

Short-term survival of acute respiratory distress syndrome patients at a single tertiary referral centre in Indonesia / Zulkifli Amin, Hasna Afifah, Chrispian O. Mamudi

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Abstrak

Tujuan: mengetahui kesintasan jangka pendek dalam 28 hari pada pasien acute respiratory distress syndrome (ARDS). Metode: studi retrospektif dilakukan di rumah sakit pusat rujukan tersier di Jakarta, Indonesia.

Pada

studi ini, digunakan data rekam medis yang diambil selama 10 bulan, yaitu Oktober 2015 hingga Agustus 2016.

Keluaran primer studi ini adalah kesintasan jangka pendek selama 28 hari terhitung sejak pasien didiagnosis sebagai ARDS. Hasil yang didapatkan kemudian dianalisis menggunakan Kaplan-Meier dan analisis multivariat

Cox regresi. Hasil: studi ini mendapatkan 101 pasien ARDS dalam periode 10 bulan. Kesintasan keseluruhan

selama 28 hari adalah 47.5% dan nilai median adalah 10 hari (95% CI 2.47 ? 17.52). Kesintasan pada pasien ARDS cenderung menurun signifikan pada minggu pertama setelah didiagnosis ARDS. Hal itu menunjukkan

mortalitas tertinggi terjadi pada minggu pertama. Skor APACHE II >20 menunjukkan HR 2.45 (95% CI 1.40-

4.28) dan derajat ARDS moderat-berat menunjukkan HR 2.27 (95% CI 1.25-4.12). Kesimpulan: kesintasan jangka pendek di negara berkembang seperti Indonesia masih rendah dan manajemen yang optimal pada awal

dari minggu pertama pada pasien ARDS akan memperbaiki tingkat kesintasan.

Aim: to identify the 28-day short-term survival rate in patients with acute respiratory distress syndrome (ARDS). Methods: this is a retrospective cohort study conducted at a tertiary referral hospital in Jakarta, Indonesia.

We conducted the study for 10 months and data was extracted from medical records between October 2015 and

August 2016. The primary end point of the study was 28-day short-term survival rate using the initial date of ARDS

diagnosis as the index time. Overall survival rate was analyzed using Kaplan-Meier test and multivariate Cox

regression analysis. Results: there were 101 ARDS subjects during 10 months of study. The overall rate of 28-day

survival was 47.5% and the median time of survival was 10 days (95% CI 2.47?17.52). The survival rate in ARDS

patients was reduced significantly at the first week after the diagnosis of ARDS was made, which indicated

that the

highest mortality occurred in the first week. Subjects with APACHE II score of >20 had a hazard ratio (HR) of 2.45

(95% CI 1.40-4.28) and those with moderate-severe of ARDS had HR of 2.27 (95% CI 1.25-4.12).

Conclusion: the

short-term survival rate of ARDS in developing countries including Indonesia is still low and early management

with optimal treatment provided within the first week may improve the survival rate.