

# Uji kesahihan kriteria diagnosis malnutrisi Global Leadership Initiative on Malnutrition (GLIM) dibandingkan dengan American Society for Parenteral and Enteral Nutrition (ASPEN) pada pasien rawat inap dewasa di RSCM = Global Leadership Initiative on Malnutrition (GLIM) malnutrition diagnostic criteria validity test compared with American Society for Parenteral and Enteral Nutrition (ASPEN) in inpatients of Dr. Cipto Mangunkusumo Hospital

Oki Yonatan Oentiono, author

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## Abstrak

Pasien rawat inap banyak yang mengalami malnutrisi di rumah sakit (RS). Malnutrisi dihubungkan dengan berbagai komplikasi, seperti risiko yang lebih tinggi mengalami infeksi, memperpanjang masa rawat (length of stay), meningkatkan biaya rawat, serta meningkatkan risiko morbiditas dan mortalitas. Variabilitas prevalensi malnutrisi masih banyak terjadi, akibat banyaknya instrumen skrining dan asesmen serta batas ambang penentuan malnutrisi. Kriteria malnutrisi terbaru menurut Global Leadership Initiative on Malnutrition (GLIM) mengusulkan model dua langkah untuk mendiagnosis malnutrisi di RS. Penelitian ini bertujuan untuk menguji kesahihan kriteria diagnosis GLIM dibandingkan dengan ASPEN dalam mendiagnosis malnutrisi pada pasien rawat inap dewasa. Penelitian menggunakan desain potong lintang pada subjek dewasa yang dirawat inap di RSCM. Setiap pasien didiagnosis menggunakan kriteria GLIM dan ASPEN oleh dokter yang berbeda. Sebanyak 100 subjek penelitian dengan median usia 44,5 tahun, mayoritas perempuan, diagnosis malnutrisi menurut kriteria GLIM paling banyak didapatkan pada pasien penyakit saluran cerna, hepatobilier dan pankreas 69% (20 dari 29 subjek) yang diikuti dengan penyakit keganasan 47% (10 dari 21 subjek). Menurut kriteria ASPEN, terdapat 48% pasien malnutrisi dengan rincian 22% malnutrisi sedang dan 26% malnutrisi berat. Menurut kriteria GLIM, terdapat 63% pasien dengan malnutrisi. Kriteria malnutrisi GLIM memiliki sensitivitas 97,9%, spesifisitas 69,2%, NPP 74,6%, dan NPN 97,3%. Uji chi square menunjukkan adanya perbedaan signifikan ( $p = 0.000$ ) antara GLIM dan ASPEN. Uji Cohen's Kappa menunjukkan nilai  $k = 0,663$  dan nilai  $p = 0.071$  yang menunjukkan kesepakatan antara diagnosis GLIM dengan ASPEN dengan tingkat sedang (nilai  $k = 0,61-0,8$ ) dan tidak signifikan. Median total lymphocyte count (TLC) adalah 1,725/mm<sup>3</sup> dengan TLC terendah 340/mm<sup>3</sup> dan tertinggi 15,660/mm<sup>3</sup>. Median kadar albumin adalah 3,85 g/dl dengan nilai terendah 1,1 g/dl dan tertinggi 5,4 g/dl.

.....Many inpatients are malnourished in the hospital (RS). Malnutrition is associated with various complications, such as a higher risk of infection, length of stay, increased hospitalization costs, and increased risk of morbidity and mortality. There is still a lot of variability in the prevalence of malnutrition, due to the large number of screening and assessment instruments and the threshold for determining malnutrition. The latest malnutrition criteria according to the Global Leadership Initiative on Malnutrition (GLIM) proposes a two-step model for diagnosing malnutrition in hospitals. This study aimed to examine the validity of the GLIM diagnostic criteria compared to ASPEN in diagnosing malnutrition in adult hospitalized patients. The study used a cross-sectional design on adult subjects who were hospitalized at RSCM. Each patient was diagnosed using the GLIM and ASPEN criteria by a different physician. A total of

100 patients with a median age of 44.5 years participated in the study, the majority were women, the diagnosis of malnutrition according to the GLIM criteria was mostly found in patients with gastrointestinal, hepatobiliary, and pancreatic diseases 69% (20 of 29 subjects) followed by malignancy 47% (10 of 21 subjects). According to ASPEN criteria, there were 48% of malnourished patients, 22% moderate malnutrition and 26% severe malnutrition, meanwhile according to the GLIM criteria, there are 63% of patients with malnutrition. The GLIM malnutrition criteria had a sensitivity of 97.9%, specificity of 69.2%, PPV 74.6%, and NPV 97.3%. The chi square test showed a significant difference ( $p = 0.000$ ) between GLIM and ASPEN. Cohen's Kappa test showed a value of  $k = 0.663$  and a value of  $p = 0.071$  which indicated a moderate ( $k = 0.61-0.8$ ) and insignificant agreement between the diagnosis of GLIM and ASPEN. The median total lymphocyte count (TLC) was  $1.725/\text{mm}^3$  with the lowest TLC of  $340/\text{mm}^3$  and the highest of  $15,660/\text{mm}^3$ . The median albumin level was  $3.85 \text{ g/dl}$  with the lowest value  $1.1 \text{ g/dl}$  and the highest  $5.4 \text{ g/dl}$ .