

Kriteria Usia Sebagai Prediktor Mortalitas Operatif Pasca Modified Blalock-Taussig Shunt = Age As Operative Mortality Predictor After Modified Blalock-Taussig Shunt

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Abstrak

Latar belakang: Modified Blalock-Taussig shunt (MBTS) merupakan prosedur bedah jantung sederhana namun memiliki angka mortalitas cukup tinggi. Karakteristik terutama usia pasien yang menjalani prosedur MBTS di Indonesia berbeda dengan negara lain.

Tujuan: Membandingkan angka mortalitas operatif MBTS berdasarkan kriteria usia dan mengidentifikasi faktor prediktor mortalitas operatif dan morbiditas pascaoperasi MBTS.

Metode: Penelitian ini merupakan studi kohort retrospektif mortalitas pada 400 pasien yang menjalani operasi MBTS di Rumah Sakit Jantung dan Pembuluh Darah Harapan Kita.

Hasil: Mortalitas berdasarkan kriteria usia yaitu 32,1% pada usia 28 hari, 19,9% pada usia 29-365 hari, 3,6% pada usia 366-1825 hari dan 8% pada usia > 1825 hari. Berat badan kurang dari 3 kg, kadar hematokrit lebih dari 45% sebelum operasi dan kadar activated partial thromboplastine time (aPTT) < 60 detik sebagai prediktor mortalitas. Transfusi packed red cell (PRC) > 6 ml/kg, penggunaan ventilasi mekanik dan penggunaan prostaglandin preoperasi dan kadar aPTT < 60 detik 4 jam pasca operasi terbukti sebagai prediktor morbiditas.

Kesimpulan: Terdapat perbedaan bermakna angka mortalitas pascaoperasi berdasarkan usia. Kriteria usia tidak terbukti sebagai prediktor mortalitas. Berat badan < 3 kg meningkatkan mortalitas. Prediktor morbiditas pascaoperasi adalah transfusi PRC > 6ml/kg, penggunaan ventilator, penggunaan prostaglandin dan kadar aPTT < 60 detik.

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Background: Modified Blalock-Taussig shunt (MBTS) is a simple procedure but has a considerable operative mortality rate. Patient's characteristics who underwent MBTS in Indonesia is different than other country. There was no predictor of operative mortality has been identified in Indonesian.

Objectives: To compare mortality rate based on age criteria and to identify mortality and morbidity predictors after MBTS procedure.

Methods: A retrospectively cohort study was conducted on 400 patients who underwent MBTS at National cardiovascular center Harapan Kita (NCCHK).

Results: There were 32,1% death at age 28 days, 19,9% at age 29-365 days, 3,6% at age 366-1825 days and 8% at age > 1825 days. Body weight < 3 kg, haematocrite level > 45% before procedure

and activated partial thromboplastine time level (aPTT) < 60 seconds were operative mortality predictors. Packed red cell transfusion (PRC) > 6 ml/kg, mechanical ventilator and prostaglandin E1 use before procedure, aPTT level < 60 seconds after procedure were identified as postoperative morbidity predictors.

Conclusion: age was not proven as an operative mortality predictors. Body weight < 3 kg increase mortality rate. Postoperative morbidity predictors were PRC transfusion > 6ml/kg, aPTT level < 60 seconds, mechanical ventilator and prostaglandine E1 use.