

Insidensi dan faktor risiko hospital readmission pada infeksi intrakranial di Rumah Sakit Cipto Mangunkusumo = Incidence and risk factors hospital readmission of intracranial infection in Cipto Mangunkusumo National Hospital

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Abstrak

Latar Belakang: Meskipun kontroversial, hospital readmission (HR) dapat mencerminkan keadaan pasien saat dipulangkan dan sebagai indikator untuk mengevaluasi mutu perawatan rumah sakit (RS). Penelitian ini bertujuan untuk mengetahui insidensi dan faktor risiko HR pada pasien infeksi intrakranial.

Metode Penelitian: Studi kohort retrospektif pasien infeksi intrakranial periode April 2019-November 2021, menggunakan data Indonesian Brain Infection Study dan telusur rekam medis. Analisis bivariat menggunakan uji Chi Square dan Mann Whitney, dilanjutkan dengan analisis multivariat regresi logistik.

Hasil: Insidensi HR pasien infeksi intrakranial sebesar 28,45%. Mayoritas subjek mengalami HR sebelum 30 hari (64,7%). Penyebab HR terbanyak adalah penyakit lain yang berbeda dengan diagnosis awal (55,9%). Komorbid penyakit ginjal meningkatkan risiko HR (aOR=7,2, IK 95%=2,2-23,8, p=0,000). Gejala klinis saat perawatan awal berupa kelemahan motorik dan kejang juga meningkatkan risiko HR (aOR=2,27, IK 95%=1,28-4,01, p=0,001) dan (aOR=1,93, IK 95%=1,02-3,62, p=0,037). Sedangkan ketersediaan pelaku rawat dapat menurunkan risiko HR (aOR=0,07, IK 95%=0,03-0,45, p=0,002).

Kesimpulan: Insidensi HR pada pasien infeksi intrakranial dalam waktu 6 bulan sebesar 28,45%. Penyakit ginjal, gejala klinis kelemahan motorik dan kejang pada perawatan awal merupakan faktor yang dapat meningkatkan risiko HR, sedangkan ketersediaan pelaku rawat merupakan faktor yang dapat menurunkan risiko HR.

.....Background: Although controversial, hospital readmission (HR) can reflect the patient's condition at discharge and as an indicator to evaluate the quality of hospital care. This study aims to determine the incidence and risk factors for HR in intracranial infections.

Method: A retrospective cohort study of intracranial infection patients, in period April 2019-November 2021, using secondary data from the Indonesian Brain Infection Study and tracing medical records. Bivariate analysis using Chi Square and Mann Whitney test, followed by multivariate logistic regression analysis.

Results: The incidence of HR in patients with intracranial infections was 28.45%. The majority of subjects experienced HR before 30 days (64.7%). The most common cause of HR was other diseases that were different from the initial diagnosis (55.9%). Kidney disease comorbidity increased HR risk (aOR=7.2;95%CI=2.2-23.8;p=0.000). Clinical symptoms during initial treatment such as motor weakness and seizures also increased the risk of HR (aOR=2.27;95%CI=1.28-4.01;p=0.001) and (aOR=1.93;95%CI=1.02-3.62;p=0.037). Meanwhile, the availability of caregivers can reduce HR risk (aOR=0.07;CI 95=0.03-0.45;p=0.002).

Conclusion: The incidence of HR in patients with intracranial infection within 6 months was 28.45%. Kidney disease, motor weakness and seizures are factors that can increase the risk of HR, while the availability of caregivers is a factor that can reduce the risk of HR.