

## INTISARI

### FAKTOR PROGNOSIS KOLANGITIS, HIPERTENSI PORTA DAN VARISES ESOFAGUS UNTUK KESINTASAN PASIEN ATRESIA BILIER PASCA OPERASI KASAI DI RSUP DR. SARDJITO

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**Latar Belakang:** Atresia bilier adalah salah satu penyakit hati pada bayi yang ditandai dengan obstruksi dan fibro-obliterasi progresif saluran bilier ekstrahepatik dan intrahepatik. Di Yogyakarta, insidensi atresia bilier dilaporkan terjadi tiap 1:7000 kelahiran hidup. Operasi Kasai masih menjadi upaya pengobatan utama untuk meningkatkan kesempatan hidup pasien atresia bilier di Indonesia. Namun, luaran operasi Kasai masih tidak menentu karena adanya beberapa faktor prognosis yang mempengaruhi kesintasan pasien, antara lain usia saat operasi, adanya sirosis, sepsis, kolangitis, hipertensi porta, dan varises esofagus. Sayangnya, penelitian tentang faktor prognosis kolangitis, hipertensi porta, dan varises esofagus masih sangat terbatas di Indonesia.

**Tujuan:** Tujuan dari penelitian ini adalah untuk mengetahui pengaruh faktor prognosis kolangitis, hipertensi porta, dan varises esofagus terhadap kesintasan pasien atresia bilier pasca operasi Kasai di RSUP Dr. Sardjito.

**Metode:** Penelitian ini menggunakan data dari 29 rekam medis pasien atresia bilier yang telah dilakukan prosedur Kasai dengan atau tanpa intra operasi kolangiografi di RSUP Dr. Sardjito dalam kurun waktu Juni 2012 sampai dengan April 2018. Dilakukan analisis antara variabel usia saat operasi, jenis kelamin, kolangitis, dan varises esofagus terhadap kesintasan pasien pasca operasi Kasai. *Odds Ratio* diukur dengan menggunakan *chi-square* atau *Fisher's Exact Test* untuk analisis univariat dan *cox regression* untuk analisis multivariat.

**Hasil:** Pada analisis univariat, jenis kelamin ( $P = 0,198$ ), usia ( $P = 1,00$ ), hipertensi porta ( $P = 0,196$ ), dan varises esofagus ( $P = 0,180$ ) tidak signifikan secara statistik dalam mempengaruhi kesintasan pasien. Adapun faktor prognosis kolangitis ( $P = 0,089$ ) hampir signifikan secara statistik. Pada analisis multivariat, usia ( $P = 0,330$ ),

jenis kelamin ( $P = 0,362$ ), kolangitis ( $P = 0,649$ ), hipertensi porta ( $P = 0,262$ ), dan varises esofagus ( $P = 0,987$ ) tidak ada yang signifikan secara statistik.

**Kesimpulan:** Pada analisis univariat dan multivariat, tidak ada variabel yang signifikan secara statistik. Namun, kolangitis hampir signifikan secara statistik dalam analisis univariat.

**Kata kunci:** atresia bilier, prosedur Kasai, faktor prognosis, kolangitis, hipertensi porta, varises esofagus

## ABSTRACT

### PROGNOSTIC FACTORS OF CHOLANGITIS, PORTAL HYPERTENSION AND ESOPHAGEAL VARICES FOR THE SURVIVAL OF POST-KASAI BILIARY ATRESIA PATIENTS IN RSUP DR. SARDJITO

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**Background:** Biliary atresia is a liver disease in infants characterized by progressive obstruction and fibro-obliteration of the extrahepatic and intrahepatic biliary tract. In Yogyakarta, the incidence of biliary atresia is reported to occur every 1: 7000 live births. Kasai surgery is still the main treatment effort to increase the chance of life of biliary atresia patients in Indonesia. However, the outcome of the Kasai surgery is still uncertain because of several prognostic factors that affect the survival of patients, including age at surgery, cirrhosis, sepsis, cholangitis, portal hypertension and esophageal varices. Unfortunately, research on the prognosis factors for cholangitis, portal hypertension and esophageal varices is still very limited in Indonesia.

**Objective:** The aim of this study was to determine the effect of the prognostic factors of cholangitis, portal hypertension and esophageal varices on the survival of biliary atresia patients after the Kasai surgery at RSUP Dr. Sardjito.

**Method:** This study used data from 29 medical records of patients with biliary atresia who had performed the Kasai procedure with or without intraoperative cholangiography at RSUP. Dr. Sardjito from June 2012 to April 2018. An analysis was carried out between variables of age at surgery, sex, cholangitis, and esophageal varices to the survival of patients after Kasai's surgery. Odds Ratio was measured using chi-square or Fisher's Exact Test for univariate analysis and cox regression for multivariate analysis.

**Results:** In univariate analysis, gender ( $P = 0.198$ ), age ( $P = 1.00$ ), portal hypertension ( $P = 0.196$ ), and esophageal varices ( $P = 0.180$ ) were not statistically significant in influencing patient survival. The prognosis factor for cholangitis ( $P = 0.089$ ) is almost statistically significant. In multivariate analysis, age ( $P = 0.330$ ), sex ( $P = 0.362$ ), cholangitis ( $P = 0.649$ ), portal hypertension ( $P = 0.262$ ), and esophageal varices ( $P = 0.987$ ) were not statistically significant.

**Conclusion:** In univariate and multivariate analyzes, there were no statistically significant variables. However, cholangitis was almost statistically significant in univariate analysis.

**Keywords:** biliary atresia, Kasai procedure, prognostic factor, cholangitis, portal hypertension, esophageal varices