

Faktor-Faktor yang Memengaruhi Gangguan Perilaku pada Anak Epilepsi = Factors Related to Behavior Problems in Children with Epilepsy

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Abstrak

[Latar belakang. Gangguan perilaku pada anak epilepsi memiliki prevalens yang tinggi dan dapat menyebabkan dampak psikososial pada anak. Namun sejauh ini di Indonesia belum terdapat studi yang meneliti gangguan perilaku pada anak epilepsi serta faktor-faktor yang berhubungan.

Tujuan. Penelitian ini untuk mengetahui: (1) proporsi dan jenis gangguan perilaku pada anak epilepsi berdasarkan child behavior checklist (CBCL), (2) hubungan antara: usia awitan kejang, frekuensi kejang, durasi epilepsi, obat anti epilepsi, tingkat sosial ekonomi, dan pendidikan orangtua, dengan gangguan perilaku pada anak epilepsi, (3) adaptasi keluarga dalam menghadapi anak epilepsi.

Metode. Penelitian potong lintang di Klinik Neurologi Anak FKUI RSCM. Skrining gangguan perilaku dengan kuesioner CBCL dilakukan pada 30 anak epilepsi tanpa defisit neurologis dan disabilitas intelektual. Studi kualitatif untuk menilai adaptasi keluarga dalam menghadapi anak epilepsi.

Hasil. Terdapat tiga dari tiga puluh anak epilepsi yang mengalami gangguan perilaku, dengan jenis gangguan perilaku eksternalisasi (perilaku melanggar aturan dan agresif), masalah sosial dan gangguan pemusatan perhatian. Faktor usia awitan kejang ($p=0,280$), frekuensi kejang ($p=0,007$; RP 0,036; IK95% 0,005-0,245), durasi epilepsi ($p=1,000$), obat anti epilepsi ($p=0,020$; RP 0,019; IK95% 0,001-0,437), tingkat sosial ekonomi ($p=0,251$), dan pendidikan orangtua ($p=1,000$), tidak berisiko meningkatkan gangguan perilaku. Terdapat sikap dan reaksi, serta persepsi dan stigma orangtua yang negatif dalam menghadapi anak epilepsi yang mengalami gangguan perilaku. Terdapat masalah keluarga sejak anak mengalami epilepsi dan gangguan perilaku. Orangtua tidak dapat menerapkan pola asuh disiplin dan kemandirian pada anak dengan gangguan perilaku.

Simpulan. Proporsi gangguan perilaku pada anak epilepsi tanpa defisit neurologis dan disabilitas intelektual tidak tinggi. Tidak terdapat faktor-faktor yang memengaruhi gangguan perilaku. Adaptasi keluarga baik dalam menghadapi anak epilepsi tanpa gangguan perilaku, dibandingkan dengan keluarga anak epilepsi yang mengalami gangguan perilaku.

.....Background. Behavior problems are prevalent in children with epilepsy and have psychosocial impact in children. However, in Indonesia, no research has ever been done to study behavior problems in children with epilepsy and related factors.

Objectives. This study aimed to define: (1) proportion behavior problem and type of behavior disorder based on child behavior checklist (CBCL), (2) the relationship

between factors: age at seizure onset, seizure frequency, epilepsy duration, antiepileptic drug, socio-economic, and parents education, with behavior problems in epileptic children, (3) family adaptation on managing children with epilepsy.

Method. A Cross sectional study in Pediatric Neurology Clinic FKUI RSCM.

Screening for behavior problems with CBCL questionnaires in 30 children with epilepsy without neurologic deficit and intellectual disability. A qualitative study examined family adaptation on managing children with epilepsy.

Results. There were three of thirty children with epilepsy, who have behavior problems, with externalizing disorder (delinquent and aggressive behavior), social and attention problems. Age at seizure onset ($p=0,280$), seizure frequency ($p=0,007$; PR 0,036; CI95% 0,005-0,245), epilepsy duration ($p=1,000$), anti epileptic drug ($p=0,020$; PR 0,019; CI95% 0,001-0,437), socio-economic ($p=0,251$), dan parents education ($p=1,000$), are not risk factors for development of behavior problems.

Parents' behavior and reaction, their perception and stigma are negative on managing children with epilepsy and behavior problems. There are family problems since their children have epilepsy and behavior problems. Parents are unable to discipline children with behavior problems and teach them to be independent.

Conclusion. The proportion of behavior problems in children with epilepsy without neurologic deficit and intellectual disability, are not high. There are no risk factors for development of behavior problems. Family adaptation on managing children with epilepsy without behavior problems are better than family who have children with epilepsy and behavior problems., Background. Behavior problems are prevalent in children with epilepsy and have

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