

Gambaran elektroensefalografi dan prevalensi status epileptikus non konvulsif pada ensefalopati metabolik di Rumah Sakit Umum Pusat Nasional Cipto Mangunkusumo = Electroencephalography pattern and prevalence non convulsive status epilepticus in metabolic encephalopathy at Cipto Mangunkusumo National General Hospital / Anastasia Maria Loho

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Abstrak

ABSTRAK

Latar belakang : Status epileptikus non konvulsif SENK dapat disebabkan oleh kelainan metabolik akut dan ditandai dengan penurunan kesadaran dengan atau tanpa bangkitan konvulsif motorik. Abnormalitas gambaran elektroensefalografi EEG dapat menggambarkan derajat kerusakan otak. Pemeriksaan EEG pada ensefalopati metabolik secara umum di Indonesia belum rutin dilakukan. Penelitian ini bertujuan mengetahui gambaran EEG, angka kejadian abnormalitas EEG, gambaran klinis, dan prevalensi SENK pada ensefalopati metabolik. Metode penelitian: Desain penelitian potong lintang deskriptif pada pasien ensefalopati metabolik di Instalasi Gawat Darurat, ruang rawat intensif, dan ruang rawat biasa RSUPN Cipto Mangunkusumo selama bulan Agustus-November 2016. Pemeriksaan EEG menggunakan EEG portable. Pasien dimasukkan sebagai sampel apabila berusia >18 tahun, didiagnosis ensefalopati metabolik oleh TS penyakit dalam, dapat dilakukan perekaman EEG. Pasien dieksklusi apabila terdapat defisit fokal neurologis pada pemeriksaan fisik dan terdapat riwayat epilepsi sebelumnya. Diagnosis SENK ditegakan dengan menggunakan kriteria Salzburg. Hasil: Di antara 34 orang subjek ensefalopati metabolik, didapatkan angka kejadian abnormalitas EEG 100%. Gambaran epileptiform ditemukan 41,2% dan gambaran non epileptiform 58,8%. Gambaran non epileptiform yang didapat meliputi: 28 subjek dengan perlambatan fokal, 3 subjek perlambatan umum, 5 subjek dengan gelombang trifasik, dan 1 subjek dengan gambaran burst suppression. Prevalensi SENK pada ensefalopati metabolik sebesar 61,8%. Mayoritas subjek dengan diagnosis SENK memiliki derajat SKG 3-8 dan dengan etiologi ensefalopati metabolik multipel. Kesimpulan: Seluruh pasien ensefalopati metabolik ditemukan kelainan EEG. Mayoritas abnormalitas EEG berupa perlambatan fokal. Prevalensi SENK pada ensefalopati metabolik cukup tinggi. Ensefalopati metabolik dengan SENK memiliki SKG yang lebih rendah dan memiliki etiologi lebih dari satu.

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ABSTRACT

Background Non Convulsive Status Epileptic NCSE could caused by acute metabolic disorder that indicated by unconsciousness with or without motoric convulsive seizure. EEG abnormality could reflect the severity of brain injury. NCSE among metabolic encephalopathy has not been reported in Indonesia. This study was aimed to find the rate and pattern of EEG abnormality, clinical signs, and prevalence of NCSE in metabolic encephalopathy. Method Cross sectional descriptive study was applied in metabolic encephalopathy patient at emergency room, intensive care unit, and ward Cipto Mangunkusumo National Hospital during August November 2016. Inclusion criteria were 18 years old, diagnosed as encephalopathy metabolic by internist, and underwent the EEG examination. Patient excluded if they had neurologic focal deficit or history of

seizure. NCSE was diagnosed by Salzburg criteria. Result Among 34 metabolic encephalopathy subject, the rate of EEG abnormality was 100 . The pattern of abnormality including 41,2 epileptiform and 91,2 non epileptiform pattern. The non epileptiform patten including 28 subject with focal slowing pattern and 3 with general slowing pattern, 5 subject had triphasic wave, and 1 subject had burst suppression. Prevalence of NCSE in metabolic encephalopathy was 61,8 . Majority of NCSE group had Glasgow Coma Scale between 3 8 and caused by multiple metabolic causes. Conclusion Rate of abnormality found in metabolic encephalopathy was 100 . Majority of the abnormality was focal slowing pattern. Prevalence of NCSE in metabolic encephalopathy was high. NCSE group tends to have lower GCS and caused by more than one etiology of encephalopathy. Keywords electroencephalography metabolic encephalopathy non convulsive status epilepticus