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Proporsi abnormalitas sitologi anus dan hubungannya dengan Coitarche, kekerapan hubungan seksual Anal Receptive dan infeksi Human Immunodeficiency Virus pada laki-laki yang berhubungan seksual dengan laki-laki = Proportion of anal cytology abnormality and the corellation between Coitarche frequency of Anal Receptive intercourse and Human Immunodeficiency Virus infection in men who have sex with men

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**Abstrak** 

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

Latar belakang dan tujuan : Hubungan seksual anal reseptive usia muda pada LSL meningkatkan penularan infeksi Human Immunodeficiency Virus (HIV), infeksi Human Papilloma Virus (HPV), dan infeksi menular seksual lainnya sehingga dapat menimbulkan abnormalitas sitologi anus. Kekerapan hubungan seksual anus pada LSL menyebabkan trauma berulang pada anus juga menimbulkan abnormalitas sitologi anus. Hal ini menyebabkan LSL rentan menderita kanker anus. Penelitian ini dilakukan untuk mengetahui kemungkinan terdapatnya hubungan antara coitarche, kekerapan hubungan seksual anal receptive dan infeksi HIV terhadap abnormalitas gambaran sitologi anus dengan anal pap smear. Metode: Penelitian ini berdesain potong lintang pada 99 LSL di Puskesmas Pasar Rebo, Jakarta Timur. Dilakukan wawancara tentang coitarche, kekerapan hubungan seksual anal receptive, dan jumlah pasangan. Juga pemeriksaan fisis, pemeriksaan serologis HIV dan pengambilan spesimen anal swab untuk pemeriksaan sitologi anus. Hasil: Proporsi gambaran abnormal sitologi adalah 15,2% dan seluruhnya ASCUS, tidak ditemukan LSIL dan HSIL. Gambaran abnormal sitologi anus berdasarkan kelompok usia coitarche dan kelompok pasangan seksual anal receptive seumur hidup terbanyak adalah usia coitarche >19 tahun dan pasangan seumur hidup < 24 orang. Gambaran abnormal sitologi anus pada kelompok berdasarkan jumlah pasangan dalam 3 bulan terakhir dan kekerapan hubungan seksual perminggu adalah sebanding. Pada 51 SP HIV positif didapatkan 17,6% ASCUS dan pada 48 SP HIV negatif didapatkan 12,5% ASCUS. LSL dengan gambaran klinis kutil peri anus ditemukan 30,3% ASCUS (RP 5,30; 95% IK 1,6417,19) Kesimpulan: Tidak terdapat perbedaan bermakna antara usia coitarche, kekerapan hubungan seksual anal receptive, dan infeksi HIV dengan abnormalitas sitologi anus.

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## <b>ABSTRACT</b><br>

Background and aim: Anal receptive intercourse at younger age among MSM could increase transmission of HIV infection, HPV infection, and other sexually transmitted disease and could cause abnormalities of anal cytology. Frequent anal receptive intercourse in MSM would cause repeated trauma to anus and this process accelerate anal cytology abnormalities. This will put MSM at high risk of anal cancer. The aim of this study is to analyze the relationship among coitarche, frequency of anal receptive intercourse in MSM and HIV infection to anal cytology abnormalities using anal Papsmear. Methods: This is a cross sectional study in 99 MSM at puskesmas Pasar Rebo, Jakarta Timur. Interview about coitarche, frequency of anal receptive intercourse, number of sexual anal receptive patner, physical examination, HIV serology, anal swab

specimens for anal cytology examination were done. Results: The proportion of the abnormal cytology was 15.2% and all were ASCUS. Neither LSIL nor HSIL were found. Abnormal cytology based on coitarche, were found more in the > 19 years age group. Abnormal cytology based on lifetime anal receptive sexual patner numbers, were more in < 24 patners. Abnormal anal cytology based on number of sexual patners in the past 3 months and frequency of weekly sexual intercourse were equal. In 51 MSM with HIV positive group there was 17.6% ASCUS and in 48 MSM with HIV negative group there was 12.5% ASCUS. In MSM with perianal wart, 30.3% were ASCUS (PR 5.30; 95%CI 1.64-17.19) Conclution: There is no significant difference between coitarche age, frequency of anal receptive intercourse, and HIV infection with abnormal anal cytology. ;Background and aim: Anal receptive intercourse at younger age among MSM could increase transmission of HIV infection, HPV infection, and other sexually transmitted disease and could cause abnormalities of anal cytology. Frequent anal receptive intercourse in MSM would cause repeated trauma to anus and this process accelerate anal cytology abnormalities. This will put MSM at high risk of anal cancer. The aim of this study is to analyze the relationship among coitarche, frequency of anal receptive intercourse in MSM and HIV infection to anal cytology abnormalities using anal Papsmear. Methods: This is a cross sectional study in 99 MSM at puskesmas Pasar Rebo, Jakarta Timur. Interview about coitarche, frequency of anal receptive intercourse, number of sexual anal receptive patner, physical examination, HIV serology, anal swab specimens for anal cytology examination were done. Results: The proportion of the abnormal cytology was 15.2% and all were ASCUS. Neither LSIL nor HSIL were found. Abnormal cytology based on coitarche, were found more in the > 19 years age group. Abnormal cytology based on lifetime anal receptive sexual patner numbers, were more in < 24 patners. Abnormal anal cytology based on number of sexual patners in the past 3 months and frequency of weekly sexual intercourse were equal. In 51 MSM with HIV positive group there was 17.6% ASCUS and in 48 MSM with HIV negative group there was 12.5% ASCUS. In MSM with perianal wart, 30.3% were ASCUS (PR 5.30; 95%CI 1.64-17.19) Conclution: There is no significant difference between coitarche age, frequency of anal receptive intercourse, and HIV infection with abnormal anal cytology. , Background and aim: Anal receptive intercourse at younger age among MSM could increase transmission of HIV infection, HPV infection, and other sexually transmitted disease and could cause abnormalities of anal cytology. Frequent anal receptive intercourse in MSM would cause repeated trauma to anus and this process accelerate anal cytology abnormalities. This will put MSM at high risk of anal cancer. The aim of this study is to analyze the relationship among coitarche, frequency of anal receptive intercourse in MSM and HIV infection to anal cytology abnormalities using anal Papsmear. Methods: This is a cross sectional study in 99 MSM at puskesmas Pasar Rebo, Jakarta Timur. Interview about coitarche, frequency of anal receptive intercourse, number of sexual anal receptive patner, physical examination, HIV serology, anal swab specimens for anal cytology examination were done. Results: The proportion of the abnormal cytology was 15.2% and all were ASCUS. Neither LSIL nor HSIL were found. Abnormal cytology based on coitarche, were found more in the > 19 years age group. Abnormal cytology based on lifetime anal receptive sexual patner numbers, were more in < 24 patners. Abnormal anal cytology based on number of sexual patners in the past 3 months and frequency of weekly sexual intercourse were equal. In 51 MSM with HIV positive group there was 17.6% ASCUS and in 48 MSM with HIV negative group there was 12.5% ASCUS. In MSM with perianal wart, 30.3% were ASCUS (PR 5.30; 95%CI 1.64-17.19) Conclution: There is no significant difference between coitarche age, frequency of anal receptive intercourse, and HIV infection with abnormal anal cytology. ]