

Faktor risiko kandidemia pada pasien sepsis non neutropenia = Risk factors for candidemia in non neutropenic sepsis patients / Resultanti

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Abstrak

ABSTRAK

Latar Belakang:

Kandidemia merupakan infeksi aliran darah dengan morbiditas dan mortalitas yang tinggi. Gambaran klinis kandidemia sulit dibedakan dengan pasien sepsis sehingga sering terlambat didiagnosis. Kultur darah sebagai baku emas diagnostik kandidemia memiliki beberapa keterbatasan, sedangkan prediktor yang ada saat ini sulit diaplikasikan dalam praktik klinis sehari-hari. Telah ada penelitian tentang faktor risiko kandidemia di luar negeri dan Indonesia, tetapi belum ada yang membahas khusus pada pasien sepsis dewasa non neutropenia.

Tujuan:

Mengetahui faktor risiko kandidemia pada pasien sepsis non neutropenia.

Metode:

Desain kasus kontrol dengan mengambil data rekam medik pasien sepsis sejak Januari 2011 sampai Juli 2015 di Rumah Sakit Cipto Mangunkusumo. Penilaian faktor risiko dilakukan dengan metode Chi-square dan dilanjutkan dengan analisis regresi logistik multivariat dengan mengikutsertakan variabel perancu.

Hasil:

Dari 51 kasus dan 153 kontrol didapatkan faktor risiko yang berhubungan dengan kejadian kandidemia adalah kateter urin [adjusted OR=5,239 (IK 95% 2,141 ? 12,819), p<0,001], nutrisi parenteral [adjusted OR=2,583 (IK 95% 1,297 ? 5,144), p=0,007], kortikosteroid [adjusted OR=2,183 (IK 95% 1,002 ? 4,755), p=0,049], dan antibiotik spektrum luas [adjusted OR=4,047 (IK 95% 1,178 ? 13,904), p=0,026].

Kesimpulan:

Kateter urin, nutrisi parenteral, kortikosteroid, dan antibiotik spektrum luas merupakan faktor risiko penting karena dapat meningkatkan risiko kejadian kandidemia pada pasien sepsis non neutropenia.

<i>ABSTRACT

Background:

Candidemia is a bloodstream infection with high morbidity and mortality. Clinical manifestations of candidemia resemble with sepsis patients so that diagnosis was delayed. Blood culture as a diagnostic gold standard had some limitations, while the current predictors difficult to apply in daily clinical practice. There were studies about risk factors of candidemia in other countries and Indonesia, but no one had studied specifically in adult non-neutropenic sepsis patients.

Objective:

To identify the risk factors for candidemia in non-neutropenic sepsis patients.

Method:

A case-control study from medical records of septic patients was conducted during the period January 2011 ? July 2015 in Cipto Mangunkusumo Hospital. We analyzed risk factors using Chi-square method followed by multivariate logistic regression adjusted with confounding factors.

Results:

A total 51 cases and 153 controls were analyzed to identify the risk factors of candidemia. After adjustment, candidemia was associated with urinary catheter [adjusted OR=5,239 (95% CI 2,141 ? 12,819), $p<0,001$], parenteral nutrition [adjusted OR=2,583 (95% CI 1,297 ? 5,144), $p=0,007$], corticosteroids [adjusted OR=2,183 (95% CI 1,002 ? 4,755), $p=0,049$], and broad spectrum antibiotics [adjusted OR=4,047 (95% CI 1,178 ? 13,904), $p=0,026$].

Conclusion:

Urinary catheter, parenteral nutrition, corticosteroids, and broad spectrum antibiotics are important risk factors that can increase the risk of candidemia in non-neutropenic sepsis patients.