

Efek disfungsi ventrikel terhadap luaran jangka pendek pasien pascakoreksi tetralogy of fallot tf = Prognostic value of ventricular diastolic dysfunction on tetralogy of fallot tf outcome

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Abstrak

ABSTRAK

Latar belakang: Keberhasilan operasi TF usia terlambat memiliki kegagalan karena risiko sindrom curah jantung rendah akibat disfungsi ventrikel sebelumnya. Tujuan: mengetahui efek disfungsi ventrikel hasil kateterisasi terhadap luaran jangka pendek sindrom curah jantung rendah dan mortalitas pascakoreksi TF. Metode: penelitian kohort retrospektif data rekam medis. Pasien TF pascakateterisasi diagnostik periode 1 Januari 2015-31 Desember 2016, diikuti dan dievaluasi luaran pascaopersinya berupa mortalitas, sindrom curah jantung rendah dan sindrom respon inflamasi sistemik SRIS . Hasil: terdapat 186 pasien kateterisasi, memiliki 114 data hemodinamik lengkap, 92 menjadi subjek penelitian. Rentang usia 6 bulan-23 tahun 6 bulan, laki-laki lebih banyak daripada perempuan 49 53,3 banding 43 46,7 . Status gizi kurang 64 69,9 , abses serebri 6 6,5 , riwayat spell 64 69,6 , mengalami hemokonsentrasi 56 60,9 , tekanan akhir diastolik ventrikel kanan TDAVKa >12 mmHg 44 47,8 dan ventrikel kiri TDAVKi >12 mmHg 46 50 . Karakteristik pascabedah adalah SRIS 42 45,7 , mortalitas 16 17,4 dan sindrom curah jantung rendah 64 69,6 . Analisis bivariat terhadap mortalitas bermakna untuk saturasi udara ruangan [OR 0,94 IK 0,88-1,003; p=0,037], bermakna terhadap sindrom curah jantung rendah adalah peningkatan TDAVKa p=0,017 dan TDAVKi p=0,024 , spell berulang p=0,03 dan SRIS p

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ABSTRACT

Background successful TF correction at late age has failure because low cardiac output syndrome risk due to known ventricular dysfunction before. Objective to determine the effect of ventricular dysfunction catheterization measurement on short term outcome, comprises of low cardiac output syndrome LCOS and mortality. Methods a retrospective cohort study of medical record. TF child performed diagnostic catheterization from 1 January 2015 31 December 2016, followed and evaluated surgery outcome. Results 186 TF catheterization patients that period, with 114 had complete hemodynamic data, only 92 as research subjects. The age range was 6 months 23 years 6 months, boys were more than girls 58 55.2 vs 46 43.8 . Undernourish was 64 69.9 , 6 6.5 cerebral abscesses, 64 69.6 had spell history, hemoconcentration 56 60.9 , right ventricular end diastolic pressure RVEDP 12 mmHg 44 47.8 and left ventricular end diastolic pressure LVEDP 12 mmHg 46 50 . Outcome for SIRS 42 45.7 , mortality 16 17.4 and LCOS 64 69.6 . Bivariate analysis of predictor variables on mortality was significant for room air saturation, OR 0.94 IK 0.88 1.003, p 0.037 , significant for LCOS was elevated RVEDP variable p 0,017 and LVEDP p 0,024 , recurrent spell p 0,03 and SIRS p