

## Akurasi metode Radiokoloid dan Blue dye dalam mendeteksi Limfonodi Sentinel pada kanker payudara stadium dini = The accuracy of radiocolloid and blue dye methods in detecting sentinel node in the early stage breast cancer

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### Abstrak

Angka kejadian kanker payudara yang ditemukan pada stadium dini meningkat, dilakukan Sentinel Lymph Node Biopsy (SLNB) untuk mendapatkan kontrol lokoregional yang baik dan morbiditas minimal. SLNB belum menjadi prosedur tetap di Indonesia, dasar SLNB adalah deteksi limfonodi sentinel sebagai prediktor status axilla. Penelitian ini adalah penelitian bersama bagian Radiologi dan Bedah FKUI - RSCM Jakarta dengan tujuan mengetahui akurasi metode radiokoloid (limfoskintigrafi dan gamma probe) serta blue dye dalam mendeteksi limfonodi sentinel pada kanker payudara stadium dini. Dilakukan uji diagnostik secara cross sectional, membandingkan akurasi metode radiokoloid dan blue dye dengan histopatologi sebagai baku emas pada 14 pasien dan didapatkan 163 limfonodi. Karakteristik subyek: keseluruhan perempuan, usia 39 - 53 tahun, kebanyakan sudah menopause, multipara dan menyusui anaknya. Tumor primer mayoritas di kanan, kwadran lateral atas, 57,1% T2, hasil histopatologi semuanya karsinoma duktal invasif, didapatkan emboli limfatik pada 71,4% kasus. Waktu injeksi sampai dilakukan operasi antara 4 sampai 24 jam. Deteksi limfonodi sentinel dengan limfoskintigrafi mempunyai akurasi 81,8%, sensitivitas 90,4%, spesifisitas 73,2%, NPV 98,1%, negatif palsu 1,8%, nilai kappa 0,37. Menggunakan gamma probe mempunyai akurasi 79%, sensitivitas 90,4%, spesifisitas 67,6%, NPV 97,9%, negatif palsu 2%, nilai kappa 0,31. Bila keduanya dilakukan mempunyai akurasi 83,6%, sensitivitas 90,4%, spesifisitas 76,8%, NPV 98,2%, negatif palsu 1,8%, nilai kappa 0,56. 14% limfonodi sentinel merupakan limfonodi mammae interna. Akurasi metode blue dye tidak bisa dinilai pada penelitian ini, gambaran deteksi dengan metode blue dye 71,4% positif. Disimpulkan bahwa metode radiokoloid mempunyai akurasi dan kesesuaian yang tinggi dalam mendeteksi limfonodi sentinel pada kanker payudara stadium dini, terbukti metode radiokoloid dapat diaplikasikan sebagai dasar penggunaan SLNB.

The incidence of breast cancer in the early stage increases, Sentinel Lymph Node Biopsy (SLNB) is conducted to obtain good locoregional and minimal morbidity. SLNB has not become the permanent procedure in Indonesia, the basic of SLNB is sentinel node detection as an axillary lymph node status predictor. This is a joint research of the Radiology and Surgery Department FKUI - RSCM Jakarta aiming to find out the accuracy of radiocolloid (lymphoscintigraphy and gamma probe) as well as blue dye method in detecting sentinel node in the early stage breast cancer. Diagnostic examination is conducted by means of cross sectional, comparing the accuracy of radiocolloid and blue dye methods with histopathology as the gold standard of 14 patients and gotten 163 nodes. Subject characteristics: all female, aged 39-53, mostly menopause, multipara and breast-feeding. Primary tumor mostly in the right, upper lateral quadrant, T2, histopathology result all carcinoma ductal invasive, emboli lymphatic found in 71,4% cases. The period of injection to surgery is between 4 until 24 hours. The detection of sentinel node with lymphoscintigraphy has 81,8% accuracy, sensitivity 90,4%, specificity 73,2%, NPV 98,1%, false-negative 1,8% and kappa value 0,37. Using gamma probe has 79% accuracy, sensitivity 90,4%, specificity 67,6%, NPV 97,9%, false-

negative 2% and kappa value 0,31. When both are conducted, it has 83,6% accuracy, sensitivity 90,4%, specificity 76,8%, NPV 98,2%, false-negative 1,8% and kappa value 0,56. 14% sentinel node is internal mammary node. The accuracy of blue dye method cannot be calculated in this research, detection rate is 71,4%. It is concluded that radiocolloid method has high accuracy and suitability in detecting sentinel node in the early stage breast cancer, it is proven that radiocolloid method can be applied as the basic for using SLNB.</i>