

Gambaran Karakteristik Gangguan Fungsi Menelan pada Bayi Prematur di Neonatal Intensive Care Unit (NICU) RSUPN dr. Cipto Mangunkusumo = Characteristics and Risk Factors of Preterm Babies Dysphagia in Neonatal Intensive Care Unit (NICU) Cipto Mangunkusumo National Hospital

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Abstrak

Latar belakang: Kelahiran hidup bayi prematur di Indonesia mencapai 675.700 kasus (15.5%) tiap tahun. Peningkatan insidens gangguan minum dan menelan pada bayi ditemukan terbanyak pada kelompok bayi prematur. Dampaknya akan meningkatkan komplikasi pasien berupa infeksi saluran napas, gangguan nutrisi, dan tumbuh kembang. Keadaan tersebut berisiko memperpanjang konversi pemberian makan per oral, perawatan, serta pembiayaan perawatan. Penelitian terdahulu belum melaporkan prevalensi dan karakteristik gangguan menelan serta gangguan koordinasi siklus isap-telan-napas (ITN) sebagai salah satu bentuk gangguan minum pada bayi prematur. Tujuan: Menilai prevalensi gangguan minum dan menelan pada bayi prematur, serta menilai karakteristik dan faktor risiko yang berpengaruh terhadap kemampuan minum dan menelan pada bayi prematur.

Metode: Penelitian ini merupakan studi potong lintang pada bayi prematur dengan riwayat perawatan di NICU yang dilakukan Flexible Endoscopic Evaluation of Swallowing (FEES) di Klinik Disfagia Terpadu Departemen THT-KL RSCM periode Oktober 2020-Oktober 2022. Parameter yang dinilai adalah faktor karakteristik kelahiran, karakteristik paska lahir, karakteristik oromotor dan tonus postural, serta karakteristik pemeriksaan FEES.

Hasil: Prevalensi gangguan menelan sebesar 25% dengan karakteristik temuan disfagia fase oral mekanik, disfagia fase faring neurogenik, dan disfagia fase orofaring neurogenik. Prevalensi gangguan koordinasi siklus ITN sebesar 62,5%. Faktor risiko penyakit refluks gastro esofagus (PRGE) berhubungan dengan gangguan menelan pada bayi prematur ($p=0,015$) dengan menggunakan uji chi-square. Parameter lain seperti kelompok PMA, high arched palate, standing secretion, nutritive sucking, penetrasi dan aspirasi memiliki hubungan terhadap gangguan menelan pada bayi prematur ($p<0,05$).

Kesimpulan: Karakteristik gangguan minum dan menelan pada bayi prematur ditemukan prevalensi gangguan koordinasi siklus ITN lebih banyak dibandingkan gangguan fungsi menelan (disfagia). Kelompok PMA, PRGE, high arched palate, standing secretion ditemukan sebagai faktor risiko yang berhubungan dengan gangguan menelan pada bayi prematur. Nutritive sucking, penetrasi, dan aspirasi ditemukan sebagai faktor menentu diagnosis disfagia pada bayi prematur.

.....Background: Preterm birth in Indonesia reaches 675,700 cases (15.5%) each year. This condition is the etiologic feeding difficulty and swallowing disorders in preterm babies. The impact will increase patient complications, such as respiratory tract infections, nutritional disorders, and growth and development. It precedes the risk of prolonging the conversion of oral feeding, and treatment, as well as a financial burden related to hospitalization. Previous studies have not reported the prevalence and characteristics of swallowing disorder or dysphagia and suck-swallow-breath (SSB) coordination disorder as a form of feeding difficulty in premature infants.

Objective: To assess the prevalence of feeding difficulty and swallowing disorders in premature babies and analyzed characteristics and risk factors that affect the ability to feed and swallow in premature babies.

Method: A cross-sectional study in preterm babies with a history of treatment in the NICU using a flexible endoscopic evaluation of swallowing (FEES) for swallowing evaluation at the Dysphagia outpatient clinics Department of ORL-HNS RSCM for the period October 2020-October 2022. The parameters assessed were birth characteristics, postnatal characteristics, oro-motor characteristics, and postural tone, as well as FEES examination characteristics.

Results: The prevalence of swallowing disorders was 25% with characteristics of mechanical oral phase dysphagia, neurogenic pharyngeal phase dysphagia, and neurogenic oropharyngeal phase dysphagia. The prevalence of SSB cycle coordination disorders was 62.5%. The risk factor associated with dysphagia in preterm babies was gastroesophageal reflux disease (GERD) with a p-value = 0.015. Other parameters such as post-menstrual age (PMA) group, high arched palate, standing secretion, nutritive sucking, penetration, and aspiration have an association with swallowing disorders in premature infants ($p < 0.05$).

Conclusion: Characteristics of feeding difficulties and swallowing disorders in preterm babies were found to have more prevalence of SSB cycle coordination disorders than impaired swallowing function (dysphagia). The PMA, GERD, high-arched palate, and standing secretion group were found to be risk factors associated with swallowing disorders in premature infants. Nutritive sucking, penetration, and aspiration were found to be the erratic factors of dysphagia diagnosis in premature babies.