

Faktor prognostik luaran mortalitas infeksi pada demam neutropenia anak dengan keganasan di Rumah Sakit Cipto Mangunkusumo (RSCM), Jakarta = Prognostic factors of infection mortality in neutropenic fever in children with malignancy at Cipto Mangunkusumo Hospital (RSCM), Jakarta

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Abstrak

Demam neutropenia pasca kemoterapi adalah morbiditas yang masih tinggi pada anak dengan keganasan. Sejumlah faktor prognostik, pola kuman, penggunaan antibiotik dan antijamur dapat memengaruhi luaran namun penelitian di Indonesia masih terbatas. Penelitian ini bertujuan mengetahui pola kuman, sensitivitas antibiotik serta faktor yang berpengaruh terhadap mortalitas infeksi anak DN. Penelitian ini dilakukan secara kohort retrospektif serta studi deskriptif terhadap 180 pasien (252 episode demam) di RSCM periode 2015-2017. Riwayat medis, pola kuman, sensitivitas antibiotik didata serta faktor prognostik dianalisis menggunakan uji multivariat regresi logistik. Bakteri terbanyak adalah gram negatif 51,5% diikuti gram positif 47,1%. Golongan jamur terbanyak adalah *Candida* sp.(82,5%) Sensitivitas antibiotik *Klebsiella* sp. terutama amikasin (85,71%), *Pseudomonas aeruginosa* terhadap seftazidim (75%), amikasin dan gentamisin (100%). *Staphylococcus* sp. terutama amoksisilav dan ampisulbaktam (76.92%). Hampir semua golongan jamur sensitif flukonazole, ketokonazole, vorikonazole (80-100%). Faktir prognostik yang meningkatkan mortalitas adalah pemasangan vena sentral (RR 1,947; IK95% 1,114-3,402), gizi kurang (RR 1,176;IK95% 1,044-1,325), gizi buruk (RR 1,241;IK95% 0,975-1,579), serta keganasan hematologi (RR 0,87;IK95% 0,788-0,976).

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Fever post-chemotherapy neutropenia is still a high morbidity in children with malignancy. A number of prognostic factors, microorganisms, antibiotic and antifungal use can affect outcomes but research in Indonesia is still limited. This study aims to determine the pattern of germs, antibiotic sensitivity and factors that influence the mortality of FN child infections. This study was a retrospective cohort as well as a descriptive study of 180 patients (252 episodes of fever) in RSCM 2015-2017 period. Medical history, microorganisms, antibiotic sensitivity was recorded as well as prognostic factors were analyzed using multivariate logistic regression tests. The most common bacteria was gram negative 51.5% and gram positive 47.1 %%. In the fungus group, *Candida* sp. was most common (82.5%). Antibiotic sensitivity of *Klebsiella* sp. mainly amikasin (85.71%), *Pseudomonas aeruginosa* against seftazidim (75%), amikasin and gentamisin (100%). *Staphylococcus* sp. mainly amoksisilav and ampisulbaktam (76.92%). Almost all fungi groups was sensitive flukonazole, ketoconazole, voriconazole (80-100%). Prognostic factors that increase mortality was central venous insertion (RR 1,947; 95%CI 1,114-3,402), wasted (RR 1,176; 95%CI 1,044-1,325), severe malnutrition (RR 1,241; 95%CI 0.975-1,579), and hematological malignancies (RR 0.87; 95%CI 0.788-0.976).