

Latar belakang: Prognosis karsinoma ovarium dipengaruhi oleh stadium klinik, jenis dan derajat diferensiasi histopatologik dan pembedahan (tipe, adekuasi dan residu tumor). Derajat diferensiasi histopatologik merupakan faktor prognosis yang bermakna pada karsinoma ovarium stadium lanjut. Derajat diferensiasi berkaitan dengan perbedaan respon terapi. Diferensiasi makin baik akan lebih resisten terhadap terapi sedangkan diferensiasi makin jelek akan lebih respon terhadap terapi. Pemeriksaan petanda tumor CA 125 merupakan salah satu metode untuk monitoring respon terapi pada karsinoma ovarium epitelial stadium lanjut.

Tujuan: Membandingkan respon terapi berdasarkan pengukuran kadar CA 125 sebelum dan sesudah terapi antara kelompok karsinoma ovarium stadium lanjut diferensiasi buruk dan diferensiasi baik

Rancangan penelitian: *Historical cohort*

Bahan dan cara: Data penelitian diambil dari catatan medik, sebagai populasi penelitian adalah pasien karsinoma ovarium stadium lanjut (III-IV) yang dirawat di bangsal Onkologi dan klinik kanker Tulip dari 1 Januari 2001 sampai 31 Juli 2005. Sebanyak 53 pasien memenuhi kriteria inklusi dan eksklusi. Derajat diferensiasi baik dan sedang sebagai kelompok pertama, derajat diferensiasi buruk sebagai kelompok kedua. Selanjutnya diamati tingkat respon yang dinilai dari penurunan kadar CA 125 sebelum dan sesudah terapi. Respon apabila penurunan kadar CA 125 setelah terapi $\geq 50\%$ dibandingkan kadar sebelum terapi. Tidak respon apabila penurunan kadar CA 125 setelah terapi $< 50\%$ atau terjadi kenaikan kadar CA 125 dibandingkan dengan kadar sebelum terapi. Uji hipotesis dan analisis variabel luar terhadap variabel tergantung dengan uji X^2 . Analisis multivariabel menggunakan uji regresi logistik.

Hasil: Derajat diferensiasi tidak menunjukkan perbedaan yang bermakna dengan tingkat respon terapi (OR=1,26; 95%CI 0,28-5,72). Selain itu tidak terdapat perbedaan bermakna antara usia penderita, stadium klinik, sifat kemosisitas sel, tipe operasi, keteraturan terapi dengan tingkat respon ($p>0,05$). Setelah dilakukan analisis regresi logistik didapatkan dari semua faktor yang dinilai tidak terdapat perbedaan bermakna dapat mempengaruhi respon terapi.

Simpulan: Respon terapi karsinoma ovarium stadium lanjut diferensiasi buruk tidak berbeda secara bermakna dibandingkan karsinoma ovarium diferensiasi baik.

Kata kunci: Karsinoma ovarium, derajat diferensiasi histopatologik, kadar CA 125

Abstract

Background: The prognosis of ovarian cancer is influenced by cancer stage, type and grade of histopathological differentiation, type and adequacy of surgery. The grade of histopathological differentiation is a significant prognosis factor for advanced ovarian cancer treatment and also associated with the response of treatment. The well histopathological differentiation is more resistant to the treatment compare with poor one. The CA 125 tumour marker is used to examine the response of ovarian cancer treatment.

Objectives: To compare the response of advanced ovarian cancer treatment using CA 125 tumour marker between well and poor histopathological differentiation.

Study design: Historycal cohort.

Material and methods: Data was derived from medical record Dr. Sardjito hospital during the period of January 1st, 2001 to July 31st, 2005. The study population were patients with advanced ovarian cancer (stages III-IV). The fifty three eligible patients were divided into two group, good and moderate histopathological differentiation versus poor differentiation. The level of CA 125 tumour marker was used to examine the response of ovarian cancer treatment. The chi-square and logistic regression test were used to see the relationship between the successful of treatment and possible associated factors.

Results: There was no significant difference between grade of histopathological differentiation and response of treatment (OR 1.26; 95%CI 0.28-5.72). Age of the patient, stage of ovarian cancer, cell chemosensitivity, type of surgery and compliance of treatment were not associated with the response of treatment ($p>0.05$). Logistic regression analysis remained not significant finding.

Conclusion: The response of advanced ovarian cancer treatment was not statistically difference between poor and well histopathological differentiation.

Key words: Ovarian cancer, histopatological differentiation, CA 125