

Validasi skor spivack sebagai prediktor penggunaan ventilator berkepanjangan pasien pascabedah pintas koroner di RSUPN Dr. Cipto Mangunkusumo = Validation of spivack score as predictor of prolonged mechanical ventilation pmv following coronary artery bypass graft cabg surgery in Cipto Mangunkusumo Hospital

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Abstrak

Latar Belakang : Penggunaan ventilator berkepanjangan pasien pascabedah pintas koroner dapat meningkatkan risiko morbiditas, mortalitas dan biaya perawatan pascabedah. Skor Spivack yang meliputi riwayat diabetes, unstable angina, gagal jantung kronik, merokok dan fraksi ejeksi merupakan skor sederhana untuk memprediksi penggunaan ventilator berkepanjangan pasien pascabedah pintas koroner.

Tujuan : Menilai performa kalibrasi dan diskriminasi skor Spivack dalam memprediksi penggunaan ventilator berkepanjangan pasien pascabedah jantung di RSCM.

Metode : Sebanyak 317 subjek diikuti secara retrospektif untuk dinilai skor Spivack dan diikuti selama 2 hari untuk dilihat penggunaan ventilator berkepanjangan. Performa kalibrasi dan diskriminasi dinilai dengan uji Hosmer-Lemeshow dan area under the curve AUC dengan Spesifitas, sensitifitas, NPV dan PPV.

Hasil Penelitian : Penggunaan ventilator berkepanjangan terdapat sebanyak 51 subjek 16,1 . Performa kalibrasi skor Spivack dengan uji Hosmer-Lemeshow menunjukkan $p=0,695$ dan plot kalibrasi menunjukkan koefisien korelasi $r=0,792$. Performa diskriminasi skor Spivack ditunjukkan dengan nilai AUC sebesar 0,646 IK95 0,564; 0,728 dengan spesifitas 42, sensitifitas 74, NPV 0,90 dan PPV 0,20.

Simpulan : Skor Spivack memiliki kalibrasi yang baik dan diskriminasi yang lemah dalam memprediksi penggunaan ventilator berkepanjangan pasien bedah jantung pintas koroner.

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Background : PMV after CABG surgery increases the risk of morbidity, mortality and hospital cost. Spivack score that includes history of diabetes, unstable angina, smoking, congestive heart failure and ejection fraction is a simple score to predict PMV following CABG surgery.

Objective : To assess the performance of calibration and discrimination of Spivack score in predicting PMV following CABG surgery in Cipto Mangunkusumo Hospital.

Methods : A total of 317 patients undergoing CABG surgery were reviewed retrospectively and evaluated for Spivack score. The subjects were followed up for up to 2 days postoperatively to predict PMV. Calibration properties were assessed by Hosmer Lemeshow test and Discrimination properties were assessed by the area under the curve AUC with sensitivity, specificity, positive predictive value PPV, and negative predictive value NPV.

Results : PMV following CABG surgery was observed in 51 subjects 16,1. Hosmer Lemeshow test of Spivack score showed $p=0.695$ and calibration plot showed $r=0.792$. Discrimination of Spivack score was shown by the AUC value of 0.646 95 CI 0.564 0.728. The sensitivity, specificity, positive predictive value PPV, and negative predictive value NPV are 74, 42, 0.20, and 0.90 respectively.

Conclusion : Spivack score has been shown to have a good calibration but weak discrimination in predicting PMV following CABG surgery.