

Gambaran kadar kompleks oksidasi LDL/beta 2 glikoprotein 1(OxLDL/2GP1) pada pasien lupus eritematosus sistemik di Rumah Sakit Cipto Mangunkusumo Jakarta = Levels of OxLDL/2GP1 complexes among systemic lupus erythematosus patients in Cipto Mangunkusumo Hospital Jakarta / Gusti Ayu Putu Yunihati

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Abstrak

ABSTRAK

Latar Belakang. Lupus Eritematosus Sistemik (LES) merupakan penyakit autoimun multisistem mengenai multiorgan akibat produksi antibodi dan kompleks imun. Memiliki mortalitas 3 kali lebih tinggi dibandingkan populasi umum dimana saat awal berkaitan dengan infeksi dan inflamasi, sedangkan jangka panjang berkaitan dengan aterosklerosis. Adapun aterosklerosis yang terjadi timbul lebih cepat dan faktor risiko tradisional (diabetes melitus, hipertensi, hiperkolesterol, obesitas, merokok dan lainnya) dan terapi steroid belum dapat menjelaskan hal ini. Diduga kompleks OxLDL/2GP1 memainkan peranan dalam proses imunopatologi terjadinya aterosklerosis dan trombosis yang dimediasi oleh adanya penyakit autoimun.

Metode. Desain penelitian berupa studi potong lintang. Subyek penelitian adalah pasien LES poliklinik Imunologi RSUPN Ciptomangunkusumo Jakarta yang telah dilakukan pemeriksaan Carotid Duplex dan Transcranial Doppler, serta memenuhi kriteria inklusi dan eksklusi. Subyek diperoleh secara konsekutif. Pada subyek dilakukan wawancara, pengisian kuesioner, pemeriksaan fisik umum dan neurologi, dan pengambilan darah vena untuk diperiksa kompleks OxLDL/2GP1. Dilakukan analisis data menggunakan perangkat SPSS 17.0

Hasil. Diperoleh 40 subyek pasien LES wanita tanpa drop out. Kadar kompleks OxLDL/2GP1 pada pasien LES dengan aterosklerosis dan tanpa aterosklerosis masing-masing meannya 0,37 unit/ml dan 0,31 unit/ml. Berdasarkan beberapa faktor risiko tradisional aterosklerosis (usia, LDL, DM, hipertensi dan obesitas) didapatkan kadar kompleks OxLDL/2GP1 pada pasien aterosklerosis maupun tidak, memiliki mean >0,25 unit/ml.

Kesimpulan. Pasien LES dengan atau tanpa aterosklerosis memiliki kadar kompleks OxLDL/2GP1 lebih dari 0,25 unit/ml namun tidak terdapat perbedaan bermakna. Demikian pula pada aterosklerosis yang disertai atau tanpa disertai faktor risiko tradisional.

ABSTRACT

Background. Systemic Lupus Erythematosus (SLE) is a multisystem autoimmune disease that can affect various organs due to production of antibodies and immune complexes. The mortality rate of SLE patients is three times higher than the general population. In early disease, mortality is related to infection and inflammation, whereas in advanced stage it is related to atherosclerosis. In SLE, atherosclerosis occurs faster; however the traditional risk factors (diabetes mellitus (DM), hypertension, hypercholesterolemia, obesity, smoking, etc.) and steroid therapy have not been able to explain this phenomenon. It is hypothesized that the OxLDL/β₂GP1 complexes play roles in the immunopathological process of atherosclerosis and thrombosis that is mediated by the presence of autoimmune disease.

Method. A cross-sectional study was conducted. The study subjects were SLE patients from immunology clinic of Cipto Mangunkusumo Hospital, Jakarta who previously have underwent carotid duplex and transcranial Doppler examination and also met the inclusion and exclusion criteria. Subjects were obtained consecutively; they were interviewed, asked to fill questionnaire, underwent general and neurological physical examination, and their venous blood samples were collected. Data analysis were done by using SPSS 17.0.

Result. A total of 40 SLE patients were included in this study; all subjects were female and there were no drop out cases. The mean of OxLDL/β₂GP1 complexes level in SLE patients with and without atherosclerosis were 0,37 unit/ml and 0,31 unit/ml, consecutively. Based on several traditional risk factors for atherosclerosis (age, LDL, DM, hypertension and obesity), the mean of OxLDL/β₂GP1 complexes level in patients with and without atherosclerosis is > 0,25 unit/ml.

Conclusion. SLE patients with or without atherosclerosis have level of OxLDL/β₂GP1 complexes of more than 0,25 unit/ml, but there were no significant difference. Similar results were found in atherosclerosis with or without traditional risk factors.