

ASSOCIATION OF HYPERTENSION AND STROKE FUNCTIONAL OUTCOME IN SPONTANEOUS INTRACEREBRAL HEMORRHAGE PATIENTS IN RSUP DR. SARDJITO

INTISARI

Latar Belakang: Stroke merupakan penyebab disabilitas nomor tiga terbanyak di dunia. Perdarahan intraserebral atau *intracerebral hemorrhage* (ICH) merupakan jenis stroke yang menyebabkan kematian dan disabilitas yang paling banyak di antara semua jenis stroke. Salah satu faktor risiko utama dari perdarahan intraserebral adalah hipertensi. Hingga saat ini, studi yang mempelajari hubungan hipertensi dan luaran fungsional stroke masih terbatas.

Tujuan: Mengetahui hubungan antara hipertensi dengan luaran fungsional stroke pada pasien perdarahan intraserebral.

Metode: Penelitian ini merupakan studi non-eksperimental dengan desain potong lintang. Data yang digunakan merupakan data sekunder pasien Stroke Unit RSUP Dr. Sardjito Yogyakarta pada bulan Januari 2020 hingga Maret 2021 yang dicatat saat admisi. Pengukuran tekanan darah subjek diklasifikasikan menjadi beberapa kategori: normal, *prehypertension*, *stage 1 hypertension*, dan *stage 2 hypertension*. Luarannya fungsional stroke dinilai menggunakan Barthel Index (BI). Skor BI diklasifikasikan menjadi *functionally dependent* (skor <60) dan *functionally independent* (skor 60 – 100). Faktor risiko stroke lainnya, seperti usia, jenis kelamin, volume perdarahan, status merokok, riwayat hipertensi, diabetes melitus, dan dislipidemia juga dicatat. Data dianalisis dengan analisis bivariat menggunakan IBM SPSS Statistics 23. Tingkat kepercayaan yang digunakan adalah 95% dengan $\alpha < 0,05$.

Hasil: Sebanyak 72 subjek dilibatkan dalam penelitian ini. Lebih dari separuh (72,3%) menderita hipertensi dan 94,23% di antaranya mengalami luaran fungsional *functionally dependent*. Namun berdasarkan hasil analisis bivariat, hubungan kedua variabel tersebut tidak signifikan ($p=0,114$)

Kesimpulan: Tidak terdapat hubungan yang bermakna antara tekanan darah dengan luaran fungsional stroke pada pasien perdarahan intraserebral di RSUP Dr. Sardjito.

Kata Kunci: perdarahan intraserebral, hipertensi, luaran fungsional stroke, Barthel Index

**ASSOCIATION OF HYPERTENSION AND STROKE FUNCTIONAL
OUTCOME IN SPONTANEOUS INTRACEREBRAL HEMORRHAGE
PATIENTS IN RSUP DR. SARDJITO**

ABSTRACT

Background: Stroke is the third most common cause of disability in the world. Intracerebral hemorrhage (ICH) is a type of stroke causing death or major disabilities most among all stroke types. One of the major modifiable risk factors of ICH is hypertension. There are still limited studies regarding the stroke functional outcome and its association with hypertension.

Objective: To determine the association between hypertension and stroke functional outcome in intracerebral hemorrhage patients.

Method: This research was a non-experimental study with cross-sectional design, using secondary on-admission data. The study was conducted in the Stroke Unit of RSUP Dr. Sardjito Yogyakarta from January 2020 to March 2021. Subjects' blood pressure measurements were classified into several categories: normal, prehypertension, stage 1 hypertension, and stage 2 hypertension. The stroke functional outcome was assessed using Barthel Index and the scores were classified into functionally dependent (score <60) and functionally independent (score 60 – 100). Other stroke risk factors, such as age, gender, hemorrhage volume, smoking status, preexisting hypertension, diabetes mellitus and dyslipidemia were also assessed. Data were analyzed with bivariate analysis using IBM SPSS Statistics 23. The level of confidence used was 95% with $\alpha < 0.05$.

Results: A total of 72 subjects were included in this study. More than half of the subjects (72.3%) had hypertension and 94.23% of them were functionally dependent. However, based on the bivariate analysis result, the association between both variables was found not significant ($p=0.114$).

Conclusion: There is no significant association between blood pressure and stroke functional outcome of ICH patients in RSUP Dr. Sardjito.

Keywords: intracerebral hemorrhage, hypertension, stroke functional outcome, Barthel Index