

Insiden relaps pada anak dengan hipertiroid Graves dan hubungannya terhadap kadar awal tiroksin bebas = Incidence of hyperthyroid Graves relapse in children and its correlation with initial thyroxine level

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Abstrak

Latar Belakang: Penyakit Graves paling banyak diderita anak hipertiroid dengan akibat tumbuh kembang anak terganggu. Metode pengobatan optimal hipertiroid Graves saat ini masih dalam perdebatan. ATD masih digunakan oleh sebagian besar tenaga kesehatan. Relaps dengan ATD dapat mencapai 83% dengan pengobatan ATD. Pengalihan metode terapi salah satunya berdasarkan relaps. Pengalihan terapi saat awal dari ATD ke metode pengobatan lain pada anak yang diprediksi relaps akan menghemat waktu dan biaya serta meningkatkan potensi tumbuh kembang anak.

Tujuan: Mengetahui insidens relaps hipertiroid Graves anak dan hubungannya terhadap kadar awal FT4 serta karakteristik usia dan jenis kelamin penderita.

Metode: Penelitian bersifat kohort retrospektif dengan menelusuri data rekam medis pasien berusia 1-18 tahun mulai Januari 2000 hingga Juni 2013 di RS Cipto Mangunkusumo, RS Hermina Jatinegara, Bekasi dan Podomoro. Data ditabulasi untuk mendapatkan insiden relaps, median kadar awal FT4, median usia dan jenis kelamin penderita relaps. Analisis statistik dilakukan untuk mencari pengaruh kadar awal FT4 terhadap insiden relaps.

Hasil: Penelitian dilakukan terhadap 25 subjek dengan 12 anak mengalami relaps. Kadar awal FT4 terhadap insiden relaps ditemukan tidak bermakna secara statistik ($p=0,64$) namun kelompok relaps cenderung memiliki kadar awal FT4 lebih tinggi. Relaps dialami lebih banyak oleh anak perempuan (3:1) dengan median usia 10,9 tahun. Penelitian ini mendapatkan hasil lain yaitu durasi eutiroid berbeda bermakna terhadap insiden relaps ($p=0,002$).

Simpulan: Insiden relaps hipertiroid Graves anak 12/25 dengan kadar awal FT4 tidak bermakna secara statistik walau terdapat kecenderungan kadar awal FT4 lebih tinggi pada kelompok relaps. Relaps lebih banyak dialami anak perempuan (3:1) dengan median usia 10,9 tahun.

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Background: Graves disease is most common causes in children with hyperthyroidism which affect growth and development. Optimal initial treatment method of hyperthyroid Graves in children is still under debate. Anti-thyroid drug (ATD) is still used as the initial treatment by the majority of health workers. Relapse can reach 83% with ATD treatment; and relapse is one of the causes to adjust therapeutic method. Alteration of initial ATD therapy to other treatment methods, in children who predicted relapse, will save time and costs as well as potentiate children's growth and development.

Aim: To investigate the incidence of Graves hyperthyroidism relapse and its relationship to the initial FT4 levels, as well as age and gender characteristics of patients.

Method: This study is a retrospective cohort by investigate medical records of patients aged 1-18 years from January 2000 to June 2013 at Cipto Mangunkusumo hospital, Hermina Jatinegara Bekasi and Podomoro Hospital. Data were tabulated to obtain the incidence of relapse, the median of initial FT4 levels, the median of age, and sex of relapse patient. Statistical analysis was performed to find the effect of initial FT4 levels on

the incidence of relapse.

Result: The study was conducted on 25 subjects with 12 children experienced a relapse. Initial FT4 levels of relapse patients was found statistically insignificant ($p=0,64$), but the relapse group tended to have higher levels of initial FT4. Relapse is predominant in girls (3:1), with median age of 10.9 years. This study found that duration of euthyroid differ significantly in the incidence of relapse ($p=0,002$).

Conclusion: The incidence of hyperthyroid Graves relapse in children is 12/25 with initial FT4 levels were not statistically significant although there was tendency initial FT4 levels were higher in relapse group. Girls experienced more relapses (3:1) with median age of 10.9 years.