

Faktor-faktor Prognostik Progression-Free Survival Dua Tahun pada pasien Limfoma Hodgkin di Rumah Sakit Umum Pusat Nasional Dokter Cipto Mangunkusumo = Prognostic Factors of Two-Year Progression-Free Survival in Hodgkin's Lymphoma patients at Doctor Cipto Mangunkusumo National Central General Hospital

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Abstrak

Latar Belakang: Limfoma Hodgkin merupakan keganasan yang mencakup 1% kasus kanker keseluruhan. Adapun overall survival (OS) pasien limfoma Hodgkin dalam lima tahun mencapai 90%. Namun, progression-free survival (PFS) limfoma Hodgkin hanya mencapai 70-90% dalam kurun waktu 25 bulan. Setelah mengalami progresivitas, pasien mengalami penurunan PFS setelah mendapat terapi lini kedua. Sehingga, perlu diketahui faktor-faktor prediktor yang mempengaruhi PFS pasien limfoma Hodgkin.

Tujuan: Mengetahui faktor-faktor prognostik PFS dua tahun pasien limfoma Hodgkin. Metode: Penelitian ini menggunakan desain kohort retrospektif yang melibatkan pasien limfoma Hodgkin yang teregistrasi dari tahun 2011-2021 di Rumah Sakit Umum Pusat Nasional Dokter Cipto Mangunkusumo. Faktor-faktor prognostik yang diteliti adalah stratifikasi risiko, skor prognosis internasional, kadar trombosit, laktat dehidrogenase, indeks komorbiditas Charlson, dan waktu sejak diagnosis hingga terapi. Analisis multivariat terhadap PFS dua tahun dilakukan menggunakan model regresi Cox.

Hasil: Terdapat 115 subjek yang disertakan dalam penelitian dengan median usia 29 tahun, kadar trombosit 393.000 sel/L, LDH 340 IU/L, dan waktu sejak diagnosis hingga terapi enam minggu. Sebagian besar subjek penelitian adalah kelompok stadium lanjut (53,91%), total skor prognosis internasional 0-3 (69,57%), dan total skor indeks komorbiditas Charlson 0-1 (75,65%). Angka PFS dua tahun pasien limfoma Hodgkin di RSCM sebesar 59,13%. Hasil analisis bivariat menunjukkan waktu sejak diagnosis hingga terapi yang tidak memiliki kemaknaan secara statistik dengan HR 0,83 (IK 95% 0,42-1,59, p=0,57). Analisis multivariat menghasilkan tiga faktor prognostik independen, yakni stadium lanjut (HR 7,85 IK 95% 3,01-20,47, p<0,01), trombosit >450.000 sel/L (HR 2,77 IK 95% 1,49-5,16, p<0,01), dan LDH baik 250-500 IU/L (HR 2,57 IK 95% 1,01-3,63, p=0,04) maupun >500 IU/L (HR 3,06 IK 95% 1,20-7,82, p=0,02). Sistem skor berdasarkan ketiga variabel tersebut memiliki diskriminasi yang baik (AUROC 0,879, IK 95% 0,816-0,942, p<0,01).

Kesimpulan: Stadium lanjut, trombosit >450.000 sel/L, dan LDH 250 IU/L merupakan faktor-faktor prognostik PFS dua tahun pada pasien limfoma Hodgkin.

.....Background: Hodgkin's lymphoma is a malignancy that accounts for 1% of all cancer cases. The overall survival (OS) of Hodgkin's lymphoma patients in five years reaches 90%. However, progression-free survival (PFS) for Hodgkin's lymphoma only reaches 70-90% within 25 months. After experiencing progression, patients experienced a decrease in PFS after receiving second-line therapy. So, it is necessary to know the predictor factors that influence the PFS of Hodgkin's lymphoma patients.

Aim: To determine prognostic factors for two-year PFS in Hodgkin's lymphoma patients. Methods: This study used a retrospective cohort design involving Hodgkin's lymphoma patients registered from 2011-2021 at Dokter Cipto Mangunkusumo National General Hospital. The prognostic factors studied were risk

stratification, international prognosis score, platelet levels, lactate dehydrogenase, Charlson comorbidity index, and time from diagnosis to therapy. Multivariate analysis of two-year PFS was performed using Cox regression models.

Results: There were 115 subjects included in the study with a median age of 29 years, platelet levels of 393,000 cells/L, LDH 340 IU/L, and time from diagnosis to therapy of six weeks. Most of the research subjects were in the advanced stage group (53.91%), the total international prognosis score was 0-3 (69.57%), and the total Charlson comorbidity index score was 0-1 (75.65%). The two-year PFS rate for Hodgkin's lymphoma patients at RSCM was 59.13%. The results of bivariate analysis showed that the time from diagnosis to therapy was not statistically significant with HR 0.83 (95% CI 0.42-1.59, $p=0.57$).

Multivariate analysis yielded three independent prognostic factors, namely advanced stage (HR 7.85, 95% CI 3.01-20.47, $p<0.01$), platelets $>450,000$ cells/L (HR 2.77, 95% CI 1.49-5.16, $p<0.01$), and LDH either 250-500 IU/L (HR 2.57, 95% CI 1.01- 3.63, $p=0.04$) or >500 IU/L (HR 3.06 95% CI 1.20-7.82, $p=0.02$).

The scoring system based on these three variables had good discrimination (AUROC 0.879, 95% CI 0.816-0.942, $p <0.01$).

Conclusion: Advanced stage, platelets $>450,000$ cells/L, and LDH >250 IU/L are prognostic factors for two-year PFS in Hodgkin's lymphoma patients.