

Proporsi dan Faktor-Faktor yang Berhubungan dengan Frailty pada Pasien HIV dalam Terapi Antiretroviral = Proportions and Factors Associated with Frailty in HIV Patients on Antiretroviral Therapy

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Abstrak

Latar Belakang. Walaupun pasien HIV mendapat terapi antiretroviral yang efektif, penurunan fungsi fisik sering ditemukan lebih awal dan menimbulkan masalah baru berupa penuaan dan frailty.

Tujuan. Mengetahui proporsi dan faktor-faktor yang berhubungan dengan prefrail dan frail pada pasien HIV dalam terapi antiretroviral.

Metode. Desain studi potong lintang pada pasien HIV usia 30 tahun dalam terapi ARV minimal 6 bulan. Pasien yang memenuhi inklusi dilakukan pencatatan demografis, penyakit komorbid, faktor terkait HIV seperti lama terdiagnosis, lama ARV, dan CD4, pengukuran antropometri seperti indeks massa tubuh, penilaian depresi dengan Indo BDI-II, dan penilaian frailty dengan kriteria Fried. Pasien dengan riwayat infeksi otak, kanker, dan oportunistik aktif dieksklusi. Analisis bivariat dan multivariat dilakukan pada faktor-faktor tersebut.

Hasil. Terdapat 164 pasien yang dianalisis. Proporsi prefrail sebanyak 51,2% (84 pasien) dan frail 3,7% (6 pasien), dengan komponen dominan pada kelemahan genggam. Pasien laki-laki sebanyak 72% dengan median usia (IQR) 40,5 (36-47) tahun, dan median CD4 nadir (IQR) 53 (21-147) sel/mm³, median CD4 awal (IQR) 77 (32 - 206) sel/mm³. Hepatitis C menjadi faktor komorbid terbanyak. Depresi berhubungan dengan prefrail dan frail dengan OR 2,14 (IK95%: 1,034-4,439) dan p = 0,036. Tidak terdapat hubungan faktor usia 50 tahun, 2 penyakit komorbid, lama terdiagnosis HIV 5 tahun, lama ARV 5 tahun, CD4 <200 sel/mm³, indeks massa tubuh 25 kg/m², dan pendapatan rendah dengan prefrail dan frail.

Kesimpulan. Terdapat proporsi prefrail sebanyak 51,2% dan frail 3,7%. Depresi merupakan salah satu faktor yang terbukti berhubungan terhadap prefrail dan frail pada pasien HIV dalam terapi ARV.

.....**Background.** Although HIV patients receive effective antiretroviral therapy, decrease in physical function is often found earlier and creates new problems in the form of aging and frailty

Aim. to determine the proportion and factors associated with prefrail and frail in HIV patients on antiretroviral therapy.

Method. A cross-sectional study design in HIV patients aged 30 years who were on ARV therapy for at least 6 months. Patients who fulfilled the inclusion were recorded demographically, comorbid diseases, HIV-related factors such as length of diagnosis, duration of ARV, CD4, anthropometric measurements such as body mass index, depression assessment with Indo BDI-II, and frailty assessment with Fried criteria. Patients with a history of brain infection, cancer, and active opportunists were excluded. Bivariate and multivariate analysis was carried out on these factors.

Results. There were 164 patients analyzed. The proportions of prefrail and frail were 51.2% and 3.7% respectively, with the dominant component in muscle weakness. Male patients were 72% with median age (IQR) 40.5 (36-47) years, median baseline CD4 (IQR) 77 (32 - 206) cell/mm³, and median nadir CD4 (IQR) 53 (21-147) cells/mm³. Hepatitis C is the most comorbid factor. Depression is related to prefrail and frail with OR 2.14 (95% CI: 1,034-4,439) and p = 0,036. There was no correlation between factors such as age 50

years, 2 comorbid diseases, length of diagnosis of HIV 5 years, duration of ARV 5 years, CD4 cell count <200 cells/mm³, body mass index 25 kg/m², and low income with prefrail and frail.

Conclusion. The proportions of prefrail and frail are 51.2% and 3.7% respectively. Depression is one of the factors that is proven to be related to prefrail and frail in HIV patients in ARV therapy.