

Analisis Potensi Interaksi Obat pada Pasien Tuberkulosis Paru di Rumah Sakit Universitas Indonesia Periode 2022-2023 = Analysis of Potential Drug Interactions in Pulmonary Tuberculosis Patients at Universitas Indonesia Hospital for the Period 2022-2023

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Abstrak

Tuberkulosis merupakan salah satu penyakit infeksi pernapasan. Terdapat peningkatan kasus tuberkulosis dari tahun ke tahun, sehingga perlu upaya untuk meningkatkan keberhasilan terapi tuberkulosis, salah satunya manajemen interaksi obat. Penelitian ini bertujuan untuk menganalisis potensi interaksi obat pada pasien tuberkulosis di Rumah Sakit Universitas Indonesia periode 2022 - 2023. Penelitian ini menggunakan desain studi cross-sectional, jenis data restrospektif dari rekam medis pasien TBSO dan TBRO mulai usia anak hingga lansia. Analisis interaksi menggunakan Lexi-Interact®. Pasien tuberkulosis paru di Rumah Sakit Universitas Indonesia mayoritas berjenis kelamin laki-laki (51,8%), berusia dewasa (38,2%), memiliki jenis tuberkulosis sensitif obat (56,4%), dan mayoritas pasien memiliki komorbid (81,8%). Hasil analisis menunjukkan dari 110 pasien tercatat sebanyak 256 jenis interaksi obat, berdasarkan kategori risiko sebanyak 14,8% interaksi tergolong kategori B (No action needed), 66,4% interaksi kategori C (Monitor therapy), 15,6% interaksi kategori D (Consider modification therapy), dan 3,1% interaksi kategori X (Avoid combination). Berdasarkan mekanisme, tercatat 33,2% interaksi memiliki mekanisme farmakokinetik, 50,4% mekanisme farmakodinamik, 1,9% mekanisme farmakokinetik dan farmakodinamik, dan 14,5% mekanisme tidak diketahui. Berdasarkan tingkat keparahan 24,2% termasuk kelompok minor, 62,9% kelompok moderate, dan 12,9% kelompok major. Berdasarkan tingkat reliabilitas hanya 0,8% dari 256 jenis interaksi termasuk poor, selain itu 62,1% termasuk fair, 31,6% termasuk good, dan 5,5% termasuk excellent. Hasil uji korelasi Spearman's rho menunjukkan adanya korelasi antara jumlah potensi interaksi obat dengan jumlah obat ($p < 0,05$). Selain itu, hasil uji beda rerata menunjukkan adanya perbedaan rerata interaksi obat pada variabel komorbid, kategori tuberkulosis, dan usia ($p < 0,05$). Dapat disimpulkan terdapat berbagai macam interaksi obat yang berpotensi terjadi pada pasien tuberkulosis di Rumah Sakit Universitas Indonesia, sehingga tenaga kesehatan perlu mempertimbangkan adanya modifikasi terapi dan pemantauan lanjutan terhadap efek samping yang mungkin timbul dari adanya interaksi obat.

.....Tuberculosis is a respiratory infectious diseases. There is an increase in tuberculosis cases, so drug interaction management is needed to improve the therapy. This study aimed to analyze the potential drug interactions in tuberculosis patients at Universitas Indonesia Hospital for the period 2022 - 2023. The design is cross-sectional study, using retrospective data from all of pulmonary TB patients in age children until elderly. Interaction analysis using Lexi-Interact®. The majority of pulmonary tuberculosis patients at Universitas Indonesia Hospital were male (51.8%), aged adults (38.2%), had drug-sensitive tuberculosis (56.4%), and the majority of patients had comorbidities (81.8%). The results showed from 110 patients, 256 types of drug interactions were recorded. Based on the risk category, 14.8% category B (No action needed), 66.4% category C (Monitor therapy), 15.6% category D (Consider modification therapy), and 3.1% category X (Avoid combination). Based on mechanism, 33.2% of interactions had pharmacokinetic mechanism, 50.4% pharmacodynamic mechanism, 1.9% dual mechanism, and 14.5% unknown mechanism. Based on

severity, 24.2% in the minor group, 62.9% in the moderate group, and 12.9% in the major group. Based on the level of reliability, only 0.8% from 256 types of interactions were poor, 62.1% were fair, 31.6% were good, and 5.5% were excellent. Spearman's rho correlation test results showed a correlation between the number of potential drug interactions with the number of drugs ($p < 0.05$). Besides that, the mean difference test results showed a difference in the mean of drug interactions between variable comorbidities, tuberculosis categories, and age ($p < 0.05$). The conclusion is there are various types of drug interactions in tuberculosis patients at Universitas Indonesia Hospital, so health workers should consider modifying therapy and monitoring of side effects that may arise from drug interactions.