

Hubungan dosis kumulatif cisplatin dengan kejadian acute kidney disease pada pasien karsinoma nasofaring stadium lokal lanjut yang menjalani kemoradiasi konkuren = Relationship between cisplatin cumulative doses and the occurrence of acute kidney disease in locally advanced nasopharyngeal cancer patients undergoing concurrent chemoradiation

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#### Abstrak

Latar Belakang. Cisplatin masih merupakan agen pilihan utama untuk kemoradiasi pada pasien karsinoma nasofaring (KNF) stadium lanjut lokal. Acute Kidney Disease (AKD) merupakan salah satu toksisitas utama pada cisplatin. Diketahui dosis kumulatif cisplatin berhubungan dengan kesintasan. Belum diketahui bagaimana hubungan dosis kumulatif cisplatin dengan AKD.

Tujuan. Mengetahui hubungan dosis kumulatif cisplatin dengan kejadian AKD

Metode Desain studi ini kohort retrospektif. Didapat subjek penelitian sebanyak 126 pasien KNF stadium lokal lanjut yang menjalani kemoradiasi di Rumah Sakit Cipto Mangunkusumo dalam rentang waktu Januari 2014 sampai Juni 2019. AKD didefinisikan sesuai kriteria Kidney Disease Improving Global Outcomes (KDIGO). Digunakan analisis bivariat menggunakan uji Kai Kuadrat untuk mengetahui hubungan antar variabel.

Hasil. Penelitian ini melibatkan 126 pasien yang menjalani kemoradiasi pertama kali di Rumah Sakit Cipto Mangunkusumo (RSCM). Terdapat 49 (38,9%) pasien yang mengalami AKD. Tidak terdapat perbedaan bermakna kejadian AKD antara kelompok yang mendapatkan cisplatin dengan dosis kumulatif  $>200\text{mg}/\text{m}^2$  dan  $200\text{mg}/\text{m}^2$  (39,5% vs 38,0%,  $p=0,868$ , RR 1,039, CI 0,662-1,630).

Kesimpulan. Proporsi AKD cukup tinggi (38,9%), namun tidak terdapat perbedaan bermakna kejadian AKD antara dosis kumulatif cisplatin  $>200\text{mg}/\text{m}^2$  dengan  $200\text{mg}/\text{m}^2$

.....Background. Cisplatin is still the first choice agent for chemoradiation in locally advanced-stage Nasopharyngeal Cancer (NPC) patients. Acute Kidney Disease (AKD) is one of the main toxicity in cisplatin. Known cumulative doses associated with survival. It is not yet known how the cisplatin cumulative dose relationship with AKD.

Objective. To determine the relationship of cisplatin cumulative dose with the incidence of AKD

Methods The design of this study was a retrospective cohort. There were 126 study subjects from advanced stage NPC patients who get chemoradiation at Cipto Mangunkusumo Hospital in the period of January 2014 to June 2019. AKD was in accordance with the Kidney Disease Improving Global Outcomes (KDIGO) study. Bivariate analysis using the chi Square test to find out the relationship between variables.

Results. This study found 126 patients who received chemoradiation for the first time at the RSCM.

Obtained 49 (38,9%) patients who get AKD. Excluding the difference in the incidence of AKD between the groups receiving cisplatin with cumulative doses of  $>200\text{ mg} / \text{m}^2$  and  $200\text{ mg} / \text{m}^2$  (39,5% vs 38,0%,  $p=0,868$ , RR 1,039, CI 0,662-1,630)

Conclusion. The proportion of AKD is quite high (38,9%), but does not contain a significant difference with the AKD between the cumulative dose of cisplatin  $>200\text{mg} / \text{m}^2$  with  $200\text{mg} / \text{m}^2$