

INTISARI

Geriatri lebih rentan mengalami penyakit diabetes melitus (DM) tipe 2 karena mengalami penurunan fungsi fisiologis. Pasien geriatri yang menderita DM tipe 2 juga umumnya memiliki komorbid lain sehingga pasien membutuhkan dua atau lebih obat yang menyebabkan peningkatan risiko kejadian interaksi obat. Tujuan dari penelitian ini adalah untuk mengetahui pola penggunaan obat antidiabetes, mengevaluasi interaksi obat antidiabetes potensial, dan mengetahui luaran klinis pasien yang mengalami interaksi obat antidiabetes potensial.

Penelitian ini menggunakan metode *cross-sectional* dengan pengambilan data rekam medis secara retrospektif pada pasien geriatri rawat jalan di RSUD Wonosari periode Januari-September 2023. Pengambilan sampel dilakukan menggunakan metode *purposive sampling*. Evaluasi interaksi obat dilakukan menggunakan fitur *Drug Interaction Checker* dari www.drugs.com dan reference.medscape.com, serta pedoman dari *Drug Interaction Facts* 2015. Data disajikan secara deskriptif dengan menggambarkan pola penggunaan obat antidiabetes, interaksi obat antidiabetes potensial, dan luaran klinis pasien yang mengalami interaksi obat antidiabetes potensial.

Hasil penelitian pada 100 pasien menunjukkan bahwa obat antidiabetes yang paling banyak diresepkan untuk monoterapi adalah metformin pada 10 pasien (10%), sedangkan kombinasi obat antidiabetes yang paling sering diresepkan adalah metformin dan insulin pada 24 pasien (24%). Interaksi obat antidiabetes potensial terjadi pada 87 pasien (87%), dengan jumlah kejadian interaksi obat antidiabetes potensial sebanyak 238 kejadian dari 43 kombinasi obat yang mengalami interaksi. Tingkat keparahan interaksi potensial ditemukan bersifat *minor* (5,46%), *moderate* (93,28%), dan *major* (1,26%). Mekanisme interaksi meliputi farmakokinetik (10,50%), farmakodinamik (81,51%), dan tidak diketahui (7,98%). Kadar glukosa darah puasa pada pasien yang mengalami interaksi obat antidiabetes potensial yaitu sebanyak 22 pasien (25,29%) normoglikemia, sedangkan kadar glukosa darah puasa pada 59 pasien (67,82%) hiperglikemia dan 6 pasien (6,90%) hipoglikemia.

Kata kunci: diabetes melitus tipe 2, geriatri, interaksi obat potensial, antidiabetes

ABSTRACT

Geriatric is more susceptible to type 2 diabetes mellitus (DM) because they experience decreased physiological function. Geriatric patients with type 2 DM also generally have other comorbidities, so they require two or more drugs, which increases the risk of drug interactions. This research aims to determine the pattern of antidiabetic drug use, evaluate potential antidiabetic drug interactions, and determine the clinical outcomes of patients who experience potential antidiabetic drug interactions.

This research used a cross-sectional method with retrospective medical record data collection on outpatient geriatric patients at RSUD Wonosari from January-September 2023. Sampling was conducted using the purposive sampling method. Evaluation of drug interactions was carried out using the Drug Interaction Checker feature from www.drugs.com and reference.medscape.com, as well as the guidelines from Drug Interaction Facts 2015. Data were presented descriptively by describing the pattern of antidiabetic drug use, potential antidiabetic drug interactions, and clinical outcomes of patients experiencing potential antidiabetic drug interactions.

The results of the study on 100 patients showed that the most commonly prescribed antidiabetic drugs for monotherapy were metformin in 10 patients (10%), while the most frequently prescribed combination of antidiabetic drugs was metformin and insulin in 24 patients (24%). Potential antidiabetic drug interactions occurred in 87% patients (87%), with the number of potential antidiabetic drug interaction events as many as 238 with 43 drug combinations experiencing interactions. The severity of the interaction found was minor (5,46%), moderate (93,28%), and major (1,26%). The mechanisms of interaction were pharmacokinetics (10,50%), pharmacodynamics (81,51%), and unknown (7,98%). Fasting blood glucose levels in patients experiencing potential antidiabetic drug interactions showed 22 patients (37,27%) were normoglycemia, while the fasting blood glucose in 59 patients (67,82%) was hyperglycemia and 6 patients (6,90%) was hypoglycemia.

Keywords: type 2 diabetes mellitus, geriatrics, potential drug interactions, antidiabetic