

Perbedaan kesintasan terjadinya major adverse cardiac events selama tujuh hari pada penderita hipertensi yang mengalami sindroma koroner akut dengan hiperurisemia dan tanpa hiperurisemia = Differentiation between hiperuricemia and no hiperuricemia to make major adverse cardiac events in seven days in hypertensive patients with acute coronary syndrome

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Abstrak

[Latar belakang: Hipertensi akan meningkatkan kadar asam urat yang akan memperburuk terjadinya Major Adverse Cardiac Events (MACE) pada penderita sindroma koroner akut (SKA). Dengan mengetahui kadar asam urat maka kita memprediksi terjadinya MACE sehingga dapat melakukan tata laksana SKA yang lebih optimal. Metode: Penelitian dilakukan secara kohort retrospektif dengan menggunakan analisa kesintasan MACE selama tujuh hari pada penderita hipertensi yang mengalami SKA. Data diambil melalui rekam medis ICCU RSCM selama 2009-2013 secara konsekutif. Analisa data menggunakan kurva Kaplan Meir, Cox proportional hazard regression, analisis multivariat Cox proportional hazard regression Hasil Penelitian: Dua ratus lima puluh subyek penelitian dibagi dalam dua kelompok hiperurisemia dan tanpa hiperurisemia. MACE lebih banyak terjadi pada kelompok hiperurisemia yaitu 38 pasien dari 125 pasien (30.4%) dibandingkan tanpa hiperurisemia sebesar 16 pasien dari 125 pasien (12.8%). Analisa kesintasan mendapatkan MACE lebih cepat dan bermakna pada penderita hiperurisemia ($P < 0.001$). Analisa Cox proportional hazard regression mendapatkan hasil hazard ratio sebesar 1.676 (IK95% 1.243-2.260). Analisa multivariat mendapatkan adjusted hazard ratio tidak berbeda bermakna pada variabel-variabel karakteristik dasar yang inhomogen yaitu variabel gagal jantung, ejeksi fraksi ventrikel kiri dan gangguan fungsi ginjal. Simpulan: Terdapat perbedaan kesintasan terjadinya MACE selama tujuh hari pada hipertensi yang mengalami SKA dengan hiperurisemia dan kelompok tanpa hiperurisemia dengan Hazard Ratio sebesar 1,676.

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