

Faktor Penyembuhan Ulkus pada Chronic Limb Threatening Ischemia yang Dilakukan Tindakan Angioplasti Endovaskular di Rumah Sakit Cipto Mangunkusumo = Factors Influencing Ulcer Healing in Chronic Limb Threatening Ischemia Patients After Endovascular Angioplasty at Cipto Mangunkusumo General Hospital

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Abstrak

Latar belakang. Pada CLTI didapatkan iskemik yang progresif sehingga menyebabkan timbulnya nyeri tungkai saat istirahat dan terbentuknya ulkus atau gangren. Intervensi revaskularisasi tungkai bawah merupakan lini pertama tata laksana CLTI, dengan pilihan prosedur berupa pembedahan secara terbuka maupun tindakan endovaskular. Pasien CLTI di RSCM datang dengan kondisi lanjut dan angka reamputasi yang tinggi, sehingga diperlukan penelitian untuk mengetahui faktor yang berhubungan dengan keluaran angioplasti endovaskular yaitu penyembuhan ulkus.

Metode. Studi potong lintang dilakukan di RSCM dengan melibatkan pasien CLTI Rutherford 5-6 yang menjalani tindakan angioplasti. Usia, jenis kelamin, riwayat merokok, hipertensi, fibrilasi atrium, gagal jantung, CKD, DM merupakan variabel yang diteliti terhadap penyembuhan ulkus yang merupakan penilaian klinis pascatindakan angioplasty yang dinilai adalah epitelisasi sempurna ulkus dalam kurun waktu 4 bulan pascatindakan.

Hasil. Pada 133 subjek penelitian, didapatkan 60,9% pasien mengalami epitelisasi sempurna. Faktor-faktor yang memengaruhi penyembuhan ulkus pada pasien CLTI antara lain, jenis kelamin, riwayat merokok, hipertensi, fibrilasi atrium, gagal jantung, CKD, dan diabetes. Faktor yang paling berhubungan dengan penyembuhan ulkus pascaangioplasti endovaskular berdasarkan uji regresi logistik adalah diabetes.

Kesimpulan. Faktor-faktor yang memiliki hubungan bermakna dengan penyembuhan ulkus pada pasien chronic limb threatening ischemia (CLTI) antara lain adalah jenis kelamin, riwayat merokok, hipertensi, fibrilasi atrium, gagal jantung, CKD, dan diabetes. Faktor yang dinilai paling berhubungan adalah diabetes melitus.

.....Background. Chronic limb threatening ischemia (CLTI) can cause rest pain in lower extremities and the formation of ulcers or gangrene. Revascularization which can be done using open surgery or endovascular procedures, is the first line treatment in CLTI management. CLTI patients at RSCM usually came with advanced conditions and high re-amputation rates even after revascularization. This study aimed to determine factors associated with the outcome of endovascular angioplasty, especially ulcer healing.

Method. A cross-sectional study was conducted at RSCM involving CLTI patients with Rutherford grade 5 and 6 that underwent angioplasty. Age, gender, history of smoking, hypertension, atrial fibrillation, heart failure, chronic kidney disease (CKD), and diabetes mellitus were the independent variables studied in this study. The dependent variable was ulcer healing which is a clinical assessment after angioplasty that was assessed as complete ulcer epithelialization within four months after the procedure.

Results. In 133 study subjects, it was found that 60.9% of patients underwent complete epithelialization. Factors that affect ulcer healing in CLTI patients include gender, history of depression, hypertension, atrial fibrillation, heart failure, chronic kidney disease, and diabetes mellitus. The factor with the highest

association to ulcer healing after endovascular angioplasty based on logistic regression test is diabetes mellitus.

Conclusion. Factors that have a significant relationship with ulcer healing in patients with CLTI include gender, smoking, hypertension, atrial fibrillation, heart failure, CKD, and diabetes. The factor that was considered to have the highest association was diabetes mellitus.