

## Determinan infeksi luka operasi pascabedah sesar

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### Abstrak

Infeksi luka operasi (ILO) adalah bagian dari infeksi nosokomial dan merupakan masalah dalam pelayanan kesehatan, terjadi pada 2 - 5% dari 27 juta pasien yang dioperasi setiap tahun dan 25% dari jumlah infeksi terjadi di fasilitas pelayanan. Penelitian bertujuan mengetahui hubungan usia, status gizi, jenis operasi, lama rawat prabedah, kadar Hb, transfusi darah, waktu pemberian antibiotik profilaksis, jenis anestesi, lama pembedahan serta lama rawat pascabedah dengan kejadian ILO pada pasien pascabedah sesar di RSUP Dr. Sardjito Yogyakarta. Rancangan desain penelitian studi observasional prospektif dilakukan dengan sampel 154 orang. Data diperoleh melalui observasi menggunakan daftar tilik sejak pasien masuk rumah sakit sampai 30 hari pascabedah. Analisis data meliputi analisis univariat, analisis bivariat dengan menggunakan uji kai kuadrat serta analisis multivariat dengan uji regresi logistik berganda.

Hasil penelitian menunjukkan ada hubungan antara waktu pemberian antibiotik profilaksis (OR = 1,16; 95% CI = 1,09 - 1,37), lama rawat prabedah (OR = 1,12; 95% CI = 1,02 - 1,24) dan lama rawat pascabedah (OR = 1,21; 95% CI = 1,04 - 1,39) dengan kejadian ILO. Faktor lainnya tidak mempunyai hubungan yang signifikan terhadap kejadian ILO. Hasil uji regresi logistik ganda menemukan lama rawat pascabedah merupakan faktor yang paling dominan terhadap kejadian ILO. Identifikasi faktor risiko ILO dapat bermanfaat untuk merencanakan upaya meminimalkan kejadian ILO pada pasien pascabedah sesar.

.....Surgical site infection (SSI) is part of health care associated infection and remains a problem in hospital care. SSI occurs in 2 to 5% of the 27 million patients having surgery each year and 25% of infections occur in care facilities. This study aimed to relation various such as age, nutritional status, type of surgery, pre-operative length of stay, hemoglobin level, blood transfusions, timing of antibiotics prophylaxis, type of anesthesia, duration of operation and post-operative length of stay on the incidence of SSI post caesarean section at Dr. Sardjito Hospital Yogyakarta. Prospective observation study was conducted in 154 sample. Data were obtained through observations using checklist since hospital admission up to 30 days post surgery. Data analysis included univariate, chi-square test and multiple logistic regression.

The result showed that time of prophylactic antibiotics (OR = 1.16; 95% CI = 1.09 - 1.37), pre-operative length of stay (OR = 1.12; 95% CI = 1.02 - 1.24) and post-operative length of stay (OR = 1.21; 95% CI = 1.04 - 1.39) were risk factors for SSI. Other factors did not show significant associations with incidence of the SSI. The findings from multiple logistic regression showed post-operative length of stay in hospital as the most dominant factor for incidence of SSI. Identifying SSI risk factors can be used to plan efforts to minimize the occurrence of SSI in post-caesarean section patients.