

# Pengaruh Pemberian Klopido­grel Terhadap Kejadian Kegagalan Primer Fistula Arteriovena pada Pasien Penyakit Ginjal Tahap Akhir – Suatu Kajian Sistematis = The Effect of Clopidogrel on Arteriovenous Fistula Primary Failure Prevention in Patients with End-Stage Renal Disease - A Systematic Review

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## Abstrak

Latar Belakang : Fistula arteriovena (FAV) merupakan akses vaskular yang paling banyak digunakan oleh pasien-pasien Penyakit Ginjal Tahap Akhir (PGTA) yang menjalani hemodialisis rutin di Indonesia. FAV dapat mengalami disfungsi sebelum digunakan untuk inisiasi hemodialisis, yang disebut kegagalan primer. Klopido­grel merupakan antiagregasi trombosit yang dilaporkan dapat mengurangi kejadian kegagalan primer pada FAV dibandingkan antiagregasi trombosit lainnya. Hingga saat ini belum ada panduan yang merekomendasikan penggunaan klopido­grel karena kurangnya bukti ilmiah.

Tujuan: Mengetahui pengaruh pemberian klopido­grel terhadap kejadian kegagalan primer FAV dan risiko perdarahan pada pasien-pasien PGTA.

Metode: Penelusuran literatur Randomized Control Trial pada pangkalan data Medline / Pubmed, EbscoHost, Embase, Proquest, Scopus dan Cochrane Library berdasarkan kriteria eligibilitas sesuai PICO tanpa batasan bahasa sejak tahun 1987. Penilaian risiko bias menggunakan aplikasi Risk of Bias 2 Cochrane.

Hasil: Penelitian ini melibatkan 3 penelitian Randomized Control Trial berdasarkan kriteria yang telah ditentukan. Ketiga penelitian mendapatkan hasil bahwa pemberian klopido­grel dapat mengurangi risiko kegagalan primer FAV. Meta-analisis tidak dapat dilakukan karena adanya heterogenitas klinis dan metodologis. Penilaian risiko bias dengan Risk of Bias 2 Cochrane mendapatkan 2 literatur berisiko bias ringan, dan 1 berisiko sedang. Penilaian dengan uji regresi Egger ( $p = 1,00$ ) dan uji korelasi Rank ( $p = 0,446$ ) tidak terdapat indikasi bias publikasi. Prevalensi perdarahan tidak berbeda pada kelompok perlakuan dibandingkan kelompok kontrol.

Simpulan: klopido­grel dapat mengurangi kejadian kegagalan primer FAV dengan kejadian perdarahan yang tidak berbeda dengan kelompok kontrol.

.....Background: Arteriovenous fistula (FAV) is the most widely used vascular access for end-stage renal disease also called end-stage kidney disease or kidney failure (CKD) patients undergoing routine hemodialysis in Indonesia. However, FAV can become dysfunctional before it is used for the initiation of hemodialysis, a condition known as primary failure. Clopidogrel is an anti-platelet aggregation that has been reported to reduce the incidence of primary failure in FAV compared to other anti-platelet aggregation agents. To date, the guideline does not suggest the use of clopidogrel monotherapy for prevention arteriovenous fistula primary failure due to low quality of evidence.

Objective: To assess the association of clopidogrel to the incidence of primary FAV failure and the risk of bleeding in End Stage Kidney Disease patients.

Methods: A literature search was carried out to obtain Randomized Control Trial studies conducted since 1987 from Medline / Pubmed, EbscoHost, Embase, Proquest, Scopus, and Cochrane Libraries without language restrictions. Risk of bias assessment was performed with the Cochrane Risk of Bias 2 application.

Results: This study involved 3 studies based on determined criteria. The risk of bias assessment with Cochrane's Risk of Bias 2 obtained a mild degree. All of the studies found that clopidogrel may reduce the risk of primary AVF failure. Meta-analysis was not performed due to clinical and methodological heterogeneity. Risk of bias assessment found 2 literature with mild risk bias and 1 literature with low risk bias. Assessment with Egger regression test ( $p = 1.00$ ), and Rank correlation test ( $p = 0.446$ ) showed no indication of publication bias. In addition, the prevalence of bleeding did not differ between the treatment and control groups