

Peranan presepsin, c-reactive protein dan procalcitonin sebagai penanda respons terapi dan prognosis sepsis neonatorum awitan lambat pada neonatus prematur = The Role of presepsin, c-reactive protein and procalcitonin as markers of therapeutic response and prognosis of late onset neonatal sepsis in preterm neonates

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## Abstrak

Pendahuluan: C-reactive protein CRP dan procalcitonin PCT merupakan penanda diagnostik dan pemantauan sepsis neonatorum yang paling banyak digunakan. Saat ini terdapat penanda sepsis baru yaitu Soluble CD14 subtype sCD14-ST presepsin. Penelitian ini bertujuan untuk mengetahui manfaat pemeriksaan serial kadar presepsin, CRP dan PCT serta korelasi antara kadar presepsin dengan kadar CRP dan PCT sebagai penanda respons terapi dan prognosis pasien SNAL pada neonatus prematur.

Metode: Desain penelitian kohort prospektif. Subjek penelitian terdiri dari 40 neonatus prematur sehat dan 40 pasien neonatus prematur SNAL dan dilakukan pemeriksaan kadar presepsin, CRP dan PCT, selanjutnya dilakukan pemantauan kadar presepsin, CRP dan PCT pasien neonatus prematur SNAL hari ke-3 dan ke-6 setelah diterapi. Pasien neonatus prematur SNAL dikelompokkan menjadi 20 pasien respons terapi dan 20 pasien non respons. Mortalitas pasien neonatus prematur SNAL ditentukan pada pemantauan hari ke-30.

Hasil: Median kadar presepsin, CRP dan PCT pada neonatus prematur SNAL masing-masing adalah 1559 pg/mL 427 ndash; 4835 pg/mL, 16.35 mg/L 0.1 ndash; 245.6 dan 4.11 ng/mL 0.17 ndash; 54.18 lebih tinggi secara bermakna dibandingkan pada neonatus prematur sehat 406 pg/mL 195 ndash; 562 pg/mL, 1.22 mg/L 0.1 ndash; 3.69 dan 0.03 0.01 ndash; 0.04 dengan nilai p.

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Introduction: C reactive protein CRP and procalcitonin PCT are marker of neonatal sepsis diagnostics and monitoring of the most widely used. Currently there is a new marker of sepsis that is Soluble CD14 subtype sCD14 ST presepsin. This study aims to determine the benefits of serial presepsin levels, CRP and PCT as well as the correlation between presepsin with CRP and PCT as a marker of response to therapy and prognosis of patients SNAL in premature neonates.

Methods. This was prospective cohort, from 20 healthy preterm neonates and 40 LOS preterm neonates patient. The concentration of presepsin, CRP and PCT were analysed. Presepsin, CRP and PCT measured in both group and in 3rd 6th day sepsis follow up after therapy. Therapeutic respons was done in 20 LOS preterm neonates patient and 20 preterm neonates patient was not. The mortality of LOS preterm neonates patient saw in 30th day observation.

Results: Median of presepsin, CRP and PCT in LOS preterm neonates are 1559 pg mL 427 ndash; 4835 pg mL, 16.35 mg L 0.1 ndash; 245.6 and 4.11 ng mL 0.17 ndash; 54.18, respectively, are significantly higher than healty preterm neonates 406 pg mL 195 ndash; 562 pg mL, 1.22 mg L 0.1 ndash; 3.69 and 0.03 0.01 ndash; 0.04, p value