

Karakteristik The New Mayo Clinic Risk Score pada pasien sindrom koroner akut pasca Percutaneous Coronary Intervention = The New Mayo Clinic Risk Score characteristic in acute coronary syndrome post Percutaneous Coronary Intervention patient

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Abstrak

[ABSTRAK

Latar Belakang : Kejadian mortalitas dan MACE merupakan komplikasi pasca PCI yang seringkali terjadi. Kemampuan ahli dalam memprediksi komplikasi dengan cara melakukan stratifikasi risiko menggunakan skor risiko. New Mayo Clinic Risk Score (NMCRS) menggunakan tujuh variabel yang mudah didapatkan pada data awal pasien dan memiliki performa yang baik. Belum ada studi untuk karakteristik mortalitas dan MACE pada NMCRS di ICCU RSCM.

Tujuan : mengetahui insidens mortalitas dan MACE serta karakteristik NMCRS pada pasien pasca PCI selama perawatan di ICCU RSCM.

Metode : Penelitian dengan desain kohort retrospektif terhadap 313 pasien SKA pasca PCI di ICCU RSCM, dalam kurun waktu 1 Agustus 2013? 31 Agustus 2014. Data pasien dari rekam medis dimasukkan ke dalam tujuh variabel skor NMCRS kemudian ditentukan hasil setiap kategori risiko.

Hasil : Insidens mortalitas pasien pasca PCI selama perawatan 3,8% (IK 95% 2,6;5) dan MACE pasca PCI selama perawatan 8,3% (IK 95% 6,6;10). Pasien-pasien dengan usia yang semakin tua, fraksi ejeksi ventrikel kiri yang rendah, infark miokard, kreatinin serum yang meningkat, adanya syok kardiogenik pra prosedur, dan adanya penyakit arteri perifer memiliki kejadian mortalitas dan MACE yang lebih tinggi pasca PCI. Skor NMCRS untuk mortalitas menunjukkan kategori risiko sangat rendah 167 pasien (53%), risiko rendah 60 pasien (19%), sedang 47 pasien (15%), tinggi 10 pasien (3%) dan risiko sangat tinggi 29 pasien (9%). Kejadian mortalitas pada kategori risiko sangat rendah 2 kasus (1,2%), rendah 0 pasien, sedang 2 pasien (4,25%), tinggi 1 pasien (10%) dan sangat tinggi 7 kasus (24,13%). Skor NMCRS untuk MACE memberikan hasil kategori sangat rendah 101 pasien (32%), risiko rendah 128 pasien (41%), sedang 52 pasien (17%), tinggi 16 pasien (5%) dan sangat tinggi 16 kasus (5%). Kejadian MACE untuk risiko sangat rendah sebanyak 4 kasus (3,96%), rendah 7 pasien (5,46%), sedang 4 pasien (7,69%), tinggi 5 pasien (31,25%) dan risiko sangat tinggi 6 kasus (37,5%).

Kesimpulan : insidens mortalitas pasien pasca PCI selama perawatan 3,8% (IK 95% 2,6;5) dan MACE pasca PCI selama perawatan 8,3% (IK 95% 6,6;10). Kenaikan skor NMCRS maka akan diiringi peningkatan kejadian mortalitas dan MACE pasca PCI.

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ABSTRACT

Background : Mortality and MACE was an often complication post PCI. Capability from an expert in predict complication by doing risk stratification using risk score. New Mayo Clinic Risk Score (NMCRS) using seven variables easy to collect from medical record and had a good performance. No report about mortality and MACE studies NMCRS characteristic for post PCI patients in ICCU RSCM.

Objective : To obtain mortality and MACE incidence and also NMCRS characteristic on post PCI patients

in ICCU RSCM.

Methods : A retrospective cohort study was conducted to evaluate 313 post PCI patients in ICCU RSCM between August 1st 2013 and August 31 2014. Patients data from medical records collect for seven variables and determined category results for each risk category.

Results : In-hospital mortality post PCI incidence 3,8% (CI 95% 2,6;5) and inhospital MACE post PCI 8,3% (CI 95% 6,6-10). Patients that getting older, lower left ventricular ejection fraction, increase serum creatinine, pre-procedure cardiogenic shock, myocardial infarct and peripheral arterial disease had higher mortality and MACE post PCI. NMCRS in predict risk of mortalitas shown for very low risk 167 patient (53%), low risk 60 patient (19%), moderate risk 47 patient (15%), high risk 10 patient (3%) and very high risk 29 patient (9%). Mortality in very low risk 2 patient (1,2%), low risk no patient, moderate 2 patient (4,25%), high 1 patient (10%) and very high risk 7 patient (24,13%). NMCRS in predict MACE shown for very low risk 101 patient (32%), low risk 128 patient (41%), moderate 52 patient (17%), high 16 patient (5%) very high risk 16 patient (5%). MACE in very low risk 4 patient (3,96%), low risk 7 patient (5,46%), moderate risk 4 patient (7,69%), high risk 5 patient (31,25%) and very high risk 6 patient (37,5%).

Conclusion : In-hospital mortality post PCI incidence 3,8% (CI 95% 2,6;5) and in-hospital MACE post PCI incidence 8,3% (CI 95% 6,6;10). The increase of NMCRS score was also followed with the increase of mortality and MACE post PCI.;Background : Mortality and MACE was an often complication post PCI. Capability from an expert in predict complication by doing risk stratification using risk score. New Mayo Clinic Risk Score (NMCRS) using seven variables easy to collect from medical record and had a good performance. No report about mortality and MACE studies NMCRS characteristic for post PCI patients in ICCU RSCM.

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