

Pola Kuman Pada Bilasan Bronkus Pasien Terduga Kanker Paru Di Rumah Sakit Persahabatan Pusat Respirasi Nasional = Germ Patterns in Bronchial Rinses from Suspected Lung Cancer Patients at the National Respiratory Center Persahabatan Hospital

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Abstrak

Latar belakang : Kanker paru adalah kanker yang berasal dari epitel bronkus. Tujuan penelitian ini adalah mengetahui gambaran pola kuman dari bilasan bronkus dan faktor-faktor yang memengaruhi pada pasien terduga kanker paru di RS Persahabatan pusat Respirasi Nasional. Metode : Jenis penelitian potong lintang. Jumlah sampel 226 pasien. Kriteria inklusi yaitu pasien terduga kanker paru, usia > 18 tahun, tidak menggunakan antibiotik satu minggu sebelum tindakan bronkoskopi. Hasil : Karakteristik pasien terduga kanker paru antara lain laki-laki (63,7%), rerata usia $60 \pm 11,45$ tahun. Keluhan respirasi batuk (78,3%) dan sesak napas (65,5%). Sebagian besar perokok berat (30,5%). Indeks massa tubuh normal (43,8%). Nilai leukosit normal (53,5%), neutrofil normal (66,4%), neutrofil limfosit rasio meningkat (67,3%). Data histopatologis terbanyak adalah adenokarsinoma (50,9%), EGFR tidak ada mutasi (34%) dan ALK negatif (29%). Foto toraks tampak lesi sentral (84,5%), > 3 mm (89,9%) dan konsolidasi (64,2%). CT scan toraks ada keterlibatan kelenjar getah bening (67,7%) dan ada metastasis (71,2%). Gambaran bronkus tampak massa infiltratif (27,9%) dan mukosa edematous (15,9%). Diagnosis terbanyak yaitu kanker paru (71,7%), T4 (85,2%), N2 (37,7%), M1a (42,6%), metastasis efusi pleura (54,9%), stage IV A (64,2%) dan PS 1 (49,4%). Bakteri terbanyak pada bilasan bronkus adalah *Pseudomonas aeruginosa* (13,7%) dan *Klebsiella pneumoniae* (11,1%). Kesimpulan : Bakteri terbanyak pada bilasan bronkus adalah *Pseudomonas aeruginosa* dan *Klebsiella pneumoniae*. Batuk, nilai leukosit, letak anatomi foto toraks, letak anatomi CT scan toraks dengan kontras, ground glass opacity dan efusi pleura pada CT scan toraks dengan kontras memengaruhi ada atau tidak bakteri pada bilasan bronkus pasien terduga kanker paru.

.....Background: Lung cancer is cancer that originates from the epithelium of the bronchi. This study aims to determine microbial patterns from bronchial washing and influencing factors in suspected lung cancer patients at Persahabatan Hospital National Respiratory Center. Method: Cross-sectional research. The sample was 226 patients. The inclusion criteria are patients suspected of lung cancer, aged > 18 years, not using antibiotics one week before bronchoscopy Results: The characteristics of patients suspected of lung cancer include male (63.7%), average age 60 ± 11.45 years. Respiratory complaints of cough (78.3%) and shortness of breath (65.5%). Most were heavy smokers (30.5%). Normal body mass index (43.8%). Normal leukocyte values (53.5%), normal neutrophils (66.4%) and neutrophil-lymphocyte ratio increased (67.3%). The most histopathological data were adenocarcinoma (50.9%), EGFR no mutation (34%) and negative ALK (29%). Thoracic photographs appear as central lesions (84.5%), > 3 mm (89.9%) and consolidated (64.2%). Thoracic CT scan there was involvement of lymph nodes (67.7%) and there were metastases (71.2%). The bronchial appears as infiltrative masses (27.9%) and edematous mucosa (15.9%). The most diagnoses were lung cancer (71.7%), T4 (85.2%), N2 (37.7%), M1a (42.6%), metastatic pleural effusion (54.9%), stage IV A (64.2%) and PS 1 (49.4%). The most common bacteria in bronchial washing are *Pseudomonas aeruginosa* (13.7%) and *Klebsiella pneumoniae* (11.1%). Conclusion: The most common

bacteria in bronchial washing are *Pseudomonas aeruginosa* and *Klebsiella pneumoniae*. Cough, leukocyte value, anatomy location based on thoracic photo and thoracic CT Scan with contrast, ground glass opacity and pleural effusion affect the presence or absence of bacteria in a bronchial wash of suspected lung cancer patients.