

# Pengaruh cairan karbohidrat elektrolit oral dibandingkan air putih terhadap ansietas praoperasi pada anak yang menjalani operasi = Comparison of electrolyte carbohydrate containing clear fluid and demineralized water against preoperative anxiety in children who undergo elective surgery

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## Abstrak

**Pendahuluan:** Pasien anak akan mengalami stres saat mereka dilepaskan dari rutinitas harian dan menjalani prosedur persiapan perioperasi yang menyebabkan mereka rentan terhadap ansietas. Puasa praoperasi merupakan faktor yang menyebabkan rasa tidak nyaman dan durasi puasa yang memanjang dapat meningkatkan rasa haus, lapar, ansietas, hipoglikemia, dan dehidrasi. Penelitian ini bertujuan untuk mengetahui pengaruh pemberian cairan karbohidrat elektrolit dibandingkan dengan air putih terhadap ansietas praoperasi.

**Metode:** Penelitian ini merupakan uji klinis acak tersamar tunggal yang mengikutsertakan 100 pasien anak yang menjalani pembedahan elektif. Sampel dialokasi menjadi dua kelompok dengan metode acak, yaitu 50 subjek di kelompok cairan karbohidrat elektrolit oral dan 50 subjek di kelompok air putih yang dikonsumsi sejak 12 jam hingga 1 jam praoperasi. Ansietas praoperasi dinilai dengan Modified Yale Preoperative Anxiety Scale-Short Form (mYPAS-SF) dan parameter rasa haus dan lapar dinilai dengan numerical rating scale (NRS) yang dilaporkan orang tua di ruang tunggu, serta pemeriksaan gula darah pascainduksi. Perubahan perilaku pascaoperasi 14 hari sejak keluar dari RS dilakukan wawancara orang tua melalui telepon dengan Post-Hospitalization Behavioral Questionnaire (PHBQ) untuk menilai.

**Hasil:** Tidak terdapat perbedaan bermakna pada ansietas praoperasi dan gula darah pascainduksi antara kelompok cairan karbohidrat elektrolit dan air putih ( $p=0,436$ ,  $p=0.850$ ). Rasa haus dan rasa lapar praoperasi pada kelompok cairan karbohidrat elektrolit lebih rendah dibandingkan kelompok air putih ( $p=0,022$ ,  $p=0,018$ ). Perubahan perilaku pascaoperasi pada kedua kelompok relatif rendah dan tidak berbeda bermakna.

**Kesimpulan:** Tidak terdapat perbedaan ansietas praoperasi pada pemberian cairan karbohidrat elektrolit oral dibandingkan air putih pada anak yang menjalani operasi elektif.

.....**Introduction:** Pediatric patients will experience stress when they released from daily routines and undergo perioperative preparation procedures that cause them to be vulnerable to anxiety. Preoperative fasting is one of the major factors that cause discomfort and prolonged fasting duration can increase thirst, hunger, anxiety, hypoglycemia, and dehydration. This study aims to determine the effect of administering carbohydrate-electrolyte containing clear fluids compared to mineral water during preoperative fasting against preoperative anxiety.

**Methods:** This study is a single blind randomized clinical trial involving 100 pediatric patients who underwent elective surgery. Samples were randomized and allocated to two groups, 50 subjects in oral carbohydrate-electrolyte group and 50 subjects in demineralized water group which were consumed from 12 hours to 1 hour preoperatively. Preoperative anxiety was assessed using Modified Yale Preoperative Anxiety Scale-Short Form (mYPAS-SF) and parameters of thirst and hunger were assessed using numerical

rating scale (NRS) that reported by parents in the holding room, as well blood glucose measurement was done post-induction. Postoperative behavior in 14 days after leaving the hospital were measured by interviewing parents by phone using Post-Hospitalization Behavioral Questionnaire (PHBQ).

Results: There's no significant differences in preoperative anxiety and blood glucose level postinduction between carbohydrate electrolyte fluid and demineralized water ( $p=0.436$ ,  $p=0.850$ ). Hunger and thirst score on carbohydrate electrolyte fluid groups lower significantly than demineralized water group ( $p=0.022$ ,  $p=0.018$ ). Postoperative behavioral changes on both group are relatively low and no significant differences.

Conclusion: There's no significant differences in preoperative anxiety between administer oral carbohydrate electrolyte containing clear fluid and demineralized water on pediatric patient who underwent elective surgery.