Uji diagnostik sistem skor sindrom frailty berdasarkan cardiovascular health study, study of osteoporotic fracture, dan indeks frailty berbasis comprehensive geriatric assessment dibandingkan dengan indeks frailty 40 item pada pasien usia lanjut = Diagnostic test of cardiovascular health study, study of osteoporotic fracture, and frailly index comprehensive geriatric assessment scoring system for the diagnosis of frailty syndrome compared with frailty index 40 items in elderly patients

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Abstrak

Latar Belakang: Pendekatan indeks frailty 40 item (FI-40) dianggap sebagai alat terbaik untuk evaluasi mortalitas dan hospitalisasi sindrom frailty, tetapi sulit diterapkan dalam praktik klinis sehari-hari. Pendekatan dengan sistem skor CHS, SOF, dan FI-CGA lebih mudah diterapkan dalam praktik klinis sehari-hari, namun hingga saat ini belum ada data validasi di Indonesia.
Tujuan: Mendapatkan rekomendasi mengenai alat ukur sindrom frailty yang mudah diterapkan dalam praktik klinis sehari-hari di Indonesia.
Metode: Penelitian ini merupakan studi potong lintang dengan pendekatan uji diagnostik yang dilakukan pada pasien di poliklinik Geriatri Rumah Sakit Cipto Mangunkusumo, dengan usia 60 tahun, pada periode Mei-Juni 2013. Setiap subjek dinilai menggunakan sistem skor CHS, SOF, FI-CGA, dan FI-40. Dilakukan penilaian sensitivitas, spesifisitas, nilai prediksi positif (NPP), nilai prediksi negatif (NPN), rasio kemungkinan positif (RK+), dan rasio kemungkinan negatif (RK-) untuk masing-masing sistem skor CHS, SOF, dan FI-CGA dibandingkan dengan FI-40.
Hasil: Proporsi individu yang termasuk dalam kategori frail, pre-frail, dan fit berdasarkan indeks frailty 40 item berturut-turut adalah 25,3%, 71%, dan 3,7%. Untuk membedakan individu frail dengan tidak frail, skor CHS memiliki sensitivitas 41,2%, spesifisitas 95%, NPP 73,7%, NPN 82,7%, RK+ 8,41 dan RK- 0,62. Skor SOF memiliki sensitivitas 17,6%, spesifisitas 99,5%, NPP 92,3%, NPN 78,1%, RK+ 35,2 dan RK- 0,83. Sedangkan skor FI-CGA memiliki sensitivitas 8,8%, spesifisitas 100%, NPP 100%, NPN 76,4%, RK+ tak terbatas, dan RK- 0,91.
Kesimpulan: Tidak ada sistem skor yang dapat digunakan sebagai alat skrining yang baik untuk sindrom frailty, namun masing-masing sistem skor dapat digunakan sebagai alat diagnostik yang baik untuk sindrom frailty.
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Background: The Frailty Index 40-item (FI-40) approach is considered the best tool for evaluating mortality and hospitalization outcomes related to frailty syndrome, although it is challenging to implement in daily clinical practice. The CHS, SOF, and FI-CGA scoring systems are easier to use in daily practice, but there is no validation data available in Indonesia.
Aim: To obtain recommendations for a frailty syndrome diagnostic tool that is easy to implement in daily clinical practice in Indonesia.
Methods: This was a cross-sectional study with a diagnostic test approach conducted on patients aged 60

years at the Geriatric Outpatient Clinic of Cipto Mangunkusumo Hospital from May to June 2013. Each subject was assessed using the CHS, SOF, FI-CGA, and FI-40 scoring systems. Sensitivity, specificity, positive predictive value (PPV), negative predictive value (NPV), positive likelihood ratio (LR+), and negative likelihood ratio (LR-) were calculated for each scoring system compared to FI-40.
Results: The proportions of frail, pre-frail, and robust individuals based on the 40-item frailty index were 25.3%, 71%, and 3.7%, respectively. To differentiate between frail and non-frail individuals, the CHS score showed a sensitivity of 41.2%, specificity of 95%, PPV of 73.7%, NPV of 82.7%, LR+ of 8.41, and LR- of 0.62. The SOF score showed a sensitivity of 17.6%, specificity of 99.5%, PPV of 92.3%, NPV of 78.1%, LR+ of 35.2, and LR- of 0.83. The FI-CGA score showed a sensitivity of 8.8%, specificity of 100%, PPV of 100%, NPV of 76.4%, LR+ infinite, and LR- of 0.91.
Conclusion: No scoring system was found to be suitable as a screening tool for frailty syndrome; however, all scoring systems can be used as effective diagnostic tools for frailty with good predictive ability.