

This case study aims to determine the application of beetroot juice in increasing hemoglobin levels in pregnant women with anemia. Sampling, hemoglobin level measurement, education, and time contracts were conducted on day 0, July 7, 2025, at 09:00 WIB. The respondent reported symptoms such as dizziness, fatigue, pale lips, and weakness. According to Dewi et al. (2021), anemia can have dangerous impacts on pregnant women and fetuses, including complications such as miscarriage, premature birth, impaired fetal growth, increased susceptibility to infection, hyperemesis gravidarum, antepartum hemorrhage, and premature rupture of membranes.

Therefore, management of anemia during pregnancy can be done through pharmacological and non-pharmacological therapy. According to Annabila and Widayati (2025), pharmacological therapy involves administering iron supplements in the form of Fe tablets. However, consuming Fe tablets can cause side effects such as gastrointestinal discomfort, nausea, constipation, and black stools. The respondent also complained of nausea and constipation after taking Fe tablets. One non-pharmacological therapy is consuming beetroot. According to Suhesti and Yuliana (2024), beetroot is beneficial for preventing and treating anemia. Beetroot has a side effect of turning urine and stools reddish-purple due to the presence of betacyanin, a natural pigment in beetroot. According to Amila et al. (2021), this effect is not harmful and can be mitigated by increasing water intake.

The initial hemoglobin level measurement before administering beetroot juice was 10.5 g/dL, indicating mild anemia. This data serves as a basis for evaluating the effectiveness of the intervention to be conducted over the next seven days. The respondent was advised to avoid tea or coffee during the intervention, as these beverages contain phytates and tannins that can inhibit iron absorption (Dewi et al., 2021).

From day 1 to day 7 (July 8-14, 2025), the respondent was given 200 ml of beetroot juice daily at 08:00 WIB. On the first day, the researcher brought the juice to the respondent's home. For the following days, the juice was prepared at the respondent's home with the researcher's supervision to ensure adherence to the Standard Operating Procedure (SOP).

On day 7 (July 14, 2025), at 09:00 WIB, the hemoglobin level was re-measured, and the result was 11.8 g/dL, indicating that the respondent's hemoglobin level had returned to normal.

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This finding is consistent with research by Utami and Triyani (2024), which showed that beetroot juice consumption increased hemoglobin levels in pregnant women with anemia.

The increase in hemoglobin levels in the respondent can be attributed to the respondent's adherence to consuming beetroot juice during the intervention. This finding is in line with previous research by Utami and Triyani (2024), which stated that consuming beetroot juice for 7 consecutive days effectively increased hemoglobin levels in pregnant women with anemia. The effect is associated with the iron content in beetroot, which plays a role in hemoglobin formation, as well as folic acid and vitamin C, which support red blood cell development and enhance iron absorption.

Thus, beetroot juice can be used as a non-pharmacological therapy for managing anemia. After the case study, the researcher provided further education to the respondent to enable them to consume beetroot juice independently at home. This is consistent with research by Annabila and Widayati (2025), which mentioned that regular consumption of beetroot juice can increase hemoglobin levels.

4. CONCLUSION

Based on the results of a 7-day case study conducted on a pregnant woman with anemia in Tamansari Village, it can be concluded that:

a. Consuming 200 ml of beetroot juice per day for 7 consecutive days was proven to increase hemoglobin levels from 10.5 g/dL to 11.8 g/dL. This indicates the potential use of beetroot juice as an effective non-pharmacological therapy to increase hemoglobin levels in the management of anemia in pregnant women.
b. The hemoglobin level measurement before the intervention showed that the respondent had mild anemia. After the intervention, there was an increase in hemoglobin levels to a normal range for pregnant women.

Thus, this case study successfully achieved its general objective of providing an overview of the application of beetroot juice (Beta Vulgaris L) to increase hemoglobin levels in pregnant women with anemia and its specific objective of determining hemoglobin levels before and after the intervention with beetroot juice.

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