Perbedaan kadar siga saliva pada penderita gingivitis antara anak talasemia beta mayor dan anak normal = The difference of slgA concentration on gingivitis patients between thalassemia beta major children and normal children

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Abstrak

Talasemia beta mayor merupakan suatu penyakit darah yang ditandai dengan tidak ada atau menurunnya produksi rantai protein beta dalam globulin yang mengakibatkan anemia mikrositik dengan derajat keparahan yang bervariasi. Perawatan untuk penderita talasemia beta mayor adalah dengan melakukan transfusi darah secara rutin. Kondisi gingivitis kerap kali juga ditemukan pada anak talasemia beta mayor. Adanya produksi sIgA saliva merupakan suatu tanda aktifnya respons imun humoral dalam rongga mulut. Penelitian ini bertujuan untuk menganalisis perbedaan kadar sIgA saliva pada penderita gingivitis antara anak talasemia beta mayor dan anak normal. Subjek penelitian sebanyak 32 anak dengan gingivitis moderat berusia 5-8 tahun, 16 anak penderita talasemia beta mayor dan 16 anak normal. Sampel saliva yang diambil diukur kadar sIgA salivanya dengan menggunakan metode ELISA.
Hasil penelitian menunjukkan perbedaan bermakna antara kadar sIgA saliva anak talasemia beta mayor dan anak normal dengan hasil rerata pada anak talasemia beta mayor 186.136 ± 92.342 g/mL dan anak normal 111.541 ± 71.000 g/mL. Pada penelitian ini dapat disimpulkan bahwa terdapat perbedaan bermakna antara kadar sIgA saliva penderita gingivitis antara anak talasemia beta mayor dan anak normal.
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Thalassemia beta major is a blood disorder that is characterized by a decrease or absence of beta protein chain production in globulins, which caused various degree of microcytic anemia. People with thalassemia beta major require scheduled blood transfusion as treatment. Gingivitis is a common oral finding, especially in children with the disorder. The production of salivary IgA (sIgA) is a sign of active humoral immune response in the oral cavity.
The purpose of this research is to analyze the difference of salivary IgA between thalassemia beta major children and normal children, both having gingivitis. Thirty-two children aged 5-8 years old with moderate gingivitis were taken as subjects, consisting of 16 thalassemia beta major children and 16 normal children. The level of salivary IgA was measured with ELISA method.
The result showed a significant difference of salivary IgA levels between thalassemia beta major children (186.136 ± 92.342 g/mL) and normal children (111.541 ± 71.000 g/mL). In conclusion there is a significant difference of salivary IgA levels in thalassemia beta major children with gingivitis and normal children with gingivitis.