

## Proporsi dan Faktor-Faktor yang Berhubungan dengan Frailty pada Pasien HIV dalam Terapi Antiretroviral = Proportions and Factors Associated with Frailty in HIV Patients on Antiretroviral Therapy

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### Abstrak

**Latar Belakang.** Walaupun pasien HIV mendapat terapi antiretroviral yang efektif, penurunan fungsi fisik sering ditemukan lebih awal dan menimbulkan masalah baru berupa penuaan dan frailty.

**Tujuan.** Mengetahui proporsi dan faktor-faktor yang berhubungan dengan prefrail dan frail pada pasien HIV dalam terapi antiretroviral.

**Metode.** Desain studi potong lintang pada pasien HIV usia 30 tahun dalam terapi ARV minimal 6 bulan. Pasien yang memenuhi inklusi dilakukan pencatatan demografis, penyakit komorbid, faktor terkait HIV seperti lama terdiagnosis, lama ARV, dan CD4, pengukuran antropometri seperti indeks massa tubuh, penilaian depresi dengan Indo BDI-II, dan penilaian frailty dengan kriteria Fried. Pasien dengan riwayat infeksi otak, kanker, dan oportunistik aktif dieksklusi. Analisis bivariat dan multivariat dilakukan pada faktor-faktor tersebut.

**Hasil.** Terdapat 164 pasien yang dianalisis. Proporsi prefrail sebanyak 51,2% (84 pasien) dan frail 3,7% (6 pasien), dengan komponen dominan pada kelemahan genggam. Pasien laki-laki sebanyak 72% dengan median usia (IQR) 40,5 (36-47) tahun, dan median CD4 nadir (IQR) 53 (21-147) sel/mm<sup>3</sup>, median CD4 awal (IQR) 77 (32 - 206) sel/mm<sup>3</sup>. Hepatitis C menjadi faktor komorbid terbanyak. Depresi berhubungan dengan prefrail dan frail dengan OR 2,14 (IK95%: 1,034-4,439) dan p = 0,036. Tidak terdapat hubungan faktor usia 50 tahun, 2 penyakit komorbid, lama terdiagnosis HIV 5 tahun, lama ARV 5 tahun, CD4 <200 sel/mm<sup>3</sup>, indeks massa tubuh 25 kg/m<sup>2</sup>, dan pendapatan rendah dengan prefrail dan frail.

**Kesimpulan.** Terdapat proporsi prefrail sebanyak 51,2% dan frail 3,7%. Depresi merupakan salah satu faktor yang terbukti berhubungan terhadap prefrail dan frail pada pasien HIV dalam terapi ARV.

.....**Background.** Although HIV patients receive effective antiretroviral therapy, decrease in physical function is often found earlier and creates new problems in the form of aging and frailty

**Aim.** to determine the proportion and factors associated with prefrail and frail in HIV patients on antiretroviral therapy.

**Method.** A cross-sectional study design in HIV patients aged 30 years who were on ARV therapy for at least 6 months. Patients who fulfilled the inclusion were recorded demographically, comorbid diseases, HIV-related factors such as length of diagnosis, duration of ARV, CD4, anthropometric measurements such as body mass index, depression assessment with Indo BDI-II, and frailty assessment with Fried criteria. Patients with a history of brain infection, cancer, and active opportunists were excluded. Bivariate and multivariate analysis was carried out on these factors.

**Results.** There were 164 patients analyzed. The proportions of prefrail and frail were 51.2% and 3.7% respectively, with the dominant component in muscle weakness. Male patients were 72% with median age (IQR) 40.5 (36-47) years, median baseline CD4 (IQR) 77 (32 - 206) cell/mm<sup>3</sup>, and median nadir CD4 (IQR) 53 (21-147) cells/mm<sup>3</sup>. Hepatitis C is the most comorbid factor. Depression is related to prefrail and frail with OR 2.14 (95% CI: 1,034-4,439) and p = 0,036. There was no correlation between factors such as age 50

years, 2 comorbid diseases, length of diagnosis of HIV 5 years, duration of ARV 5 years, CD4 cell count <200 cells/mm<sup>3</sup>, body mass index 25 kg/m<sup>2</sup>, and low income with prefrail and frail.

Conclusion. The proportions of prefrail and frail are 51.2% and 3.7% respectively. Depression is one of the factors that is proven to be related to prefrail and frail in HIV patients in ARV therapy.