

Gambaran kadar lipid pada penggunaan obat anti epilepsi generasi pertama tunggal di Poli Neurologi Rumah Sakit Cipto Mangunkusumo = Lipid profile in using of first generation of anti epileptic drugs as monotherapy at Cipto Mangunkusumo Hospital Outpatient Clinic

Dian Cahyani, author

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Abstrak

Latar Belakang. Pemberian obat anti epilepsi (OAE) generasi pertama dalam jangka waktu lama sering menimbulkan efek samping seperti perubahan kadar lipid plasma yang akan meningkatkan resiko penyakit kardiovaskular dan cerebrovaskular. OAE ini banyak digunakan di poli neurologi RSCM. Diharapkan dengan diketahuinya gambaran kadar lipid plasma pada penggunaan OAE generasi pertama tunggal dan prevalensi dislipidemia, dapat dilakukan penapisan dini dan preventif timbulnya penyakit kardio dan cerebrovaskular.

Metode. Desain penelitian berupa studi potong lintang (cross sectional). Subjek penelitian adalah orang dengan epilepsi yang mendapat karbamazepin, fenitoin, fenobarbital dan valproat tunggal minimal 6 bulan. Subjek diperoleh secara konsekutif, kemudian dilakukan wawancara data medis, recall makanan, pemeriksaan fisik dan kadar lipid darah. Pemeriksaan kadar lipid dilakukan setelah puasa minimal 8 jam. Hasil. Diperoleh 59 subjek, 27 karbamazepin, 16 fenitoin, 10 fenobarbital dan 6 valproat. Prevalensi dislipidemia sebesar 20.3%. Rerata kadar kolesterol total 193.5 ± 31.9 ; LDL 115.3 ± 23.9 ; HDL 59.5 ± 18.8 dan trigliserida 117.0 ± 63.6 . Rerata kadar kolesterol total, LDL dan trigliserida fenitoin lebih tinggi dari OAE lain. Rerata HDL terendah ditemukan pada valproat. Didapat perbedaan bermakna secara statistik rerata kolesterol total, LDL dan trigliserida berdasarkan jenis OAE. Didapat hubungan bermakna secara statistik antara durasi penggunaan OAE dengan tingginya kadar HDL pada karbamazepin dan fenobabital. Kesimpulan. Rerata kadar lipid dibawah rerata kadar lipid populasi. Dislipidemia lebih banyak ditemukan pada kelompok fenitoin. Durasi penggunaan OAE berhubungan dengan kadar HDL tinggi.

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Background. Longterm therapy with first generation of antiepileptic drugs (AED) has been associated with adverse effects, such as serum lipid profile changes which can increase the risk of cardiovascular and cerebrovascular disease. These AEDs are commonly used in outpatient clinic at Cipto Mangunkusumo hospital. The aim of this study is knowing lipid profile in first generation AEDs consumption.

Method. This was cross sectional study. The subjects of this study were epilepsy patients receiving carbamazepine, phenytoin, phenobarbital and valproate as monotherapy for more than 6 months. This study used consecutive sampling. All subjects were interviewed, food recalled and underwent physical examination and measurements serum lipid profile. Blood samples for serum lipid profile were collected at least after 8 hours overnight fasting.

Result. There were 59 patients, 27 with carbamazepine therapy, 16 phenytoin, 10 phenobarbital, 6 valproate. Prevalence of dyslipidemia is 20.3%. Mean of total cholesterol is 193.5 ± 31.9 ; LDL 115.3 ± 23.9 ; HDL 59.5 ± 18.8 and triglyceride 117.0 ± 63.6 . Patients with phenytoin showed the highest mean of total cholesterol, LDL and triglyceride. Patients with valpoate showed the lowest mean of HDL. There was significant difference in mean of cholesterol total, LDL and triglyceride according to AEDs. The duration of

AEDs therapy was significantly associated with higher HDL in patients with carbamazepine and Phenobarbital.

Conclusion. Mean of lipid profile among people with epilepsy was lower than population. Dyslipidemia were more frequent in phenytoin. The duration of AEDs therapy was significantly associated with higher HDL.