

Hubungan vulnerable plaque dengan sindrom koroner akut pasien risiko atau suspek pjk di rs jantung pembuluh darah harapan kita = The Correlation between vulnerable plaque with acute coronary syndrome in patient with risk or suspect coronary heart disease at harapan kita heart and vascular hospital

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Abstrak

Kejadian sindrom koroner akut (SKA) pada pasien risiko atau suspek penyakit jantung koroner (PJK) terkait dengan tipe plaque-nya. Coronary Computed Tomography Angiography (CCTA) merupakan modalitas pilihan untuk melihat adanya soft plaque, mixed plaque dan calcified plaque pada arteri koronaria. Mengetahui hubungan antara vulnerable plaque dengan kejadian SKA pada pasien yang telah diperiksa CCTA menjadi informasi tambahan dalam evaluasi dan penatalaksanaan pasien. Metode.: Penelitian retrospektif dengan comparative cross sectional pasien risiko atau suspek PJK yang menjalani pemeriksaan CCTA yang terdapat soft plaque dan mixed plaque yang termasuk vulnerable plaque serta calcified plaque. Dilakukan penilaian rerata Hounsfield Unit dan perhitungan remodeling indeks (RI) untuk melihat komponen positif remodeling (PR). Hasil : Terdapat hubungan yang bermakna pada vulnerable plaque yang mengalami SKA dengan nilai $p < 0,001$ dan OR : 6.55. Selain itu didapatkan juga hubungan yang bermakna antara soft plaque dan mixed plaque dengan positif remodeling dibandingkan tanpa positif remodeling dengan nilai $p : 0,039$ dan OR : 2,92. Kesimpulan : Terdapat hubungan yang bermakna antara vulnerable plaque pada pasien risiko atau suspek PJK dengan kejadian SKA

Background and Objective : Acute coronary syndrome (ACS) event in risk or suspect of coronary artery disease depend on their plaque type. Coronary Computed Tomography Angiography (CCTA) is modality of choice to recognise soft plaque, mixed plaque and calcified plaque in coronary artery disease (CAD). Correlation between vulnerable plaque with ACS event in risk or suspect CAD that already examined by CCTA have additional information for evaluation and treatment patient. Methods : Comparative cross sectional retrospective study patient with risk or CAD that already examined by CCTA that contain soft plaque and mixed plaque that categorized as vulnerable plaque and calcified plaque, also assessment average value of Hounsfield Unit and quantification of remodeling index (RI) to see the positive remodeling (PR). Results : There is correlation in vulnerable plaque related to ACS with $p < 0,001$ and OR : 6,55. Besides that there also correlation between soft plaque and mixed plaque with positif remodeling compare without positive remodeling with value $p 0,039$ and OR : 2,92. Conclusions : There is correlation between ACS event and vulnerable plaque in patient with risk or suspect CAD