

Faktor risiko yang memengaruhi terjadinya sindrom pascatrombosis pada pasien trombosis vena dalam dengan Covid-19 yang dilakukan terapi konservatif = Risk factors influencing the occurrence of Post-thrombotic syndrome in deep venous thrombosis patients with COVID-19 undergoing conservative therapy

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Abstrak

Latar Belakang: Sindrom pascatrombosis (PTS) diestimasikan terjadi pada 20-50% pasien dengan jarak beberapa bulan hingga 1-2 tahun pasca trombosis vena dalam DVT. Insidensi PTS akan lebih tinggi pada DVT yang ditatalaksana konservatif. Tatalaksana DVT pada COVID-19 selama ini hanya konservatif. Sampai saat ini belum ada penelitian mengenai evaluasi terjadinya sindrom pascatrombosis pada pasien DVT dengan COVID-19.

Metode: Desain penelitian yang digunakan adalah desain kohort retrospektif. Penelitian dilakukan di Divisi Bedah Vaskular dan Endovaskular, Departemen Medik Ilmu Bedah, Rumah Sakit Umum Pusat Nasional dr. Cipto Mangunkusumo, Jakarta. Waktu penelitian akan berlangsung selama 6 bulan, yaitu dari bulan Desember 2022 sampai dengan Mei 2023. Dilakukan uji bivariat dan multivariat pada data yang didapat.

Hasil: Didapatkan insidensi terjadinya PTS pada pasien DVT dan COVID-19 adalah 59.3%. Variabel yang meningkatkan risiko terjadinya PTS dan secara statistik bermakna menurut uji bivariat adalah riwayat DVT ipsilateral ($p = 0.000$), lokasi trombus Iliaka Femoral Popliteal ($p = 0.000$), dan derajat COVID-19 sedang berat ($p = 0.000$). Dari uji multivariat didapatkan $y = -2.965 + 2.545X_1(\text{riwayat DVT ipsilateral}) + 2.110X_2(\text{lokasi trombus Iliaka Femoral Popliteal}) + 2.679X_3(\text{Derajat COVID-19 sedang berat})$.

Kesimpulan: Insidensi terjadinya PTS pada pasien DVT dengan COVID-19 yang dilakukan terapi konservatif lebih meningkat. Faktor risiko yang memengaruhi terjadinya sindrom pascatrombosis secara uji statistik bivariat bermakna menurut uji bivariat adalah adanya riwayat DVT ipsilateral, lokasi trombus Iliaka Femoral Popliteal, dan derajat COVID-19 sedang berat. Dari uji multivariat didapatkan derajat COVID-19 sedang berat sebagai faktor risiko terbesar PTS sebesar 14.5X, riwayat DVT ipsilateral sebagai faktor risiko terbesar PTS sebesar 12.7X dan lokasi trombus Iliaka Femoral Popliteal sebagai faktor risiko sebesar 8.2x.

.....Background: Post-thrombotic syndrome (PTS) is estimated to occur in 20-50% patients several months to 1-2 years after DVT. The incidence of PTS will be higher in DVT which is managed conservatively. So far, the management of DVT in COVID-19 has only been conservative. To date, there have been no studies regarding the evaluation of the occurrence of postthrombotic syndrome in DVT patients with COVID-19.

Methods: The design used for this research was a retrospective cohort design. The study was conducted at the Division of Vascular and Endovascular Surgery, Department of Medical Surgery, dr. Cipto Mangunkusumo, Jakarta. The research time will last for 6 months, from December 2022 to May 2023.

Bivariate and multivariate tests were carried out.

Results: The incidence of PTS in DVT and COVID-19 patients was 59.3%. Variables that increasing the risk of PTS and were statistically significant according to bivariate tests were history of ipsilateral DVT ($p = 0.000$), Popliteal Iliac Femoral thrombus location ($p = 0.000$), and moderate to severe COVID-19 severity (p

= 0.000). From the multivariate test, $y = -0.596 + 2.545X_1$ (ipsilateral DVT history) + $2.110X_2$ (popliteal Iliac Femoral thrombus location) + $(-2.679)X_3$ (moderate to severe COVID-19 severity).

Conclusion: The incidence of PTS in DVT patients with COVID-19 who are undergoing conservative therapy is increasing. The risk factors that influence the occurrence of postthrombotic syndrome in statistically significant bivariate tests are history of ipsilateral DVT, the location of the Iliac Femoral Popliteal thrombus, and the moderate to severe COVID-19 severity. From the multivariate test, moderate to severe COVID-19 severity was found as the biggest risk factor for PTS by 14.5-fold, history of ipsilateral DVT as risk factor for PTS by 12.7-fold and the location of the Iliac Femoral Popliteal thrombus as a risk factor for 8.2-fold.