

Insidens kolonisasi dan infeksi clostridium difficile pada pasien yang mendapat terapi antibiotika dalam tujuh hari perawatan di Rumah Sakit Cipto Mangunkusumo = The incidence of clostridium difficile colonization and infection among hospital inpatients prescribed antibiotics in seven days hospitalization at Cipto Mangunkusumo Hospital

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Abstrak

Latar belakang. Berbagai studi sebelumnya menunjukkan bahwa insidens kolonisasi dan infeksi C.difficile semakin meningkat, terutama pada pasien rawat inap yang mendapat terapi antibiotika. Namun belum ada penelitian yang mendapatkan data kedua insidens tersebut di Indonesia, terutama di RSCM.

Tujuan. Untuk mengetahui insidens kolonisasi dan infeksi C.difficile pasien rawat inap yang mendapat terapi antibiotika di RSCM.

Metode. Dilakukan studi kohort prospektif berbasis surveilans pada 96 pasien rawat inap yang mendapat terapi antibiotika di RSCM pada periode penelitian. Dilakukan pemeriksaan feses dengan uji kromatografi cepat C.DIFF QUIK CHEK COMPLETETM pada awal dan akhir penelitian. Dilakukan follow-up selama 5-7 hari perawatan pada semua pasien. Insidens kolonisasi strain non-toksigenik adalah pasien yang memiliki hasil pemeriksaan fesesnya konversi GDH/Toksin -/- saat awal perawatan menjadi GDH/Toksin +/-, Insidens kolonisasi strain toksigenik adalah pasien yang memiliki konversi GDH/Toksin -/- saat awal perawatan menjadi GDH/Toksin +/+. Insidens infeksi adalah pasien yang memiliki konversi GDH/Toksin -/- saat awal perawatan menjadi GDH/Toksin +/+ yang disertai satu atau lebih gejala yang berhubungan dengan infeksi C.difficile.

Hasil. Dari 96 subjek penelitian, 13 subjek mengalami kolonisasi non-toksigenik; 8 subjek mengalami kolonisasi toksigenik; 9 subjek mengalami infeksi. Terdapat 11 subjek yang mengalami gejala klinis, namun hasil pemeriksaan fesesnya tidak ditemukan toksin yang positif (2 subjek hanya mengalami kolonisasi non-toksigenik dan 9 subjek tidak mengalami kolonisasi atau infeksi) sehingga dianggap bukan merupakan infeksi C.difficile.

Kesimpulan. Insidens kolonisasi C.difficile adalah 22%, dimana kolonisasi strain non-toksigenik adalah 14% (IK95% 13-16) dan strain toksi.

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Background. Previous studies showed that there have been a significant increasing of the incidence of C.difficile colonization and infection, particularly among hospital inpatients prescribed antibiotics.

However, there is no such data available in Indonesia, mainly at Cipto Mangunkusumo Hospital.

Objective. To determine the incidence of Clostridium difficile colonization and infection among hospital inpatients prescribed antibiotics at Cipto Mangunkusumo Hospital.

Methods. A surveillance-based prospective cohort study was conducted on 96 inpatients prescribed antibiotics at Cipto Mangunkusumo Hospital during the study period. All patient was followed-up for 5-7 days hospitalization. We obtained rectal swabs or stool samples on admission and day 5-7 of hospitalization and performed a rapid chromatography test C.DIFF QUIK CHEK COMPLETETM to determine

colonization or infection. Incidence of non-toxigenic colonization was defined as a conversion of baseline result GDH/toxin -/- into GDH/toxin +/- as the second result. Incidence of toxigenic colonization was defined as a conversion of baseline result GDH/toxin -/- into GDH/toxin +/+ as the second result. Incidence of infection was defined as a conversion of baseline result GDH/toxin -/- into GDH/toxin +/+ as the second result, accompanied by one or more *C.difficile* infection-associated clinical symptoms.

Results. A total of 96 subjects were included in the study; 13, 8 and 9 had a non-toxigenic colonization, toxigenic colonization, and infection, respectively. 11 subjects with clinical symptoms could not be determined whether they had a *C.difficile* infection because of the “toxin-negative” findings from their stool examination (2 subjects had non-toxigenic colonization and 9 subjects had neither colonization nor infection).

Conclusion. The incidence of *C.difficile* colonization was 22%, which 14% (95% CI 13-16) was the incidence of non-toxigenic colonization and 8% (95% CI 7-10) was the incidence of toxigenic colonization. The incidence of *C.difficile* infection was 9% (95% CI 8-11).