

Pengalaman trans urethral resection of the prostate (TUR-P) menggunakan sistem bipolar dengan cairan NaCl 0,9% sebagai irigasi di Departemen Urologi RSCM = Trans urethral resection of the prostate (TUR-P) with bipolar system using normal saline as irrigation in Urology Department Ciptomangunkusumo hospital

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Abstrak

Tujuan: Melaporkan pengalaman TUR-P menggunakan NaCl 0,9% sebagai irigasi (sistem bipolar) dan efeknya terhadap kadar hemoglobin, hematokrit dan natrium.

Bahan dan Cara: Studi ini adalah studi prospektif non randomisasi. Enam puluh pasien PPJ memenuhi kriteria penelitian (30 sistem bipolar, 30 sistem monopolar), dinilai lama operasi, jumlah cairan irigasi, berat chip prostat, penurunan kadar hemoglobin, hematokrit, natrium dan ada tidaknya TUR sindrom.

Hasil : Terdapat perbedaan yang bermakna antara volume prostat pada kedua grup. Pada sistem bipolar rerata lama operasi adalah 39,66+12,02 menit dan 54,33+19,01 menit pada sistem monopolar, rerata berat chip yang direseksi 14,09+11,25 gram pada sistem bipolar dan 24,26+18,15 gram pada sistem monopolar. Rerata penurunan hemoglobin 0,7601 pada sistem bipolar dan 1,09g/dl pada sistem monopolar, rerata penurunan natrium 2,3mEq/l pada sistem bipolar dan 1,7mEq/l pada sistem monopolar. Tidak terdapat korelasi yang bermakna antara lama operasi dengan penurunan hemoglobin dan natrium pada kelompok sistem bipolar sedangkan pada sistem monopolar terdapat korelasi yang bermakna antara lama operasi dengan penurunan hemoglobin(p:0,04), dan penurunan natrium(p:0,008). Tidak dijumpai adanya TUR sindrom pada kedua kelompok.

Simpulan: Dari pengalaman awal ini, disimpulkan bahwa TUR-P dengan sistem bipolar merupakan prosedur yang aman dan tidak memerlukan keahlian tambahan. Penelitian lanjutan dengan studi prospektif randomisasi untuk membandingkan sistem ini dengan sistem monopolar sangat dianjurkan.

Objectives: To report our experience in TUR-P using normal saline as irrigation (bipolar system) and its effect towards patient's hemoglobin, hematocryte and sodium content. **Materials and methods:** This study was performed in a prospective non-randomized fashion. Sixty BPH patients were included (30 patients were done with bipolar system, 30 patients with monopolar system). The parameters recorded were operation time, amount of irrigation, resected tissue weight, hemoglobin, hematocryte and sodium decline and presence of TUR syndrome.

Results : There was a significant difference in prostate volume between the two groups. Mean operation time was 39,66+12,02 mnt in the bipolar group and 54,33+19,01 mnt in the monopolar group, resected tissue weight was 14,09+11,25 grams in the bipolar group and 24,26+18,15 grams in the monopolar group. Hemoglobin decline was 0,7601 in the bipolar group and 1,09 in the monopolar group, sodium decline was 2,3mEq/l in the bipolar group and 1,7mEq/l in the monopolar group. There was no significant correlation

between operation time with hemoglobin and sodium decline in the bipolar group whilst in the monopolar group there was significant correlation between operation time with hemoglobin decline (p:0,04), and sodium decline (p:0,008). There was no TUR syndrome seen in either groups.

Conclusions: TUR-P with bipolar system is a new technology which is safe and requires no additional skills. Further investigation using randomized controlled trial to compare this technology with monopolar system is recommended.</i>