

Stroke Unit: Does it make a difference assessment of the early effectiveness of a stroke unit in improving functional state in Dr. Cipto Mangunkusumo Hospital

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Abstrak

Unit Stroke (US) telah terbukti sangat baik dalam perawatan pasien stroke. Penelitian US pada tahun 1990 menunjukkan hasil dengan peningkatan rata-rata kehidupan dan perbaikan status fungsional penderita dan menurunkan hari perawatan pasien. Di Indonesia US masih baru sehingga penelitian tentang tatalaksana perawatan di US sangat diperlukan.

Penelitian ini dilakukan untuk evaluasi manfaat US sebagai perawatan pasien stroke khususnya perbaikan status fungsional pasien dibandingkan perawatan pasien di Sudut Stroke Bangsal Umum Neurologi. Hasil penelitian menunjukkan perbaikan status fungsional stroke (Skor NIHSS) baik di US maupun di Sudut Stroke Bangsal Neurologi Umum. Data memperlihatkan penurunan nilai NIHSS yaitu 17,35 menjadi 5,31 sedangkan di Sudut stroke 13,83 menjadi 8,87. Dengan menggunakan Independent t-test, penurunan NIHSS di US signifikan dibandingkan sudut stroke di bangsal neurologi umum. (MedJ Indones 2006; 15:30-3).

Stroke unit has been believed as the best institutional care for stroke patients. Recent researches in the 1990s indicated that stroke units can produce increasing survival rate and improving the functional state of the patients which can reduce the need for institutional care after stroke. In Indonesia, stroke unit is still new. Because stroke unit has educational role beside its clinical importance, the research about stroke unit especially in its value in managing stroke patients in Indonesia is needed.

This study was evaluated the effectiveness of stroke unit care in managing stroke patients especially in improving the functional state of the patients in compared with conventional care of stroke corner in general neurology ward. This study indicated that both stroke unit (SU) and stroke corner in general neurology ward (SC) shows reduction in NIHSS score. In Stroke Unit, the reduction of NIHSS was 17.35 to 5.31 while in Neurology ward from 13.83 to 8.87. Using independent t-test, the reduction of NIHSS in stroke unit is more significant compared with stroke corner in general neurology ward ($p=0,000$). (Med J Indones 2006; 15:30-3).