INTISARI

Latar belakang: Status Epileptikus (SE) merupakan kegawatdaruratan neurologi dengan kondisi kejang terus menerus atau intermiten tanpa pulihnya kesadaran di antara kejang selama minimal 30 menit. Pasien epilepsi berkemungkinan untuk mengalami setidaknya satu kali episode SE selama hidupnya. Hingga saat ini belum didapatkan studi yang meneliti faktor prediktor SE pada anak epilepsi secara menyeluruh.
Tujuan: Mengetahui faktor prediktor terjadinya SE pada anak epilepsi.
Metode: Dilakukan studi kasus kontrol dengan sampel anak epilepsi berusia 1 bulan-<18 tahun yang dirawat di Instalasi Kesehatan Anak RSUP Dr. Sardjito Yogyakarta periode Januari 2017-Desember 2021 yang memenuhi kriteria inklusi dan eksklusi. Sampel diambil secara *simple random sampling*. Analisis bivariat untuk menghitung nilai p dan analisis multivariat dengan regresi logistik. Hubungan antar variabel dinyatakan dengan *odds ratio* (OR) dan interval kepercayaan 95% dengan tingkat kemaknaan statistik p <0,05.
Hasil: Kelompok kasus terdiri dari 54 anak epilepsi dengan SE dan kelompok kontrol terdiri dari 54 anak epilepsi tanpa SE. Perbandingan laki-laki dan perempuan adalah 1,2:1 dengan median usia 3 tahun dan rentang usia 1-11 tahun. Analisis bivariat dan multivariat menunjukkan riwayat SE sebelumnya (p=0,07; OR 4,3; IK95% 1,48-12,23), infeksi sistem saraf pusat (SSP) (p=0,007; OR 5,9; IK95% 1,64-22,21), dan hipokalsemia (p=0,002; OR 9,6; IK95% 2,37-38,96) merupakan faktor prediktor terjadinya SE pada anak epilepsi.
Kesimpulan: Riwayat SE sebelumnya, infeksi SSP, dan hipokalsemia merupakan prediktor terjadinya SE pada anak epilepsi.

Kata kunci: Status epileptikus, epilepsi, kejang, anak, faktor prediktor

ABSTRACT

Background Neuroblastoma is an extracranial solid tumor originating from neural crest cells which failed in its migration. Neuroblastoma is commonly found in children under 12 months of age. The survival rate of children with neuroblastoma is still relatively low, both in developed countries and in Indonesia.
Objective to determine whether age, sex, location of the primary tumor, cell differentiation and patient compliance affect the survival of children with neuroblastoma at Dr.Sardjito General Hospital.
Methods This study is a retrospective cohort study. Data were taken from medical records of pediatric patients with neuroblastoma at Dr. Sardjito General Hospital between January 2012 to September 2020 based on secondary data from medical records and registration data of pediatric cancer patients in the Pediatric Hematology Oncology Department of Dr. Sardjito General Hospital. The data collected included age at diagnosis, sex, location of the primary tumor, degree of cell differentiation, and patient adherence to therapy.
Result Fifty-four pediatric patients with neuroblastoma were involved in this study with 54% of female subjects. The median observation of this study was 13.25 months, with an incidence rate of 62/100 person year with a median survival of 13 months from the time of diagnosis. The 5-year survival rate in this study was 21.3%. The results of multivariate analysis show that stage IV when compared to other stage groups is more at risk of death (HR 10.9; CI 1.47 – 81.01). Sub-group follow-up analysis showed that there was no significant difference in stage IV male patients compared to female patients (HR 1.62; CI 0.81-3.22). The group of patients who had a primary tumor location outside the adrenal medulla with stage IV was not significantly different from patients whose tumor location was unknown (HR 2.45; CI 0.71-8.43). The group of patients whose primary tumor location was in the adrenal medulla did not have a significant difference in survival against patients whose primary tumor location was unknown (HR 2.09; CI 0.84-5.22).
Conclusion This study showed that the predictor factors studied did not affect mortality in children with neuroblastoma at Dr. Sardjito General Hospital, Yogyakarta.

Key words: child, neuroblastoma, cancer, solid tumor, predictor.