

Efektifitas teknik nerve sparing saat histerektomi radikal pada kanker serviks dalam menurunkan angka kejadian retensio urin pascaoperasi = Efficacy of nerve sparing technique during radical hysterectomy in reducing postoperative urinary retention / Jimmy Panji Wirawan

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Abstrak

Tujuan: Penelitian ini bertujuan membandingkan kejadian retensio pada pasien kanker serviks yang menjalani histerektomi radikal dengan dan tanpa teknik nerve sparing

Metode: Pasien kanker serviks stadium IB-IIA yang menjalani prosedur histerektomi radikal di Rumah Sakit Cipto Mangunkusumo periode Juni 2011 hingga Mei 2012 masuk sebagai subjek penelitian. Kelompok terbagi menjadi kelompok dengan dan tanpa teknik nerve sparing. Pencatatan morbiditas intraoperatif serta analisa residu urin serta kejadian retensio urin pascaoperasi menjadi keluaran penelitian. Analisis statistik menggunakan uji Fisher, Chi-Square dan uji T tidak berpasangan.

Hasil: Sebanyak 39 pasien kanker serviks menjalani prosedur histerektomi radikal dalam periode penelitian. Dari sejumlah tersebut, hanya 26 pasien yang dapat dianalisa. Tujuh belas subjek dengan teknik nerve sparing dan sembilan subjek tanpa nerve sparing. Tidak ada perbedaan karakteristik pasien dalam hal jenis histopatologi maupun stadium kanker serviks. Morbiditas intraoperatif tidak berbeda antar kelompok dari segi: lama operasi (307 menit VS 300 menit, p 0.76), jumlah perdaraan (1340 ml VS 1044 ml, p 0.41) serta komplikasi intraoperatif (p 1.00). Meskipun tidak berbeda secara statistik, terdapat kecenderungan nilai volume miksi lebih banyak pada kelompok dengan nerve sparing satu bulan pascaoperasi. Volume residu urin pada satu bulan pascaoperasi lebih sedikit pada kelompok dengan nerve sparing (78 ml VS 310 ml, p 0.03).

Kesimpulan: Terdapat perbedaan bermakna volume residu urin satu bulan pasca operasi antara kelompok dengan dan tanpa nerve sparing.

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Objectives: To describe the efficacy of nerve sparing during radical hysterectomy technique in reducing post operative urinary retention in our institution.

Methods: Cervical cancer patients stage IB-IIA whom underwent radical hysterectomy procedure at Cipto Mangunkusumo Hospital from June 2011 till May 2012 were considered into the study. Study group was divided into group with and without nerve sparing technique. Intraoperative morbidity, residual urine volume and incidence of urinary retention were our outcomes. We used Fisher test, Chi Square test and Independent sample T Test for statistical analysis.

Results: A total of 39 patients underwent radical hysterectomy procedure during the time period. From there, as much as 26 patients were available for analysis with 17 subjects underwent nerve sparing and 9 subjects

without nerve sparing. No difference found between study group in terms of histopathology and stadium. Intraoperative morbidity such as length of operation (307 min VS 300 min, p value 0.76), bleeding (1340 mL VS 1044 mL, p value 0.41) and intraoperative complication did not differ between groups (p value 1.00). Though not statistically significant, there is a tendency of higher micturition volume in nerve sparing group at day 30th postoperative. Residual urine volume at one month postoperative was lower in nerve sparing group (78 ml VS 310 ml, p value 0.03).

Conclusion: Difference in residual urine volume one month postoperative was found between group with and without nerve sparing technique.