

## INTISARI

**Latar Belakang:** Meningoensefalitis bakterial merupakan kegawatdaruratan neurologis dengan angka kejadian, mortalitas, serta sekuele yang tinggi pada anak-anak, terutama di negara berkembang. Kondisi ini dapat disebabkan oleh infeksi lokal seperti otitis media supuratif kronik (OMSK) dan diperberat komplikasi subdural empiema dan abses serebri yang membutuhkan tindakan operasi. Meskipun terapi multidisiplin sudah diterapkan, prognosis pasien sangat dipengaruhi oleh banyak faktor, antara lain status gizi, kesehatan rumah, kepatuhan berobat, dan komplikasi pasca operasi.

**Tujuan:** Penelitian ini bertujuan untuk memantau dan mengintervensi faktor prognostik yang memengaruhi luaran jangka panjang pasien OMSK pasca meningoensefalitis dengan subdural empiema, guna meningkatkan kualitas hidup pasien.

**Metode:** Penelitian dilakukan secara prospektif selama 12 bulan pada seorang pasien anak berusia 13 tahun dengan riwayat meningoensefalitis bakterial, OMSK, dan defek kranium pasca *craniectomy*. Intervensi dilakukan secara holistik meliputi pemantauan status gizi, imunisasi, edukasi kepatuhan berobat, perbaikan kesehatan rumah, serta penggunaan helm pelindung.

**Hasil:** Setelah 12 bulan pemantauan, tidak terdapat reinfeksi sistem saraf pusat dan trauma pada defek kranium. Pasien menunjukkan peningkatan status gizi, perbaikan fungsi motorik, kemampuan berbicara, dan kualitas hidup. Namun, imunisasi dan tes IQ belum sepenuhnya dilaksanakan.

**Kesimpulan:** Pemantauan dan intervensi multidisiplin yang komprehensif terbukti efektif dalam meningkatkan luaran kesehatan pasien dengan meningoensefalitis bakterial dan komplikasi terkait. Peningkatan kolaborasi antar disiplin serta pengawasan jangka panjang diperlukan untuk mencapai hasil yang lebih optimal.

**Kata kunci:** OMSK, meningoensefalitis, subdural empiema, craniectomy

## ABSTRACT

**Background:** Bacterial meningoen­cephalitis is a neurological emergency with high incidence, mortality, and sequelae rates in children, particularly in developing countries. This condition may result from local infections such as chronic suppurative otitis media and is exacerbated by complications such as subdural empiema and brain abscesses, which often require surgical intervention. Despite multidisciplinary therapy, the prognosis of patients is significantly influenced by factors such as nutritional status, household conditions, treatment adherence, and postoperative complications.

**Objective:** This study aims to monitor and intervene in prognostic factors affecting the long-term outcomes of chronic suppurative otitis media patients following meningoen­cephalitis with subdural empiema, to improve their quality of life.

**Methods:** A 12-month prospective study was conducted on a 13-year-old child with a history of bacterial meningoen­cephalitis, chronic suppurative otitis media, and cranial defects post-craniectomy. Holistic interventions included monitoring nutritional status, immunizations, adherence education, household health improvements, and the use of protective helmets.

**Results:** After 12 months of monitoring, there were no occurrences of central nervous system reinfections or trauma to the cranial defect. The patient demonstrated improvements in nutritional status, motor function, speech ability, and quality of life. However, immunization and IQ testing were not fully completed.

**Conclusion:** Comprehensive multidisciplinary monitoring and interventions effectively improved the health outcomes of a patient with bacterial meningoen­cephalitis and associated complications. Enhanced interdisciplinary collaboration and long-term surveillance are essential to achieving optimal results.

**Keywords:** chronic suppurative otitis media, meningoen­cephalitis, subdural empiema, craniectomy