

Hubungan Neutrophil to Lymphocyte Ratio dan Flynn Severity Score terhadap tingkat keparahan dan lama rawat inap pada pasien infeksi odontogenik maksilofasial di RSUPN DR. CIPTO MANGUNKUSUMO periode Januari 2019 - Desember 2023 = Correlation Between Neutrophil to Lymphocyte Ratio and Flynn Severity Score towards severity rate and length of hospitalization on maxillofacial odontogenic infection patients at RSUPN DR. CIPTO MANGUNKUSUMO for the period January 2019 - December 2023

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Abstrak

Latar Belakang: Infeksi odontogenik dapat disebabkan karies, penyakit periodontal, trauma dan pulpitis. Anamnesa, pemeriksaan klinis dan pemeriksaan penunjang perlu dilakukan. Salah satu sistem penilain untuk pemeriksaan fisik yang dapat digunakan yaitu flynn severity score. Pemeriksaan fisik pada pasien infeksi odontogenik tidak dapat dijadikan prediksi untuk pertimbangan lama rawat inap dan tingkat keparahan sehingga pemeriksaan laboratorium diperlukan. Pemeriksaan NLR (neutrophil to lymphocyte ratio) dapat digunakan sebagai penanda infeksi yang mudah dihitung serta dapat membantu memprediksi lama rawat inap dan tingkat keparahan pasien infeksi odontogenik.

Tujuan: Menganalisa hubungan NLR (neutrophil to lymphocyte ratio) dan Flynn Severity Score terhadap tingkat keparahan serta lama rawat inap pada pasien infeksi odontogenik maksilofasial di RSUPN Dr. Cipto Mangunkusumo selama periode Januari 2019- Desember 2023

Metode Penelitian: Cross sectional restrospektif dengan data sekunder sampel rekam medis pasien infeksi odontogenik RSUPN Dr. Cipto Mangunkusumo periode Januari 2019-Desember 2023 dikumpulkan dan didapatkan 94 sampel. Setiap sampel diidentifikasi jenis kelamin, usia, kondisi sistemik, tingkat keparahan, waktu drainase, NLR, dan lama rawat inap. Uji hipotesis korelatif dilakukan dengan uji Spearman dan uji komparasi dengan Uji Fisher z.

Hasil Penelitian: Secara keseluruhan terdapat hubungan nilai NLR dan flynn severty score terhadap tingkat keparahan dan lama rawat inap ( $p = 0,001$ ). ]Terdapat hubungan yang bermakna antara NLR terhadap tindakan drainase yang dilakukan  $< 48$  jam dan  $> 48$  jam ( $p = 0,001$ ).

Kesimpulan: Nilai NLR dibandingkan dengan nilai flynn severity score memiliki hasil yang setara untuk menilai tingkat keparahan dan lama rawat inap pada pasien infeksi odontogenik maksilofasial ( $p= 0,68$ ).

.....Background: Odontogenic infections may caused by caries, periodontal disease, trauma and pulpitis. Anamnesis, clinical, radiological and laboratory examinations are important medical procedure. One of the scoring systems for physical examination that can be used is the Flynn severity score. Physical examination alone cannot be used as a prediction for consideration of length of hospitalization and severity so laboratory tests are needed. Neutrophil to Lymphocyte Ratio (NLR) examination can be used as a marker of infection that is easy to calculate and can help to predict the length of hospitalization and severity rate of odontogenic infection patients.

Objective: To analyze the correlation of NLR and Flynn Severity Score towards severity rate and length of hospitalization on maxillofacial odontogenic infection patients at Dr. Cipto Mangunkusumo Hospital,

January 2019-December 2023. Methods: Cross sectional retrospective with secondary data of medical record samples of odontogenic infection patients at Dr. Cipto Mangunkusumo Hospital during January 2019-December 2023 were gathered, with 94 samples were obtained. Each sample was identified by gender, age, systemic conditions, severity, drainage time, NLR, and length of hospitalization. Correlative hypothesis test was performed with Spearman test and comparative test with Fisher z test.

Results: Overall, there was a correlation between NLR and flynn severity score on severity rate and length of hospitalization ( $p= 0,001$ ). There was correlation between NLR and drainage which was performed  $< 48$  and  $> 48$  hours  $p= 0,001$ . Conclusion: NLR score compared to flynn severity score had equivalent results for assessing the severity and length of hospitalization on maxillofacial odontogenic infection patients ( $p= 0,68$ ).