



The Application Of Amb On Bananas In Lowering Blood Pressure In Hypertension Patients

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Abstract: Hypertension is a condition characterized by blood pressure that exceeds normal limits. Common causes include excessive salt intake, physical inactivity, smoking, alcohol consumption, prolonged stress, and obesity. If left uncontrolled, hypertension can lead to serious complications, including sudden death. Therefore, non-pharmacological interventions are needed to help manage blood pressure and prevent further complications. This study aimed to describe the application of Ambon banana therapy in reducing blood pressure among patients with hypertension in the working area of the Lampaseh Community Health Center (UPTD), Kuta Raja District, Banda Aceh City. A descriptive case study design was used, involving two participants with grade 1 hypertension. The study was conducted from December 17 to 23, 2025. The instruments included informed consent forms, assessment forms, SOP sheets, a manual sphygmomanometer, a knife, and a digital scale to ensure accurate banana dosage. The results showed that consuming Ambon bananas before breakfast for seven consecutive days reduced blood pressure. In Subject I, blood pressure decreased from 140/90 mmHg to 120/90 mmHg, while in Subject II it decreased from 150/90 mmHg to 130/80 mmHg. This study indicates that Ambon banana therapy is an effective non-pharmacological intervention for lowering blood pressure in patients with grade 1 hypertension.

Keywords: Hypertension, Blood Pressure, Ambon Banana Therapy

INTRODUCTION

Hypertension, commonly known as high blood pressure, is a condition characterized by blood pressure that exceeds the normal limit of 120/80 mmHg. According to the World Health Organization (WHO), normal blood pressure is considered to be below 140/85 mmHg, while blood pressure above 165/90 mmHg is classified as hypertension (Purwandari, 2018). In general, hypertension is an asymptomatic condition in which elevated blood pressure in the arteries increases the risk of cardiovascular diseases, such as stroke, kidney failure, heart attack, and kidney damage (Insani, 2015).

According to the World Health Organization (WHO) 2023, approximately 1.13 billion people worldwide have hypertension. The highest prevalence of hypertension is found in the African Region (27%), while the Region of the Americas has the lowest prevalence (18%). The number of adults with hypertension increased from 594 million in 1975 to 1.13 billion in 2015, with most of the increase occurring in low- and middle-income countries. This increase is mainly attributed to the rising prevalence of hypertension risk factors within these populations (Ministry of Health of the Republic of Indonesia, 2021).

In Indonesia, the prevalence of hypertension based on physician diagnosis or antihypertensive

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medication use among individuals aged 18 years and above is 8.84%, according to the Ministry of Health of the Republic of Indonesia (2019). However, other data indicate that only about one-third of hypertension cases are diagnosed, while the prevalence based on blood pressure measurements exceeds 25% in all provinces. The Basic Health Research (Riskesdas) also reported that the prevalence of hypertension was 34.1% (Riskesdas, 2019).

In Aceh Province, the prevalence of hypertension among individuals aged 18 years and above is 26.45%. This figure indicates that Aceh has a relatively high prevalence of hypertension compared to the national average (Aceh Provincial Health Office, 2021).

The signs and symptoms of hypertension include blurred vision, headache accompanied by a feeling of heaviness in the neck, and easy fatigue. If left untreated, these symptoms may lead to complications such as heart disease, kidney disease, and visual impairment (Merdekawati et al., 2021).

Efforts to control hypertension can be carried out through pharmacological and non-pharmacological therapies. Pharmacological therapy includes the administration of antihypertensive medications, such as diuretics, beta-adrenergic blockers (beta blockers), vasodilators, calcium channel blockers, and angiotensin-converting enzyme (ACE) inhibitors. Non-pharmacological therapy includes lifestyle modification, weight reduction, hypertension exercise, sodium intake restriction, a low-fat diet, limiting caffeine consumption, smoking cessation, increased consumption of fruits and vegetables, the use of boiled bay leaves, and the consumption of Ambon bananas (Saputra et al., 2020).

A study conducted by Syukriah (2025) showed that consuming Ambon bananas before breakfast for seven consecutive days effectively reduced blood pressure. In Subject I, blood pressure decreased from 140/90 mmHg before the intervention to 130/60 mmHg afterward. In Subject II, blood pressure decreased from 150/90 mmHg to 130/70 mmHg following the intervention. These findings demonstrate that Ambon banana therapy is effective in lowering blood pressure among patients with hypertension.

These findings are supported by Wijaya (2024), who reported that Ambon banana therapy reduced blood pressure in both respondents, with an average reduction of 19 mmHg in systolic blood pressure and 14 mmHg in diastolic blood pressure. The study concluded that Ambon banana therapy is effective in reducing blood pressure among patients with hypertension.

Based on a preliminary survey conducted on September 17–18, 2025, 150 individuals with hypertension were identified from six villages within the working area of Lampaseh Kota Community Health Center. Among them, 60 were men and 90 were women

who received treatment between June and August 2025. Two of these individuals were selected as study subjects.

Subject I, identified as Mrs. R, was a 40-year-old woman who had no contraindications to consuming Ambon bananas. During the intervention, she did not receive any other non-pharmacological therapy or antihypertensive medication. She had been diagnosed with hypertension for three years. Her vital signs showed a blood pressure of 140/90 mmHg, a respiratory rate of 20 breaths per minute, a pulse rate of 90 beats per minute, and a body temperature of 36.5°C. She willingly participated and was cooperative throughout the intervention.

Subject II, identified as Mrs. F, was a 42-year-old woman who also had no contraindications to consuming Ambon bananas. During the intervention, she did not receive any other non-pharmacological therapy or antihypertensive medication. She had been diagnosed with hypertension for two years. Her vital signs included a blood pressure of 150/90 mmHg, a respiratory rate of 20 breaths per minute, a pulse rate of 100 beats per minute, and a body temperature of 36.5°C. She willingly participated and was cooperative throughout the intervention.

METHOD

This research is descriptive in nature and employs a case study approach. Descriptive research aims primarily to provide a clear and detailed description of a situation or phenomenon regarding what is occurring (Adiputra et al., 2021). This case study aims to describe the reduction in blood pressure following the administration of *pisang ambon* (Ambon banana) therapy.

RESULT AND DISCUSSION

Based on the research findings, it was observed that following the consumption of Ambon bananas, the blood pressure of Subject I and Subject II decreased compared to their previous levels; the details of this decrease are as follows.

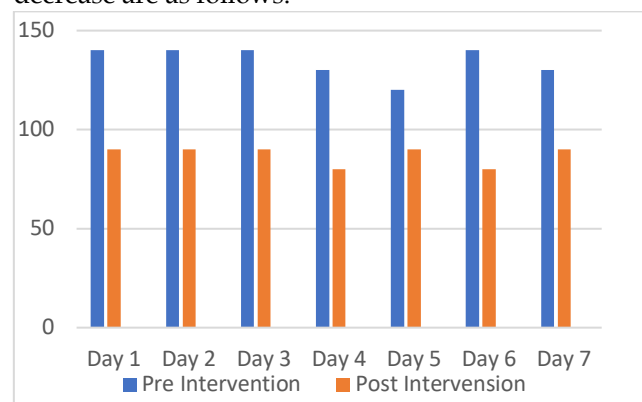


Diagram 1: Blood Pressure Evaluation Results Before and After the Application of Ambon Bananas on Subject I

Based on Diagram 4.2, a gradual decrease in blood pressure was observed in Subject I, ranging from 140/90 mmHg at the post-test on the first day to a final reading of 120/80 mmHg at the post-test on the seventh day.

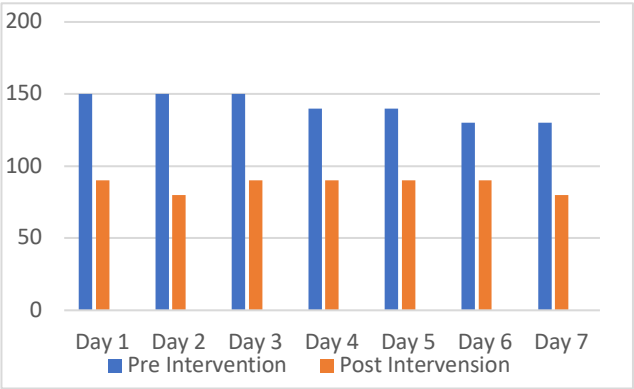


Diagram 2: Blood Pressure Evaluation Results Before and After *Ambon* Banana Intervention for Subject II

Diagram 4.2 shows a gradual decrease in blood pressure for Subject II, moving from a reading of 150/90 mmHg at the first day's post-test to a final reading of 130/80 mmHg at the seventh day's post-test.

Based on the results of the study on Ambon banana therapy for reducing blood pressure in subjects with hypertension, it was found that there was a decrease in blood pressure in both subjects after receiving the therapy. Subject I experienced a reduction in blood pressure from 140/90 mmHg to 120/90 mmHg, while Subject II showed a decrease from 150/90 mmHg to 130/80 mmHg.

In Subject I, blood pressure measurements demonstrated gradual changes throughout the seven-day intervention period. On the first day, the blood pressure remained unchanged at 140/90 mmHg before and after the Ambon banana therapy. On the second day, the blood pressure decreased from 140/90 mmHg to 140/80 mmHg. On the third day, it decreased further from 140/90 mmHg to 130/80 mmHg. On the fourth day, the blood pressure remained stable at 130/80

mmHg before and after the therapy. On the fifth day, the blood pressure decreased from 120/90 mmHg to 120/80 mmHg. On the sixth day, an increase in blood pressure before the therapy was observed, reaching 140/80 mmHg. This increase was presumed to be associated with stress and fatigue resulting from the subject's activities as a housewife. However, after the therapy, the blood pressure decreased to 130/80 mmHg. On the seventh day, the blood pressure decreased from 130/90 mmHg before the therapy to 120/90 mmHg after the administration of Ambon banana therapy.

Overall, these findings indicate that Ambon banana therapy had a positive effect on reducing blood pressure in Subject I, although fluctuations in blood pressure occurred due to external factors such as stress and fatigue. Nevertheless, a reduction in blood pressure was consistently observed by the end of the intervention period.

In Subject II, blood pressure measurements also showed gradual changes throughout the intervention period. On the first day, the blood pressure decreased from 150/90 mmHg before the Ambon banana therapy to 150/80 mmHg after the therapy. On the second day, the blood pressure remained stable at 150/80 mmHg before and after the therapy. On the third day, the blood pressure decreased from 150/90 mmHg to 140/80 mmHg. On the fourth day, an increase in blood pressure before the therapy was observed because the subject had consumed coffee prior to the intervention. The blood pressure decreased from 150/90 mmHg before the therapy to 140/80 mmHg afterward. On the fifth day, the blood pressure decreased from 140/90 mmHg to 140/80 mmHg. On the sixth day, the blood pressure decreased from 130/90 mmHg to 130/80 mmHg. On the seventh day, the blood pressure remained stable at 130/80 mmHg before and after the Ambon banana therapy.

Based on the researcher's assumption, Ambon banana therapy was able to reduce blood pressure in both subjects after seven consecutive days of administration. This effect may be attributed to the high potassium content of bananas, which promotes vasodilation, thereby improving blood flow and reducing pressure on the arterial walls. In addition, Ambon bananas contain antioxidants that help maintain cardiovascular and vascular health.

These findings are supported by the theory proposed by Desnilasari and Lestari (2014), which states that Ambon bananas can lower blood pressure because they exhibit Angiotensin-Converting Enzyme Inhibitor (ACE-I) activity in the body. As the name implies, ACE-I inhibits the action of the angiotensin-converting enzyme involved in the mechanism that increases blood pressure. Furthermore, bananas are rich in potassium and low in sodium, making them beneficial for individuals with hypertension. Therefore, the high potassium content of bananas is believed to contribute to the reduction of blood pressure.

Several factors supported the effectiveness of Ambon banana therapy in reducing blood pressure among patients with hypertension, including treatment adherence, educational level, and family support.

The first factor contributing to the success of the therapy was adherence to the intervention protocol. Proper and consistent implementation of the therapy played an important role in achieving the desired outcomes. Subject I consumed Ambon bananas every morning before breakfast for seven consecutive days. Similarly, Subject II followed the same regimen, consuming Ambon bananas every morning before breakfast for seven consecutive days. During the intervention period, both subjects were highly cooperative and enthusiastic in following the therapy as instructed.

Based on the researcher's assumption, adherence to the prescribed therapy and the correct implementation of the intervention greatly influenced the effectiveness of the treatment. The reduction in blood pressure became more evident when the therapy was administered according to the established Standard Operating Procedure (SOP), including the recommended frequency and duration of Ambon banana consumption.

This finding is consistent with the study by Sugiyono (2018), which defines adherence as a habit or pattern of activities performed repeatedly in daily life, either individually or collectively. In the context of therapy, adherence refers to the consistent and regular implementation of a treatment according to a predetermined schedule, with the aim of improving an individual's physical and mental health.

These findings are also in agreement with the study conducted by Wulandari and Hartutik (2022), which reported that therapies performed regularly and according to schedule can enhance treatment effectiveness, accelerate the body's response, and improve overall therapeutic outcomes.

According to Suwanti et al. (2017), adherence is generally defined as an individual's behavior of complying with rules, recommendations, and discipline in following a treatment regimen, such as taking medication, adhering to dietary recommendations, or making lifestyle modifications in accordance with therapeutic and health guidelines. The level of adherence ranges from disregarding recommendations to fully complying with the prescribed treatment plan.

Another factor contributing to the success of this therapy was the participants' educational background. In this study, Subject I had completed senior high school as the highest level of education and had limited knowledge regarding hypertension prevention.

Similarly, Subject II had also completed senior high school and had insufficient information about hypertension prevention and the types of foods that could increase blood pressure. During the study, the researcher provided health education regarding foods that may contribute to elevated blood pressure.

Based on the researcher's assumption, a higher level of knowledge enables individuals to better understand the disease they are experiencing and the appropriate preventive measures to reduce the risk factors associated with hypertension. Consequently, when unexpected health problems arise, individuals are more likely to know how to manage them using both pharmacological and non-pharmacological approaches.

This finding is supported by Mulyanti (2022), who stated that a higher level of knowledge generally enables individuals to obtain and understand health information more easily. Knowledge also influences family support and can be enhanced through health education. In the present study, both Subject I and Subject II demonstrated limited knowledge regarding dietary management for hypertension, highlighting the importance of providing appropriate health education to improve disease prevention and management.

management.

These findings are supported by the study conducted by Adellia et al. (2024), which reported that individuals with a higher level of knowledge are generally better able to understand and process health-related information, enabling them to make informed decisions regarding healthcare services and adopt healthier lifestyles in the future.

According to Heryati (2016), a higher level of education contributes to broader knowledge. Educational attainment influences an individual's ability to understand new information and enhances self-

motivation, thereby encouraging positive behavioral changes toward a healthier lifestyle.

Family support was also identified as an important factor contributing to the success of the therapy. During the study, both subjects received strong support from their families throughout the Ambon banana intervention aimed at reducing blood pressure. In Subject I, family members, including the subject's children, consistently provided encouragement and motivation to support the recovery process. Similarly, Subject II received substantial support from family members, who facilitated and assisted throughout the implementation of the Ambon banana therapy.

Based on the researcher's assumption, family support plays a crucial role in the recovery process. It is considered one of the key factors influencing the success of the intervention, as emotional encouragement and motivation from family members can improve patients' adherence to therapy and support the achievement of better health outcomes.

According to Wilson and Ampey Thornhill (2016), when families share their concerns with social support systems, clients receive advice and guidance. Creating a caring environment, providing direction, identifying appropriate healthcare resources, and offering financial assistance are common forms of family support.

Osamor (2015) stated that chronic diseases, such as hypertension, require lifelong treatment. This poses a challenge for both patients and their families to maintain motivation and adherence to treatment over an extended period. One effective way to enhance patients' motivation is through continuous family support.

Rahayu (2017) also reported that individuals who receive support from their families are generally more likely to accept medical advice than those who do not receive such support. This finding highlights the importance of family social support in managing health

problems. Family support can have a positive impact on patients by encouraging them to adhere to treatment and facilitating the recovery process.

Several factors may influence blood pressure, including age, sex, stress, caffeine consumption, and excessive sodium intake. Based on the findings of this study, Subject II did not experience stress, whereas Subject I reported experiencing stress due to fatigue from performing household responsibilities.

Based on the researcher's assumption, age may influence blood pressure because of the natural physiological changes that occur over time. As individuals age, the arteries tend to become stiffer, harder, and less elastic. These changes increase vascular resistance, requiring the heart to pump more forcefully, which consequently leads to an increase in blood pressure.

Based on the researcher's assumption, stress can contribute to elevated blood pressure because it triggers the release of hormones such as adrenaline, which increases heart rate and causes vasoconstriction, resulting in a temporary rise in blood pressure.

This assumption is supported by the study conducted by Ni Made Wedri et al. (2017), which reported that stress or psychological tension stimulates the adrenal glands to release adrenaline. This hormone increases both the rate and force of cardiac contractions, leading to an elevation in blood pressure.

Another factor that may increase blood pressure is excessive consumption of caffeine and sodium. Based on the findings of this study, Subject II experienced an increase in blood pressure on the fourth day of the intervention. On the third day, the subject's blood pressure was 140/80 mmHg, whereas on the fourth day it increased to 150/90 mmHg. This increase was attributed to the consumption of caffeinated beverages during the previous evening and the following morning.

In contrast, Subject I maintained a healthy dietary pattern throughout the seven-day intervention and did not experience a similar increase in blood pressure.

These findings are consistent with the theory proposed by Esti (2015), who explained that caffeine can cause blood vessels to constrict by blocking the action of adenosine, a substance that helps keep blood vessels dilated. In addition, caffeine stimulates the adrenal glands to release higher levels of cortisol and adrenaline, both of which may contribute to increased blood pressure. Therefore, to reduce the risk of hypertension, coffee consumption should be limited to no more than two cups per day.

This finding is further supported by Utami (2021), who, based on the recommendations of the European Society of Cardiology (ESC), stated that individuals with hypertension who consume more than three cups of coffee per day are at a higher risk of experiencing elevated blood pressure.

In addition to stress and dietary factors, age is another factor that may influence the development of hypertension. Based on the findings of this study, Subject I was 51 years old and Subject II was 42 years old. Both subjects were within the productive age group, which is associated with an increased risk of hypertension.

According to the researcher's assumption, age influences blood pressure because of natural physiological changes that occur over time. As individuals grow older, the arteries become stiffer, less elastic, and more rigid. These changes increase vascular resistance, forcing the heart to pump more forcefully, which consequently leads to elevated blood pressure.

This finding is consistent with the study conducted by Nuraeni (2020), which reported that increasing age is associated with structural changes in the arteries, causing them to become wider and stiffer. As a result,

the capacity and elastic recoil of blood vessels decrease, contributing to an increase in blood pressure.

Another factor that may influence blood pressure is sex. Based on the findings of this study, both Subject I and Subject II were female.

According to the researcher's assumption, sex may influence blood pressure because of hormonal differences between males and females. In males, testosterone has been reported to contribute to elevated blood pressure by reducing the elasticity of blood vessels and promoting sodium retention by the kidneys, resulting in a greater tendency toward hypertension. In contrast, females produce estrogen, which helps maintain the flexibility and elasticity of blood vessels. This vascular elasticity promotes smoother blood flow, thereby contributing to more stable and lower blood pressure.

These findings are supported by Gillis and Sullivan (2016), who reported that women generally exhibit a stronger anti-inflammatory immune profile, which may serve as a compensatory mechanism to limit increases in blood pressure. In contrast, men tend to exhibit a more pro-inflammatory immune profile, which is associated with a greater susceptibility to elevated blood pressure.

CONCLUSION

Based on the findings and discussion of this case study on patients with hypertension, it can be concluded that Ambon banana therapy was effective in reducing blood pressure in individuals with hypertension. Subject I experienced a reduction in blood pressure from 140/90 mmHg to 120/90 mmHg, while Subject II showed a decrease from 150/90 mmHg to 130/80 mmHg.

Several factors were identified as influencing blood pressure, including stress, caffeine consumption, excessive sodium intake, age, and sex. In addition, the success of the Ambon banana intervention was supported by several factors, namely adherence to the therapy, educational level, and family support.

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CONFLICTS OF INTEREST

The author declares that there are no conflicts of interest regarding the conduct of this study, the preparation of the manuscript, or the publication of this article.

REFERENCES

- Agustianingrum, P., Chasanah, S. C. S., & Sari, R. P. (2020). The Effect of Ambon Banana (*Musa paradisiaca* var. *sapientum* Linnaeus) Administration on Reducing Blood Pressure in Patients with Hypertension. *Jurnal Kesehatan*, 9(2), 63-72.
- Akimba, A. J. A. A. J. (2025). Implementation of Ambon Banana Administration to Reduce Blood Pressure in Patients with Hypertension. *Jurnal Akademik Keperawatan Kesdam IM Banda Aceh*, 9(4).
- Amira, I., Suryani, S., & Hendrawati, H. (2021). The Relationship Between Stress Level and Hypertension Among Older Adults at Guntur Public Health Center, Garut Regency. *Jurnal Kesehatan Bakti Tunas Husada: Jurnal Ilmu-Ilmu Keperawatan, Analis Kesehatan dan Farmasi*, 21(1), 21-28.
- Kartiningrum, E. D., & Ningtyas, A. (2021). A Qualitative Study of Family Care for Patients with Hypertension in Sumber Hamlet, Sebaung

- Village, Gending District, Probolinggo. *Hospital Majapahit: Jurnal Ilmiah Kesehatan Politeknik Kesehatan Mojokerto*, 13(1), 46–60.
- Ministry of Health of the Republic of Indonesia. (2017). Indonesia Health Profile 2016. Ministry of Health of the Republic of Indonesia.
- Lukitaningtyas, D., & Cahyono, E. A. (2023). Hypertension: A Review Article. *Pengembangan Ilmu dan Praktik Kesehatan*, 2(2), 100–117.
- Nurleny, N., & Kossasy, S. M. (2024). The Effect of Ambon Banana (*Musa paradisiaca* var.) on Blood Pressure in Patients with Hypertension in Andalas Village, the Working Area of the Public Health Center. *Jurnal Kesehatan Saintika Meditory*, 7(1), 432–441.
- Purwandari, K. P., & Nugroho, Y. W. (2018). The Relationship Between Dietary Adherence and Blood Pressure Among Patients with Hypertension in Nambangan Village. *University Research Colloquium*, 482–486.
- Ramadhan, M. R., Retnaningrum, Y. R., Riastiti, Y., & Irawiraman, Y. H. (2021). The Effect of Ambon Banana (*Musa paradisiaca*) Consumption on Blood Pressure Reduction Among Patients with Hypertension at South Bontang Public Health Center. *Jurnal Sains dan Kesehatan*, 3(2).
- Rika Widiyana, D., & Ansari, Z. (2023). Complications of Hypertension in Relation to Patients' Knowledge of Hypertension and Prevention Efforts. *Jurnal Penelitian Keperawatan Medik*, 2(2), 44–51.
- Safutri, W., Maesaroh, S., & Sagita, Y. D. (2022). The Relationship Between Adherence to a Hypertension Diet and the Incidence of Hypertension Among Older Adults at the Posbindu PTM of Raman Endra Village, East Lampung Regency, in 2021. *Jurnal Maternitas Aisyah*, 3(1), 12–19.
- Tanu, B. Y., Situmorang, P., Zai, N. S., & Siregar, D. (2025). Risk Factors for Hypertension Among Adults in Nias Regency. *Jurnal Keperawatan Cikini*, 6(1), 39–47.
- Tigana, I. K., Bastian, F., & Safirza, S. (2023). Characteristics of Hospitalized Patients with Hypertension at Meuraxa Regional General Hospital. *Media Kesehatan Masyarakat Indonesia*, 22(5), 308–313.
- Tina, L., Ulfianti, R., & Yunawati, I. (2019). The Effect of Ambon Banana (*Musa acuminata* Colla) Administration on Blood Pressure Among Hypertensive Patients Aged Over 45 Years at Wawotobi Public Health Center in 2017. *Majalah Kesehatan*, 6(2), 106–112.
- Warjiman, W., Unja, E. E., Gabrilinda, Y., & Hapsari, F. D. (2020). Screening and Education for Patients with Hypertension. *Jurnal Suaka Insan Mengabdi*, 2(1), 15–26.
- World Health Organization. (2016). Obesity and Overweight: Fact Sheet. World Health Organization.
- Wijaya, I., Soesanto, E., & Armiyati, Y. (n.d.). Reducing Blood Pressure in Older Adults with Hypertension Using Ambon Bananas.
- Yulianti, I., Prameswari, V. E., & Wahyuningrum, T. (2019). The Effect of Ambon Banana Administration on Blood Pressure Among Older Adults with Hypertension. *Jurnal Ners dan Kebidanan*.
- Yuni, M. Y., Marlina, C., & Nasution, H. A. (2022). The Effect of Consuming Ambon Banana Juice on Reducing Blood Pressure Among Older Adults with Hypertension in the Working Area of Samudra Public Health Center, North Aceh, in 2022.