

INTISARI

Latar belakang: Nyeri persalinan merupakan pengalaman yang menakutkan pada wanita hamil.

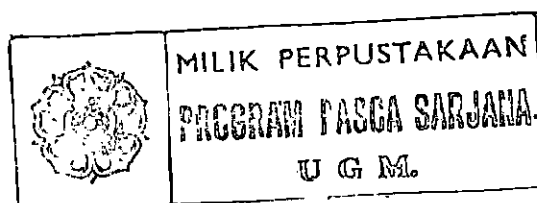
Tujuan: Mengetahui efektifitas pemberian ketorolac injeksi 30 mg/5 jam intramuskuler untuk mengurangi nyeri persalinan kala I fase aktif.

Bahan dan cara: Dilakukan uji klinik acak terkendali di RSUP Dr. Sardjito, RSUD Wates, RSUD Dr. Soeradji Tirtonegoro, dan RS PKU. Delanggu. Seratus dua subyek dengan indikasi persalinan kala I fase aktif dikelompokkan secara acak menjadi kelompok perlakuan dan kelompok kontrol. Tiga puluh milligram ketorolac diberikan secara injeksi intramuskuler pada 51 orang kelompok perlakuan dan seratus milligram vitamin B1 diberikan secara injeksi intramuskuler pada 51 orang kelompok kontrol.

Hasil: Mean $\pm$ SD VAS sebelum pemberian vitamin B1 $82,98 \pm 16,04$, sebelum pemberian ketorolac $82,25 \pm 19,45$. Satu jam setelah pemberian vitamin B1 $75,53 \pm 21,53$, dan satu jam setelah pemberian ketorolac $71 \pm 20,21$ dengan $p < 0,0001$. Penurunan nyeri berdasarkan skala VPI setelah pemberian injeksi ketorolac maupun vitamin B1 didapatkan $p = 0,003$; sangat nyeri 0, nyeri sedang 12 (23,51%), nyeri ringan 27 (52,9%), tidak nyeri 12 (23,5%) dan sangat nyeri 7 (13,7%), nyeri sedang 20 (39,2%), nyeri ringan 16 (31,4%), tidak nyeri 8 (15,7%) Mean $\pm$ SD lama persalinan kala satu pada satu jam setelah pemberian ketorolac pada nullipara $576,52 \pm 245,56$, pada multipara $575,62 \pm 456,38$, dengan $p = 0,99$. Skor Apgar menit -1 dan menit -5 setelah pemberian ketorolac $6,92 \pm 1,32$; $p = 0,73$ dan $8,98 \pm 1,00$; $p = 0,73$

Simpulan: Pemberian injeksi ketorolac 30 mg intramuskuler tidak mempengaruhi lama persalinan kala I, dapat mengurangi nyeri persalinan kala I fase aktif, dan tidak mempengaruhi skor Apgar.

Kata kunci: ketorolac, nyeri persalinan



ABSTRACT

Background: Pain during labor and delivery has been found to be a fearful experience for some pregnant women.

Objective: To determine the effectivity of administering 30 mg ketorolac injection intramuscularly every five hour to reduce pain during active phase on first stage of labor.

Materials and methods: Randomized clinical trial has been done on subject at Sardjito hospital, Wates hospital, Soeradji Tirtonegoro hospital, and PKU Delanggu hospital. A total 102 subject who have been considered to be in active phase on first stage of labor were divided into two groups randomly. 30 mg ketorolac muscular injection every 5 hours was given on the first group which consist of 51 subject. The latest group received 100 mg vitamin B1 injection intramuscularly as a controlled group.

Results: The mean $\pm$ SD VAS at study entry was $82,98 \pm 16,04$ in the vitamin B1 group and $82,25 \pm 19,45$ in the ketorolac group. After 1 hour, the mean VAS were $75,53 \pm 21,53$ and $71 \pm 20,21$, respectively, $p < 0,0001$, there was significant effect for either nulliparous and multiparous women. The decreasing pain according to VPI scale after received ketorolac injection and vitamin B1 ($p = 0,003$, severe pain 0, moderate pain 12 (23,5%), mild pain 27 (52,9%), no pain 12 (23,5%) and severe pain 7 (13,7%), moderate pain 20 (39,2%), mild pain 16 (31,4%), no pain 8 (15,7%). The mean $\pm$ SD duration of first stage labor after 1 hour ketorolac injection in nulliparous were $576,52 \pm 245,56$ and in multiparous were $575,62 \pm 456,38$, $p = 0,99$ After ketorolac injection, the Apgar score at 1 minute was $6,92 \pm 1,31$; $p = 0,73$ and at 5 minute was $8,98 \pm 0,99$; $p = 0,73$.

Conclusions: 30 mg ketorolac injection intramuscularly was not affected the duration of first stage of labor, proved to be able to reduce pain during first stage of labor, also it showed no effect on Apgar score.

Key words: ketorolac, labor pain