

TINGKAT KONTROL PASIEN ASMADI RS PERSAHABATANBERDASARKAN ASTHMA CONTROL TEST BESERTA HUBUNGANNYADENGAN TINGKAT MORBIDITAS DANFAKTOR RISIKO STUDI LONGITUDINAL DI POLI RAWAT JALAN SELAMA SATU TAHUN = ASTHMA CONTROL LEVEL AND THE RELATION WITH MORBIDITY AND RISK FACTORS, A LONGITUDINAL STUDY IN ASTHMA OUTPATIENT CLINIC IN PERSAHABATAN HOSPITAL

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Abstrak

Latar belakang. Berdasarkan penelitian sebelumnya jumlah pasien asma yang tidak terkontrol di Rumah Sakit Persahabatan masih cukup banyak. Penelitian tersebut bertujuan untuk lebih menggambarkan tingkat kontrol pasien asma dan mencari hubungan dengan berbagai faktor risiko yang ada.

Metode. Pasien asma persisten yang memenuhi syarat penelitian dikumpulkan sejak Mei 2011 sampai Nopember 2011 kemudian diidentifikasi faktor risiko yang dimiliki. Tingkat kontrol asma diukur menggunakan ACT dan tingkat morbiditas diukur dengan Revised Jones Morbidity Index. Pengukuran kembali dilakukan setiap tiga bulan sampai genap setahun evaluasi. Setelah genap setahun evaluasi akan dinilai hubungan antara nilai ACT dengan faktor risiko serta hubungan antara nilai ACT dengan nilai Revised Jones morbidity index. Hasil. Sampel yang berhasil diikuti sampai satu tahun sebanyak 280 pasien. Prosentase asma terkontrol penuh pada evaluasi bulan ke-0,3,6,9 dan 12 berturut-turut adalah 8,57; 6,79; 11,79; 10,71; 13,93%. Sedangkan asma terkontrol sebagian berturut-turut 27,86; 32,50; 32,50; 36,07; 46,79% dan asma tidak terkontrol berturut-turut 63,57; 60,71; 55,71; 53,22; 39,28. Nilai ACT yang meningkat didapatkan pada 191 pasien (68,2%), tetap atau stabil pada 36 pasien (12,9%) dan menurun pada 53 pasien (18,9%). Nilai ACT yang menurun berhubungan secara bermakna dengan faktor risiko riwayat atopi pada pasien ($p = 0,042$) dan alergen inciter ($p = 0,004$). Terdapat hubungan yang kuat antara nilai ACT dengan nilai Revised Jones Morbidity Index pada tiap waktu evaluasi dengan koefisien korelasi (r) di bulan ke-0,3,6,9 dan 12 berturut-turut 0,808; 0,815; 0,851; 0,872; 0,902 dengan nilai p yang sama yaitu 0,000.

Kesimpulan. Secara umum tingkat kontrol asma pada pasien asma di poli asma RSP membaik. Nilai ACT yang menurun berhubungan secara bermakna dengan riwayat atopi pada pasien dan alergen inciter. Terdapat hubungan yang kuat antara nilai ACT dengan nilai Revised Jones Morbidity Index.

.....Background. Our previous study showed that there were still a lot of uncontrolled asthma patients in asthma outpatient clinic Persahabatan Hospital, with unknown cause. In this study we elaborate whether morbidity and risk factors can be modified in order to achieve the control status.

Methods, The subjects of this study are all asthma patient in asthma outpatient clinic in Persahabatan Hospital from May 2011 to November 2011 (six month period) and signed the informed consent. All eligible subjects will interviewed to identify the risk factors including inducer and inciter of asthma. Asthma

control status measure using Asthma Control Test (ACT) and degree of morbidity measure using Revised Jones Morbidity Index. Evaluation were done every three months. After complete one year of evaluation, the correlation between change tendency of asthma control status and risk factors will analyze using Chi Square test. The correlation between ACT value and Revised Jones morbidity index value will analyze using Spearman test.

Result. 313 patients were enrolled and 33 patients were excluded because lost of contact, and 280 patients were complete evaluate for 12 month. Full asthma control at 0,3,6,9 and 12 month of evaluation were 8,57; 6,79; 11,79; 10,71; 13,93% respectively. Partial control at 0,3,6,9 and 12 month of evaluation were 27,86; 32,50; 32,50; 36,07; 46,79% respectively. The uncontrolled asthma at 0,3,6,9 and 12 month of evaluation were 63,57; 60,71; 55,71; 53,22; 39,28. Asthma control status was getting better in 191 patients (68,2%), stable in 36 patients (12,9%) and worsened in 53 patients (18,9%). The worsening asthma control status has significant correlation with patient's atopic history ($p = 0,042$) and alergen as inciter ($p = 0,004$). There are significant correlation with strong coefficient of correlation (r) between the value of ACT and Revised Jones Morbidity Index that found in every time of evaluation (0,3,6,9 and 12 month) with the value of r were 0,808; 0,815; 0,851; 0,872; 0,902 respectively with the same p value (0,000).

Conclusion. Overall, Patient's asthma control status in asthma clinic Persahabatan Hospital after 12 month of evaluation was getting better. The worsening one were significant associated with patient's atopic history and alergen as inciter. There is strong correlation between the value of ACT and Revised Jones Morbidity Index.