

Pengaruh Antibiotik Empiris Terhadap Leukosit Pada Pasien Abses Leher Dalam Kepala Leher

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ABSTRAK

Latar Belakang: Abses leher dalam merupakan infeksi serius di ruang potensial leher yang membutuhkan penanganan yang cepat dan tepat. Terapi antibiotik empiris diberikan sebelum hasil kultur mikrobiologi diperoleh. *Clinical pathway* di THT-KL RSUP Dr. Sardjito merekomendasikan antibiotik empiris dengan kombinasi seftriakson dan metronidazole. Namun terdapat beberapa kasus mendapatkan antibiotik empiris selain *clinical pathway* karena pertimbangan klinis dan riwayat medis pada pasien. Sehingga perlunya evaluasi terapi pemberian antibiotik empiris yang dinilai dari leukosit dan perbaikan klinis pasien.

Tujuan: Mengetahui pengaruh antibiotik empiris sesuai *clinical pathway* dibandingkan selain *clinical pathway* terhadap leukosit pada pasien abses leher dalam di THT-KL RSUP Dr. Sardjito.

Metode: Penelitian observasional analitik dengan rancangan penelitian *cross-sectional*. Variabel bebas adalah pemberian antibiotik empiris dan variabel terikat adalah leukosit. Analisis dilakukan dengan uji *Chi square*, *Mann-Whitney*.

Hasil: Subyek penelitian meliputi 60 pasien, Mayoritas pasien adalah laki-laki (68,3%), rerata usia 52 ± 17 tahun. Pasien yang menderita DM (38,3%), pasien kelompok antibiotik sesuai *clinical pathway* (50%) dan pasien kelompok antibiotik selain *clinical pathway* (50%). Pasien yang meninggal (3,3%). Keterlibatan ruang abses pada seluruh sampel rata rata 5 ruang abses. Bakteri mayoritas pada hasil kultur biakan yaitu *streptococcus spp* (23,3%), *staphylococcus spp* (20%) dan *klebsiella spp* (13,3%). Penurunan kadar leukosit hari ke-3 secara signifikan pada kelompok sesuai *clinical pathway* ($p < 0,05$).

Kesimpulan: Pemberian antibiotik empiris sesuai *clinical pathway* berpengaruh terhadap leukosit pada pasien abses leher dalam di THT-KL RSUP Dr. Sardjito.

Kata Kunci: abses leher dalam, antibiotik empiris, leukosit, *clinical pathway*

The Effect of Empirical Antibiotics on Leukocytes in Patients with Deep Neck Abscesses

ABSTRACT

Introduction: Deep neck abscess is a serious infection in the potential spaces of the neck that requires appropriate management. Empirical antibiotic therapy is administered before microbiological culture results are obtained. The clinical pathway in the ENT-KL department of RSUP Dr. Sardjito recommends empirical antibiotics with a combination of ceftriaxone and metronidazole. However, there are several cases where empirical antibiotics were given outside the clinical pathway due to clinical considerations and the patient's medical history. Therefore, there is a need to evaluate the therapy of empirical antibiotic administration based on leukocyte count and clinical improvement of the patient.

Objective: To determine the effect of empiric antibiotics according to the clinical pathway compared to those not following the clinical pathway on leukocytes in patients with neck abscesses in the ENT-Head and Neck Surgery department at RSUP Dr. Sardjito.

Method: An analytical observational study with a cross-sectional research design. The independent variable is the administration of empirical antibiotics and the dependent variable is leukocytes. Analysis was conducted using the Chi-square test and Mann-Whitney test.

Results: The study subjects included 60 patients, the majority of whom were male (68.3%), with an average age of 52 ± 17 years. Patients with DM (38.3%), patients in the antibiotic group according to the clinical pathway (50%), and patients in the antibiotic group outside the clinical pathway (50%). Patients who died (3.3%). The involvement of abscess spaces in the entire sample averaged 5 abscess spaces. The majority of bacteria in the culture results were streptococcus spp (23.3%), staphylococcus spp (20%), and klebsiella spp (13.3%). The decrease in leukocyte levels on the 3rd day was significant in the group following the clinical pathway ($p < 0.05$).

Conclusion: The administration of empirical antibiotics according to the clinical pathway affects leukocyte levels in patients with deep neck abscesses in the ENT-Head and Neck Surgery department of RSUP Dr. Sardjito.

Keywords: deep neck abscess, empirical antibiotics, leukocytes, clinical pathway