

Gambaran kadar Cg-A dalam penapisan pasien IBS dan dicurigai gastro entero pancreatic neuro endocrine tumor (Gep-Net) yang keduanya berisiko Gep-Net = Overview of the levels of chromogranin a Cg-A in screening IBS and patients suspected of Gep-Net which both have the risk of Gep-Net

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Abstrak

[ABSTRAK

Gastro Entero Pancreatic Neuro Endocrine Tumor (GEP-NET) merupakan keganasan yang jarang dijumpai di dunia dibandingkan dengan keganasan gastrointestinal lainnya. Menurut data

GEP-NET kadang sulit dibedakan dengan Irritabel Bowel Syndrome (IBS) dalam mendiagnosisnya.

Keluhan GEP-NET antara lain nyeri perut, diare, flushing, sampai penurunan berat badan. Keluhan IBS antara lain nyeri perut, mual, diare atau dengan tanpa konstipasi. Saat ini telah dikembangkan pemeriksaan Chromogranin A (CgA) untuk membantu dalam pemeriksaan penapisan pasien yang menderita IBS maupun pasien yang dicurigai GEP-NET.

Penelitian ini merupakan penelitian deskriptif untuk mengetahui kadar CgA pada kelompok normal, mengetahui kadar CgA pada pasien yang didiagnosis IBS, mengetahui kadar CgA pada pasien yang memiliki risiko GEP-NET dan mengetahui perbedaan kadar CgA pada pasien yang didiagnosis IBS dan pasien yang dicurigai menderita GEP-NET yang keduanya memiliki risiko GEP-NET.

Pada penelitian ini didapatkan kadar CgA serum pada kelompok kontrol normal dengan nilai mean 50,70 μg/L, median 48,89 μg/L dengan rentang minimum-maksimum antara 42,66-80,62 μg/L. Pada penelitian ini didapatkan kadar CgA serum pada kelompok IBS dengan nilai mean 76,67 μg/L, median 64,82 μg/L dengan rentang minimum-maksimum antara 45,52-243,18 μg/L. Pada penelitian ini didapatkan kadar CgA serum pada kelompok yang dicurigai GEP- NET dengan nilai mean median 66,23 μg/L dengan rentang minimum-maksimum antara 49,89-656,41 μg/L. Pada penelitian ini tidak terdapat perbedaan kadar CgA pada populasi pasien yang didiagnosa IBS maupun pada pasien yang dicurigai menderita GEP-NET yang keduanya memiliki risiko menderita GEP-NET dikemudian hari.

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ABSTRACT

Gastro Entero Pancreatic Neuro Endocrine Tumors (GEP-NET) is a malignancy that is rarely found in the world compared to other gastrointestinal malignancies. According to data registration data The Surveillance, Epidemiology and End Results (SEER) an increase in the incidence of sharp from 1973 (from 0.92 to 1.28 in 100,000 population per year), to 2004 (from 5.09 to 5.42 in 100,000 population per year).

GEP-NET is difficult to distinguish from Irritabel Bowel Syndrome (IBS) in diagnose sometimes. GEP-NET complaints include abdominal pain, diarrhea, flushing, until the weight loss. Complaints of IBS include abdominal pain, nausea, diarrhea or with no constipation. We have been developed examination Chromogranin A (CgA) to assist in the screening examination of patients who suffer from IBS and patients who are suspected of suffering from GEP-NET. This study is a descriptive study to determine levels of CgA

in the normal group, knowing CgA levels in patients diagnosed IBS, knowing CgA levels in patients who have a risk of GEP-NET and know the difference CgA levels in patients diagnosed with IBS and patients suspected of suffering from GEP- NET who both have risk GEP-NET.

In this study, serum levels of CgA in the normal control group with a mean of 50,70 $\mu\text{g/L}$, median 48,89 $\mu\text{g/L}$ with a minimum-maximum range between 42,66 to 80,62 $\mu\text{g/L}$. In this study, serum levels of CgA in the IBS group with a mean of 76,67 $\mu\text{g/L}$, median 64,82 $\mu\text{g/L}$ with a minimum-maximum range between 45,52 to 243,18 $\mu\text{g/L}$. In this study, serum levels of CgA in the group suspected of GEP-NET premises mean median value 66,23 $\mu\text{g/L}$ with a minimum-maximum range between 49.89 to 656.41 $\mu\text{g/L}$. In this study there was no difference in the levels of CgA IBS patients diagnosed population and in patients suspected of suffering from GEP-NET are both at risk of suffering from GEP-NET in the future., Gastro Entero Pancreatic Neuro Endocrine Tumors (GEP-NET) is a malignancy that is rarely found in the world compared to other gastrointestinal malignancies. According to data registration data The Surveillance, Epidemiology and End Results (SEER) an increase in the incidence of sharp from 1973 (from 0.92 to 1.28 in 100,000 population per year), to 2004 (from 5.09 to 5.42 in 100,000 population per year).

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