

Analisis kesintasan 5 tahun pasien kanker payudara stadium lanjut lokal berdasarkan kemoterapi neoadjuvan di Rumah Sakit Cipto Mangunkusumo tahun 2011-2016 = Survival rate 5 years breast cancer locally advanced based on chemotherapy neoadjuvan in Hospital Cipto Mangunkusumo 2011-2016

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Abstrak

Latar belakang: Salah satu modalitas terapi yang digunakan untuk meningkatkan angka kesintasan hidup pasien kanker payudara adalah dengan pemberian kemoterapi neoadjuvan. Pada umumnya kemoterapi neoajuvan kanker payudara stadium lanjut lokal di RSCM menggunakan regimen doxorubicin based. Namun belum ada penelitian lebih lanjut mengenai perbandingan kesintasan hidup lima tahun pasien kanker payudara lanjut lokal yang mendapatkan kemoterapi neoadjuvan doxorubicin based dengan non-doxorubicin based di RSCM.

Tujuan: Mengetahui angka kesintasan hidup lima tahun penderita kanker payudara stadium lanjut lokal yang diberikan kemoterapi neoadjuvan doxorubicin based dan non-doxorubicin based di RSCM tahun 2011 – 2016.

Metode: Sebanyak 236 pasien kanker payudara stadium lanjut lokal yang mendapatkan kemoterapi neoadjuvan di RSCM tahun 2011-2016 menjadi sampel dalam penelitian ini. Analisis data dilakukan dengan metode Kaplan Meier, uji Log Rank dan Cox Regression.

Hasil penelitian: Angka kesintasan hidup lima tahun pasien kanker payudara stadium lanjut lokal yang diberi kemoterapi neoadjuvan doxorubicin based sebesar 37 dan non-doxorubicin based sebesar 48,9 . Pasien kanker payudara stadium lanjut lokal yang mendapatkan kemoterapi neoadjuvan doxorubicin based memiliki probabilitas 1,38 kali lebih cepat terjadinya kematian 95 CI 0,946 – 2,026 setelah dikontrol dengan variabel invasi pembuluh limfatik, respon klinis, stadium, radiasi, jenis histopatologi, grade, dan status menopause. Invasi pembuluh limfatik merupakan variabel dengan hazard ratio terbesar yaitu 4,74 95 CI 3,213 – 7,284.

Kesimpulan: Kemoterapi neoadjuvan non-doxorubicin based menunjukkan kesintasan hidup yang lebih tinggi dibandingkan kemoterapi neoadjuvan doxorubicin based.

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Background: One of the therapeutic modalities used to increase survival rates of breast cancer patients with neoadjuvant chemotherapy. In general, neoajuvant chemotherapy for locally advanced breast cancer at RSCM used a doxorubicin based regimen. But there has been no further study on the survival comparison of five years of locally advanced breast cancer patients who are neoadjuvant chemotherapy doxorubicin based or non doxorubicin based at RSCM.

Objectives: This study is conducted for determine 5 years survival rate of locally advanced breast cancer who were given neoadjuvant chemotherapy doxorubicin based and non doxorubicin based at RSCM in 2011 – 2016.

Methods: A total of 236 patients with locally advanced stage breast cancer who received neoadjuvant chemotherapy at RSCM in 2011 – 2016 were sampled in the study. Data analysis was performed by Kaplan

Meier method, Log Rank and Cox Regression analysis.

Results: 5 years survival rate of locally advanced breast cancer patients given neoadjuvant doxorubicin based chemotherapy is 37 and non doxorubicin based is 48.9. Locally advanced breast cancer patients receiving neoadjuvant doxorubicin based chemotherapy had a 1.38 times faster probability of death 95 CI 0.946 2.026 after controlled by invasive variation of lymphatic vein, clinical response, stage, radiation, histopathology, grade, And menopausal status. Invasion of lymphatic vessels is the variable with the largest hazard ratio of 4.74 95 CI 3,213 7,284.

Conclusions Neoadjuvant chemotherapy non doxorubicin based showed a higher survival than doxorubicin based for locally advanced breast cancer.