

# Kesintasan 5 Tahun Pasien Lupus Eritematosus Sistemik Di Rscm Dan Faktor-Faktor Yang Memengaruhi = 5 Years Survival Of Systemic Lupus Erythematosus ( SLE ) Patients At Rscm And Predispose Factors

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## Abstrak

Latar Belakang : Lupus Eritematosus Sistemik ( LES ) adalah penyakit reumatik autoimun yang ditandai adanya inflamasi luas yang melibatkan hampir seluruh sistem organ. Penyakit ini menyerang wanita muda dengan insiden puncak usia 15-40 tahun. Manifestasi klinik LES beragam tergantung organ yang terlibat. Risiko kematian pada pasien LES meningkat apabila tidak terdiagnosis dan tidak ditangani secara tepat.

Tujuan : Mengetahui kesintasan pasien LES di RSCM beserta faktor-faktor yang memengaruhi kesintasan.

Metode : Penelitian ini merupakan penelitian kohort retrospektif dengan menggunakan data rekam medis dari pasien yang terdiagnosis LES pertama kali pada tahun 2014-2019 di RSCM. Dilakukan analisis survival terhadap usia, jenis kelamin, anemia hemolitik, trombositopenia, NPSLE, anti ds-DNA tinggi, C3 dan C4 rendah, penggunaan

glukokortikoid dosis tinggi, limfopenia, Anti Cardiolipin Antibody ( ACA ) positif, penyakit kardiovaskular, dan nefritis lupus. Dilakukan analisis multivariat dengan cox regression.

Hasil: Terdapat 448 subjek yang diteliti. Kesintasan lima tahun pasien LES di RSCM adalah 88%. Rerata kesintasan 56 bulan (IK95% 55-57). Pada analisis multivariat, ditemukan bahwa NPSLE [HR 3,595 (IK95% 1,932-6,688)], kadar C3 dan C4 rendah [HR 2,501 (IK95% 1,330-4,701)], penyakit kardiovaskuler [HR 2,851 (IK95% 1,198-6,787)], dan anemia hemolitik [HR 2,106 (IK95% 1,008-4,404)] berpengaruh signifikan terhadap kesintasan 5 tahun pasien LES.

Kesimpulan: Kesintasan kumulatif 5 tahun pasien LES di RSCM adalah 88% dengan neuropsikiatri lupus (NPSLE), kadar C3 dan C4 rendah, penyakit kardiovaskuler, dan anemia hemolitik berpengaruh signifikan terhadap kesintasan pasien LES di RSCM.

.....Background : Systemic Lupus Erythematosus (SLE) is an autoimmune rheumatic disease characterized by widespread inflammation involving almost all organ systems. This disease attacks young women with a peak incidence aged 15-40 years. The clinical manifestations of SLE vary depending on the organs involved. The risk of death in SLE patients increases if it is not diagnosed and treated appropriately.

Objective : knowing the survival of SLE patients at RSCM along with the factors that influence survival.

Methods : This study is a retrospective cohort study using medical record data from patients diagnosed with SLE for the first time in 2014-2019 at RSCM. Survival analysis was carried out on age, gender, hemolytic anemia, trombocytopenia, NPSLE, high anti ds-DNA, low C3 and C4, use of high doses of glucocorticoids, lymphopenia, positive Anti-Cardiolipin Antibody (ACA), cardiovascular disease, and lupus nephritis.

Multivariate analysis with cox regression was carried out.

Results : There were 448 subjects studied. The 5 year survival of SLE patients at RSCM is 88%. Mean survival time 56 months (95%CI 55-57). In the multivariate analysis, it was found that NPSLE [HR 3,595 (95%CI 1,932-6,688)], low C3 dan C4 [HR 2,501 (95%CI 1,330-4,701)], cardiovascular disease [HR 2,851 (95% CI 1,198-6,787 )], dan hemolytic anemia [HR 2,106 (95% CI 1,008-4,404)] had a significant effect on

5 year SLE survival.

Conclusion : The 5 year survival cumulative of SLE patients at RSCM is 88% with neuropsychiatric lupus (NPSLE), low C3 dan C4, cardiovascular disease, dan hemolytic anemia have a significant effect on the survival of SLE patients at RSCM.