

Faktor-faktor yang memengaruhi respons terapi pada anak penyandang epilepsi di RSUPN Cipto Mangunkusumo = Factors influencing treatment response in children with epilepsy in RSUPN Cipto Mangunkusumo

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Deskripsi Lengkap: <https://lib.ui.ac.id/detail?id=20421216&lokasi=lokal>

Abstrak

[Pemberian terapi yang sesuai, khususnya obat antiepilepsi (OAE) sebagai terapi utama dapat menyembuhkan pasien penyandang epilepsi. Seringkali faktor yang berkaitan erat dengan pemberian OAE kurang diperhatikan. Oleh karena itu, penelitian yang dilakukan penulis membahas bagaimana hubungan antara faktor-faktor yang memengaruhi respons terapi pada anak penyandang epilepsi. Penelitian dilakukan dengan metode cross-sectional, yaitu dengan menggunakan data sekunder dari rekam medis epilepsy registry pada pasien anak di Departemen Ilmu Kesehatan Anak RSUPN Cipto Mangunkusumo dengan tanggal kunjungan 1995-2010. Dari penelitian, ditemukan bahwa dari 174 subyek penelitian, 76,4% mengalami bangkitan umum dan 23,6% mengalami bangkitan fokal. Terdapat 62,1% subyek yang mengalami epilepsi simtomatik dan 37,9% epilepsi idiopatik. Sembilan puluh enam koma enam persen subyek mendapatkan regimen yang sesuai dengan lini pertama, 63,8% mendapatkan OAE dengan dosis sesuai, 77,0% subyek mendapatkan terapi tunggal (monoterapi), dan 70,3% tidak mengalami perubahan regimen selama terapi. Dari analisis bivariat menggunakan uji Chi-Square maupun Fisher's, tidak ditemukan hubungan yang signifikan baik untuk faktor kesesuaian regimen, dosis OAE, kombinasi OAE, maupun perubahan regimen selama terapi (seluruhnya memiliki nilai $p > 0,05$). Namun, nilai OR masing-masing faktor menunjukkan hasil yang sesuai dengan teori sehingga dapat disimpulkan bahwa secara klinis respons bebas kejang akan didapatkan pada pasien yang mendapatkan regimen sesuai, dosis sesuai, monoterapi, dan tidak ada pergantian regimen. Adapun bila dikaitkan dengan klasifikasi epilepsi yang dialami, pasien dengan epilepsi idiopatik memiliki kecenderungan mendapatkan respons bebas kejang (OR=1,407 95% CI 0,732-2,705). Analisis multivariat menggunakan uji regresi logistik menunjukkan monoterapi menjadi faktor yang terkuat dalam pencapaian respons terapi epilepsi walaupun hasil pada penelitian ini tidak signifikan.]; Appropriate therapy admission, especially antiepileptic drugs (AED) as the main therapy for epileptic patients, might help the patients to achieve its maximum recovery. Health care providers don't pay much attention to factors related to AED admission. Therefore, this research was determined to analyze the association between several factors affecting treatment response in children with epilepsy. This research is a cross-sectional study, using secondary data from epilepsy registry medical record in pediatric patient at Pediatric Health

Department of RSUPN Cipto Mangunkusumo during 1995-2010. This study showed that among 174 subjects, 76.4% subjects had general seizure and 23.6% subjects had focal seizure. It is also found that 62.1% subjects had symptomatic epilepsy and 37.9% subjects had idiopathic epilepsy. Ninety six point six percent subjects had appropriate regiment with first-line drugs, 63.8% subjects had appropriate AED dose, 77.0% subjects received monotherapy, and 70.3% did not receive any regiment modification during therapy. Through bivariate analysis using Chi-Square and Fisher's test: there were no significant association between regiment compatibility, AED dose, AED combination, and regiment modification during therapy ($p > 0.05$). However, the odds ratio (OR) of each factors showed corresponding result with the theory. In conclusion, seizure-free response will be achieved by patients who had appropriate regiment, appropriate dose, monotherapy, and no regiment modification. Analysis about association between epilepsy classification and therapy response showed that patient with idiopathic epilepsy tended to be easier to be seizure-free. Multivariate analysis using logistic regression showed that monotherapy was the strongest factor affecting therapy response, even though in this study it was not statistically significant; Appropriate therapy admission, especially antiepileptic drugs (AED) as the main therapy for epileptic patients, might help the patients to achieve its maximum recovery. Health care providers don't pay much attention to factors related to AED admission. Therefore, this research was determined to analyze the association between several factors affecting treatment response in children with epilepsy. This research is a cross-sectional study, using secondary data from epilepsy registry medical record in pediatric patient at Pediatric Health Department of RSUPN Cipto Mangunkusumo during 1995-2010. This study showed that among 174 subjects, 76.4% subjects had general seizure and 23.6% subjects had focal seizure. It is also found that 62.1% subjects had symptomatic epilepsy and 37.9% subjects had idiopathic epilepsy. Ninety six point six percent subjects had appropriate regiment with first-line drugs, 63.8% subjects had appropriate AED dose, 77.0% subjects received monotherapy, and 70.3% did not receive any regiment modification during therapy. Through bivariate analysis using Chi-Square and Fisher's test: there were no significant association between regiment compatibility, AED dose, AED combination, and regiment modification during therapy ($p > 0.05$). However, the odds ratio (OR) of each factors showed corresponding result with the theory. In conclusion, seizure-free response will be achieved by patients who had appropriate regiment, appropriate dose, monotherapy, and no regiment modification. Analysis about association between epilepsy classification and therapy response showed that patient with idiopathic epilepsy tended to be easier to be seizure-free. Multivariate analysis using logistic regression showed that monotherapy was the strongest factor affecting therapy response, even though in this study it was not statistically significant, Appropriate therapy admission, especially antiepileptic drugs (AED) as the main

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