

Kesesuaian terapi antibiotik empiris dengan kuman patogen dan pengaruhnya terhadap keberhasilan terapi pada pasien demam neutropenia pasca kemoterapi di Rumah Sakit Cipto Mangunkusumo periode 2015-2018 = The appropriateness of empirical antibiotic therapy with pathogen and its effect toward successful therapy in chemo-related febrile neutropenic patients at Cipto Mangunkusumo Hospital from 2015-2018.

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Abstrak

Latar Belakang: Keberhasilan terapi demam neutropenia berkaitan erat dengan pemberian antibiotik empiris awal. Pola kuman patogen berbeda-beda pada tempat satu dan yang lain. Penelitian mengenai kesesuaian antibiotik dengan kuman patogen dan pengaruhnya terhadap keberhasilan terapi penting diteliti untuk mendapat gambaran mengenai pilihan antibiotik empiris di RSCM.

Tujuan: Mengetahui kesesuaian antibiotik empiris dengan kuman patogen dan pengaruhnya terhadap keberhasilan terapi. **Metode.** Desain kohort retrospektif dengan menggunakan data rekam medis RSCM periode Januari 2015-Maret 2018. Analisis kesesuaian menggunakan Uji Mc Nemar dan analisis kesesuaian terhadap keberhasilan terapi menggunakan Uji Chi Square dan menghitung nilai relative risk (RR).

Hasil: Didapatkan 114 subyek yang memenuhi kriteria penelitian. Kejadian demam neutropenia lebih banyak dijumpai pada perempuan (52,6%), usia <60 tahun (80,7%), tumor hematologi (57%), tidak ada komorbid (54,4%), pasca kemoterapi siklus pertama (43,9%), regimen intensitas tinggi (57,9%), dan skor Multinational Association of Supportive Care in Cancer < 21 (72,8%); dengan nilai Absolute Neutrophil Count awal $10^9/100/\mu\text{L}$ (75,4%) dan durasi > 7 hari (78,1%). Pada 38,6% kasus tidak ditemukan fokus infeksi. Penggunaan antibiotik anti-pseudomonas 86,8% dengan jenis tersering meropenem (20,3%). Patogen non-pseudomonas mendominasi (83,3%) dengan kuman terbanyak Klebsiella pneumoniae (22,7%). Angka keberhasilan terapi cukup tinggi (63,2%) dengan mortalitas 21,1%. Tidak terdapat kesesuaian antibiotik dengan patogen (nilai Kappa 0,012). Analisis bivariat menunjukkan tidak ada faktor perancu pada penelitian ini. Kesesuaian antibiotik tidak mempengaruhi keberhasilan terapi, dengan nilai RR 1,07 (IK 95% 0,79-1,45).

Kesimpulan: Tidak terdapat kesesuaian antara antibiotik empiris dengan kuman patogen namun hal ini tidak mempengaruhi keberhasilan terapi pada pasien demam neutropenia pasca kemoterapi di RSCM.

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Background: Success rate of febrile neutropenia therapy closely related with initial empirical antibiotic. Spectrum of pathogen may differ from place to place. The appropriateness of empirical antibiotic therapy with pathogen and its effect toward successful therapy were vital in choosing the appropriate empirical antibiotic in Cipto Mangunkusumo Hospital.

Objectives: To identify appropriateness of empirical antibiotic therapy with pathogen and its effect toward success of therapy.

Methods: A cohort retrospective study was conducted by using secondary data in Cipto Mangunkusumo Hospital from January 2015-March 2018. Mc Nemar test was used to analyze the appropriateness and Chi

Square analysis was used to obtain relative risk of success rate related with appropriateness.

Results: One hundred and fourteen subjects were included in this study. Febrile neutropenia more common in female (52,6%), <60 years of age (80,7%), hematological malignancies (57%), no comorbid (54,4%), after the first cycle of chemotherapy (43,9%), high intensity regimen (57,9%), and Multinational Association of Supportive Care in Cancer score < 21 (72,8%); with baseline Absolute Neutrophil Count $\geq 100/\mu\text{L}$ (75,4%) and ≤ 7 days of duration (78,1%). No documented infection in 38,6% cases. The use of anti-pseudomonas antibiotic were 86,8% with meropenem as the mostly used (20,3%). Non-pseudomonas pathogen were found in 83,3% cases with Klebsiella pneumoniae as the most common pathogen (22,7%). Success rate was good (63,2%) with 21,1% mortality. There were no appropriateness between antibiotics and pathogen (Kappa value 0,012). There were no confounding factors in this study. The relation between appropriateness and success rate were not statistically significant (RR 1,07; 95%CI 0,79-1,45).

Conclusion: There were no appropriateness between antibiotics and pathogen and there were no relation between appropriateness and success rate in chemo-related febrile neutropenic patients at Cipto Mangunkusumo Hospital.