

Hubungan kesesuaian antibiotika empiris dengan hasil kultur terhadap ketahanan hidup pasien perforasi tukak peptik di RSUPN Dr. Cipto Mangunkusumo Jakarta = Relationship of suitability of empiric antibiotics with culture results to the survival of perforated peptic ulcer patients in Dr. Cipto Mangunkusumo Hospital Jakarta

Mo Tualeka, author

Deskripsi Lengkap: <https://lib.ui.ac.id/detail?id=20424505&lokasi=lokal>

Abstrak

ABSTRAK

Latar Belakang: Mortalitas pasien perforasi tukak peptik (PTP) masih stabil pada angka 20-50% dimana penyebab terbanyak adalah sepsis. Tantangan ini memicu para ahli bedah untuk meneliti faktor-faktor yang berhubungan dengan mortalitas dan morbiditas penyakit ini. Selain pembedahan untuk kontrol infeksi, antibiotika preoperatif diketahui menurunkan angka mortalitas. Penelitian ini bertujuan mengetahui hubungan kesesuaian antibiotika empiris dengan hasil kultur sensitifitas antibiotika terhadap ketahanan hidup 30 hari pasien perforasi tukak peptik di RSUPN Dr Cipto Mangunkusumo (RSCM) Jakarta. Metode: Studi kohort terhadap pasien PTP sejak Januari 2012 hingga Agustus 2015 di Departemen Bedah FKUI/RSCM Jakarta, dimana PTP akibat keganasan dan trauma tembus dieksklusikan. Pola kuman dan antibiotika pada pasien PTP disajikan sebagai studi pendahuluan. Hasil: dari 45 pasien yang didapat, angka mortalitas pasien PTP di RSCM sebesar 31,1% dan ketahanan hidup sebesar 68,9%. Pola kuman pada pasien PTP adalah Escherichia coli sebagai kuman Gram negatif terbanyak (35,85%) dan Streptococcus alfa hemolytic sebagai kuman Gram positif terbanyak (15,09%). Antibiotika lini kedua yang sesuai untuk pasien PTP adalah Sulbactam/Ampicillin.

Tidak terdapat hubungan antara skor

Boey dan ketahanan hidup, namun syok preoperatif memengaruhi ketahanan hidup (nilai OR 14,67). Begitu juga dengan komorbiditas memengaruhi ketahanan hidup sebesar 10,54 kali. Lama persiapan operasi tidak bermakna terhadap ketahanan hidup, sedangkan durasi operasi memengaruhi ketahanan hidup sebesar 7,5 kali. Antibiotika empiris yang sesuai dengan hasil kultur memengaruhi ketahanan hidup sebesar 12,57 kali. Kesimpulan: Pemberian antibiotika empiris yang tepat terbukti berhubungan dengan ketahanan hidup pasien perforasi tukak peptik.;

<hr>

<i>ABSTRACT</i>

Background: Mortality of patients with peptic ulcer perforation (PUP) was stable at 20-50%, which is the most common cause is sepsis. This challenge prompted the surgeon to examine the factors associated with mortality and morbidity of this disease. In addition to surgery to control infection, preoperative antibiotics are known to reduce mortality. This study aims to determine the suitability of empiric

antibiotics relationship with antibiotic sensitivity culture results to the 30 days survival of perforated peptic ulcer patients in Dr Cipto Mangunkusumo General Hospital (RSCM) in Jakarta. Methods: A cohort study of patients PUP since January 2012 to August 2015 at Department of Surgery Faculty of medicine/RSCM Jakarta, where PUP due to malignancy and penetrating trauma were excluded. Patterns of bacteria and antibiotics in PUP patients presented as a preliminary study. Results: 45 patients were obtained, the mortality rate of patients in RSCM PUP by 31.1% and amounted to 68.9% survival. Patterns of bacteria in a patient PUP is *Escherichia coli* as most Gram-negative bacteria (35.85%) and *Streptococcus alfaemolytic* as most Gram-positive bacteria (15.09%). The second line antibiotics are appropriate for the PUP patients is sulbactam/ampicillin. There was no relationship between Boey's score and survivability, but the preoperative shock affect survival (OR 14.67). Likewise with comorbidities affecting the survival of 10.54 times. Time to surgery on survival was not significant, while the duration of surgery affecting the survival of 7.5 times. Empiric antibiotics in accordance with the culture results affects survival of 12.57 times. Conclusion: The provision of appropriate empiric antibiotic shown to be associated with survival in patients with peptic ulcer perforation.

Background: Mortality of patients with peptic ulcer perforation (PUP) was stable at 20-50%, which is the most common cause is sepsis. This challenge prompted the surgeon to examine the factors associated with mortality and morbidity of this disease. In addition to surgery to control infection, preoperative antibiotics are known to reduce mortality. This study aims to determine the suitability of empiric antibiotics relationship with antibiotic sensitivity culture results to the 30 days survival of perforated peptic ulcer patients in Dr Cipto Mangunkusumo General Hospital (RSCM) in Jakarta. Methods: A cohort study of patients PUP since January 2012 to August 2015 at Department of Surgery Faculty of medicine/RSCM Jakarta, where PUP due to malignancy and penetrating trauma were excluded. Patterns of bacteria and antibiotics in PUP patients presented as a preliminary study. Results: 45 patients were obtained, the mortality rate of patients in RSCM PUP by 31.1% and amounted to 68.9% survival. Patterns of bacteria in a patient PUP is *Escherichia coli* as most Gram-negative bacteria (35.85%) and *Streptococcus alfaemolytic* as most Gram-positive bacteria (15.09%). The second line antibiotics are appropriate for the PUP patients is sulbactam/ampicillin. There was no relationship between Boey's score and survivability, but the preoperative shock affect survival (OR 14.67). Likewise with comorbidities affecting the survival of 10.54 times. Time to surgery on survival was not significant, while the duration of surgery affecting the survival of 7.5 times. Empiric antibiotics in accordance with the culture results affects survival of 12.57 times. Conclusion: The provision of appropriate empiric antibiotic shown to be associated with survival in patients with peptic ulcer perforation.

Background: Mortality of patients with peptic ulcer perforation (PUP) was stable at 20-50%, which is the most common cause is sepsis. This challenge prompted the surgeon to examine the factors associated with mortality and morbidity of this

disease. In addition to surgery to control infection, preoperative antibiotics are known to reduce mortality. This study aims to determine the suitability of empiric antibiotics relationship with antibiotic sensitivity culture results to the 30 days survival of perforated peptic ulcer patients in Dr Cipto Mangunkusumo General Hospital (RSCM) in Jakarta. Methods: A cohort study of patients PUP since January 2012 to August 2015 at Department of Surgery Faculty of medicine/RSCM Jakarta, where PUP due to malignancy and penetrating trauma were excluded. Patterns of bacteria and antibiotics in PUP patients presented as a preliminary study. Results: 45 patients were obtained, the mortality rate of patients in RSCM PUP by 31.1% and amounted to 68.9% survival. Patterns of bacteria in a patient PUP is *Escherichia coli* as most Gram-negative bacteria (35.85%) and *Streptococcus alfaemolytic* as most Gram-positive bacteria (15.09%). The second line antibiotics are appropriate for the PUP patients is sulbactam/ampicillin. There was no relationship between Boey's score and survivability, but the preoperative shock affect survival (OR 14.67). Likewise with comorbidities affecting the survival of 10.54 times. Time to surgery on survival was not significant, while the duration of surgery affecting the survival of 7.5 times. Empiric antibiotics in accordance with the culture results affects survival of 12.57 times. Conclusion: The provision of appropriate empiric antibiotic shown to be associated with survival in patients with peptic ulcer perforation.