INTISARI

Kanker kolorektal (mencakup kolon, rektum dan saluran anus) merupakan salah satu kanker yang banyak terjadi di seluruh dunia, dengan terapi yang digunakan untuk mengatasi kanker kolorektal yaitu terapi endoskopi, terapi bedah, terapi sistemik (kemoterapi, *targeted therapy*, atau kombinasi keduanya). Tatalaksana kemoterapi di Indonesia yaitu platinum (CapeOX, FOLFOX) dan non platinum (FOLFIRI). Tujuan penelitian ini yaitu untuk mengetahui perbedaan efektivitas dan keamanan regimen kemoterapi berbasis platinum dibandingkan non platinum pada pasien kanker kolorektal stadium III dan IV di RSUP Dr. Sardjito Yogyakarta.

Metode penelitian ini yaitu *cohort retrospective*, dengan pengambilan data menggunakan *consecutive sampling* dari data sekunder rekam medis pasien dalam bentuk fisik dan digital, dengan kriteria inklusi yaitu pasien kanker kolorektal yang telah terdiagnosa sesuai ICD-10 (C18-C20), berusia lebih dari 16 tahun, mendapatkan regimen berbasis platinum atau non-platinum selama 4-12 siklus, dan terdapat luaran terapi (sembuh/ progresivitas/meninggal). Sebanyak 100 pasien yang memenuhi kriteria inklusi penelitian terdiri dari 56 pasien yang menerima regimen platinum dan 44 pasien menerima regimen non platinum. Analisis yang digunakan yaitu untuk mengetahui hubungan antar variabel penelitian yaitu *Chi square, Kaplan Meier, Mantel Cox, Cox Proportional Hazard,* dan *Binary Logistic Regression*.

Tidak terdapat perbedaan signifikan (p=0,256) *Overall Survival* (OS) antara kelompok platinum dibandingkan kelompok non platinum (58 bulan vs 57 bulan) dan tidak terdapat perbedaan signifikan (p=0,050) *Progression Free Survival* (PFS) pada kelompok platinum dibandingkan kelompok non platinum (50 bulan vs 42 bulan). OS dalam 5 tahun platinum dibandingkan non platinum (85,7% vs 70,5%) dan PFS dalam 5 tahun platinum dibandingkan non platinum (76,8%, vs 56,8%). Kejadian efek samping hematologi lebih tinggi pada kelompok platinum dibandingkan non platinum. Efek samping hematologi pada kelompok platinum dibandingkan non platinum yaitu leukositopenia (37% vs 38%), neutropenia (37% vs 37%) dan trombositopenia (41% vs 11%). Kejadian efek samping non hematologi lebih tinggi pada kelompok non platinum dibandingkan platinum. Efek samping non hematologi pada kelompok platinum dibandingkan non platinum yaitu mual (25% vs 33%), muntah (12% vs 22%), dan mukositis oral (7% vs 14%). Kejadian efek samping hematologi dan non hematologi yang terjadi pada pasien kanker kolorektal perlu pemantauan ketat dan manajemen efek samping yang efektif.

Kata Kunci: Platinum, non-Platinum, kanker kolorektal, efek samping, *OS*, *PFS*

ABSTRACT

Colorectal cancer (including the colon, rectum and anal canal) is one of the most common cancers worldwide, with therapies used to treat colorectal cancer including endoscopic therapy, surgical therapy, systemic therapy (chemotherapy, targeted therapy, or a combination of both). Chemotherapy treatments in Indonesia are platinum (CapeOX, FOLFOX) and non-platinum (FOLFIRI). The purpose of this study was to determine the difference in effectiveness and safety of platinum-based chemotherapy regimens compared to non-platinum in patients with stage III and IV colorectal cancer at Dr. Sardjito General Hospital Yogyakarta.

This research method is a retrospective cohort, with data collection using consecutive sampling from secondary data of patient medical records in physical and digital form, with inclusion criteria, namely colorectal cancer patients who have been diagnosed according to ICD-10 (C18-C20), aged more than 16 years, get platinum or non-platinum-based regimens for 4-12 cycles, and there are therapeutic outcomes (cure / progression / death). A total of 100 patients who met the study inclusion criteria consisted of 56 patients receiving platinum regimens and 44 patients receiving non-platinum regimens. The analysis used was to determine the relationship between research variables, namely Chi square, Kaplan Meier, Cox Mantle, Cox Proportional Hazard, and Binary Logistic Regression.

There was no significant difference (p=0.256) Overall Survival (OS) between the platinum group compared to the non-platinum group (58 months vs 57 months) and there was no significant difference (p=0.050) Progression Free Survival (PFS) in the platinum group compared to the non-platinum group (50 months vs 42 months). OS at 5 years in platinum compared to non-platinum (85.7% vs 70.5%) and PFS at 5 years in platinum compared to non-platinum (76.8%, vs 56.8%). The incidence of hematologic adverse events was higher in the platinum group than in the non-platinum group. Hematologic side effects in the platinum group compared to non-platinum were leukocytopenia (37% vs 38%), neutropenia (37% vs 37%) and thrombocytopenia (41% vs 11%). The incidence of non-hematologic side effects was higher in the non-platinum group than in the platinum group. Non-hematologic side effects in the platinum group compared to the non-platinum group were nausea (25% vs 33%), vomiting (12% vs 22%), and oral mucositis (7% vs 14%). The incidence of hematologic and non-hematologic side effects occurring in colorectal cancer patients needs close monitoring and effective side effect management.

Keywords: Platinum, non-Platinum, Colorectal Cancer, adverse effects, *OS*, *PFS*