

Hubungan antara Kadar Gula Darah Admisi dan Timi Flow Pra/PascaproSEDUR Intervensi Koroner Perkutan Primer terhadap Mortalitas Pasien Infark Miokard Akut disertai Elevasi Segmen ST = The Association of Blood Glucose Level on Admission and Pre-post Procedural Timi Flow with Mortality in Patients with St Segment Elevation Myocardial Infarction Undergoing Primary Pci

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Abstrak

Latar belakang: Hubungan antara kadar gula darah yang tinggi dan thrombolysisin myocardial infarction TIMI flow pra/pascaproSEDUR angioplasti primerterhadap mortalitas 1 tahun belum banyak dieksplorasi.Tujuan: Penelitian ini bertujuan untuk menentukan hubungan kadar gula darahsaat admisi dan TIMI flow pra/pascaproSEDUR terhadap mortalitas 1 tahun pasieninfark miokard akut disertai elevasi segmen ST IMA-EST yang menjalaniintervensi koroner perkutan primer IKPP .Metode: 856 pasien IMA-EST yang dilakukan IKPP pada Januari 2014 hinggaJuli 2016 dianalisis secara retrospektif. Cut-off yang digunakan untuk kadar guladarah tinggi pada studi ini adalah ge;169 mg/dL. Kesintasan 1 tahun dinilai denganmetode Kaplan-Meier.Hasil: Pasien dengan kadar gula darah ge;169 mg/L N=307 mempunyai proporsiTIMI flow akhir 0 ndash; 1 yang lebih tinggi [3.3 vs. 0.5 ; adjusted odds ratio OR = 5.58, 95 confidence interval CI 1.30 ndash;23.9; p=0.02] dan mortalitas 1 tahun lebih tinggi [16.3 vs. 6 ; adjusted hazard ratio HR = 1.9, 95 CI1.12 ndash;3.23, p=0.017] dibanding pasien dengan kadar gula darah rendah N=549 .TIMI flow akhir 0 ndash; 1 merupakan prediktor independen mortalitas 1 tahun HR= 7.0, 95 CI 3.23 ndash;15.15;

.....Background The association of high blood glucose level and Thrombolysis InMyocardial Infarction TIMI flow before after primary angioplasty with 1 yearmortality has not much been explored.Objective This study sought to determine the association of blood glucose level BGL on admission and pre post procedural TIMI flow with 1 year mortality inpatients with ST segment elevation myocardial infarction STEMI undergoingprimary percutaneous coronary intervention PCI .Methods 856 patients with STEMI and treated with primary PCI betweenJanuary 2014 and July 2016 were retrospectively analyzed. The cut off used for ahigh BGL in this study was ge 169 mg dL. Survival at 1 year was assessed byKaplan Meier method.Results Patients with BGL ge 169 mg dL N 307 had higher proportion of finalTIMI flow 0 1 3.3 vs. 0.5 adjusted odds ratio OR 5.58, 95 confidenceinterval CI 1.30 to 23.9 p 0.02 and higher 1 year mortality 16.3 vs. 6 adjusted hazard ratio HR 1.9, 95 CI 1.12 to 3.23, p 0.017 compared withlower BGL patients N 549 . Final TIMI flow 0 1 was an independent predictorof 1 year mortality HR 7.0, 95 CI 3.23 to 15.15 p