

Deteksi malnutrisi pasien kanker ginekologik: perbandingan antara malnutrition screening tool dan patient-generated subjective global assessment dengan subjective global assessment = Comparison between malnutrition screening tool and patient generated subjective global assessment against subjective global assessment in detecting malnutrition among gynecologic cancer patients

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Abstrak

Pasien rawat inap di rumah sakit dengan keganasan sering terjadi malnutrisi. Deteksi dini malnutrisi mempercepat terapi awal nutrisi sehingga mengurangi morbiditas dan mortalitas. Penelitian ini merupakan studi uji diagnostik membandingkan MST dan PG-SGA dengan SGA pada pasien kanker ginekologik rawat inap di RSUPN Cipto Mangunkusumo sebanyak 66 orang pada bulan April 2015. Pengumpulan data menggunakan formulir skrining, pemeriksaan fisik, dan pengukuran antropometri. MST memiliki sensitivitas 70%, spesifisitas 88%, PPV 90%, NPV 65%, AUC 0,79. PG-SGA mempunyai sensitivitas 100%, spesifisitas 92%, PPV 95%, NPV 100%, AUC 0,96. Terdapat perbedaan signifikan lama waktu pengerjaan di antara ketiganya, dengan waktu tercepat dimiliki oleh MST. Prevalensi malnutrisi berdasarkan SGA sebesar 60,6%. PG-SGA merupakan alat skrining yang sesuai dalam mendeteksi malnutrisi pasien kanker ginekologik rawat inap.

.....Malnutrition is a common problem in hospitalized patients with malignancies. Early recognition of malnutrition leads to appropriate nutritional care plans and reduces rate of both morbidity and mortality. This diagnostic test study which comparing between MST and PG-SGA against SGA, was conducted on 66 hospitalized gynecologic cancer patients in April 2015. Data collection was obtained using screening tool forms, physical examination, and anthropometric measurement. According to SGA, 60.6% of patients were malnourished. MST had a sensitivity of 70% and a specificity of 88%. The PPV of MST was 90%, NPV 65%, and AUC value was 0.79. PG-SGA had a sensitivity of 100% and a specificity of 92%. The PPV of PG-SGA was 95%, NPV 100%, and AUC value was 0.96. There were a significant difference in time spent applying questionnaires between these screening tools, and MST had the quickest among three. PG-SGA is suitable screening tool for detecting risk of malnutrition in hospitalized patients with gynecologic cancer.