Hubungan antara Komorbiditas Psikiatri dengan Terjadinya Ketidaktepatan Diagnosis pada Gangguan Bipolar = Relationship between Psychiatric Comorbidities and Misdiagnosis in Bipolar Disorder

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Abstrak

[ABSTRAK

Pendahuluan

Penegakkan diagnosis gangguan bipolar sering mengalami kesulitan kerena adanya komorbiditas yang mengakibatkan gejala pada gangguan bipolar tidak menonjol. Tumpang tindih gejala pada gangguan bipolar dengan gangguan jiwa lainnya menyebabkan terjadinya ketidaktepatan diagnosis sehingga orang dengan gangguan bipolar didiagnosis sebagai gangguan jiwa lainnya pada pemeriksaan awal. Data dari National Depressive and Manic Depressive Association (NDMDA) menunjukan 60% gangguan bipolar didiagnosis depresi, 26% anxietas, 18% skizofrenia, 17% gangguan kepribadian borderline atau antisosial, 14% penyalahgunaan alkohol dan 11% skizoafektif. Sekitar 69%-73% pasien dengan gangguan bipolar mengalami ketidaktepatan diagnosis pada saat pemeriksaan awal. Peneliti ingin mengetahui besaran komorbiditas pada penderita gangguan bipolar dan hubungannya dengan ketidaktepatan diagnosis pada gangguan bipolar.

Metode

Studi ini merupakan penelitian deskriptif analitik dengan rancangan potong lintang. Responden adalah pasien dewasa di RSUPN dr Cipto Mangunkusumo Jakarta dan RS dr. Marzoeki Mahdi Bogor pada bulan Desember 2014 hingga didapatkan jumlah sampel, yaitu 80 responden. Pasien yang berobat dan terlihat adanya gejala mood dilakukan pemeriksaan dari rekam medis dan pemeriksaan dengan instrumen SCID I.

Hasil

Didapatkan 80 responden dengan gangguan bipolar, pada studi rekam medis diketahui ada 11 responden (13.8%) yang didiagnosis bukan sebagai gangguan bipolar setelah rutin mendapatkan perawatan medis. Diketahui juga ada 62.5% dari seluruh responden yang memiliki komorbid. Berdasarkan analisis menggunakan SPSS versi 20 didapatkan hasil adanya hubungan yang bermakna antara komorbid dengan terjadinya ketidaktepatan diagnosis gangguan bipolar dengan nilai p 0.046.

Simpulan

Pada penelitian ini instrumen SCID I digunakan sebagai standar baku emas untuk menegakkan diagnosis gangguan bipolar dan mengetahui adanya komorbid. Berdasarkan hasil penelitian ini didapatkan 13.8% responden yang didiagnosis

bukan sebagai gangguan bipolar walaupun telah rutin mendapatkan perawatan medis. Terdapat hubungan antara kejadian komorbid dengan ketidaktepatan diagnosis gangguan bipolar.

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ABSTRACT

Background

Diagnosing Bipolar Disorder often times has become difficult due to comorbidities causing indistinct features emerging from the disorder. Overlapping of bipolar disorder with other psychiatric disorders leads to inaccuracy since the beginning of diagnosis. Thus people with bipolar disorder has been diagnosed with other disorders previously.Data fromNational Depressive and Manic Depressive Association (NDMDA) shows 60% of bipolar disorder being diagnosed with depression, 26% with anxiety, 18% with skizofrenia 17% with borderline or antisocial personality disorder, 14% with alcohol abuse and 11%with schizoaffective. Approximately 69%-73% patients with bipolar disorder experienced inaccuracy of diagnosis in the beginning.The author would like to find comorbidities of people with bipolar disorder and its relationship with misdiagnosis of bipolar diagnosis.

Method

This is an analytic descriptive study with cross sectional in design. Respondents are adults patients at National Referal Hospital of dr Cipto Mangunkusumo in Jakarta and dr. Marzoeki Mahdi Hospital in Bogor on Desember 2014, and a total of 80 samples were acquired. Patients on medication and observed to be with mood symptoms were performed evaluation from medical record and SCID 1 instrument.

Result

From medical record evaluation, 11 (13.8%) out 80 respondents with bipolar disorder were found to be diagnosed with other than bipolar disorder after routine medical treatment. This study found 62.5% from all respondents to have comorbidities. Analysis using SPSS version 20 revealed significant relationship between comorbidities with misdiagnosis of bipolar disorder (p 0.046).

Conclusion

This study used SCID I instrument as gold standard in diagnosing bipolar disorder and to find comorbidities. 13.8% respondents were found to be diagnosed with other than bipolar disorder even after routine medical treatment. There is a relationship between comorbidity with misdiagnosis of bipolar disorder.;

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