

Apolipoprotein A-1 dan B pada penyakit jantung koroner hubungannya dengan hasil angiogram

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Abstrak

Untuk menilai peranan pemeriksaan apolipoprotein A-1 dan B dalam hubungan dengan adanya dan luasnya PJK,dilakukan penelitian pada 30 laki-laki (berusia 30-60 tahun, rata-rata 46 tahun) yang diperiksa angiografi koroner di RS Jantung Harapan Kita, Jakarta, antara bulan Desember 1989 sampai dengan akhir Februari 1990.

Apolipoprotein diperiksa secara nephelometry immunoassay'sesuai 'Lipid Research Centre'. Selain itu diperiksa juga kolesterol total, trigliserida, kolesterol HDL, kolesterol LDL, rasio kolesterol total / kolesterol HDL, serta beberapa faktor risiko.

Pada 30 angiogram koroner yang diteliti, 21 penderita (70%) ditemukan stenosis koroner dan 9 penderita (30%) tak ditemukan stenosis koroner. Kadar apo A-1, apo B, rasio apo B/A-1, kolesterol total, kolesterol HDL, kolesterol LDL, rasio kolesterol total/kolesterol HDL dan rokok berbeda bermakna antara kelompok penderita dengan stenosis dan tanpa stenosis ($p < 0,05$).

Dengan analisis multivariat model diskriminan didapatkan bahwa yang dapat menjadi prediktor independen ada tidaknya PJK secara angiografi ialah : apo A-1, rasio kolesterol total/kolesterol HDL, rokok, apo B dan rasio apo B/A-1. Dengan analisis varians antar kelompok stenosis, rasio apo B/A-1 paling baik membedakan luasnya stenosis.

Disimpulkan bahwa pemeriksaan apolipoprotein bermanfaat sebagai prediktor independen adanya dan luasnya PJK secara angiografi.

.....To assess the potential use of serum apolipoprotein A1 and B as predictor for coronary artery disease, these apolipoproteins were quantified by rate nephelometry in 30 male patients (age 30 to 60 years, mean 46,5 years) who underwent coronary angiography in the National Cardiac Centre, Jakarta.

In addition, we analysed lipoprotein profile including serum total cholesterol, triglyceride, HDL cholesterol and LDL cholesterol levels by enzymatic method, and also some other risk factors.

There were 21 patients with angiographically documented coronary atherosclerosis and 9 patients without coronary artery atherosclerosis. The levels of apolipoprotein A1, apolipoprotein B, total cholesterol; HDL cholesterol, LDL cholesterol and smoking were significant difference between the two groups ($p < 0,05$). Using multivariate discriminant analysis, there were 5 independent predictors for the presence or absent of angiographically documented coronary artery disease: the level of apolipoprotein A1, the ratio of total cholesterol / HDL cholesterol, smoking, level of apolipoprotein B and the ratio of apolipoprotein E / A1. Analysis of variance between the groups of stenoses showed that the ratio of apolipoprotein B/A-1 was a good discriminator between no stenose or 1, 2, 3 vessels disease.

Results of this study indicate that measurement of apolipoprotein can serve as a good predictor for coronary artery disease.