

Pemantauan Terapi Obat pada Pasien Ikterus dengan Diagnosa Penyerta Hiv on Arv dan Tuberkulosis on Oat = Monitoring of Drug Therapy in Jaundice Patients with co-Diagnoses of HIV on ARV and Tuberculosis on OAT

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Abstrak

Tuberkulosis (TB) dan Human Immunodeficiency Virus (HIV) menjadi beban utama penyakit menular terutama di negara-negara berpenghasilan rendah. Pada pasien penderita Tuberkulosis dengan adanya infeksi penyerta seperti koinfeksi HIV, diestimasikan akan meningkatkan risiko terjadinya drug-induced liver injury (DILI) akibat OAT sebanyak 4 kali lipat. Dilakukan pemantauan terapi obat ini untuk menganalisis masalah terkait obat (MTO)/ Drug's Related Problem (DRP) yang terjadi pada pengobatan pasien dan memberikan rekomendasi tindak lanjut menggunakan metode SOAP. Diperoleh hasil bahwa pasien memiliki diagnosis ikterus obstruktif, anemia normosistik normokrom, hiponatremia hipoosmolar euvolemik, Dili et causa OAT, HIV on ARV, TB on OAT dan terdapat interaksi obat kategori antara sukralfat dengan dolutegravir yang menyebabkan Sukralfat menurunkan efek dari dolutegravir dengan pengikatan kation dlm saluran GI. Hasil analisis DRP disajikan dalam SOAP sebagai komunikasi tertulis untuk menyampaikan rekomendasi kepada dokter penanggung jawab (DPJP).

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Tuberculosis (TB) and Human Immunodeficiency Virus (HIV) are the main burden of infectious diseases, especially in low-income countries. In patients suffering from Tuberculosis with accompanying infections such as HIV co-infection, it is estimated that the risk of drug-induced liver injury (DILI) due to OAT will increase by 4 times. This drug therapy monitoring is carried out to analyze drug-related problems (MTO)/Drug-Related Problems (DRP) that occur during patient treatment and provide follow-up recommendations using the SOAP method. The results showed that the patient had a diagnosis of obstructive jaundice, normochromic normocytic anemia, euvolemic hypoosmolar hyponatremia, Dili et causa OAT, HIV on ARV, TB on OAT and there was a major category of drug interaction between sucralfate and dolutegravir which caused Sucralfate to reduce the effect of dolutegravir by binding cations in GI tract. The results of the DRP analysis are presented in SOAP as written communication to convey recommendations to the doctor in charge (DPJP).