

**Profil kanker wilayah propinsi DKI Jakarta tahun 2008-2012:
berdasarkan data di RSCM sebagai pusat pengendali registrasi kanker
DKI Jakarta = Cancer profile DKI Jakarta province region 2008-2012
based on data of RSCM as cancer registry control center in DKI Jakarta**

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Abstrak

Latar Belakang: Menurut data WHO World Health Organization pada tahun 2012, kanker menempati nomor dua penyebab kematian di negara maju setelah penyakit kardiovaskular dan menjadi penyakit nomor tiga penyebab kematian di negara berkembang setelah kardiovaskular dan penyakit infeksi. Saat ini, data mengenai profil kanker yang diperoleh dari kegiatan registrasi kanker di Indonesia belum ada. Profil kanker dengan metode pengumpulan dan pelaporan yang baik di wilayah DKI Jakarta diperlukan untuk pembentukan registrasi kanker berbasis populasi di Indonesia. Rumah Sakit Ciptomangunkusumo RSCM telah ditetapkan sebagai rumah sakit pengendali data beban kanker DKI Jakarta oleh Menteri Kesehatan Republik Indonesia. Penelitian ini bertujuan untuk memberikan gambaran profil kanker di Provinsi Jakarta tahun 2008 sampai tahun 2012 berdasarkan data di RSCM sebagai pusat pengendali registrasi kanker Provinsi DKI Jakarta.

Metode: Penelitian ini bersifat deskriptif cross sectional dengan mengambil data dari registrasi kanker di RSCM untuk membetuk profil kanker di Provinsi DKI Jakarta tahun 2008 sampai tahun 2012.

Hasil: Didapatkan 14.726 pasien kanker, dengan rasio laki-laki dan perempuan 1:1,8. Mayoritas berusia antara 45-54 tahun. Mayoritas pasien datang berobat pada stadium lanjut, yaitu stadium 3 atau 4, sebanyak 31,8. Domisili pasien terbanyak di Kota Jakarta Barat 27,5 diikuti Kota Jakarta Timur 25,5. Urutan lima kanker terbanyak pada kedua jenis kelamin adalah kanker payudara, kanker serviks, keganasan sistem hematopoetik dan retikuloendotelial, kanker paru dan bronkus, serta kanker nasofaring. Urutan lima kanker terbanyak pada laki-laki adalah kanker paru, kanker nasofaring, keganasan sistem hematopoetik dan retikuloendotelial, kanker hati, serta kanker kelenjar getah bening. Urutan kanker terbanyak pada perempuan adalah kanker payudara, kanker serviks, kanker ovarium, keganasan sistem hematopoetik dan retikuloendotelial, serta kanker kelenjar tiroid.

Kesimpulan: Hasil pada penelitian ini sesuai dengan GLOBOCAN 2012 untuk Wilayah Asia Tenggara, namun cakupan datanya belum optimal karena belum semua fasilitas kesehatan di Provinsi DKI Jakarta mengumpulkan data pasien kanker.

Saran: Diperlukan penelitian lebih lanjut dengan cakupan yang lebih luas dengan melibatkan semua fasilitas kesehatan di Provinsi DKI Jakarta.

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Background: According to WHO World Health Organization data in 2012, cancer occupies the second cause of death in developed countries after cardiovascular disease and become the third leading cause of death in developing countries after cardiovascular and infectious diseases. Currently, data on cancer profiles obtained from cancer registration activities in Indonesia does not exist. Cancer profiles with good collecting and reporting methods are required for the establishment of Indonesia population based cancer registry. The Minister of Health of Indonesia has designated Ciptomangunkusumo Hospital Rumah Sakit Cipto

Mangunkusumo RSCM as a Cancer Registry Control Center of DKI Jakarta Province. This study aims to provide a description of cancer profile of DKI Jakarta Province in 2008 to 2012 based on data from RSCM as a control center for cancer registry of DKI Jakarta Province.

Methods: This was a cross sectional descriptive study by collecting data from cancer registry at RSCM to establish cancer profile in DKI Jakarta Province in 2008 to 2012.

Results: 14,726 cancer patients were found, with male and female ratio of 1 1.8. The majority of patients were between 45 54 years old. Most of patients came to the health care facility were in advanced stage, as many as 31.8. The number of patient was highest from West Jakarta 27.5 and followed by from East Jakarta 25.5. The five most frequent cancer found in both sexes were breast cancer, cervical cancer, hematopoietic and reticuloendothelial system malignancy, lung and bronchial cancer, and nasopharyngeal cancer. The five most common cancers in male were lung cancer, nasopharyngeal cancer, hematopoietic and reticuloendothelial system malignancy, liver cancer, and lymph node cancer. The five most common cancers in female were breast cancer, cervical cancer, ovarian cancer, hematopoietic and reticuloendothelial system malignancy, and thyroid gland cancer.

Conclusion: The results of this study are similar with GLOBOCAN 2012 results for Southeast Asia region, but the data coverage was still not optimal because not all health care facilities in DKI Jakarta Province submitted cancer patient data.

Suggestion: Further research is needed with broader coverage involving all health care facilities in the DKI Jakarta Province.