

Kejadian systemic inflammatory response syndrome pada anak pasca bedah jantung terbuka dan hubungannya dengan durasi penggunaan mesin pintas jantung paru = Incidence of systemic inflammatory response syndrome on children undergoing open heart surgery and its association with the duration of cardiopulmonary bypass

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Abstrak

Kejadian Systemic Inflammatory Response Syndrome (SIRS) pasca bedah jantung terbuka masih merupakan salah satu komplikasi yang banyak ditemukan. Salah satu faktor risikonya adalah durasi pintas jantung. Studi kohort retrospektif dilakukan terhadap 187 pasien bedah jantung terbuka di RSUPN Cipto Mangunkusumo tahun 2014-2015. Subjek dibedakan menjadi 2 kelompok berdasarkan durasi pintas jantung (durasi >60 menit dan 60 menit). Sebanyak 107 (57,2%) pasien mengalami SIRS dalam 24 jam pasca operasi. Kejadian SIRS ditemukan pada 75 (65,8%) pasien dari kelompok durasi >60 menit dan 32 (43,8%) pasien dari kelompok durasi 60 menit. Melalui analisis multivariat regresi logistik, didapatkan hubungan bermakna ($p < 0,05$) antara durasi CPB dan SIRS dengan OR 2,04 (IK95% 1,05-3,93). Durasi CPB merupakan faktor risiko independen dari kejadian SIRS pasca bedah jantung terbuka.

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Systemic inflammatory Response Syndrome (SIRS) is a major complication found at patient following open heart surgery. One of the risk factors is the duration of the cardiopulmonary bypass. A historical cohort study had been done on 187 postcardiac surgery patients in RSUPN Cipto Mangunkusumo. The subjects were divided into 2 separate groups based on the duration of cardiopulmonary bypass (duration >60 minutes and 60 minutes). There were 107 (57.2%) patients having SIRS within 24 hours following the surgery. SIRS was found on 75 (65.8%) patients from group with duration >60 minutes and 32 (43.8%) patients from group with duration 60 minutes. Through logistic regression multivariate analysis, there was a significant difference ($p < 0.05$) with OR 2.04 (CI95% 1.05-3.93) between two groups. Therefore, duration of cardiopulmonary bypass was an independent risk factor of post open heart surgery SIRS.