

INTISARI

Down syndrome merupakan kelainan kongenital yang dapat bersifat genetik dan tidak selalu diturunkan. Penyebab kelainan ini adalah adanya tiga salinan kromosom 21 karena adanya kesalahan dalam pembelahan sel (*nondisjunction*). Kelainan ini memberikan kontribusi terhadap abnormalitas kraniofasial dan rongga mulut, salah satunya yaitu tinggi wajah yang lebih pendek. Terjadinya hipoplastik pada hidung, serta perkembangan maksila dan mandibula yang kurang sempurna merupakan faktor penyebab ukuran tinggi wajah anak *Down syndrome* lebih kecil. Tujuan penelitian ini adalah untuk mengetahui gambaran proporsi tinggi wajah atas dan tinggi wajah bawah pada anak *Down syndrome* rentang usia 5-6 tahun.

Sebanyak 11 orang anak *Down syndrome* rentang usia 5-6 tahun dilakukan pengukuran tinggi wajah atas dan tinggi wajah bawah dengan menggunakan jangka sorong (*sliding caliper*) pada titik antropometri nasion, subnasal, dan gnation. Tinggi wajah atas diukur mulai titik nasion ke titik subnasal, sedangkan tinggi wajah bawah diukur mulai titik subnasal ke titik gnation. Pengukuran dilakukan pada posisi subjek duduk tegak menghadap ke depan dengan *frankfurt horizontal plane* (FHP) sejajar lantai dan posisi mulut tertutup. Hasil pengukuran kemudian dianalisis secara deskriptif.

Hasil penelitian menunjukkan bahwa rata-rata proporsi tinggi wajah atas sebesar 46.60% dan rata-rata proporsi tinggi wajah bawah yaitu 53.40%, sehingga dapat disimpulkan bahwa anak *Down syndrome* rentang usia 5-6 tahun memiliki proporsi tinggi wajah atas lebih rendah dibanding proporsi tinggi wajah bawah.

Kata Kunci: *Down Syndrome*, Proporsi Tinggi Wajah Atas, Proporsi Tinggi Wajah Bawah, Rentang Usia 5-6 Tahun

ABSTRACT

Down syndrome is a congenital disorder that can be genetic and is not always inherited. The cause of this disorder is the presence of three copies of chromosomes 21st due to an error in cell division (nondisjunction). This abnormality contributes to craniofacial and oral cavity abnormalities, one of the abnormalities is a shorter facial height. The occurrence of hypoplastic in the nose, as well as the development of the maxilla and mandible that occurred imperfectly are the factors that cause the facial size of children with Down syndrome to be smaller. The purpose of this study was to describe the proportion of upper and lower facial height in children with Down syndrome aged 5-6 years.

A total of 11 children with Down syndrome aged 5-6 years were measured for their upper and lower facial heights using a sliding caliper at the nasion, subnasal, and gnathion anthropometric points. The height of the upper facial was measured from the nasal point to the subnasal point, while the height of the lower facial was measured from the point of the subnasal to the gnathion point. Measurements were taken with the subject sitting upright facing forward with the frankfurt horizontal plane (FHP) parallel to the floor with the mouth closed. The result of this measurement was then analyzed descriptively.

The results showed that the average of upper facial height proportion was 46.60% and the average of lower facial height proportion was 53.40%, so it can be concluded that children with Down syndrome aged 5-6 years have a lower proportion of upper facial height than lower facial height.

Keywords: Down Syndrome, Upper Facial Height Proportion, Lower Facial Height Proportion, Age Range 5-6 Years