

Delayed graft function pada laparoscopi donor nefrektomi hidup analisis multivariat = Delayed graft function following laparoscopic live donor nephrectomy a multivariate analysis

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Abstrak

[ABSTRAK

Latar

Belakang

Delayed

graft

function

(DGF)

adalah

komplikasi

yang

umum

dijumpai

pada

transplantasi

dari

mayat.

Berdasarkan

studi

terdahulu,

DGF

dan

factor

resikonya

memiliki

hasil

yang

bervariasi

pada

donor

nefrektomi

hidup

Metode

Peneliti

melakukan

analisis
retrospektif
dari
rekam
medic
donor
dan
resipien
transplantasi
ginjal
pada
100
kasus
laparoscopi
donor
nefrektomi
hidup
di
Rumah
Sakit
Cipto
Mangunkusumo
dari
November
2011
hingga
Februari
2014.
Kriteria
DGF
adalah
pasien
dialisis
pada
1
minggu
post
operasi
dan/
atau
kreatinin
lebih

dari
2.5
mg/dl
pada
hari
ke
7
post
operasi.
Pasien
yang
tidak
masuk
dalam
kriteria
tersebut
didefinisikan
memiliki
renal
allograft
yang
berfungsi
normal
Hasil
Prevalensi
DGF
pada
penelitian
ini
adalah
14%.
Indeks
massa
tubuh
resipien,
cold
ischemia
time,
waktu
anastomosis
vaskular,
dan

total
ischemia
time
lebih
tinggi
pada
grup
DGF,
tetapi
tidak
ditemukan
faktor
resiko
DGF
yang
signifikan
secara
statistic
saat
dilakukan
analisis
multivariat
Kesimpulan
Insidensi
DGF
pada
studi
ini
masuk
dalam
rentang
yang
diamati
pada
studi--‐
studi
sebelumnya.
Faktor
resiko
yang
dilaporkan
sebagai

faktor
resiko
DGF
pada
laparoscopi
donor
nefrektomi
hidup
tidak
signifikan
secara
statistik
dengan
DGF
pada
studi
kali
ini.

ABSTRACT

Background

Delayed graft function (DGF) is a common complication affecting deceased donor renal transplantation. Based on previous studies, DGF and its risk factors in live donor nephrectomy (LDN) have a various results.

Methods

We retrospectively analyzed the medical records of donor and recipient from our first 100 cases of laparoscopic LDN in Cipto Mangunkusumo Hospital from November 2011 to February 2014. The criteria used to define DGF were the requirement for dialysis in postoperative week 1 and/or serum creatinine greater than 2.5 mg/dl at postoperative day 7. Patients who did not match any of these criteria were define as having normal renal allograft function.

Results

The overall prevalence of DGF was 14%. Recipients body mass index, cold ischemia time, vascular anastomosis time, and total ischemia time were higher among the delayed graft function group, but no risk factors for DGF were significantly associated after multivariate analysis.

Conclusions

The incidence of DGF in our study was in the range of that observed in previous studies. The factors that previously reported and believed as risk factors of DGF in laparoscopic LDN were not significantly associated with the development of DGF in our study.;

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