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RESPON ANTIBODI DAN TIMBULNYA KIPI PASCA VAKSINASI COVID-19 PADA PGTA DENGAN CAPD
WAHJU PRAMONO, Pembimbing I : dr. R. Heru Prasanto, SpPD-KGH, pembimbing II : dr. Metalia Puspitasari, SpPD
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INTISARI

RESPON ANTIBODI DAN TIMBULNYA KIPI PASCA VAKSINASI COVID-19 PADA PGTA DENGAN CAPD

Latar belakang : Pasien Penyakit Ginjal Tahap Akhir merupakan pasien dengan status *immunocomprimeze* yang rawan tertular infeksi dan harus menjalani terapi pengganti ginjal. Pada masa pandemi COVID-19, pasien PGTA dengan dialsis merupakan kelompok yang rawan terkena infeksi. Penelitian ini bertujuan untuk mengetahui respon *Neutralizing Antibody* (NAb) dengan serokonversi dengan *signal inhibition* ≥ *30%* pasien PGTA dengan CAPD dan timbulnya KIPI terhadap vaksinasi dengan *inactivated vaccine Coronavac.*

Metode : penelitian ini merupakan *observartional study* dengan desain penelitian *prospective cohort.* Penelitian ini melibatkan pasien PGTA dengan terapi CAPD di URJ Renal Terpadu RSUP dr. Sardjito. Pasien mendapatkan vaksin di URJ RSUP dr. Sardjito sesuai jadwal rutin. Pemeriksaan NAb dilakukan sebelum vaksinasi dan 2 minggu sesudah pemberian dosis ke 2. Juga dilakukan pemeriksaan darah rutin, dan kimia klinik. KIPI diamati selama 2 minggu pasca pemberian vaksin ke 1 dan ke 2. Hubungan antara data demografi dengan peningkatan NAb diuji dengan menggunakan Fischer exact test, perbedaan hasil laboratorium menggunakan *Paired t test.*

Hasil penelitian : dari 19 pasien yang bersedia mengikuti penelitian, semua pasien menunjukkan peningkatan NAb sebelum vaksinasi dan sesudah vaksinasi. Sebanyak 13 pasien menunjukkan peningkatan *signal inhibition* ≥ *30%,* dan 6 pasien menunjukkan peningkatan < 30%. Enam pasien dengan peningkatan < 30% menunjukkan NAb sebelum vaksin dengan *signal inhition* ≥ *30%.* KIPI pasca vaksinasi ke 1 timbul pada 9 peserta, dengan 4 manifestasi lokal, dan 5 manifestasi sistemik. Pasca vaksinasi ke 2 KIPI timbul pada 5 pasien, semua sistemik.

Kesimpulan : Pemberian *inactivated vaccine Coronavac* mampu memberikan serokonversi pada PGTA dengan CAPD, dan tidak didapatkan KIPI berat.

Kata kunci : PGTA, Coronavac, NAb, KIPI

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ABSTRACT

ANTIBODY RESPONSE AND AEFI AFTER COVID-19 VACCINATION IN PGTA WITH CAPD

Background: Patients with End-Stage Renal Disease (ESRD) are immunocomprimeze patients who are prone to infection and should have renal replacement therapy. During the COVID-19 pandemic ESRD patients on dialysis were a group that was prone to infection. This study aims to determine the response of Neutralizing Antibody (NAb) with seroconversion with signal inhibition ≥ 30% of ESRD patients with CAPD and the incidence of Adverse Event Following Immunisation (AEFI) to vaccination with the inactivated vaccine Coronavac.

Methods: This research is an observational study with a prospective cohort research design. This study involved ESRD patients with CAPD at the *URJ Renal Terpadu RSUP dr. Sardjito*. The patient received the vaccine at *URJ RSUP dr. Sardjito* according to a regular schedule. NAb examination was carried out before vaccination and 2 weeks after the second dose was given. Routine blood tests and clinical chemistry were also performed. AEFI was observed for 2 weeks after administration of the 1st and 2nd vaccines. The relationship between demographic data and increased NAb was tested using *Fischer exact test*, the difference in laboratory results using *Paired t test.*

The results of the study: Nineteen patients who were willing to participate in the study, all patients showed an increase in NAb before and after vaccination. A total of 13 patients showed an increase in signal inhibition ≥ 30%, and 6 patients showed an increase in signal inhibition < 30%. Six patients with increase in signal inhibition < 30% showed pre-vaccine NAb with inhibition signal ≥ 30%. The 1st post-vaccination AEFI occurred in 9 participants, with 4 local manifestations, and 5 systemic manifestations. After the second vaccination, AEFI appeared in 5 patients, all systemic.

Conclusion: Administration of the inactivated vaccine Coronavac was able to provide seroconversion of ESRD with CAPD, and no severe AEFIs were found.

Keywords: ESRD, Coronavac, NAb, AEFI