Korelasi nilai fungsi sistolik ventrikel kiri antara echocardiography 2D dengan dual source computed tomography (DSCT) jantung pada penyakit jantung koroner stabil di RSUPN Cipto Mangunkusumo = Correlation of left ventricular systolic function value between echocardiography 2D and cardiac dual source computed tomography (DSCT) in stable coronary heart disease at Cipto Mangunkusumo Hospital

Sonya Anasrul, author

Abstrak

[ABSTRAK
Latar belakang dan tujuan: Menentukan korelasi nilai Ejection Fraction (EF) ventrikel kiri pada echo 2D dan DSCT jantung pada pasien Penyakit Jantung Koroner (PJK) stabil di RSUPN Cipto Mangunkusumo, sehingga nilai EF ventrikel kiri DSCT jantung dapat dijadikan acuan untuk evaluasi, penatalaksanaan dan prognosis pada PJK stabil yang mempunyai indikasi dilakukan CT jantung.
Metode: Analisa retrospektif dari 30 pasien PJK stabil yang menjalani pemeriksaan echo 2D dan DSCT jantung dengan jarak waktu 3 bulan, meliputi penilaian EF ventrikel kiri. Berdasarkan nomor rekam medis yang ada, dilakukan pengambilan data EF ventrikel kiri echo 2D serta data tambahan lainnya. Nilai EF ventrikel kiri secara DSCT di evaluasi kembali pada cardiac workstation (Siemens, Leonardo), kemudian ditentukan bagaimana korelasinya dengan nilai EF ventrikel kiri secara echo 2D. Analisis statistik penelitian ini menggunakan uji Spearman
Hasil: Terdapat perbedaan nilai EF ventrikel kiri sebanyak 4% antara echo 2D dengan DSCT jantung. Perbedaan sebanyak 4% ini tidak bermakna signifikan secara klinis namun bermakna secara statistik. Nilai R Spearman yang didapat adalah 0,17 sementara nilai p 0,364 (p > 0,005), artinya tidak terdapat korelasi antara nilai EF ventrikel kiri secara echo 2D dengan DSCT jantung pada pasien PJK stabil yang menjalani pemeriksaan echo 2D dan DSCT jantung dengan jarak 3 bulan di RSUPN Cipto Mangunkusumo.
Kesimpulan: Walaupun pada penelitian ini secara statistik tidak berkorelasi, namun pada keadaan hasil echo yang borderlineatau pada pasien PJK stabil yang mempunyai indikasi dilakukan CT jantung, nilai EF ventrikel kiri pada CT dapat menjadi acuan untuk penatalaksanaan selanjutnya.
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ABSTRACT
Background and Objectives: to determine the correlation left ventricle Ejection Fraction (EF) between echo 2D and cardiac DSCT in Coronary Heart Disease (CHD) patients at Cipto Mangunkusumo Hospital, so that the value of the left ventricular EF cardiac DSCT can be used as a reference for the evaluation, treatment and prognosis in stable CHD who have an indication of cardiac CT.
Methods: A retrospective analysis of 30 patients with stable CHD who underwent 2D echo and cardiac DSCT with interval 3 months, include assessment of left ventricular EF. Based on the existing medical record number, performed data collection left ventricular EF 2D echo and other additional data. Value of left ventricular EF in DSCT in return on cardiac evaluation workstation (Siemens, Leonardo), then determined how its correlation with left ventricular EF values in 2D echo. Statistical analysis of this study using the

Spearman test.
Result: There are differences in left ventricular EF value by 4% between 2D echo with cardiac DSCT. The difference of 4% is not clinically significant, but statistically significant. Spearman R value obtained was 0.17 while the p-value 0.364 (p> 0.005), meaning that there is no correlation between the value of the left ventricular EF in 2D echo and cardiac DSCT in patients with stable CHD who underwent 2D echo and cardiac DSCT with distance 3 month in Cipto Mangunkusumo hospital.
Conclusion: Although this study was not statistically correlated, but the results echo borderline or in stable CHD patients who had cardiac CT indications, left ventricular EF values on CT can be a reference for further management.;Background and Objectives: to determine the correlation left ventricle Ejection Fraction (EF) between echo 2D and cardiac DSCT in Coronary Heart Disease (CHD) patients at Cipto Mangunkusumo Hospital, so that the value of the left ventricular EF cardiac DSCT can be used as a reference for the evaluation, treatment and prognosis in stable CHD who have an indication of cardiac CT. Methods: A retrospective analysis of 30 patients with stable CHD who underwent 2D echo and cardiac DSCT with interval 3 months, include assessment of left ventricular EF. Based on the existing medical record number, performed data collection left ventricular EF 2D echo and other additional data. Value of left ventricular EF in DSCT in return on cardiac evaluation workstation (Siemens, Leonardo), then determined how its correlation with left ventricular EF values in 2D echo. Statistical analysis of this study using the Spearman test.
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