

Analisis faktor risiko dari kejadian Adjacent Segment Degeneration Pascaoperasi Anterior Cervical Discectomy and Fusion = Risk factor analysis of Adjacent Segment Degeneration after Anterior Cervical Discectomy and Fusion Surgery

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Abstrak

Pendahuluan: Anterior cervical discectomy and fusion (ACDF) merupakan operasi standar terapi untuk mengatasi masalah tulang servikal seperti herniasi diskus serta spondilosis servikal refrakter. Komplikasi Adjacent segment degeneration setelah ACDF merupakan kejadian yang dapat menyebabkan gejala dan mungkin membutuhkan reoperasi. Sampai saat ini, faktor risiko adjacent segment degeneration setelah operasi ACDF masih menjadi topik diskusi karena perbedaan dari beberapa hasil penelitian yang ada. Maka dari itu, penelitian ini bertujuan untuk menambah informasi terkait faktor risiko adjacent segment degeneration.

Metode: Sebuah penelitian cross sectional dilakukan pada pasien pascaoperasi ACDF lebih dari satu tahun di RSCM dan RSUP Fatmawati. Penelitian ini menilai hubungan faktor risiko usia, jenis kelamin, indeks massa tubuh, riwayat merokok, riwayat diabetes mellitus, jumlah level fusi, dan lokasi fusi terhadap kejadian adjacent segment degeneration pascaoperasi ACDF.

Hasil dan Diskusi: Sebanyak 41 pasien yang menjalani penelitian ini dengan melibatkan 79 level tulang belakang. Rata – rata usia sampel $52,85 \pm 10,41$ tahun dan sebagian besar sampel berjenis kelamin perempuan ($n = 21$; 56,1%). Operasi paling banyak melibatkan lebih dari satu level tulang belakang (75,6%) dengan paling banyak melibatkan tulang belakang C5/C6 ($n=34$; 82,92%). Adjacent segment degeneration terjadi pada 10 pasien (24,39%) pasca ACDF. Tidak ditemukan hubungan signifikan antara faktor risiko usia, jenis kelamin, indeks massa tubuh, riwayat merokok, riwayat diabetes mellitus, jumlah level fusi, dan lokasi fusi terhadap kejadian adjacent segment degeneration pascaoperasi ACDF ($p > 0.05$).

Kesimpulan: Pada studi ini tidak ditemukan hubungan signifikan antara usia, jenis kelamin, indeks massa tubuh, riwayat merokok, riwayat diabetes mellitus, jumlah level fusi, dan lokasi fusi terhadap kejadian adjacent segment degeneration pascaoperasi ACDF.

.....**Introduction:** Anterior cervical discectomy and fusion (ACDF) is a standard surgical therapy for cervical spine issues such as disc herniation and refractory cervical spondylosis. Adjacent segment degeneration (ASD) after ACDF is a complication that can cause symptoms and may necessitate reoperation. To date, risk factors for adjacent segment degeneration following ACDF surgery remain a topic of discussion due to discrepancies in existing research. Hence, this study aims to provide additional information regarding risk factors for adjacent segment degeneration.

Methods: A cross-sectional study was conducted on patients one year or more after ACDF surgery at Cipto Mangunkusumo Hospital and Fatmawati Hospital. This research assesses the relationships between risk factors such as age, gender, body mass index, smoking history, diabetes mellitus history, number of fusion levels, and fusion location with the occurrence of adjacent segment degeneration after ACDF surgery.

Results and Discussion: A total of 41 patients were included in this study, involving 79 spinal levels. The mean age of the sample was 52.85 ± 10.41 years, with the majority being female ($n = 21$; 56.1%). Most

surgeries involved more than one spinal level (75.6%), with the most common level C5/C6 (n=34; 82.92%). Adjacent segment degeneration occurred in 10 patients (24.39%) after ACDF. No significant differences were found between age, gender, body mass index, smoking history, diabetes mellitus history, number of fusion levels, and fusion location with the occurrence of adjacent segment degeneration after ACDF surgery ($p > 0.05$).

Conclusion: This study did not found significant differences between age, gender, body mass index, smoking history, diabetes mellitus history, number of fusion levels, and fusion location with the occurrence of adjacent segment degeneration after ACDF surgery.