

Interleukin-10 serum level in acute coronary syndrome patients

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Abstrak

Tujuan Membandingkan kadar IL-10 pada pasien sindrom koroner akut (SKA) dan pasien dengan penyakit jantung koroner (PJK). Metode Subyek penelitian adalah pasien SKA yang dirawat di ruang rawat jantung intensif RSCM/FKUI, RS Persahabatan, RS MMC, dan RS Medistra Jakarta antara bulan Mei 2005 sampai Mei 2006. Pasien PJK rawat jalan diambil sebagai pembanding. Kadar seru interleukin 10 (IL-10) diukur pada kedua kelompok dengan metode radioimunoassay. Perbandingan kedua kelompok dilakukan dengan uji t-test tidak berpasangan. Untuk mengetahui apakah kadar IL-10 dapat digunakan sebagai prediksi SKA, maka dilakukan juga perhitungan sensitivitas dan spesifisitas IL-10. Hasil Telah dianalisa data dari 146 penderita (84 SKA dan 62 PJK). Kadar IL-10 pada penderita SKA ($7.37 \text{ pg/mL} + 7.81$, CI 95% 5.68-9.07) lebih tinggi dibanding dengan penderita PJK ($1.59 \text{ pg/mL} + 1.55$, CI 95% 1.2-1.98). Cut-off point optimum untuk kadar IL-10 adalah $>1.95 \text{ pg/mL}$, dengan sensitivitas 79.76 % dan spesifisitas 77.42 %. Kesimpulan Kadar IL-10 pada kelompok SKA lebih tinggi secara bermakna dibanding kelompok PJK. Kadar IL-10 cukup baik digunakan sebagai prediksi SKA, walaupun tidak sebaik CRP.

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**Abstract
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Aim To compare plasma IL-10 concentrations in patients with Acute Coronary Syndrome (ACS) with those in Coronary Artery Disease (CAD). Methods ACS patients hospitalized in intensive coronary care unit (ICCU) of Cipto Mangunkusumo Hospital/Faculty of Medicine University of Indonesia (CMH/FMUI), Persahabatan Hospital, MMC Hospital, and Medistra Hospital, Jakarta, between May 2005 and May 2006, were included in this study. The ambulatory CAD patients were taken as comparator. The serum IL-10 level was measured by immunoassay method, and compared by using Independent Student's t-test. To investigate whether IL-10 serum level could predict ACS, the sensitivity and specificity of this parameter towards SKA in various IL-10 serum levels were calculated as well. Results In this observational study, as many as 146 subjects were analyzed, consisting of 84 ACS patients, and 62 coronary artery disease (CAD). The IL-10 level was higher in the group of ACS patients ($7.37 \text{ pg/mL} + 7.81$, CI 95% 5.68-9.07) than that in CAD patients ($1.59 \text{ pg/mL} + 1.55$, CI 95% 1.2-1.98). The optimal cut-off point for serum IL-10 level is $>1.95 \text{ pg/mL}$, with 79.76 % sensitivity and 77.42 % specificity. Conclusion The IL-10 level was higher in the ACS patients compared to that in CAD patients. Serum IL-10 measurement is a quite superior method to distinguish acute and stable condition, even though it is not as good as hsCRP for the same purpose.