

INTISARI

Penggunaan obat pada populasi pediatri seringkali menimbulkan tantangan, terutama terkait terjadinya *Potentially Inappropriate Medications* (PIMs) dan interaksi obat potensial. Kedua faktor tersebut adalah hal terpisah, namun sama-sama berkontribusi dalam meningkatkan risiko *Adverse Drug Reactions* (ADR) pada pediatri. Penelitian ini bertujuan mengevaluasi PIMs berdasarkan *KIDs List 2025* serta mendeskripsikan interaksi obat potensial pada peresepan pasien pediatri rawat jalan di RSA UGM periode Januari – Juni 2025 dengan metode *cross-sectional* serta unit analisis berupa resep.

Identifikasi PIMs dilakukan dengan *KIDs List 2025* yang disesuaikan dengan Formularium Nasional dan Formularium RSA, sedangkan interaksi obat potensial dievaluasi menggunakan *drug interaction checker* pada situs web www.online.lexi.com. Sampel diambil dengan teknik *purposive sampling* dengan kriteria usia pasien ≤ 18 tahun yang mendapatkan ≥ 2 obat pada periode Januari – Juni 2025.

Karakteristik pasien didominasi oleh laki-laki (61%) dan kelompok usia balita 1 – 4 tahun (46%) dengan diagnosis utama penyakit saraf (34%). Sebanyak 58% resep termasuk PIM dengan 65,5% resep mengandung setidaknya satu PIM. Prevalensi obat PIM sebesar 19,6% dari 413 obat pada 100 peresepan dan didominasi oleh asam valproat (6,8%), risperidone (3,5%), dan aripiprazole (2,9%). Kejadian PIM tertinggi ditemukan pada diagnosis epilepsi (29,3%) dan kategori “hati-hati”. Interaksi obat potensial ditemukan pada 47% resep dengan total 152 kejadian, di mana mayoritas memiliki tingkat keparahan moderat (92,8%). Selain itu, 35% resep menunjukkan risiko ganda melalui kombinasi PIM dan interaksi obat secara bersamaan.

Kata kunci: interaksi obat potensial, *KIDs List*, pediatri, PIM.

ABSTRACT

Medication use in pediatric populations often presents challenges, particularly related to the occurrence of Potentially Inappropriate Medications (PIMs) and potential drug–drug interactions. Although these factors are distinct, both contribute to an increased risk of Adverse Drug Reactions (ADRs) in pediatric patients. This study aimed to evaluate PIMs based on the 2025 KIDs List and to describe potential drug interactions in outpatient pediatric prescriptions at RS Akademik UGM during the period of January–June 2025 using a cross-sectional design, with prescriptions as the unit of analysis.

PIMs were identified using the 2025 KIDs List adapted to the National Formulary and the hospital formulary, while potential drug interactions were assessed using a drug interaction checker available on www.online.lexi.com. Samples were selected using purposive sampling, including patients aged ≤ 18 years who received two or more medications during the study period.

Patient characteristics were predominantly male (61%) and aged 1 – 4 years (46%), with neurological disorders as the most common primary diagnosis (34%). PIMs were identified in 58% of prescriptions, with 65.5% containing at least one PIM. The prevalence of PIM drugs accounted for 19.6% of 413 medications across 100 prescriptions, most commonly valproic acid (6.8%), risperidone (3.5%), and aripiprazole (2.9%). The highest occurrence of PIMs was observed in patients with epilepsy (29.3%) and within the “use with caution” category. Potential drug interactions were identified in 47% of prescriptions, with a total of 152 events, predominantly of moderate severity (92.8%). Additionally, 35% of prescriptions demonstrated a combined risk involving both PIMs and potential drug interactions.

Keywords: *potentially inappropriate medication, KIDs List, pediatrics, potential drug interaction.*