

Hubungan Ketersediaan Jalur Nutrisi Enteral dengan Pemenuhan Nutrisi dan Status Gizi Pasien Kanker Kepala Leher = Association between Enteral Nutrition Availability with Nutritional Fulfillment and Nutritional Status in Head and Neck Cancer Patients

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Abstrak

Latar Belakang: Pengobatan Kanker kepala leher (KKL) melalui terapi radiasi maupun kemoradiasi sering menimbulkan efek samping. Efek samping terapi radiasi pasien KKL menyebabkan gangguan asupan yang meningkatkan kejadian malnutrisi. Ketersediaan jalur nutrisi enteral merupakan salah satu tata laksana nutrisi yang dapat diberikan untuk mencegah penurunan asupan dan status gizi pasien KKL. Penelitian ini bertujuan melihat korelasi antara ketersediaan jalur nutrisi enteral dengan pemenuhan nutrisi dan status gizi. Metode: Studi potong lintang dilakukan pada subjek dewasa dengan KKL pasca terapi radiasi di poliklinik radioterapi RSCM. Pemenuhan nutrisi dinilai dengan FFQ semi kuantitatif sedangkan status gizi diukur dengan menghitung indeks massa tubuh (IMT). Ketersediaan jalur nutrisi enteral didapatkan melalui wawancara dan rekam medis pasien.

Hasil: Sebanyak 41 subjek penelitian dengan rerata usia 51 tahun ikut serta dalam penelitian. Sebagian besar subjek adalah laki-laki, diagnosis kanker nasofaring, stadium IV, dan jalur nutrisi oral. Rerata IMT subjek $20,5 \pm 3,6$ kg/m² dan rerata asupan subjek $1336,7 \pm 405,5$ kkal/hari. Rerata IMT subjek dengan jalur nutrisi enteral lebih rendah dibandingkan dengan jalur nutrisi oral yaitu $18,2 \pm 2,6$ kg/m² dibanding $21,2 \pm 3,5$ kg/m². Rerata total asupan energi subjek dengan jalur nutrisi enteral lebih tinggi dibandingkan dengan jalur nutrisi oral yaitu $1498,1 \pm 430,6$ kkal/hari dibanding $1291,4 \pm 393,3$ kkal/hari. Terdapat korelasi negatif sedang antara ketersediaan jalur nutrisi enteral dengan status gizi ($r=-0,346$, $p=0,027$) dan korelasi positif lemah dengan pemenuhan nutrisi ($r=0,216$, $p=0,174$). Meskipun demikian pada penelitian ini ditemukan bahwa proporsi subjek yang mendapat jalur nutrisi enteral dan mengalami penurunan IMT lebih sedikit dibandingkan dengan proporsi subjek yang menggunakan jalur oral, yaitu 22,2% dengan 43,8%.

Kesimpulan: Terdapat korelasi negatif sedang yang signifikan antara ketersediaan jalur nutrisi enteral dengan status gizi dan korelasi positif lemah dengan pemenuhan nutrisi yang masih dipengaruhi oleh faktor perancu penelitian.

.....Background: Treatment of head and neck cancer (HNC) through radiation therapy or chemoradiation often lead to side effects. The side effect of radiation therapy in HNC patients might deteriorate food intake that increase the incidence of malnutrition. The availability of enteral nutrition is one of nutritional interventions that can be provided to prevent detrimental of food intake and nutritional status in HNC patients. This study aims to evaluate the correlation between the availability of enteral nutrition with nutritional fulfillment and nutritional status.

Method: A cross sectional study was conducted on adult HNC patients after radiation therapy at Radiotherapy Outpatient Clinic of Dr. Cipto Mangunkusumo Hospital. Nutritional fulfillment was assessed by semi-quantitative food frequency questionnaire (FFQ) while nutritional status was measured by calculating body mass index (BMI). The availability of enteral route was obtained through interviews and patients medical records.

Results: A total of 41 subjects with a mean age of 51 years participated in the study. Most of the subjects were male, with stage IV nasopharyngeal cancer and oral nutrition route. The mean of BMI was $20,5 \pm 3,6$ kg/m² and the mean food intake was $1336,7 \pm 405,5$ kcal/day. The mean BMI of subjects with enteral nutrition was lower than those on oral nutrition, which was $18,2 \pm 2,6$ kg/m² compared to $21,2 \pm 3,5$ kg/m². The mean total energy intake of subjects with enteral nutrition route was higher than oral nutrition route, which was $1498,1 \pm 430,6$ kcal/day compared to $1291,4 \pm 393,3$ kcal/day. There was a moderate negative correlation between the availability of enteral nutrition and nutritional status ($r=-0,346$, $p=0,027$), meanwhile there was a weak positive correlation with nutritional fulfillment ($r=0,216$, $p=0,174$). However, in this study we found that the proportion of subjects with enteral nutrition who experienced a decrease of BMI was less than the proportion of subjects on the oral route, which was 22,2% compared to 43,8%, respectively.

Conclusion: There is a moderate negative correlation between the availability of enteral nutrition which was statistically significant with nutritional status and a weak correlation with nutritional fulfillment which was still influenced by confounding factors.