

Analisis Faktor-Faktor Yang Memengaruhi Kecelakaan Sepeda Motor Dengan Indeks Keparahan Trauma Maksilofasial Dan Tingkat Kesadaran = Analysis of Factors Influencing Motor Vehicle Accident and Maxillofacial Trauma Indices and Level of Conciousness

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Abstrak

Pendahuluan: Trauma maksilofasial akibat kecelakaan sepeda motor sering terjadi dan meningkat setiap tahunnya. Cranial Disruption Score (CDS), Maxillofacial Injury Severity Score (MFISS), Facial Injury Severity Scale (FISS), Facial Fracture Severity Score (FFSS), Zeeshan and Simon Model (Model ZS), dan Glasgow Coma Scale (GCS) merupakan indeks keparahan trauma maksilofasial dan tingkat kesadaran yang berguna untuk memberikan perawatan dan mendapatkan prognosis bagi pasien. Akan tetapi, hubungan faktor-faktor dalam kecelakaan sepeda motor yang mempengaruhi keparahan trauma maksilofasial berdasarkan indeks-indeks tersebut belum pernah diteliti sebelumnya. Tujuan: Menganalisis hubungan faktor-faktor dalam kecelakaan, yaitu pencahayaan, kecepatan berkendara, dan penggunaan helm, terhadap keparahan trauma maksilofasial berdasarkan indeks keparahan CDS, MFISS, FISS, FFSS, Model ZS, dan GCS pasien trauma maksilofasial di Rumah Sakit Umum Daerah (RSUD) Kabupaten Tangerang periode Juni 2017 – Mei 2022. Metode: Studi dilakukan dengan menganalisis rekam medis bedah mulut di RSUD Kabupaten Tangerang periode Juni 2017 – Mei 2022. Hasil: Sebanyak 257 pasien yang memenuhi kriteria inklusi diikuti dalam studi ini. Terdapat perbedaan bermakna ($p < 0,05$) skor CDS, MFISS, FISS, FFSS, Model ZS, dan GCS berdasarkan pencahayaan, kecepatan berkendara, dan penggunaan helm. Analisis multivariat menunjukkan terdapat pengaruh ($p < 0,05$) kecepatan berkendara dan penggunaan helm terhadap keparahan trauma maksilofasial berdasarkan CDS, MFISS, FISS, FFSS, Model ZS, dan GCS tetapi pengaruh pencahayaan hanya terlihat pada skor MFISS dan FISS ($p < 0,05$). Kesimpulan: Keparahan trauma maksilofasial berdasarkan CDS, FFSS, Model ZS dipengaruhi oleh kecepatan dan penggunaan helm, tetapi tidak oleh pencahayaan. Keparahan trauma maksilofasial berdasarkan MFISS dan FISS dipengaruhi oleh pencahayaan, kecepatan, dan penggunaan helm, tetapi hubungan terbalik penggunaan helm dengan FISSDisruption Score (CDS), Maxillofacial Injury Severity Score (MFISS), Facial Injury Severity Scale (FISS), Facial Fracture Severity Score (FFSS), Zeeshan and Simon Model (ZS Model), and Glasgow Coma Scale (GCS) are indexes of severity maxillofacial trauma and level of consciousness that are useful for providing care and obtaining a prognosis for patients. However, the relationship between factors in motorcycle accidents that influence the severity of maxillofacial trauma based on these indices has never been studied before. Objective: To analyze the relationship between the factors involved in an accident, namely lighting, driving speed, and use of a helmet, on the severity of maxillofacial trauma based on the severity index of CDS, MFISS, FISS, FFSS, Model ZS, and GCS in maxillofacial trauma patients at the Regional General Hospital (RSUD)) Tangerang District for the period June 2017 – May 2022. Methods: The study was conducted by analyzing the medical records of oral surgery at the Tangerang District Hospital for the period June 2017 – May 2022. Results: A total of 257 patients who met the inclusion criteria were included in this study. There were significant differences ($p < 0.05$) in the CDS, MFISS, FISS, FFSS, Model ZS, and GCS scores based on lighting, driving speed, and helmet use. Multivariate analysis

showed that there was an effect ($p < 0.05$) of driving speed and helmet use on the severity of maxillofacial trauma based on CDS, MFISS, FISS, FFSS, Model ZS, and GCS but the effect of lighting was only seen on the MFISS and FISS scores ($p < 0, 05$). Conclusion: Severity of maxillofacial trauma based on CDS, FFSS, ZS model is affected by speed and helmet use, but not by lighting. The severity of maxillofacial trauma based on MFISS and FISS is influenced by lighting, speed, and helmet use, but there is an inverse relationship between helmet use and FISS.