

Variabilitas Tata Laksana Status Epileptikus oleh Dokter Spesialis Anak di Indonesia = Variability in Management of Status Epilepticus by Pediatricians in Indonesia

Hanifa Aulia Qurotaayun, author

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Abstrak

Latar Belakang Status epileptikus adalah kondisi kegawatdaruratan Neurologi yang dapat terjadi pada anak. UKK Neurologi IDAI menerbitkan Rekomendasi Penatalaksanaan Status Epileptikus IDAI 2016 agar terdapat keseragaman tata laksana serta menghindari over dan undertreatment. Tujuan Mengkaji dan mengevaluasi penerapan Rekomendasi Penatalaksanaan Status Epileptikus UKK Neurologi IDAI 2016 dan variabel yang memengaruhi tata laksana status epileptikus oleh dokter spesialis anak di Indonesia. Metode Metode penelitian menggunakan studi potong lintang dengan instrumen penelitian berupa kuesioener daring yang berisi 16 pertanyaan kesesuaian tata laksana, dengan total skor 21. Penelitian dilakukan selama bulan Oktober 2023. Respondens merupakan dokter spesialis anak di Indonesia yang tergabung dalam Ikatan Dokter Anak Indonesia (IDAI). Hasil Rerata skor kesuaian tata laksana status epileptikus dari 129 subjek adalah 11,68 dari 21,00. Rentang skor subjek adalah 2,00 hingga 19,00. Proporsi dokter spesialis anak yang mengetahui rekomendasi adalah 97,3% dan yang pernah mendapatkan sosialisasi adalah 82,9%. Signifikansi uji komparatif rerata skor kesesuaian kategori usia <41 tahun, 41-60 tahun, >60 tahun adalah $p=0,071$, kategori tahun kelulusan 10 tahun dan >10 tahun $p=0,04$, kategori tempat kerja klinik/praktik pribadi, rumah sakit tipe B/A dan rumah sakit tipe C/D adalah 0,309, kategori lokasi kerja kota madya dan kabupaten adalah $p=0,279$, serta kategori riwayat sosialisasi dan tidak $p=0,139$. Terdapat perbedaan kemampulaksanaan rekomendasi tata laksana antara lokasi kerja praktik/klinik pribadi dan rumah sakit sebesar $p=0,287$ dan rumah sakit tipe B/A dan rumah sakit tipe C/D sebesar $p=0,013$, serta berdasarkan tempat kerja sebesar $p=0,798$. Kesimpulan Terdapat perbedaan rerata skor kesesuaian rekomendasi tata laksana yang secara statistik bermakna pada kategori tahun kelulusan 10 tahun dan >10 ($p=0,04$), serta perbedaan kemampulaksanaan rekomendasi di rumah sakit tipe B/A dan rumah sakit tipe C/D ($p=0,013$).

.....Introduction Status epilepticus is a neurological emergency condition that can occur in children. Indonesian Pediatric Society (UKK Neurologi IDAI) issued the IDAI 2016 Recommendations for the Management of Status Epilepticus to ensure consistent management of status epilepticus. Objective To assess and evaluate the implementation of the UKK Neurologi IDAI 2016 Recommendations for the Management of Status Epilepticus and the variables influencing the management of status epilepticus by pediatric specialists in Indonesia. Method The research methodology used a cross-sectional study design with an online questionnaire as the research instrument, consisting of 16 questions on the appropriateness of management, with a total score of 21. The research was conducted in October 2023. The respondents were pediatric specialists in Indonesia who are members of the Indonesian Pediatric Society (IDAI). Results The mean score of compliance with the managementguidelines recommendations based on workplace in hospital type B/A and hospital type C/D ($p=0.013$). guidelines for status epilepticus from 129 subjects is 11.68 out of 21.00. The range of subject scores is from 2.00 to 19.00. The proportion of pediatric specialists who are aware of the recommendations is 97.3%, and those who have received training is 82.9%. The significance of the comparative test for the mean scores of compliance in the age categories <41 years, 41-

60 years, and >60 years is $p=0.071$. $p=0.04$ For the categories of years since graduation 10 years and >10 years, $p=0.309$. for the categories of workplace in clinics/private practice, hospital type B/A, and hospital type C/D, $p=0.795$ for the categories of working location in rural and urban area, and $p=0.139$ for the categories of history of training and no training. The difference in the implementation of management guideline recommendations based on working location with a significance of $p=0.287$ in clinic/private practice and hospitals, and $p=0.013$ in hospital type B/A and hospital type C/D. The difference in the implementation of management guideline recommendations based on workplace with a significance of $p=0.798$ in rural and urban area. Conclusion There is a statistically significant difference in the mean scores of compliance with the management guideline recommendations in the categories of years since graduation 10 years and >10 years ($p=0.04$), and difference in the implementations of management.