

Analisis Faktor yang Berhubungan dengan Lama Waktu Pasien STEMI Sampai di Rumah Sakit Rujukan PCI = Factor Analysis Related to the Length of Time STEMI Patients Arrive at the PCI Referral Hospital

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Deskripsi Lengkap: <https://lib.ui.ac.id/detail?id=9999920556450&lokasi=lokal>

Abstrak

Latar Belakang : STEMI merupakan kasus kegawatan kardiovaskuler yang bersifat mengancam jiwa. Tatalaksana segera dengan reperfusi koroner berupa primary Percutaneous Coronary Intervention (PPCI) menjadi pilihan utama. PPCI efektif diberikan di jam awal onset gejala STEMI. Kedatangan pasien bukan di jam awal serangan masih menjadi masalah tatalaksana STEMI. Mencegah keterlambatan kedatangan pasien bertujuan menyelamatkan miokardium dari kerusakan lebih luas. Penting mencegah keterlambatan tatalaksana STEMI terutama di fase prehospital.

Tujuan: Mengidentifikasi faktor faktor yang mempengaruhi lama waktu pasien STEMI sampai di rumah sakit rujukan PCI.

Metode : Penelitian crosssectional dengan pendekatan consecutive sampling yang melibatkan 100 pasien STEMI.

Hasil: Terdapat hubungan bermakna antara Usia (p: 0,008), tipe gejala STEMI (p: 0,015), keparahan nyeri (p: 0,0001), pilihan fasilitas kontak medis pertama (p: 0,043), dukungan keluarga (p: 0,001), waktu tempuh (p: 0,043) , pengetahuan (p: 0,0001) dengan lama waktu pasien STEMI sampai di RS rujukan PCI. Tidak terdapat hubungan bermakna antara gender (p: 0,585), pendidikan (p: 0,437), kemampuan ekonomi (p: 0,957), riwayat PJK (p: 0,647), riwayat diabetes (p: 0,339) dengan lama waktu pasien STEMI sampai di rumah sakit rujukan PCI. Faktor paling berhubungan dengan lama waktu pasien STEMI sampai di Rumah sakit rujukan PCI adalah tipe gejala STEMI.

Rekomendasi : Edukasi tentang gejala STEMI terutama gejala atipikal tanpa nyeri dada untuk mencegah keterlambatan kedatangan pasien ke fasilitas kegawatan STEMI.

.....Background: STEMI is a life-threatening in cardiovascular disease. Immediate treatment with primary percutaneous coronary intervention (PPCI) is the main choice of management. PPCI is effective in the early hours of STEMI onset. The arrival of patients not in the early hours of the attack is still a problem in the management of STEMI. Preventing delay in patient arrival aims to save the myocardium from severe damage. It is important to prevent delays in the management of STEMI, especially in the prehospital phase.

Objective: To identify the factors influencing the length of time STEMI patients arrive at the PCI referral hospital.

Methods: Cross-sectional study with consecutive sampling involving 100 STEMI patients.

Results: There was a significant relationship between age (p: 0.008), type of STEMI symptoms (p: 0.015), pain severity (p: 0.0001), choice of first medical contact facility (p: 0.043), family support (p: 0.001), travel time (p: 0.043), knowledge (p: 0.0001) with the length of time STEMI patients arrived at the PCI referral hospital. There was no significant relationship between gender (p: 0.585), education (p: 0.437), economic ability (p: 0.957), history of CHD (p: 0.647), history of diabetic (p: 0.339) and the length of time STEMI patients arrived at the PCI referral hospital. The predominant factor related to the length of time STEMI patients arrived at the PCI referral hospital was the type of STEMI symptoms.

Recommendation: Education about STEMI symptoms, especially atypical symptoms without chest pain, to prevent delays in patient arrival to STEMI emergency facilities.