

Hubungan antara faktor risiko stenosis vena sentral dengan keberhasilan neoplastic di RSCM = Correlation between central vein stenosis risk factors with success rate of venoplasty in Cipto Mangunkusumo Hospital

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Abstrak

ABSTRAK
Latar belakang Dalam lima tahun terakhir, penggunaan kateter pada pasien penyakit ginjal kronis PGK di RSCM kerap diikuti stenosis vena sentral SVS , 60-70 . Sejak 2013 SVS ditangani melalui prosedur venoplasti, namun belum ada evaluasi keberhasilan. Penelitian ini ditujukan melakukan evaluasi keberhasilan venoplasti dan faktor risiko terjadinya stenosis. Metode Dilakukan studi deskriptif analitik dengan desain potong lintang melibatkan pasien PGK stadium 4-5 yang terdiagnosis simptomatik SVS, secara klinis dan radiologis, yang memiliki risiko stenosis, memenuhi kriteria inklusi dan eksklusi serta menjalankan venoplasti. Variabel independen yaitu onset gejala, jenis, lokasi, durasi dan frekuensi pemasangan kateter. Variabel dependen adalah keberhasilan venoplasti dinilai dengan residual stenosis 60 tahun, 61,8 laki-laki dan 70,6 memiliki hipertensi sebagai etiologi PGK. Angka berhasil venoplasti 85,3 , nilai rerata initial stenosis adalah 79,1 13,8 dan median residual stenosis 24,5 dengan range 10-90 . Letak stenosis terbanyak di vena subklavia 47,1 . Tidak didapatkan hubungan bermakna terhadap keberhasilan venoplasti, namun angka ketidakberhasilan venoplasti yang lebih tinggi ditemukan pada lokasi di vena subklavia OR 2,45; p = 0,627 dan frekuensi pemasangan kateter >2 kali OR 1,85; p = 0,648 . Kesimpulan Keberhasilan venoplasti pada SVS 85,3 dengan keberhasilan ditemukan dua kali lebih tinggi pada implantasi di vena subklavia dan frekuensi > 2 kali. Namun pada studi ini tidak bermakna secara statistik. Ketidakberhasilan venoplasti lebih sering ditemukan pada subjek dengan pemasangan kateter di vena subklavia, durasi pemasangan panjang, onset gejala lambat dan riwayat pemasangan berulang.

ABSTRACT
Background In the last five years, the use of deep vein catheter in chronic kidney disease CKD often leads to central vein stenosis CVS at Cipto Mangunkusumo Hospital 60 70 . Since 2013, CVS has been managed with venoplasty, and has never been evaluated. The study aimed to evaluate of its success rate and the risk factors might be correlated. Method A descriptive analytic study with cross sectional design conducted enrolling of stage 4 5 CKD patients with symptomatic CVS who underwent venoplasty. Independent variables are onset of symptoms, type, location, duration and frequency of catheter implantation. Dependent variable is venoplasty success, which was determined by residual stenosis 60 years old, 61.8 were male and 70.6 with hypertension. Venoplasty success rate found on this study was 85.3 , mean initial stenosis was 79.1 13.8 and median residual stenosis was 24.5 ranged of 10 90 . The most common stenosis was found in subclavian vein 47.1 . There was no significant correlation with venoplasty success rate. Nevertheless, higher venoplasty success rate found in subjects with catheter located in subclavian vein OR 2.45 p 0.627 and the frequency of implantation 2 times OR 1.85 p 0.648 . Conclusion Venoplasty success rate on CVS patients was 85.3 with success rate found twice higher with implantation at subclavian vein and frequency 2 times. However, there was no statistically significant correlation between stenosis risk factors with this success rate. Venoplasty failure is often found on CVS subjects with catheter implantation on subclavian vein, prolonged duration, delayed onset of symptoms and history of recurrent

implantation. Keywords Central vein stenosis, venoplasty, risk factors.