

Faktor komorbiditas prabedah dan jenis operasi sebagai prediktor aki pascabedah elektif yang dirawat di ICU RSCM = Preoperative comorbidities and type of surgery as predictors of postoperative aki in patients electively admitted in ICU RSCM immediately after surgery

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Abstrak

Latar Belakang : Kejadian AKI Acute Kidney Injury pascabedah akan meningkatkan morbiditas, mortalitas dan lama perawatan di rumah sakit. Diagnosis AKI ditegakkan berdasarkan kriteria AKIN. Kondisi dan manajemen perioperatif sangat mempengaruhi kekerapan AKI pascabedah.

Tujuan : Mengetahui hubungan faktor komorbiditas prabedah dan jenis operasi sebagai prediktor AKI pascabedah elektif yang dirawat di ICU RSCM.

Metode : Penelitian kohort retrospektif menggunakan data dari rekam medis pasien yang dirawat di ICU pascabedah elektif antara Januari 2014 hingga Desember 2015. Seratus satu pasien diikuti dalam penelitian dari total 1739 data pasien yang didapatkan. Diagnosis AKI ditegakkan dengan kriteria AKIN. Data diolah menggunakan perangkat lunak SPSS dengan uji Chi Square dan Independent T test.

Hasil : Analisis dilakukan pada 101 pasien dari 1739 populasi terjangkau. Insiden AKI didapatkan sebesar 44,6 . Diagnosis AKI ditegakkan dengan penurunan jumlah urin sesuai dengan Stage 1 AKI berdasarkan AKIN. Rata-rata usia AKI didapatkan sebesar 50,44 13,7 tahun $p=0,304$. Analisis berdasarkan masing-masing variabel didapatkan kekerapan AKI pada diabetes melitus sebesar 50 $p=0,633$, penyakit jantung sebesar 40,7 $p=0,641$, hipertensi sebesar 46,9 $p=0,749$, dan operasi intraabdomen sebesar 61,9 $p=0,072$.

Kesimpulan : Dari variabel yang diteliti tidak ada hubungan faktor komorbiditas prabedah dan jenis operasi sebagai prediktor AKI pascabedah elektif yang dirawat di ICU RSCM.

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Background Postoperative Acute Kidney Injury AKI will increase the risk of patient rsquo s morbidity, mortality and or prolonged the hospital stay. In this study, the diagnosis of AKI was made based on The Acute Kidney Injury Network AKIN criteria. Perioperative patient condition and management influenced the incidence of postoperative AKI.

Aim To determine the relationship between preoperative patient rsquo s comorbidities and surgical procedure with the incidence of postoperative AKI in patients who were admitted in ICU RSCM immediately after surgery.

Methods A retrospective cohort study using consecutive patients who underwent elective surgery with postoperative ICU admission from January 2014 to December 2015. A total of 1739 patients were collected from medical record, and 101 patients were included for the study. The included patients were segregated using AKIN diagnosis criteria and the relationship variables were analyzed using Chi Square test and Independent T test.

Results The incidence of AKI in this study were 44.6 , in which all of them were diagnosed as AKI Stage I, based on decrease in urine output as stipulated by AKIN criteria. The average age was 50.44 13.7 years old $p 0.304$. The incidence of AKI in patients with diabetes mellitus was 50 $p 0.633$, heart disease 40.7 $p 0.641$, hypertension 46.9 $p 0.749$, and intra abdominal surgery 61.9 $p 0.072$.

Conclusion There were no relationship between patient rsquo s preoperative comorbidities and surgical procedure with the incidence of AKI postoperatively in patients admitted in ICU RSCM.