

Perbandingan efek propofol target controlled infusion dengan sevofluran sebagai pemeliharaan anestesia terhadap profil hemodinamik intraoperatif resipien transplantasi ginjal = Comparison between target-controlled infusion of propofol and sevoflurane as maintenance of anesthesia to hemodynamic profile of renal transplant recipient.

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Abstrak

Latar Belakang: TCI propofol dan sevofluran merupakan agen pemeliharaan anestesi umum yang sering digunakan, termasuk pada transplantasi ginjal dan memiliki pengaruh terhadap hemodinamik intra-operatif, khususnya kardiovaskular.

Tujuan: Membandingkan pengaruh TCI propofol dan sevofluran terhadap profil hemodinamik kardiovaskular intra-operatif resipien transplantasi ginjal.

Metode: Uji klinis prospektif tersamar tunggal terhadap 46 resipien transplantasi ginjal di RSCM selama bulan Juli-Desember 2017. Parameter hemodinamik diukur saat pasca-induksi, pasca-insisi, intra-operatif dan pascareperfusi. Hasil dianalisis menggunakan uji general linear model untuk pengukuran berulang, uji t tidak berpasangan Mann-Whitney U.

Hasil: Indeks kardiak intra-operatif $p = 0,216$, pasca-induksi 4,20 vs 3,10 L/mnt/m², $p = 0,056$ dan pascareperfusi 4,77 vs 4,07 L/mnt/m², $p = 0,077$ kelompok TCI propofol lebih tinggi dibandingkan sevofluran. Tekanan rerata arteri intra-operatif hampir sama pada kedua kelompok $p = 0,480$, nilai pasca-induksi 80,74 vs 80,61 mmHg, $p = 0,980$ dan pascareperfusi 89,30 vs 92,52 mmHg, $p = 0,359$ lebih tinggi pada kelompok sevofluran. Indeks volume sekuncup hampir sama pada kedua kelompok $p = 0,086$, dengan nilai pasca-induksi lebih tinggi 54,35 vs 49,56 mL/m², $p = 0,335$ dan pascareperfusi lebih rendah 62,52 vs 62,78 mL/m², $p = 0,962$ pada kelompok TCI propofol. Indeks resistensi vaskular sistemik intra-operatif $p = 0,054$, pasca-induksi 1786 vs 1426 dynes.detik/cm-5/m², $p = 0,077$ dan pascareperfusi 1523 vs 1404 dynes.detik/cm-5/m², $p = 0,223$ lebih tinggi pada kelompok sevofluran.

Simpulan: Tidak terdapat perbedaan pengaruh hemodinamik yang signifikan secara statistik intra-operatif antara TCI propofol dengan sevofluran pada resipien transplantasi ginjal.

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Background: TCI propofol and sevoflurane are common agents for general anesthesia, including for renal transplantation procedure. They have intraoperative hemodynamic effect, especially cardiovascular. Aim. Comparing the effect of TCI propofol and sevoflurane to intraoperative cardiovascular hemodynamic profile in renal transplant patients.

Methods: Single blinded prospective study in 46 renal transplant patients at Cipto Mangunkusumo National Hospital between July-December 2017. Hemodynamic parameters were measured at postinduction, postincision, intraoperative, and postreperfusion. Data were analyzed using general linear model for repeated measurements, unpaired t-test, Mann-Whitney U.

Results: Intraoperative cardiac index $p = 0,216$, postinduction 4,20 vs 3,10 L/mnt/m², $p = 0,056$ and postreperfusion 4,77 vs 4,07 L/mnt/m², $p = 0,077$ TCI propofol group were higher than sevoflurane group. Mean arterial pressure intraoperatively similar in both groups $p = 0,480$, postinduction 80,74 vs 80,61

mmHg, $p = 0,980$ and postreperfusion 89,30 vs 92,52 mmHg, $p = 0,359$ were higher in sevoflurane group. Stroke volume index were similar in both groups $p = 0,086$, and higher during postinduction 54,35 vs 49,56 mL/m², $p = 0,335$ but lower during postreperfusion 62,52 vs 62,78 mL/m², $p = 0,962$ TCI propofol group. Systemic vascular resistance index were higher during intraoperative $p = 0,054$, postinduction 1786 vs 1426 dynes.detik/cm-5/m², $p = 0,077$ and postreperfusion 1523 vs 1404 dynes.detik/cm-5/m², $p = 0,223$ in sevoflurane group.

Conclusion: Intraoperative hemodynamic effects were statistically similar between TCI propofol and sevoflurane group in renal transplant recipients.