



## INTISARI

### **PERBEDAAN PERUBAHAN DERAJAT VARISES ESOFAGUS PADA PENDERITA SIROSIS HATI YANG DITERAPI DENGAN SIMVASTATIN 10 mg DIBANDINGKAN DENGAN SIMVASTATIN 20 mg**

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**Latar Belakang.** Varises esofagus adalah salah satu komplikasi sirosis hati akibat peningkatan tekanan vena porta. Perdarahan akibat ruptur varises esofagus masih menjadi penyumbang mortalitas yang tinggi. Terapi standar untuk mencegah perdarahan variseal yaitu beta bloker dan ligasi varises. Simvastatin diketahui menurunkan tekanan portal, memperbaiki fungsi hepatoseluler, dan menurunkan fibrosis pada sirosis hati. Penurunan tekanan vena porta pada pemberian simvastatin diharapkan menurunkan derajat varises esofagus pada sirosis hati.

**Tujuan Penelitian.** Mengetahui perubahan derajat varises esofagus pada pasien sirosis hati yang diterapi dengan simvastatin 10 mg dibandingkan 20 mg selama 3 bulan.

**Metode.** Uji klinis dilakukan secara acak tersamar ganda pada pasien sirosis hati di RSUP Dr. Sardjito Yogyakarta Januari hingga Maret 2018 yang memenuhi kriteria inklusi dan eksklusi. Subjek dirandomisasi menjadi grup yang diberi perlakuan simvastatin 10 mg dan grup simvastatin 20 mg selama 3 bulan. Dilakukan penilaian derajat varises esofagus pada awal dan akhir penelitian. Analisis data menggunakan uji *Chi Square* atau uji *Fischer Exact*.

**Hasil Penelitian.** Dilakukan analisis statistik terhadap grup simvastatin 10 mg (n=21 subjek) dan grup simvastatin 20 mg (n=14 subjek). Pada grup simvastatin 10 mg derajat varises esofagus membaik pada 4(19%) orang, menetap 12(57,1%) orang, dan memberat 5(23,8%) orang. Sedangkan pada grup simvastatin 20 mg derajat varises esofagus membaik 1(7,1%) orang, menetap 8(57,1%) orang, dan memberat 5(35,7%) orang. Secara statistik tidak terdapat perbedaan bermakna perubahan derajat varises esofagus antara grup simvastatin 10 dibandingkan grup simvastatin 20 mg ( $p=0,474$  RR 1,18 CI 95%).

**Kesimpulan.** Tidak didapatkan perbedaan bermakna perubahan derajat varises esofagus pada penderita sirosis hati yang diterapi dengan simvastatin 10 mg per hari dibandingkan dengan simvastatin 20 mg per hari selama 3 bulan.

**Kata Kunci :** Sirosis hati, hipertensi portal, varises esofagus, derajat varises esofagus, simvastatin.



## ABSTRACT

### **THE DIFFERENCE IN CHANGE OF ESOPHAGEAL VARICES FORM IN PATIENTS WITH LIVER CIRRHOSIS AFTER TREATMENT OF SIMVASTATIN 10 mg COMPARED TO SIMVASTATIN 20 mg**

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**Background.** Esophageal varices is a complication of liver cirrhosis due to portal hypertension. Bleeding from esophageal varices is a catastrophic complication with high mortality. Standard therapy to prevent variceal bleeding is the combination of beta-blockers and endoscopic banding ligation. The administration of simvastatin in liver cirrhosis has been proven decreases portal hypertension, improves hepatocellular function and may reduce fibrosis. Decreased portal pressure due to simvastatin administration is expected to improve esophageal varices form.

**Aims.** To observe the change of esophageal varices form in patients with liver cirrhosis who are treated with simvastatin 10 mg compared to those who are treated with simvastatin 20 mg for 3 months.

**Methods.** This was a double blind randomized trial in patients with liver cirrhosis in Dr Sardjito Hospital Yogyakarta from January 2018 to March 2018 who met the inclusion and exclusion criteria. Subjects were randomized into two groups. One group received Simvastatin 10 mg daily and the other received Simvastatin 20 mg daily for 3 months. Endoscopic examination of esophageal varices form underwent at the beginning and at the end of the study. Data was analyzed using Chi-Square/Fischer's Exact test.

**Results.** Statistical analysis was examined in patients who received simvastatin 10 mg ( $n = 21$ ) and simvastatin 20 mg ( $n = 14$ ) daily for 3 months. In simvastatin 10 mg group, esophageal varices improved on 4(19%) patients, unchanged on 12(57,1%), and worsen on 5(23,8%) patients. While in simvastatin 20 mg group, esophageal varices improved on 1(7,1%) patients, unchanged on 8(57,1%), and worsen on 5(35,7%) patients. At the end of the study, there was no significant difference in change of esophageal varices form in simvastatin 10 mg group compared to simvastatin 20 mg group ( $p=0,474$  RR 1,18 CI 95%).

**Conclusion.** There was no significant difference in change of esophageal varices form in patients with liver cirrhosis after treatment of simvastatin 10 mg daily compared to simvastatin 20 mg daily for 3 months.

**Keywords :** Liver cirrhosis, portal hypertension, esophageal varices form, simvastatin.