

Pengembangan Modul Dan Modifikasi Skor Modified Checklist For Autism In Toddlers (M-Chat) Dan Penerapan Terapi Pijat Pada Anak Risiko Gangguan Spektrum Autisme = Module Development And Modified Checklist Score Modification For Autism In Toddlers (M-Chat) And Application Of Massage Therapy In Children At Risk For Autism Spectrum Disorders

Andy Martahan Andreas Hariandja, author

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Abstrak

Penelitian terapi pijat bagi anak dengan GSA yang dilakukan dalam kurun waktu 10 – 15 tahun lebih banyak ditujukan terhadap anak yang telah didiagnosis gangguan spektrum autisme dengan rerata usia anak berada di antara 3 – 6 tahun. Di Indonesia penelitian tentang terapi pijat pada anak dengan risiko gangguan spektrum autisme belum banyak dilakukan dan dipublikasikan di jurnal ilmiah.

Prevalensi penderita gangguan spektrum autisme di beberapa belahan dunia cenderung meningkat, seperti di Negara Amerika Serikat, Cina dan negara berkembang seperti di Indonesia. Di Indonesia sendiri data dan informasi yang akurat dan lengkap dari penderita gangguan spektrum autisme (GSA) masih kurang, sehingga dkuatirkan banyak anak dengan gejala risiko gangguan spektrum autisme tidak mendapatkan penanganan secara dini.

Penelitian ini bertujuan mengembangkan modul terapi pijat pada anak risiko gangguan spektrum autisme, mengetahui dan menganalisis modifikasi skor M-CHAT dan mengetahui hasil penerapan TPGSA dalam menurunkan skor M-Chat dan status risiko gangguan spektrum autisme pada anak Usia 18–36 bulan. Jenis penelitian yang digunakan adalah penelitian Deskriptif dengan pendekatan Studi Kasus. Populasi penelitian adalah anak usia 18-36 bulan yang telah mengikuti skrining/pemeriksaan M-CHAT di PKM Pasar Minggu, PKM Cipayung dan PKM Kebon Jeruk. sebanyak 1685 orang dengan angka kejadian anak risiko autisme sebanyak 14 orang (0,8%) dari bulan Mei tahun 2019 sampai dengan Maret 2020. Sampel penelitian sebanyak 10 orang yang memenuhi kriteria inklusi. Jumlah anak yang diskriminasi dalam rangka modifikasi Skor M-CHAT adalah 904 anak yang dianalisis dengan Receiver Operating Characteristic (ROC) untuk memperoleh nilai Cut off Point dan Sensitivitas.

Hasil analisis dengan menggunakan ROC, diperoleh cut off point 24 dengan sensitivitas 87 % dengan Confidence Interval (CI) 95% dengan ROC area under the curve 0.912. Hasil penelitian dari penerapan terapi pijat diperoleh gambaran terdapat penurunan skor M-Chat dan perubahan status risiko gangguan spektrum autisme yang dimulai pada periode III hari ke 21-30 dan periode IV hari ke 31-40 pemberian terapi pijat.

Kesimpulan penelitian ini adalah hasil analisis ROC pada modifikasi skor M-CHAT dapat digunakan untuk melakukan skrining dan menilai status risiko GSA, penerapan TPGSA dapat menurunkan skor risiko anak GSA dan dapat merubah anak risiko GSA dari risiko tinggi menjadi risiko autisme dan normal.

.....Research on massage therapy for children with ASD that was conducted over a period of 10-15 years was mostly aimed at children who had been diagnosed with autism spectrum disorders with the average age of children being between 3-6 years. In Indonesia, research on massage therapy in children at risk for ASD has not been widely carried out and reported in the form of scientific journal publications.

The prevalence of people with Autism Spectrum Disorders in some parts of the world tends to increase, such as in the United States, China and developing countries such as Indonesia. In Indonesia alone, accurate and complete data and information from people with Autism Spectrum Disorders (ASD) are still lacking, so it is feared that many children with risk symptoms of autism spectrum disorders do not get early treatment.

This study aims to develop a massage therapy modul for children at risk for ASD, find out and analyze the modification of The Modified Check List for Autism in Toddler (M-CHAT) score and determine the results of the application of MTASD in reducing the risk score for ASD in children aged 18-36 months. The type of research used is descriptive research with a case study approach. The study population was children aged 18-36 months who had participated in the M-CHAT screening/examination at the Pasar Minggu Community Health Center (CHC), CHC of Cipayung and CHC of Kebon Jeruk as many as 1685 people with the incidence of children at risk of autism as many as 14 people (0.8%) from May 2019 to March 2020. The research sample was 10 people who met the inclusion criteria. The number of children screened in order to modify the M-CHAT score was 904 children who were analyzed by Receiver Operating Characteristics (ROC) to obtain Cut off Point and Sensitivity values.

The results of the study based on ROC analysis obtained a cut off point 24 with a sensitivity of 87 % with a Confidence Interval (CI) of 95%, with an ROC area under the curve of 0.912. From the application of MTASD, it was found that a decrease in the M-CHAT score occurred in period III starting from day 30. The conclusion of this study is that the results of the ROC analysis on the modified M-CHAT score can be used as a score to screen and assess the risk status of ASD, the application of MTASD can reduce the risk score of children with ASD and can change children at risk of ASD from high risk to autism risk and normal.