

Efek sildenafil hipertensi paru sekunder akibat penyakit jantung bawaan lesi pirau kiri ke kanan pasca tindakan korektif = Sildenafil for secondary pulmonary hypertension due to left to right shunt after corrective procedure

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Abstrak

Latar belakang: Hipertensi paru (HP) merupakan penyulit yang sering terjadi pada anak dengan penyakit jantung bawaan (PJB) lesi pirau kiri ke kanan. Penatalaksanaan HP yang reversibel adalah tindakan korektif terhadap PJB. Morbiditas dan mortalitas HP pasca-tindakan korektif cukup tinggi. Penggunaan vasodilator oral (sildenafil) dikatakan bermanfaat untuk menurunkan tekanan arteri pulmonalis pasca-tindakan korektif. Tujuan: menganalisis perbedaan tekanan arteri pulmonalis serta luaran klinis antara kelompok sildenafil dan kelompok placebo, pada pasien HP akibat PJB, yang telah mendapat tindakan korektif.

Metodologi: Pasien PJB pirau kiri ke kanan usia < 18 tahun yang direncanakan dilakukan tindakan korektif, dirandomisasi secara acak ganda ke dalam kelompok sildenafil atau plasebo. Sildenafil diberikan per-oral dengan dosis berdasarkan berat badan, diberikan 3 hari pasca-tindakan selama 30 hari. Pemeriksaan klinis dan tekanan arteri pulmonalis yang dianalisis dengan ekokardiografi dilakukan sebelum, 3 hari, serta 30 hari pasca-tindakan korektif.

Hasil: Selama periode Juli 2013 - Juni 2014 terdapat 36 pasien yang direkrut (17 plasebo dan 19 sildenafil). Tidak ada perbedaan tekanan arteri pulmonalis pasca-tindakan korektif dan 30 hari pasca-perlakuan pada kedua kelompok. Tidak ada perbedaan yang bermakna pada luaran klinis pasca-tindakan korektif antara kedua kelompok. Tidak dijumpai reaksi samping obat.

Simpulan: Sildenafil tidak memengaruhi penurunan tekanan arteri pulmonalis pasca-tindakan korektif, disebabkan HP akibat hiperkinetik yang turun karena penutupan defek.

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Background. Pulmonary hypertension (PH) was a common complication congenital heart defect (CHD) due to left to right shunt. Corrective procedure by surgery or catheterization intervention is the therapy of choice for reversible PH. Since morbidity and mortality of PH after correction was high, Sildenafil as a selective vasodilator for pulmonary artery was used in many recent studies to decrease pulmonary artery pressure. Objectives. To evaluate the role of sildenafil in pulmonary artery pressure and clinical outcome after corrective procedure of left to right shunt CHD.

Methods. Left to right shunt patients aged < 18 year-old were scheduled for corrective treatment were randomized, double-blind, to receive either sildenafil or placebo orally, given day 3rd to day 30th after corrective procedure. Clinical and pulmonary artery pressure were evaluate using echocardiography before, 3 days and 30 days after corrective procedure and receiving the drug.

Results. During July 2013 - June 2014, 36 patients were included, 17 in placebo and 19 in the sildenafil groups. There was no differences in pulmonary artery pressure and clinical outcome after corrective procedure in the two groups. There were no adverse events during the treatment.

Conclusion. Sildenafil seems has no effect for decreasing pulmonary artery pressure since the PH was due to hyperkinetic, therefore, pulmonary artery pressure is back to normal soon after corrective procedure.