

Suplementasi Probiotik pada Terapi Standar Zinc dan Cairan Rehidrasi Oral pada Anak Usia 6-36 Bulan dengan Diare Akut = Supplementation of Probiotics to Standard Therapy Zinc and Oral Rehydration Solution in 6 until 36-month- Old Children with Acute Diarrhea

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Abstrak

Latar Belakang. Cairan rehidrasi oral dan zinc telah menjadi terapi standar dalam tata laksana diare akut pada anak. Probiotik sudah digunakan secara luas pada kasus diare akut pada anak meskipun belum direkomendasikan oleh WHO. Penelitian yang membandingkan penambahan probiotik pada terapi standar masih sangat terbatas.

Tujuan. Mengetahui efektivitas pemberian suplementasi probiotik pada terapi standar diare akut.

Metode. Penelitian uji klinis acak tersamar ganda dilakukan pada anak usia 6 bulan sampai 36 bulan dengan diare akut tanpa dehidrasi dan dehidrasi ringan sedang, yang dilakukan di kelurahan Kenari, Jakarta Pusat antara bulan Oktober 2011 sampai Februari 2012. Kelompok perlakuan diberikan terapi standar ditambah probiotik *Lactobacillus rhamnosus* R0011 1.9×10^9 cfu dan *Lactobacillus acidophilus* R0052 0.1×10^9 cfu, sedangkan kelompok kontrol diberikan terapi standar dan plasebo. Luaran yang dinilai adalah durasi diare dan frekuensi defekasi. Penelitian ini bersifat intention to treat analysis.

Hasil. Total 112 subjek masuk dalam penelitian, terdiri dari 56 subjek mendapat terapi standar ditambah probiotik, dan 56 subjek hanya terapi standar. Median lama durasi diare setelah terapi pada kelompok perlakuan yaitu 68,5 jam sedangkan pada kelompok kontrol 61,5 jam ($p=0,596$). Median frekuensi defekasi pada kelompok perlakuan yaitu 5 kali, sedangkan pada kelompok kontrol 5,5 kali ($p=0,795$).

Simpulan. Pada penelitian ini tidak ditemukan penurunan durasi diare dengan penambahan probiotik pada terapi standar. Meskipun kelompok perlakuan memiliki frekuensi defekasi yang lebih sedikit dibandingkan dengan kelompok kontrol, namun perbedaan tersebut tidak bermakna.

Background. Oral rehydration solution and zinc have been used as standard therapy for treating acute diarrhea in children. Probiotics are widely used in treatment of acute diarrhea in children, although it has not been recommended by WHO. Studies comparing supplementation of probiotics to standard therapy are still limited.

Objectives. To know the efficacy of probiotic supplementation to standard therapy in acute diarrhea.

Methods. A randomized double blind clinical trial was performed in children aged 6-36 months with acute diarrhea without dehydration or mild to moderate dehydration in Kenari sub district, central Jakarta, between October 2011 until Februari 2012. Supplemented group was given standard therapy and probiotics *Lactobacillus rhamnosus* R0011 1.9×10^9 cfu and *Lactobacillus acidophilus* R0052 0.1×10^9 cfu, while control group was given standard therapy and placebo. The outcomes were duration of diarrhea and frequency of defecation. Stool frequency was recorded daily until resolution of diarrhea. The analysis was based on intention to treat.

Results. A total of 112 subjects were included in the study, consisted of 56 subjects in supplemented group and 56 subjects in control group. Median duration of diarrhea in supplemented group was 68,5 hours while in the control group was 61,5 hours ($p=0,596$). Median frequency of defecation in supplemented group was

5 times, while in the control group was 5,5 times ($p=0,795$).

Conclusion. This study did not find shorter duration of diarrhea with supplementation of probiotics to standard therapy. Although supplemented group had lower frequency of defecation compared to control group, the difference was not significant.