

Efektivitas Pemberian Dosis Awal Fenobarbital Intravena untuk Anak Pasca- Kejang dan Faktor - Faktor yang Memengaruhinya = Effectiveness of Initial Intravenous Phenobarbital in Post-Seizure Child and The Risk Factors of Recurrence

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Abstrak

<p>Latar Belakang: Kejang berulang berisiko mengganggu kualitas hidup anak dan dapat berkembang menjadi status epileptikus. Sampai saat ini belum ada rekomendasi tatalaksana pasca kejang pada anak untuk mencegah kejang berulang.

Tujuan: Menilai efektivitas fenobarbital intravena pada anak pasca kejang untuk mencegah kejang berulang serta faktor risiko yang memengaruhinya.

Metode: Studi observasional kohort prospektif pada 70 subjek sesuai kriteria inklusi. Status epileptikus dan pemberian fenitoin atau fenobarbital intravena sebelumnya dieksklusi. Pada seluruh subjek diberikan fenobarbital 10 mg/kgbb dan dipantau selama 2x24 jam untuk melihat adanya kejang berulang. Faktor risiko yang diteliti adalah etiologi kejang, usia awitan, frekuensi kejang, lama kejang, perkembangan motorik kasar, interval antara kejang dan pemberian fenobarbital, perkembangan neurologi pasca fenobarbital, kadar leukosit dan pemeriksaan EEG.

Hasil: Sebanyak 70 dari 79 pasien yang dianalisis, proporsi terbesar laki – laki (61%) dan berusia <3 tahun (46%). Sebanyak 77% subjek tidak mengalami kejang berulang setelah pemberian fenobarbital 10 mg/kgbb. Usia awitan kejang >3 tahun (OR 4,444; p=0,046) dan perkembangan motorik kasar (OR 3,932; IK95% 1,072 – 14,422; p=0,039) merupakan faktor risiko independen terhadap terjadinya kejang berulang.

Kesimpulan: Efektivitas pemberian dosis awal fenobarbital untuk mencegah terjadinya kejang berulang sebesar 77,1%. Usia awitan kejang >3 tahun dan keterlambatan perkembangan motorik kasar merupakan faktor risiko kejang berulang.</p><hr /><p>Background: Recurrent seizures are associated with poor quality of life of child and at risk of developing into status epilepticus. In Indonesia, there is no recommendation for management post-seizure in child to prevent recurrent seizure.

Aims: To assess the effectiveness of initial intravenous phenobarbital in post-seizure child to prevent recurrence of seizure and identify the risk factors.

Method: A prospective cohort observational study of 70 subjects according inclusion criteria. Patients with status epilepticus or administration of intravenous phenytoin or phenobarbital previously were excluded. All subject were given 10 mg/kgbb intravenous phenobarbital and evaluate seizure recurrence for 2x24 hours. The risk factors studied were seizure etiology, onset age of seizure, seizure duration, gross motor development, intervals between seizures and phenobarbital administration, neurological development, leucocyte levels and electroencephalography examination.

Results: A total of 70 from 79 subject were analyzed, found that the largest proportion were male (61%) and aged <3 years (46%). A total of 77% subjects did not had recurrence of seizure in 2x24 hours monitoring after administration of 10 mg/kgbb intravenous phenobarbital. Onset age of seizure >3 years (OR 4.444; p=0.046) and gross motor development (OR 3.932; 95%CI 1.072 – 14.422; p=0.039) were independent risk factors for seizure recurrence.

Conclusion: The administration of 10 mg/kgbb intravenous phenobarbital was effective in preventing seizure recurrence. Onset age of seizures >3 years and delayed gross motor development are the risk factors for seizure recurrence.</p>