

Hubungan Gambaran HRCT Toraks Pasca COVID-19 dengan Riwayat Terapi Rawat Inap di RSUP Persahabatan = The Correlation of Post COVID-19 Chest HRCT Features with Inpatient Therapy History in Persahabatan Hospital

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Abstrak

Pemeriksaan HRCT toraks mengevaluasi secara objektif perubahan pada gambaran parenkim paru akibat respons inflamasi termasuk pada pasien pasca COVID-19. Riwayat terapi selama pasien dirawat inap merupakan faktor yang diduga berpengaruh terhadap gambaran HRCT toraks pasca COVID-19. Penelitian ini menganalisis hubungan antara riwayat terapi tersebut dengan gambaran HRCT toraks dengan subjek yang diperiksa antara Juni 2020-Juli 2021. Metode yang digunakan adalah observasional analitik dengan pendekatan kohort pada data sekunder melalui telusur rekam medis. Pada 73 subjek penelitian dilakukan analisis univariat, bivariat (uji kai kuadrat dan fisher) dan multivariat (uji regresi logistik) dengan variabel independen terdiri atas karakteristik individu (usia, jenis kelamin, komorbiditas, derajat COVID-19) dan riwayat terapi (antivirus, antiinflamasi dan antitrombotik) serta variabel dependen berupa gambaran HRCT toraks. Terdapat gambaran sekuele sebanyak 55 subjek (75,3%) dengan rincian 7 subjek (9,6%) dengan gambaran fibrosis, 5 subjek (6,8%) dengan gambaran GGO, 43 subjek (59,9%) dengan gambaran GGO dan fibrosis serta gambaran nonsekuele sebanyak 18 subjek (24,7%). Gambaran sekuele terhadap variabel masing-masing adalah sebagai berikut: laki-laki dan perempuan yaitu 78,8% dan 66,7% ($p=0,025$, $OR=0,019-0,770$), derajat ringan, sedang dan berat-kritis yaitu 56,5%, 75,0% dan 88,2% ($p=0,031-1,096-6,962$), subjek dengan dan tanpa warfarin yaitu 57,1% dan 82,7% ($p=0,007$, $OR=0,016-0,517$), subjek dengan dan tanpa heparin yaitu 83,3% dan 60,0% ($p=0,024$, $OR=1,250-23,222$), subjek dengan durasi terapi antiinflamasi 10 hari dan >10 hari yaitu 61,0% dan 93,5% ($p=0,026$, $OR=1,276-42,609$). Laki-laki-laki lebih banyak memiliki gambaran sekuele pasca COVID-19 pada HRCT toraks daripada perempuan. Derajat COVID-19 adalah faktor paling berpengaruh dan menentukan pemilihan terapi rawat inap. Kelompok subjek dengan warfarin memiliki gambaran sekuele pasca COVID-19 pada HRCT toraks lebih banyak daripada tanpa warfarin. Kelompok subjek dengan heparin memiliki gambaran sekuele pasca COVID-19 pada HRCT toraks lebih banyak daripada tanpa heparin. Kelompok subjek dengan durasi terapi antiinflamasi 10 hari memiliki gambaran sekuele pasca COVID-19 pada HRCT toraks lebih sedikit daripada dengan terapi antiinflamasi >10 hari.

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Chest HRCT is an objective examination to evaluate alteration in lung parenchyma due to inflammation response including in post COVID-19 patients. Inward patient therapy history is one of factor to be suspected has an influence to chest HRCT features in post COVID-19 patients. This study analyzes a relation between therapy history and chest HRCT features was examined between June 2020 and June 2021. Observational analytic with retrospective approach method is used by medical record explore as secondary data. In 73 subjects in this study, univariate analysis, bivariate analysis (chi square and fisher's test), and multivariate analysis (logistic regression) had done to perform the description of independent variable consists individual characteristics (age, sex, comorbidity, COVID-19 severity degree) and therapy history

(antiviral, antiinflammation, antithrombotic), and chest HRCT features as dependent variable. There are sequelae features in 55 subjects (75.3%) consist of 7 subjects (9.6%) with fibrotic features, 5 subjects (6.8%) with GGO and 43 subjects (59.9%) and also 18 subjects (24.7%) non-sequelae features. Sequelae features for each variable are: male and female are 78,8% vs 66,7% ($p=0.025$, $OR= 0.019-0.770$), mild, moderate, and severe-critical COVID-19 severity degree are 56,5% vs 75,0% vs 88,2% ($p=0,031-1,096-6,962$), subjects with and without warfarin are 57,1% vs 82,7% ($p=0,007$, $OR=0,016-0,517$), subjects with and without heparin are 83,3% vs 60,0% ($p=0,024$, $OR= 1,250-23,222$), subject with antiinflammation therapy duration 10 days is higher risk than >10 days are 61,0% vs 93,5% ($p=0,026$, $OR=1,276-42,609$). Males are larger number with post COVID-19 sequelae features in chest HRCT than females. The severity degree of COVID-19 is the most influencing factor and this determines on inpatient therapy selection. Warfarin history subjects are smaller number with post COVID-19 sequelae features in chest HRCT than in without warfarin. Heparin history subjects are larger number with post COVID-19 sequelae features in chest HRCT than in without heparin. Anti-inflammatory therapy duration 10 days are smaller number with post COVID-19 sequelae features in chest HRCT than in > 10 days.