

Efektifitas pemberian proton pump inhibitor omeperazol pada bayi dan anak dengan laringomalasia = The effectivity of giving proton pump inhibitor omeperazole to the babies and child with laryngomalacia / Riza Sahyuni

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Abstrak

ABSTRAK

Latar belakang: Laringomalasia merupakan kondisi kelemahan struktur supraglotis saat inspirasi sehingga menyebabkan sumbatan jalan nafas atas dan menimbulkan gejala stridor inspirasi. Stridor semakin memburuk pada posisi terlentang. Penyakit penyerta laringomalasia umumnya adalah refluks laringofaring (RLF) yaitu 25-68%. RLF adalah pergerakan isi lambung secara retrograd menuju laring-faring, menimbulkan gejala dan tanda klinis yang bervariasi. Pemberian omeperazol dapat memperbaiki gejala regurgitasi dan stridor serta memperpendek durasi perjalanan alamiah laringomalasia

Tujuan: Mengetahui efektifitas omeperazol pada bayi dan anak dengan laringomalasia, mengetahui prevalensi RLF pada laringomalasia, ada tidaknya RLF berdasar nilai reflux finding score (RFS) menurut Belafsky dan mengetahui berat ringan gejala laringomalasia berdasar nilai laryngomalacia symptom score (LSS).

Metode: Uji controlled trials pada 65 subyek laringomalasia, dibagi kedalam kelompok 42 subyek yang mendapat omeperazol 2 x 2 mg/kg/bb dan 23 subyek yang mendapat plasebo selama 3 bulan

Hasil : Kelompok omeperazol dengan gejala berat 58,8% mengalami perbaikan dibanding kelompok plasebo 66,7% dengan nilai $p = 0,716$. Kelompok omeperazol dengan RLF positif 58,3% mengalami perbaikan dibanding kelompok plasebo 75% dengan nilai $p = 1.0$

Simpulan : Prevalensi RLF positif sebesar 24,6% dan gejala berat sebesar 44,6%. Efektifitas pemberian omeperazol selama 3 bulan belum terbukti efektif dibanding plasebo berdasarkan perbaikan nilai LSS, RFS dan status gizi. Namun hasil tersebut hanya berlaku sebagai kesimpulan penelitian pendahuluan karena tidak optimalnya besar sampel dan randomisasi subyek. Perlu penelitian lanjutan untuk membuktikan efektifitas omeperazol pada perbaikan skor LSS, skor RFS dan status gizi bayi dan anak dengan laringomalasia

ABSTRACT

Background: laryngomalacia is condition of floppy supraglottis structure in respiratory that trigger obstruction the upper airway and it causes symptom stridor inspiratory. Stridor can get worse in face up position. In general, the comorbidity of laryngomalacia is laryngopharyngeal reflux (LPR) about 25-68%. LPR is the movement of gaster retrogradely toward laryngopharyngeal and it triggers various symptom and clinical sign. The giving of omeperazole can improve the symptom of regurgitation and stridor and shorten the duration of natural disease of laryngomalacia

Objective: Knowing the effectivity of giving omeperazole to the babies and children with laryngomalacia, knowing the prevalance of LPR to the laryngomalacia, knowing the positibility of LPR based on the value of reflux finding score (RFS) according to Belafsky and knowing severity of symptom laryngomalacia based on the value of laryngomalacia symptom score (LSS).

Method: Test on controlled trials on 65 samples with laryngomalacia and is divided into 42 groups that have been given omeperazole 2x2 mg/kg/bw and 23 samples that have been given placebo for 3 month

Result: Omeperazol groups with severe symptom showed the improvement of 58,8% compared to placebo groups 66,7% with $p = 0.716$. Omeperazole groups with RLF positive showed the improvement of 58,3% compared to placebo groups 75 % with $p = 1.0$

Conclusion: The Prevalence of positive LPR based on RFS is 24,6% and with severe symptom is 44,6%. The effectivity of giving omeperazole for 3 month has not proved effective compared to placebo based on the improvement of value LSS, RFS and nutrition status. However such result is only valid for the conclusion of initial research because the size of samples were not either optimal or randomized. It is necessary to conduct research continuation to prove the effectivity of giving omeperazole on the improvement of LSS score, RFS score and nutrition status of babies and children with laryngomalacia