

Faktor yang Berhubungan dengan Amputasi Mayor pada Acute Limb Ischemia Klasifikasi Rutherford IIb di RSCM 2014-2019 = Factors Related to Major Amputation in Acute Limb Ischemia Rutherford IIb in RSCM 2014-2019

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Abstrak

Studi ini mengidentifikasi faktor-faktor yang berhubungan dengan kejadian amputasi mayor pada pasien Acute Limb Ischemia (ALI) klasifikasi Rutherford IIb dan seberapa besar pengaruhnya. Penelitian ini berdesain kuantitatif dengan desain kohort retrospektif terhadap semua pasien RSCM pada tahun 2014-2019 dengan diagnosis ALI Rutherford IIb. Data demografi dan faktor risiko, dianalisa untuk mendapatkan korelasinya dengan tindakan amputasi mayor. Pada penelitian ini, insiden amputasi mayor pada total subjek adalah 39,2%. Rata-rata subjek berusia 60 tahun, dengan insiden komorbiditas diabetes mellitus 32,4%, gangguan ginjal kronik 19,6%, hipertensi 41,2%, dan penyakit jantung koroner 39,2%. Hasil analisis menunjukkan hipertensi meningkatkan risiko amputasi mayor 27,4 kali, riwayat penyakit jantung koroner meningkatkan risiko 10,7 kali, dan diabetes mellitus meningkatkan risiko 9,8 kali, semua secara signifikan. Merokok ditemukan sebagai faktor risiko tidak langsung terhadap kejadian amputasi mayor.

Kata kunci: Acute limb ischemia, Amputasi mayor, Rutherford IIb

<hr />This study identifies the factors associated with major amputation in patients with Acute Limb Ischemia (ALI) Rutherford Stage IIb and how much they affect it. This is a quantitative study with retrospective cohort design for all patients with ALI in Rutherford IIb stage in 2014-2019. Demographics and risk factors were all analyzed in order to find the correlation with the incidence of major amputation. In this study, the incident of major amputation on the overall subject was 39.2%. The mean age for the subjects was 60 years old, and the comorbidity incidence of diabetes is 32.4%, chronic kidney disease is 19.6%, hypertension is 41.2%, and coronary heart disease is 39.2%. The result of the analysis shows that hypertension increases the risk of major amputation in patients with ALI in Rutherford IIb stage by 27.4 times, while coronary heart disease does by 10.7 times and diabetes does by 9.8 times, all statistically significant. Smoking is also found as an indirect risk factor to the incident of major amputation.

Key words: Acute limb ischemia, Major amputation, Rutherford IIb