Malnutrition screening tool dan royal marsden nutrition screening tool dalam menapis risiko malnutrisi pasien kanker rawat inap pra bedah = Malnutrition screening tool and royal marsden nutrition screening tool in screening malnutrition of hospitalized pre surgial cancer patients

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Abstrak

Penelitian ini bertujuan untuk mengetahui alat skrining malnutrisi yang sesuai untuk pasien kanker dewasa rawat inap pra bedah sehingga malnutrisi cepat dikenali dan dapat diberikan dukungan nutrisi secara dini. Penelitian ini merupakan uji diagnostik alat skrining Malnutrition Screening Tool (MST) dan Royal Marsden Nutrition Screening Tool (RMNST) dengan Subjective Global Assessment (SGA) sebagai pembanding terhadap 58 pasien kanker rawat inap pra bedah yang masuk rumah sakit kurang dari 24 jam. Sensitivitas, spesifisitas, nilai duga positif (NDP), nilai duga negatif (NDN), dan area under the curve (AUC) dihitung untuk mengetahui metode yang paling baik diantara dua alat skrining dibanding standar baku. Hasil penelitian didapatkan prevalensi malnutrisi berdasarkan SGA sebesar 34,6%. Sensitivitas, spesifisitas, NDP, NDN, dan AUC MST berturut-turut adalah 88.9%, 97%, 94,12%, 94,28%, dan 93% sedangkan sensitivitas, spesifisitas, NDP, NDN, dan AUC RMNST masing-masing adalah 94.4%, 82.35%, 73,9%, 96,55%, and 88%. Hal ini menunjukkan bahwa RMNST lebih baik dibanding MST dalam menapis malnutrisi pada pasien kanker rawat inap pra bedah.

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This study aimed to determine malnutrition screening tool which appropriate for adult hospitalized pre-surgical cancer patients, therefore, malnutrition could be recognized quickly and nutritional intervention could be provided at an early stage. This study was a diagnostic test of Malnutrition Screening Tool (MST) and the Royal Marsden Nutrition Screening Tool (RMNST) compared to Subjective Global Assessment (SGA) on 58 cancer pre-surgical inpatients who were admitted to the hospital less than 24 hours. Sensitivity, specificity, positive predictive value (PPV), negative predictive value (NPV), and area under the curve (AUC) were calculated to evaluate the perfomance of tools compared the standard. The result showed that the prevalence of malnutrition by SGA was 34.6%, the sensitivity, specificity, PPV, NPV, and AUC of MST were 88.9%, 97%, 94,12%, 94,28%, and 93% respectively while the sensitivity, specificity, PPV, NPPV, and AUC of RMNST were 94.4%, 82.35%, 73,9%, 96,55%, and 88% respectively. This indicated that RMNST better than MST in screening malnutrition in the cancer pre-surgical inpatients.