

Kesesuaian tripel diagnostik dengan histopatologis pada kanker payudara stadium awal di RSCM dan RSUPP = Accuracy of triple diagnostic in early stage breast cancer at Ciptomangunkusumo Hospital and Persahabatan Hospital

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Abstrak

Latar belakang: Kanker payudara merupakan kanker terbanyak dengan insiden 40,3 per 100.000 perempuan dan angka mortalitas sebesar 16,6 per 100.000 perempuan di Indonesia. Pada stadium awal I-II, penentuan terapi operatif mastektomi seringkali membutuhkan pemeriksaan potong beku intraoperatif untuk menilai keganasan, namun sering tidak tersedia di banyak rumah sakit. Tripel diagnostik pemeriksaan fisik, ultrasonografi dan fine needle aspiration biopsy merupakan metode diagnostik preoperatif yang juga dinilai akurat dan mudah dilakukan. Studi ini menilai kesesuaian tripel diagnostik dengan histopatologis khususnya pada benjolan yang curiga ganas di RSCM dan RSUPP selama Februari 2016-Agustus 2017.

Metode: Subjek dengan benjolan payudara curiga ganas pada stadium awal yang memenuhi kriteria inklusi di RSCM dan RSUPP dilakukan tripel diagnostik preoperatif, kemudian dilakukan pemeriksaan potong beku intraoperatif dan histopatologi pasca operasi. Menggunakan desain studi diagnostik statistik, dilakukan analisis kesesuaian tripel diagnostik maupun potong beku dibandingkan dengan histopatologi yaitu sensitivitas, spesifisitas, nilai prediksi positif NPP, nilai prediksi negatif NPN dan akurasi.

Hasil Didapatkan 33 subjek kanker payudara stadium awal prevalensi 4,3 dengan rerata umur 49,6 tahun dengan kelompok umur terbanyak di atas 40 tahun 78,8. Sekitar 63,6 subjek memiliki ukuran tumor 2-5 cm dan jenis histopatologi terbanyak berupa karsinoma invasif 84,8. Dibandingkan hasil histopatologi: a Potong beku memiliki sensitivitas 96,8, spesifisitas 100, NPP 100, NPN 66,7, dan akurasi 97,0 ; dan b Tripel diagnostik mempunyai sensitivitas 77,4, spesifisitas 100, nilai prediksi positif tinggi 100, nilai prediksi negatif 22,2 dan akurasi 78,8 $p = 0,016$.

Kesimpulan: Tripel diagnostik merupakan metode diagnostik yang cukup akurat pada kanker payudara stadium awal sehingga dapat digunakan sebagai metode diagnostik alternatif di fasilitas pelayanan tipe C dan D di Indonesia di saat potong beku tidak tersedia.

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Background: Breast cancer is the most common cancer with incidence rate 40.3 per 100.000 women and mortality rate 16.6 per 100.000 women in Indonesia. In early stage, decision for operative therapy mastectomy requires intraoperative frozen section to assess its malignancy, which is often unavailable in many hospitals. Triple diagnostic physical examination, breast ultrasonography and fine needle aspiration biopsy is an accurate and easily performed preoperative diagnostic method. This study assesses the suitability of triple diagnostic with histopathology results in suspicious malignant breast lumps at Ciptomangunkusumo and Persahabatan hospital during February 2016 August 2017.

Method: Subjects with suspicious malignant breast lump that met the inclusion criteria underwent preoperative triple diagnostic, intraoperative frozen section and postoperative histopathology examination. With statistic diagnostic study design, the suitability of triple diagnostic and frozen section were assessed in comparison to histologic examination sensitivity, specificity, positive predictive value PPV, negative

predictive value NPV and accuracy.

Result: 33 subjects with early stage breast cancer were obtained prevalence 4.3 with average mean of age of 49.6 years, were above 40 years 78.8. Around 63.6 had tumor size between 2.5 cm, and most histopathologic types were those with invasive carcinoma 84.8. When compared to histopathologic result a Frozen section has 96.8 sensitivity, 100 specificity, 100 PPV, 66.7 NPV and 97.0 accuracy and b Triple diagnostic has 77.4 sensitivity, 100 specificity, high PPV 100, 22.2 NPV and 78.8 accuracy. p 0.016.

Conclusion: Triple diagnostic is a relatively accurate diagnostic method in early stage breast cancer, hence, can be used as an alternative diagnostic method at type C and D healthcare facilities in Indonesia whenever frozen section is unavailable.