

## Proporsi resistensi aspirin pada diabetes melitus tipe 2 di RSUPNCM dan hubungannya dengan HbA1c = Proportion of aspirin resistance in type 2 diabetes mellitus at RSUPNCM and its relation with HbA1c

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### Abstrak

Panduan dari American Diabetes Association (ADA) tahun 2015 menyarankan penggunaan aspirin (75-162 mg/hari) pada pasien DM untuk pencegahan primer maupun sekunder terhadap penyakit kardiovaskular. Namun, sebagian pasien yang minum aspirin tidak mencapai respons inhibisi yang diharapkan (resistensi aspirin). Terdapat teori yang menyatakan bahwa kontrol metabolik pada diabetes berkontribusi menurunkan sensitivitas trombosit terhadap aspirin. Penelitian ini bertujuan mengetahui proporsi resistensi aspirin pada pasien DM tipe 2, serta hubungannya dengan kontrol glikemik yang dinyatakan dengan HbA1c. Penelitian ini menggunakan desain potong lintang terhadap 82 pasien DM yang minum aspirin. Pada pasien dilakukan pemeriksaan agregasi trombosit dengan agregometer Chrono-log. Definisi resistensi aspirin adalah agregasi trombosit 20% dengan agonis asam arakidonat 0,5 mg/mL. HbA1c diperiksa menggunakan metode afinitas boronat dari Nycocard. Didapatkan proporsi resistensi aspirin sebanyak 14,6%. Tidak ditemukan hubungan yang bermakna antara kendali HbA1c yang buruk dengan resistensi aspirin.

.....Guidelines from the American Diabetes Association (ADA) in 2015 suggested the use of aspirin (75-162 mg / day) in patients with diabetes mellitus for primary or secondary prevention of cardiovascular disease. However, some patients who took aspirin did not achieve the expected inhibition response (aspirin resistance). There is a theory which states that the metabolic control in diabetes contributes to decrease sensitivity of platelets to aspirin. This study aims to determine proportion of aspirin resistance in patients with type 2 diabetes, as well as its relation with glycemic control that is represented by HbA1c. This study used cross-sectional design on 82 diabetic patients who took aspirin. Platelet aggregation was assessed using Chrono-log aggregometry. Resistance to aspirin was defined as 20% platelet aggregation with arachidonic acid 0,5 mg / mL. HbA1c was assessed with boronic affinity method of Nycocard. Twelve subjects (14,6%) of type 2 diabetic patients were found to be resistant to aspirin therapy. There was no significant association between poor HbA1c control and aspirin resistance.