

## Profil pasien glioma yang menjalani radiasi di RSUPN DR Cipto Mangunkusumo tahun 2009-2014 = The Profile of glioma patients underwent radiation therapy in Cipto Mangunkusumo National Hospital period 2009-2014

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### Abstrak

[<b>ABSTRAK</b><br>

Pendahuluan : Glioma adalah jenis tumor yang paling umum dari neoplasma intraserebral primer. Tumor ganas primer sistem saraf pusat (SSP) mencapai sekitar 2% dari semua kanker dan high grade glioma adalah jenis yang paling banyak ditemukan. High grade glioma menyebabkan tingkat morbiditas dan mortalitas yang tinggi. Saat ini belum ada data yang menggambarkan profil pasien glioma yang menjalani radioterapi di Indonesia.

Metode penelitian : Penelitian ini merupakan penelitian retrospektif deskriptif analitik terhadap 121 pasien glioma yang mendapat radiasi di departemen Radioterapi RSUPN Dr. Cipto mangunkusumo dari Januari 2009 sampai Januari 2014. Data diperoleh dari catatan medis dan hasil penelusuran melalui telepon terhadap pasien atau keluarganya. Respon tumor dianalisa terhadap 22 pasien yang mempunyai CT scan atau MRI pre dan post radiasi dengan menggunakan kriteria RECIST.

Hasil : Sebagian besar pasien adalah laki-laki (53,7%), dengan usia rata-rata 45 tahun. Histopatologi yang paling banyak ditemukan adalah astrositoma. Prosedur bedah yang paling banyak ditemukan pada penelitian ini adalah craniotomi removal tumor (70%). Teknik 3D CRT paling banyak digunakan yaitu pada 77,7% pasien. Nimotuzumab sebagai antibodi monoklonal digunakan pada 9% pasien. Respon parsial ditemukan 59,1%. Analisis kesintasan hidup tiga tahun dari seratus sebelas pasien yang memenuhi kriteria didapatkan angka kesintasan yaitu 46,15%. Analisis kaplan meyer menunjukkan overall treatment time merupakan faktor prognostik untuk kesintasan hidup ( $p = 0,016$ ).

Kesimpulan : Teknik operasi terbanyak pada pasien glioma yang menjalani radiasi di departemen radioterapi RSUPN DR. Cipto Mangunkusumo adalah craniotomi removal tumor (70,9%). Teknik 3D CRT adalah teknik radiasi yang paling banyak digunakan. Respon parsial ditemukan 59,1%. Kesintasan hidup tiga tahun pasien glioma yaitu 46,2% dan overall treatment time merupakan faktor prognostik yang bermakna untuk kesintasan hidup

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<b>ABSTRACT</b><br>

Introduction : Glioma is the most common type of primary intracerebral neoplasms. High grade glioma being the most frequent type found (70,9%) causes a high morbidity and mortality rate. There is currently no data describing the profile management of patients undergoing radiotherapy glioma in Indonesia.

Methods : This study Retrospective analytic descriptive study of 121 glioma patients from januari 2009 until december 2014. The data was obtained from medical records and individual

contact via telephone. Tumor response was evaluated in 22 patients with pre and post irradiation imaging (CT or MRI) using 3D volumetric data and assessed via RECIST criteria.

Results : Most of our patients were male (53,7%), with median age 45 years old.

Astrocytoma was the most histopathological type found. 70.9% of Patients who received radiotherapy in Cipto Mangunkusumo hospital were post craniotomi tumor removal. 3D Conformal technique was used in 81.0% of patients. Seventy nine point three had a two gray dose perfraction. Provision of chemotherapy in patients undergoing radiation still only at 7.4% of patients. Nimotuzumab as a monoclonal antibody used on 9% patient. The median overall treatment time was 45 days and delay treatment time 38 days. Fifty nine point one percent of partial respon was found. Local recurrences were found throughout the follow-up of 6.6%. Analysis kaplan meyer showed that overall treatment time was a prognostic factor for overall survival rate ( $p=0,016$ ).

Conclusions : : Almost seventy one percent of glioma patients who received radiotherapy had craniotomy removal tumor. 3D Conformal techniques is the most widely used. Fifty nine point one percent of partial respon founded. Three years overall survival was 46,2% and overall treatment time was found as a factor that significantly affects overall survival prognosis.;

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