

**KORELASI ANTARA VOLUME DAN LOKASI INTRACEREBRAL
HEMORRHAGE DENGAN KEJADIAN HERNIASI SUBFALCINE
PADA PASIEN NON-TRAUMA**

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INTISARI

Latar Belakang: *Intracerebral hemorrhage (ICH)* memiliki angka morbiditas dan mortalitas tinggi di seluruh dunia. Salah satu cedera sekunder yang muncul akibat ICH adalah herniasi serebri, khususnya hernia *subfalcine*. Beberapa penelitian sebelumnya telah melaporkan temuan hernia *subfalcine* pada beberapa kasus ICH.

Tujuan: Mengetahui korelasi antara lokasi dan volume *intracerebral hemorrhage* dengan derajat hernia *subfalcine* pada kasus perdarahan intraserebral non trauma

Metode: Penelitian analitik observasional dengan desain *cross sectional*. Data penelitian diperoleh secara retrospektif berdasarkan data sekunder hasil pemeriksaan *CT scan* kepala. Dilakukan analisis korelatif antara lokasi dan volume *intracerebral hemorrhage* dengan derajat hernia *subfalcine*.

Hasil: Sebanyak 50 orang disertakan dalam penelitian ini, mayoritas berjenis kelamin laki-laki (52,0%), berusia 51-65 tahun (42,0%), tidak merokok (56,0%), tidak mengalami diabetes (82,0%), mengalami hipertensi (66,0%), tidak mengalami dislipidemia (80,0%), mengalami ICH dengan etiologi mikroangiopati hipertensi (54,0%), mengalami perdarahan intrakranial lain berupa SAH (32,0%), dan mengalami ICH di area lobar (58,0%). Tidak terdapat korelasi yang signifikan antara lokasi ICH dengan derajat hernia *subfalcine* ($p > 0,05$), sedangkan terdapat korelasi yang signifikan antara volume ICH dengan derajat hernia *subfalcine* ($p < 0,001$; $r = 0,752$).

Kesimpulan: Terdapat korelasi yang kuat antara volume *intracerebral hemorrhage* dengan derajat hernia *subfalcine* pada kasus perdarahan intraserebral non trauma. Semakin besar volume ICH, semakin berat derajat keparahan herniasi *subfalcine*.

Kata Kunci: *intracerebral hemorrhage*; hernia *subfalcine*; *CT-scan*

**CORRELATION BETWEEN VOLUME AND LOCATION OF
INTRACEREBRAL HEMORRHAGE WITH SUBFALCINE
HERNIATION IN NON TRAUMA PATIENT**

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ABSTRACT

Background: Intracerebral hemorrhage (ICH) has high morbidity and mortality rates worldwide. One of the secondary injuries that occurs due to ICH is cerebral herniation, especially subfalcine hernia. Several previous studies have reported findings of subfalcine hernia in several cases of ICH.

Objective: To determine the correlation between the location and volume of intracerebral hemorrhage with the degree of subfalcine hernia in cases of non-traumatic intracerebral hemorrhage

Method: Observational analytical study with a cross-sectional design. The research data were obtained retrospectively based on secondary data from head CT scans. A correlative analysis was performed between the location and volume of intracerebral hemorrhage with the degree of subfalcine hernia.

Results: A total of 50 people were included in this study, the majority were male (52.0%), aged 51-65 years (42.0%), non-smokers (56.0%), non-diabetics (82.0%), 0%), hypertension (66.0%), non-dyslipidemia (80.0%), experienced ICH with hypertensive microangiopathy etiology (54.0%), experienced other intracranial hemorrhage in the form of SAH (32.0%), and experienced ICH in the lobar area (58.0%). There was no significant correlation between the location of ICH and the degree of subfalcine hernia ($p > 0.05$), while there was a significant correlation between the volume of ICH and the degree of subfalcine hernia ($p < 0.001$; $r = 0.752$).

Conclusion: There is a strong correlation between the volume of intracerebral hemorrhage and the degree of subfalcine hernia in cases of non-traumatic intracerebral hemorrhage. The greater the volume of ICH, the more severe the severity of subfalcine herniation.