

Perbandingan sensitivitas dan spesifisitas international hiv dementia scale dan montreal cognitive assessment versi indonesia dalam penapisan gangguan kognitif pasien HIV = Sensitivity and specificity comparison between international hiv dementia scale and montreal cognitive assessment indonesian version as screening tools in HIV associated neurocognitive disorder / Wiwit Ida Chahyani

Wiwit Ida Chahyani, author

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Abstrak

ABSTRAK

Latar Belakang: HIV-associated neurocognitive disorder (HAND) adalah komplikasi neurologis dalam perjalanan penyakit HIV. Karena prevalensi HAND masih tinggi dan dampak negatif yang disebabkan seperti gangguan fungsional, kehilangan pekerjaan, membutuhkan caregiver, maka sangat diperlukan sekali perangkat alat penapisan gangguan kognitif yang praktis, mudah, tidak membutuhkan waktu yang lama serta tersedia disemua fasilitas untuk penapisan HAND. Ini merupakan penelitian pertama di Indonesia untuk menentukan sensitivitas dan spesifisitas International HIV Dementia Scale (IHDS) dan Montreal Cognitive Assesment versi Indonesia (MOCA-INA) sebagai alat penapisan HAND dan untuk mengetahui pola ranah kognitif yan paling sering terganggu. Metode Penelitian: Penelitian ini merupakan uji diagnostik pada pasien HIV yang berobat di poliklinik pelayanan terpadu HIV RSUPN Cipto Mangunkusumo Jakarta September-Desember 2015. Pasien yang memenuhi kriteria penelitian dilakukan pemeriksaan penapisan dengan IHDS dan MOCA-INA dilanjutkan pemeriksaan kognitif lengkap. Hasil: Didapatkan 120 subjek dengan nilai median usia 33 (21-40) tahun, sebagian besar telah mendapatkan ARV 117 orang (97,5%). Proporsi gangguan kognitif berdasarkan IHDS 54 orang (45%), berdasarkan MOCA- INA 69 orang (57,5%). Proporsi HAND berdasarkan pemeriksaan kognitif lengkap 72 orang (60%). Nilai sensitivitas IHDS 45,8% (95% CI 0,348-0,573) dan spesifisitas IHDS 56,3% (95% CI 0,423-0,693). Nilai sensitivitas MOCA-INA 70,8% (95% CI 0,595-0,801) dan spesifisitas MOCA-INA 62,5% (95% CI 0,484 to 0,748). Pola gangguan kognitif yang tersering adalah gangguan memori 71 subjek (98,6%), diikuti fungsi eksekutif 56 subjek (77,8%) dan kelancaran bahasa 31 subjek (43,1%). Kesimpulan: MOCA-INA adalah alat penapisan HAND yang memiliki nilai sensitifitas dan spesifisitas yang lebih baik dibandingkan IHDS. Gangguan ranah kognitif yang tersering adalah memori, fungsi eksekutif dan kelancaran bahasa

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ABSTRACT

Background: HIV-associated neurocognitive disorder (HAND) is a disabling complication in HIV disease progression. Due to high prevalence and negative impacts of HAND such as functional disorders, loss of employment, and dependence to caregivers, it is necessary to have some practical tools to screen HAND to prevent disabilities. This was the first study in Indonesia to look into the sensitivity and specificity of IHDS and MOCA-INA as a screening tool for HAND and to determine which cognitive domains are mostly affected. Materials and Method: This was a diagnostic study in integrated HIV outpatient clinics in Cipto Mangunkusumo Hospital, Jakarta in September to December 2015. Patients were screened for cognitive disorders using IHDS and MOCA-INA as well as complete cognitive assessment. Results: There were 120

subjects with median (range) age of 33 (21-40) years. Most subjects (97.5%) received Antiretroviral Treatment (ART). Prevalence of cognitive disorder based on IHDS and MOCA-INA were 45% and 57.5%, respectively. Prevalence of HAND based on complete cognitive assessment were 60%. The sensitivity and specificity of IHDS were 45.8% (95% CI 0.348-0.573) and 56.3% (95% CI 0.423-0.693). The sensitivity and specificity of MOCA-INA were 70.8% (95% CI 0.595-0.801) and 62.5% (95% CI 0.484 to 0.748). Memory (98.6%) was the most affected domain, followed by executive function (77.8%), and verbal fluency (43.1%). Conclusions: These data suggest that MOCA-INA is a validated screening tool for HAND with higher sensitivity and specificity. The most frequent disorders were memory, executive function, and disturbance in verbal fluency.