

Perbandingan Efektivitas Beberapa Terapi Topikal pada Proktitis Radiasi: Sebuah Telaah Sistematis dan Meta-Analisis = The Comparison of The Effectiveness of Topical Therapies in Radiation Proctitis: A Systematic Review and Meta-Analysis

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Abstrak

Latar Belakang: Tingginya pertumbuhan kasus keganasan ginekologi dan organ panggul menyebabkan penggunaan terapi radiasi meningkat. Akan tetapi, terapi radiasi juga cukup banyak menimbulkan proktitis radiasi sebesar 30%. Tatalaksana menggunakan agen topikal seperti SCFA, sukralfat, steroid, formalin, dan 5-ASA diketahui memiliki hasil yang baik, namun belum banyak studi yang membandingkan terapi mana yang lebih superior. Tujuan: Menilai efektivitas beberapa terapi topikal terhadap perbaikan gejala klinis dan gambaran endoskopi pasien proktitis radiasi.

Sumber Data: Pencarian utama dilakukan secara elektronik pada basis data PubMed, Cochrane/CENTRAL, Scopus, dan Science Direct antara September hingga November 2020. Pencarian sekunder dilakukan secara snowballing pada referensi studi yang terkait, dan melalui register uji klinis yang tersertifikasi lainnya seperti Global Index Medicus, Garba Rujukan Digital (GARUDA), ClinicalTrial.gov, dan International Clinical Trials Registry Platform (ICTRP) WHO.

Seleksi Studi: Studi uji klinis acak terkontrol dengan intervensi terapi topikal dibandingkan plasebo atau terapi topikal lainnya atau kombinasi terapi medikamentosa, yang menilai luaran berupa respon gejala klinis dan gambaran endoskopi, serta dapat disertai luaran lain, ataupun tidak. Tidak ada batasan terhadap tahun publikasi dan bahasa. Penilaian judul, abstrak, dan studi dilakukan oleh dua orang peninjau independen. Dari total 1786 studi, didapatkan 9 studi memenuhi kriteria eligibilitas.

Ekstraksi Data: Ekstraksi data dilakukan oleh dua peninjau independen dan dikonfirmasi pada peninjau ketiga. Konfirmasi data dilakukan dengan menghubungi peneliti dari studi terkait. Tidak didapatkan data tambahan.

Hasil: Studi yang melaporkan efektivitas terapi berupa banyaknya jumlah subjek yang mengalami perbaikan atau penurunan skor klinis dan endoskopi dirangkum secara kualitatif. Masing-masing studi saling membahas antar terapi, dan memiliki heterogenitas yang tinggi. Dua studi mengenai formalin dapat dilakukan meta-analisis dengan hasil perbaikan klinis dan endoskopi, namun tidak bermakna terhadap dua studi tersebut (RR 0.97, 95% CI: 0.82-1.15) dan tidak terdapat terapi yang lebih superior dibanding terapi lain dalam meta-analisis tersebut. Empat studi yang membahas formalin 4% memiliki kualitas hasil studi menengah dengan risiko bias rendah. Terdapat 3 dari 9 studi yang membandingkan terapi SCFA dengan plasebo sehingga sulit untuk menyimpulkan terapi mana yang bermakna. Satu studi mengenai efektivitas sukralfat menunjukkan hasil bermakna dengan estimasi risiko rendah (RR 0.57, 95% CI: 0.35-0.92, P = 0.02). Akan tetapi studi mengenai 5-ASA topikal tidak ditemukan dalam inklusi telaah sistematis ini. Secara umum, kualitas hasil studi berdasarkan GRADE dapat dimasukkan ke dalam kategori sedang. Kesimpulan: Penggunaan terapi SCFA enema, formalin topikal, steroid topikal, dan sukralfat enema efektif dalam memperbaiki gejala klinis dan gambaran endoskopi proktitis radiasi. Namun, hingga saat ini belum

ada studi klinis berkualitas baik sehingga sulit untuk menilai terapi yang terbaik. Sedangkan dari 2 studi formalin 4% yang dapat dilakukan meta-analisis, menunjukkan bahwa tidak ada terapi yang lebih superior dibandingkan lainnya. Selain itu, tidak ditemukan tidak ditemukan efek samping berat pada penggunaan terapi SCFA enema, formalin topikal, steroid topikal, dan sucralfat enema dalam mengobati proktitis radiasi.

.....Background: The high incidence of gynecological and pelvic malignancies has led to the usage of radiation therapy. Nonetheless, radiation therapy also causes a significant complication, about 30% of radiation proctitis. Treatments using topical agents such as SCFA, sucralfate, steroids, formalin, and 5-ASA are known to have good results. However, there are only a few studies comparing the superiority of those therapies.

Objectives: To assess the effectiveness of topical therapies in the clinical and endoscopic improvement of radiation proctitis patients.

Data Sources: Primary searching was conducted on electronic databases such as PubMed, Cochrane/CENTRAL, Scopus, and Science Direct between September and November 2020. Secondary searching was done by snowballing method on the relevant study references and through other certified clinical trial registries (Global Index Medicus, Garba Digital Reference (GARUDA), ClinicalTrial.gov, and WHO's International Clinical Trials Registry Platform (ICTRP)).

Study Selection: A randomized controlled trial comparing topical therapies versus placebo or other topical therapies or combination with medical therapies that evaluating the clinical response and endoscopic response. There is no restriction regarding the year of publication and language. Each study were assessed by two independent reviewers. From a total of 1,786 studies identified, 9 studies met the eligibility criteria.

Data Extraction: Data extraction was performed by two independent reviewers and confirmed by a third reviewer. Data confirmation was made by contacting the first researchers from related studies. No additional information was obtained.

Results: Studies reporting the effectiveness of therapy in the form of a large number of subjects experiencing improvement or reduction in clinical symptoms and endoscopy were summarized qualitatively. Each study discussed the therapies and the heterogeneity that could not be calculated due to the different outcomes. Two studies on formalin were subject to meta-analysis with clinical and endoscopy improvement. However, they were not significant in the two studies (RR 0.97, 95% CI: 0.82-1.15), and no better treatment compared with others in those studies. Further, four studies discussing 4% formalin had medium study quality results with a low risk of bias. There are 3 out of 9 studies that compared SCFA therapy with placebo so it is difficult to conclude which therapy has a better effect, and has an unclear risk of bias, but with a small number of patients so that the quality of the study is low. One study using sucralfate showed significant results with a low-risk estimate (RR 0.57, 95% CI: 0.35-0.92, P = 0.02). However, the study of topical 5-ASA was not found in the inclusion of this systematic review. The level of evidence for the majority of outcomes was downgraded using GRADE to a moderate level, due to imprecision and study limitation.

Conclusion: The usage of SCFA enema, topical formalin, topical steroid and sucralfate enema are effective in improving the clinical and endoscopic response in radiation proctitis patient. However, until now, there are no good quality studies, making it difficult to prove the best therapy. A meta-analysis from 2 studies using 4% formalin versus irrigation and antibiotics, shows no therapy is superior to another. Otherwise, no serious side effects were found in the usage of these topical therapies