Penggunaan kateter intrapleura water sealed drainage, indwelling pleural catheter dan pigtail catheter pada penatalaksanaan kanker paru dengan efusi pleura masif = The use of intrapleural catheter water sealed drainage indwelling pleural catheter and pigtail catheter for treatment of lung cancer with massive pleural effusio

Tamam Anugrah Tamsil, author

Abstrak

Latar Belakang : Efusi pleura masif merupakan salah satu masalah pada tatalaksana kanker paru dan menyebabkan kematian. Pemasangan kateter intrapleura merupakan tatalaksana utama keganasan dengan efusi pleura masif. Kateter yang digunakan yaitu water sealed drainage, indwelling pleural catheter atau pigtail catheter. Water sealed drainage saat ini merupakan kateter yang terbanyak digunakan.
Tujuan : Penelitian ini adalah penelitian pendahuluan untuk mengetahui penggunaan (toleransi dan efikasi) water sealed drainage, indwelling pleural catheter dan pigtail catheter pada penatalaksanaan kanker paru dengan efusi pleura masif.
Metode : Penelitian observasional kohort retrospektif pada pasien kanker paru tegak jenis dengan efusi pleura masif yang terpasang kateter intrapleura (WSD, IPC atau pigtail catheter). Data diambil dari rekam medis Rumah Sakit Umum Pusat Persahabatan Jakarta pada periode 1 Januari 2012 sampai 31 Desember 2015 dan dilakukan penilaian tolerasi (komplikasi akut dan lanjut) dan efikasi (lama penggunaan, lama rawat dan alasan pencabutan) pemasangan kateter intrapleura.
Hasil : Subjek penelitian 77 pasien dengan karakteristik laki-laki (55,8%), median usia 57 tahun, range 26-84 tahun, adenokarsinoma (84,4%) dan terapi kemoterapi (32,5%). Komplikasi akut sebesar 70,1%, komplikasi terbanyak nyeri lokasi pemasangan kateter (58,4%). Komplikasi lanjut sebesar 54,5%, komplikasi terbanyak nyeri lokasi kateter bertambah atau menetap (29,9%). Rerata lama rawat pasca pemasangan kateter 14,14 hari, median 10 hari dan range 1-72 hari. Rerata lama pemakaian kateter 55,98 hari, median 30 hari dan range 2-310 hari. Alasan pencabutan kateter terbanyak adalah produksi cairan minimal (46,75%).
Kesimpulan : Toleransi dan efikasi penggunaan kateter intrapleura pada pasien kanker paru dengan efusi pleura masif cukup baik dan aman. Diperlukan penelitian kohort prospektif dengan jumlah sampel yang sama pada tiap kelompok kateter, sehingga penggunaan kateter dapat dianalisis perbandingannya dan penelitian dengan kelompok pembanding, contohnya tindakan pleurodesis, yang merupakan baku emas tatalaksana efusi pleura ganas.

Background : Massive pleural effusion is one of the problems in lung cancer treatment that cause death. The main treatment of cancer patient with massive pleural effusion is the placement of intrapleural catheter. Catheters that can be used are water sealed drainage, indwelling pleural catheter or pigtail catheter. Currently, water sealed drainage is the most catheter used.
Objective : This is a preliminary study which is aimed to assess tolerancies and efficacies of water sealed drainage, indwelling pleural catheter or pigtail catheter for treatment of lung cancer with massive pleural effusion.

Methods : This study is a retroscpective observational cohort study. Subjects are lung cancer patients with massive pleural effusion and catheterized with intrapleural catheter (WSD, IPC or pigtail catheter). The datas were taken from medical record at RSUP Persahabatan between 1 January 2012-31 December 2015 and assessed for tolerancies (acute or late complication) and efficacies ((length of hospital admission after catheter placement, duration and the reason of retraction) of intrapleural catheter

Results: Subjects of study are 77 patients, with characteristic, male (55,8%), median age 57 years old, range from 26 to 84 years old, adenocarcinoma (84,4%) and the most main therapy is chemotherapy (32,5%). Acute complication obtained in 70,1% patients, with the most common complication is pain in catheter location (58,4%). Late complication obtained in 54,5% patients with the most common complication is pain in the catheter location (29,9%). The mean of length of staying in hospital after the placement of catheter are 14,14 days, median 10 days, range from 1 to 72 days. The mean of duration of catheter placement is 55.98 days, median 30 days, range from 2 to 310 days. Minimal fluid production (46,75%) are the most reason of intrapleural catheter retraction.

Conclusion: Tolerancies and efficacies of intrapleural catheter (WSD, IPC or pigtail catheter) in lung cancer patients with massive pleural effusion are quite good and safe. Prospective cohort studies are needed in the future to determine which type of intrapleural catheter is better for the treatment of massive pleural effusion in lung cancer patients and studies with comparison group for example pleurodesis, which is the gold standard for treatment of malignant pleural effusion.