

Intisari

Sindrom koroner akut (SKA) merupakan manifestasi klinis utama dari penyakit jantung koroner yang menyebabkan banyak kematian di seluruh dunia. Dalam terapi farmakologisnya digunakan banyak jenis obat sehingga menyebabkan terjadinya polifarmasi dan meningkatkan potensi adanya interaksi obat. Penelitian ini bertujuan untuk menganalisis adanya interaksi obat pada terapi pasien SKA di instalasi rawat inap Rumah Sakit Akademik Universitas Gadjah Mada (RSA UGM) Yogyakarta.

Penelitian ini menggunakan metode deskriptif analitik dengan rancangan *cross-sectional* dan data diambil secara retrospektif. Subjek penelitian merupakan pasien yang menjalani rawat inap dengan diagnosis utama SKA di RSA UGM Yogyakarta pada periode Januari – Desember 2024. Pengambilan sampel dilakukan dengan metode *consecutive sampling*. Data diambil dari rekam medis pasien berupa data sosio demografi, data subjektif berupa riwayat penyakit, data objektif berupa hasil pemeriksaan laboratorium serta pola penggunaan obat pasien. Interaksi obat dianalisis menggunakan situs *Drug Interaction Checker* (www.drugs.com atau Lexicomp) serta *Drug Interaction Facts* (2015) terkait tingkat keparahan, mekanisme dan manajemennya kemudian diolah secara deskriptif.

Hasil dari penelitian yang dilakukan adalah sebanyak 102 dari 494 pasien memenuhi kriteria inklusi dan menjadi sampel. Pola penggunaan obat terbanyak adalah antiplatelet (100%), antihiperlipidemia (99,02%), antikoagulan (95,10%), antihipertensi (95,10%) dan nitrat (83,33%). Interaksi obat potensial terjadi pada 102 pasien (100%) dimana interaksi antara antiplatelet aspirin dan klopidoogrel paling banyak terjadi (79,41%). Interaksi obat potensial terjadi dengan tingkat keparahan minor (15,79%), moderat (75,79%) dan mayor (8,42%) serta mekanisme farmakodinamik (60,53%), farmakokinetik (19,47%), *unknown* (18,95%) dan *both* (1,05%). Terjadi interaksi obat aktual pada 20 pasien (19,61%) dengan total 22 kejadian. Efek dari interaksi tersebut diberikan manajemen yang berbeda-beda sesuai dengan tingkat keparahan efek yang muncul.

Kata kunci: Interaksi obat, penyakit jantung koroner, rawat inap, sindrom koroner akut

Abstract

Acute coronary syndrome (ACS) is the leading clinical manifestation of coronary heart disease and is a main cause of death worldwide. Pharmacological therapy for ACS involves multiple drugs uses, which often leads to polypharmacy and increased risk of potential drug interaction. This study aims to analyze the potential and actual drug interaction in ACS patients at the inpatient ward of Rumah Sakit Akademik Universitas Gadjah Mada, Yogyakarta.

A descriptive analytical method with a cross sectional design is used in this study and the data were collected retrospectively. Population of this study were the inpatients at RSA UGM Yogyakarta whose primary diagnosed with ACS between January – December 2024. Samples were selected using consecutive sampling method. Data were collected from the patient's medical record, including social demographic information, subjective such as past medical history, and objective such as medication used during hospitalization and laboratory examination result. Drug interactions were analyzed using Drug Interaction Checker sites (such as Lexicomp or www.drugs.com) and Drug Interaction Facts (2015), including the severity level, mechanism and managements. Furthermore, the result were processed and analyzed descriptively.

From the research, the results showed that 102 out of 494 patients met the inclusion criteria and were included as samples. Antiplatelets (100%), antihyperlipidemics (99,02%), anticoagulants (95,10%), antihypertensive (95,10%) and nitrates (83,33%) were the most common drug classes used to treat ACS patients. Potential drug interactions were identified in all 102 patients (100%) with the most frequent interaction is between aspirin and clopidogrel (79,41%). The severity level of potential drugs interaction that occur were minor (15,79%), moderate (75,79%) and major (8,42%) with pharmacodynamic (60,53%), pharmacokinetic (19,47%), unknown (18,95%) and both (1,05%) mechanisms. On this study, 22 actual drug interactions were found from 20 patients (19,61%). The management of these actual interactions varied depending on the severity of the effects that occurs.

Keywords: Acute coronary syndrome, coronary heart disease, drug interactions, inpatient care