

# Proporsi hipertensi pulmoner dan faktor-faktor yang mempengaruhi kejadian rawat inap berulang pasien luluh paru di RSUP Persahabatan = The Proportion of pulmonary hypertension and the influencing factors of re hospitalization in patients with destroyed lung at Persahabatan hospital

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## Abstrak

Data mengenai luluh paru LP sangat terbatas mencakup karakteristik demografi, status hipertensi pulmoner HP, fungsi paru, kapasitas latihan, aktivitas fisis dan kejadian rawat inap berulang. Penelitian ini memiliki desain potong lintang dengan 54 subjek. Echokardiografi dilakukan untuk menyingkirkan terdapatnya kelainan jantung dan menentukan status HP. Subjek kemudian akan menjalani serangkaian prosedur antara lain wawancara, pemeriksaan fisis, uji jalan 6 menit 6MWT, uji fungsi paru dan pemeriksaan darah. Hipertensi pulmoner ditemukan pada 63 subjek dengan mPAP 29,13 13,07 sedangkan 55,9 diantaranya mengalami PH yang berat. Rawat inap berulang terjadi pada 44,4, sesak napas mMRC >1, aktivitas fisis, rawat inap berulang, luas lesi, CRP dan tekanan oksigen arteri memiliki hubungan bermakna terhadap status HP. Kadar CRP dan 6MWT merupakan variabel yang paling berhubungan dengan kejadian rawat inap berulang pada LP-HP yang dianalisis dengan analisis multivariat. Echokardiografi sebaiknya dilakukan pada pasien LP. Pasien LP-HP mengalami sesak yang lebih berat, rawat inap berulang, lesi yang lebih luas, kadar CRP lebih tinggi, aktivitas fisis, uji fungsi paru, PaO<sub>2</sub> dan indeks massa tubuh yang lebih rendah. Hasil spirometri dan kadar CRP merupakan faktor yang paling berpengaruh terhadap kejadian rawat inap berulang pada pasien LP-HP melalui analisis multivariat.

.....We investigated and provided data about demographic and clinical characteristics. We also found out the influencing factors of re hospitalization in destroyed lung with pulmonary hypertension patients. This is a cross sectional study involving 54 DL subjects. Echocardiography was performed to rule out cardiac abnormality and to establish their PH status. Subjects performed several procedures such as interview, physical examination, 6 minutes walking test 6MWT, lung function test, and blood tests to obtain all the needed data. Pulmonary hypertension was found in 63 of subjects with mPAP was 29,13 13,07 while 55,9 of DL PH subjects had severe PH. Re hospitalization occurred in 44,44 subjects. We analyzed using chi square for categorical data and student t test and found a significant association of PH status in DL subjects with breathlessness by mMRC scale 1, physical activity, re hospitalization, body mass index, FVC, FEV<sub>1</sub>, FEV<sub>1</sub>/FVC, spirometry result, extent of lesion, CRP and arterial oxygen pressure. Level of CRP, VE<sub>P1</sub> and 6MWT had the strongest association for DL having PH and rehospitalization by multivariate analysis. Echocardiography should be performed among DL patients. Patients DL who got PH have more breathlessness, re hospitalization and extent of lesion, higher CRP level, lower physical activity, worse lung function test, lower PaO<sub>2</sub> and lower BMI. Spirometry result, and CRP level had the strongest association for DL having PH and rehospitalization by multivariate analysis.