

INTISARI

Skizofrenia merupakan gangguan psikotik berat yang memberikan dampak ekonomi signifikan dalam perawatannya. Antipsikotik kombinasi tipikal dan atipikal menjadi kombinasi yang banyak digunakan. Penelitian ini bertujuan mengetahui rata-rata biaya total rawat inap dan *outcome* terapi kombinasi antipsikotik klozapin-risperidon-haloperidol dibandingkan klozapin-risperidon-trifluoperazin pasien skizofrenia.

Penelitian ini menggunakan rancangan kohort retrospektif. Populasi penelitian terdiri dari pasien dengan diagnosis skizofrenia yang menerima terapi kombinasi klozapin-risperidon-haloperidol atau klozapin-risperidon-trifluoperazin, dengan jumlah sampel masing-masing sebanyak 32 dan 22 pasien. Penelitian dilakukan dari perspektif rumah sakit sehingga yang dihitung adalah biaya medis langsung. *Outcome* terapi diukur berdasarkan lama rawat inap pasien sejak menerima kombinasi antipsikotik. Rata-rata biaya diperoleh dari data keuangan rumah sakit, sedangkan data lama rawat inap diambil dari rekam medis pasien. Analisis data dilakukan menggunakan uji *T-Independen* untuk data terdistribusi normal dan uji *Mann-Whitney U* untuk data tidak terdistribusi normal.

Hasil penelitian menunjukkan *outcome* terapi berdasarkan lama rawat inap kombinasi klozapin-risperidon-trifluoperazin ($15,72 \pm 5,11$ hari) lebih kecil dibandingkan kelompok klozapin-risperidon-haloperidol ($18,78 \pm 5,22$ hari). Terdapat perbedaan signifikan pada lama rawat inap dengan nilai $p=0,037$ ($p < 0,05$). Rata-rata total biaya rawat inap pasien skizofrenia kelompok kombinasi risperidon-klozapin-haloperidol (Rp.6.476.855,97 \pm 1.442.883,01) lebih kecil dibandingkan kombinasi klozapin-risperidon-trifluoperazin (Rp.6.504.609,40 \pm 1.942.228,61) pada pasien skizofrenia. Rata-rata biaya total pengobatan kombinasi klozapin-risperidon-haloperidol dan kombinasi klozapin-risperidon-trifluoperazin secara statistik tidak berbeda signifikan dengan nilai $p=0,952$ ($p > 0,05$).

Kata Kunci: skizofrenia, klozapin, risperidon, haloperidol, trifluoperazin, analisis biaya

ABSTRACT

Schizophrenia is a severe psychotic disorder that imposes a significant economic burden in its management. Typical–atypical antipsychotic combinations are frequently used in clinical practice. This study aimed to determine the average total inpatient cost and therapeutic outcomes of clozapine–risperidone–haloperidol compared with clozapine–risperidone–trifluoperazine combinations in patients with schizophrenia.

This study employed a retrospective cohort design. The study population consisted of patients diagnosed with schizophrenia who received either the clozapine–risperidone–haloperidol combination or the clozapine–risperidone–trifluoperazine combination, with sample sizes of 32 and 22 patients, respectively. The study was conducted from a hospital perspective, focusing on direct medical costs. Treatment outcomes were measured based on the length of hospital stay from the initiation of the antipsychotic combination. Average costs were obtained from hospital financial records, while length of stay data were extracted from patients' medical records. Data analysis was performed using the Independent t-test for normally distributed data and the Mann–Whitney U test for non-normally distributed data.

The study results indicated that treatment outcomes, based on the length of hospital stay, were shorter for the clozapine–risperidone–trifluoperazine combination (15.72 ± 5.11 days) compared to the clozapine–risperidone–haloperidol group (18.78 ± 5.22 days). A significant difference in length of stay was observed, with a p-value of 0.037 ($p < 0.05$). The average total hospitalization cost for schizophrenia patients in the clozapine–risperidone–haloperidol group (Rp 6,476,855.97 \pm 1,442,883.01) was lower than that of the clozapine–risperidone–trifluoperazine group (Rp 6,504,609.40 \pm 1,942,228.61). However, the difference in total treatment costs between the two combination therapies was not statistically significant with a p-value of $p = 0.952$ ($p > 0.05$).

Keywords: schizophrenia, clozapine, risperidone, haloperidol, trifluoperazine, cost analysis