# Gangguan kapasitas difusi paru pada mikroangiopati diabetik di rsup persahabatan jakarta = Lung diffusion capacity impairment in diabetic microangiopathy at persahabatan hospital Jakarta

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Abstrak

Latar Belakang. Mikroangiopati diabetik DM seperti nefropati, retinopati, dan neuropati merupakan komplikasi umum diabetes melitus tipe 2 T2DM . Paru merupakan salah satu organ target dari komplikasi mikrovaskular dan penurunan kapasitas difusi paru pada mikroangiopati DM masih sedikit diketahui.
Metode. Penelitian ini bersifat potong lintang pada subjek T2DM yang menjalani pemeriksaan kapasitas difusi paru terhadap karbon monoksida DLCO, albumin urin, funduskopi dan elektromiografi EMG di poliklinik rawat jalan DM terpadu. Kriteria eksklusi yaitu penyakit paru akut atau kronis.
Hasil. Sebanyak 52 subjek L/P:20/32 usia 58 10,4 tahun sebagian besar menunjukkan HbA1c>6,5 41/52 78 , tidak pernah merokok 41/52 78,8 . rerata terdiagnosis DM 10,5 6,9 tahun, sebanyak 33 63,5 le;10 tahun dan 19 36,5 subjek >10 tahun. Subjek dengan neuropati lebih banyak ditemukan yaitu sebesar 41/52 26,3 diikuti nefropati 29/52 18,6 dan retinopati 9/52 5,8 dengan rerata DLCO sebesar 16,01 4,12 ml/menit/mmHg . Penurunan kapasitas difusi pada Mikroangiopati DM ditemukan sebanyak 14/52 25 subjek, didapatkan nilai p pada nefropati sebesar p=0,27, retinopati p=0,36 dan neuropati p=0,49.
Kesimpulan. Gangguan kapasitas difusi paru pada mikroangiopati DM mengalami penurunan namun tidak mempunyai hubungan yang yang bermkana, hal ini menunjukkan gangguan faal difusi paru pada mikroangiopati DM.
<hr />Background. Diabetic microangiopathy such as nephropathy, retinopathy and neuropathy is a common complications of type 2 diabetes mellitus T2DM . The lung is one of the target organs in the development of vascular complications in diabetic patients and little is known about the impairment of pulmonary diffusing capacity due to the diabetic microangiopathy.
Method. The subjects were T2DM patients underwent carbon monoxide lung diffusion capacity DLCO test, urine test, funduscopy and electromyography EMG examination with consecutively from diabetic outpatient clinic. The exclusion criterias were acute or chronic pulmonary diseases.
Results. A total of 52 subjects m/f: 20/32 ages 58 10.4 years mostly showed HbA1c> 6.5 41/52 78 , never smoked 41/52 78.8 . diagnosed DM rates of 10.5 6.9 years, 33 63.5 le;10 years and 19 36.5 subjects> 10 years. Subjects with more neuropathy were 41/52 26.3 followed by nephropathy 29/52 18.6 and retinopathy 9/52 5.8 with DLCO average of 16.01 4.12 ml / min / mmHg . The decrease in diffusion capacity in Microangiopathy DM was found in 14/52 25 subjects, obtained p value on nephropathy of p=0.27, retinopathy p=0.36 and neuropathy p=0.49 respectively.
Conclusion. This study demonstrated that diffusion capacity is impairment in diabetic microangiopathy patients. Pulmonary diffusion capacity has no association with diabetic microangiopathy but there is a decreased pulmonary diffusion physiology.