Korelasi peak sistolik velocity arteri brakialis dan volume flow draining vein intraoperatif dihubungkan dengan maturitas pada arterovenous fistula brakiosefalika = Coleralation peak sistolik velocity brachial artery and bloodflow rate intraoperative relation with maturation of brachiocephalic fistula

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Abstrak

ABSTRAK
 Hemodialisis merupakan tatalaksana renal replacement yang tersering pada pasien gagal ginjal
kronik stadium 5, Akses vaskular dan morbiditas sebagai akibat komplikasi akses merupakan penyebab utama perawatan di rumah sakit. Kegagalan maturitas merupakan hambatan utama penggunaan arteriovenous fistula. Tujuan dari penelitian ini adalah untuk mengkaji korelasi peak sistolik velocity arteri brakialis dan volume flow draining vein intraoperatif dengan menggunakan ultrasonografi doppler untuk memprediksi maturasi AVF. Uji statistik yang digunakan adalah uji Mann Whitney dan uji Chi Squere. Hasil yang didapatkan tidak ditemukan korelasi antara PSV arteri brakialis dengan maturitas. Rerata nilai titik potong volume flow draining vein intraoperatif 259,43 ml/min dan paska operatif 679,22 ± 65,36 ml/min dihubungkan dengan maturitas, ini dapat menjadi acuan menetukan perlu tidaknya melakukan tindakan revisi saat intraoperatif, yang pada akhirnya diharapkan dapat menurunkan angka kegagalan maturasi AVF. ABSTRACT
 Hemodialisis as treatment for renal replacement often patient chronic renal disease grade 5.
Vascular access for hemodialysis its associated problems is the leading cause for hospital admission and morbidity.Maturation failure is impeded by issues of maturation. The result from this study showed that correlation peak sistolik velocity brakial artery and bloodflow rate measured using Doppler ultrasonogaphy right creation of the brachiocephalic fistula can predict AVF maturation. Statistic analisis use Mann Whithey and Chi Squere. Result no correlation PSV with maturation, The intraoperative Bloodflow rate 259,43 ml/min and post operative 6 week 679,22 ± 65,36 ml/min, maybe used as a guide to decide whether or not a corrective procedure was needed to repair the brachiochephalic and consequently help in reducing the rate of AVF maturation failure.
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