

Perbandingan mobilitas leher kandung kemih penderita inkontinensia urin jenis stres dan kontinensia melalui pencitraan ultrasonografi = Comparison of bladder neck mobility on stress urinary incontinence and continence using ultrasound imaging / Riry Meria

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Deskripsi Lengkap: <https://lib.ui.ac.id/detail?id=20415923&lokasi=lokal>

Abstrak

[**ABSTRAK**]

Latar Belakang : Inkontinensia urin sampai saat ini masih menjadi masalah bagi masyarakat dunia. Telah ada tiga penelitian yang membandingkan penurunan leher kandung kemih pada kelompok inkontinensia urin jenis stres dan kontinensia. Namun penelitian mengenai perbandingan tersebut belum ada di Indonesia sementara hasil penelitian yang telah ada belum dapat digeneralisir pada populasi di Indonesia. Berdasarkan hal tersebut peneliti ingin mengetahui apakah terdapat perbedaan rerata penurunan leher kandung kemih kelompok inkontinensia urin jenis stres dan kontinensia di Indonesia dengan perbedaan pada tiga buah aspek, yaitu aspek penegakan diagnosis, kelompok pembanding, dan pengukuran.

Tujuan : Menganalisis perbedaan rerata mobilitas leher kandung kemih pada inkontinensia urin jenis stres dan kontinensia.

Metode : Penelitian ini merupakan penelitian observasional. Untuk menjawab pertanyaan penelitian utama dan tambahan digunakan desain deskriptif potong lintang. Populasi target dalam penelitian ini adalah semua perempuan yang mengalami inkontinensia urin jenis stres dan kontinensia di Indonesia. Populasi terjangkau penelitian ini adalah semua perempuan yang mengalami inkontinensia urin jenis stres dan kontinensia masing-masing 37 orang yang berobat ke Unit Rawat Jalan Poliklinik Ginekologi RSCM periode Februari 2014 sampai Januari 2015.

Hasil : Rerata jarak leher kandung kemih ke simfisis pubis saat istirahat, saat valsava dan mobilitas leher kandung kemih pada inkontinensia urin jenis stres berturut-turut adalah 26,9 (SB 3,2) mm, 5 (-29 - 22) mm dan 24,3 (SB 7,9) mm. Rerata jarak leher kandung kemih ke simfisis pubis saat istirahat, saat valsava dan mobilitas leher kandung kemih pada kontinensia berturut-turut adalah 26,9 (SB 3,2) mm, 17,6 (SB 5,3) mm dan 10 (SD 4,1) mm. Rerata jarak leher kandung kemih ke simfisis pubis saat valsava pada inkontinensia urin jenis stres lebih kecil dibandingkan kontinensia 6,3 (SB 7,1) mm VS 16,3 (SB 5,2) mm, $p=0,0001$.

Rerata mobilitas leher kandung kemih pada inkontinensia urin jenis stres lebih besar dibandingkan kontinensia 20,8 (SB 7,0) mm VS 10,0 (SD 4,8) mm, $p=0,0001$.

Kesimpulan : Rerata jarak leher kandung kemih ke simfisis pubis saat valsava

pada inkontinensia urin jenis stres lebih kecil dibandingkan kontinensia. Rerata mobilitas leher kandung kemih pada inkontinensia urin jenis stres lebih besar dibandingkan kontinensia.

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**ABSTRACT
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Background : Stress urinary incontinence still be the world problem. Various studies compared decreasing bladder neck on stress urinary incontinence and continence have been done. Research with the same purpose has not been done in Indonesia. Based on that, need to study how the comparison decreasing of bladder neck between stress urinary incontinence and continence groups in Indonesia with a difference in three aspects, such as diagnostic criteria, comparised group, and the observer.

Aim : To analize difference bladder neck mobility on stress urinry incontinence and continence.

Methods : This study was an observational study. Main and additional research questions using a cross-sectional design . The target population in this study were all women who undergo stress urinary incontinence and continence in Indonesia . The population of this study was affordable to all women who undergo stress urinary incontinence and continence were treated to the Outpatient Clinic of Gynecology Unit of Ciptomangunkusumo Hospital in the period Februari 2014 to January 2015.

Results : Mean of distance of bladder neck to the symphysis pubic at rest, valsava and bladder neck mobility on stress urinary incontinence were 26,9 (SD 3,2) mm, 5 (-29 - 22) mm and 24,3 (SD 7,9) mm. Mean of distance of bladder neck to the symphysis pubic at rest, at valsalva and bladder neck mobility on continence were 26,9 (SD 3,2) mm, 17,6 (SD 5,3) mm and 10,0 (SD 4,1) mm. There was no differences between the distance of bladder neck to the symphysis pubic at rest on stress urinary incontinence and continence 27,1 (SD 3,3) mm VS 26,3 (SD 3,5) mm, p=0,523. Mean of distance of bladder neck to the symphysis pubic at valsava on stress urinary incontinenc was lower than continence 6,3 (SD 7,1) mm VS 16,3 (SD 5,2) mm, p=0,0001. Mean of bladder neck mobility on stress urinary incontinence was greater than continence 20,8 (SD 7,0) mm VS 10,0 (SD 4,8) mm, p=0,0001.

Conclusion : Mean of distance of the bladder neck to the symphysis pubic at valsava on stress urinary incontinenc was lower than continence. Mean of bladder neck mobility on stress urinary incontinence was greater than continence, Background : Stress urinary incontinence still be the world problem. Various studies compared decreasing bladder neck on stress urinary incontinence and continence have been done. Research with the same purpose has not been done in Indonesia. Based on that, need to study how the comparison decreasing of bladder neck between stress urinary incontinence and continence groups in Indonesia with a difference in three aspects, such as diagnostic criteria,

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