

ABSTRAK

Latar Belakang: Belum banyak data yang membandingkan luaran terapi pada anak dengan limfangioma terutama di Indonesia khususnya di senter pendidikan bedah anak UGM.

Tujuan: Membandingkan luaran pembedahan, ST (Skleroterapi) bleomycin, dan kombinasi kedua terapi limfangioma di senter bedah anak UGM.

Metode: Penelitian retrospektif potong-lintang ini mengolah data rekam medis 31 pasien dengan diagnosis limfangioma yang terbagi 3 kelompok, 6 pasien kelompok terapi pembedahan, 5 pasien kelompok terapi ST dengan bleomycin dan 20 pasien kelompok terapi kombinasi di senter bedah anak UGM, mulai dari Januari 2015 hingga Januari 2019. Instrumen penelitian yang digunakan terdiri dari 6 variabel yaitu: pengurangan ukuran, permasalahan estetika, permasalahan fungsional, komplikasi paska tindakan, kebutuhan intervensi lanjutan dan frekuensi intervensi dari masing-masing kelompok terapi. Data dianalisis dengan ANOVA dan Kruskal-Wallis dengan program SPSS.

Hasil: Rerata nilai skor terapi secara keseluruhan pada kelompok terapi bedah, ST dan kombinasi ($14,67 \pm 2,80$ vs $13,40 \pm 2,07$ vs $12,50 \pm 1,47$, $p=0,056$). Hasil Analisa variabel ditampilkan dalam rerata peringkat. Variabel pengurangan ukuran: pembedahan>kombinasi>ST ($17,83$ vs $16,30$ vs $12,60$, $p=0,554$). Variabel masalah estetika: ST>pembedahan >kombinasi ($26,10$ vs $14,50$ vs $13,93$, $p=0,001$). Variabel masalah fungsional: kombinasi>pembedahan>ST ($17,00$ vs $14,33$ vs $14,00$, $p=0,151$). Pada variabel komplikasi paska operasi: ST>pembedahan>kombinasi ($23,10$ vs $16,33$ vs $14,13$ $p=0,076$). Pada variabel kebutuhan intervensi lanjutan: kombinasi>pembedahan>ST ($18,50$ vs $14,44$ vs $8,00$, $p=0,026$). Pada variabel jumlah intervensi: pembedahan>ST>kombinasi ($27,25$ vs $18,00$ vs $12,13$, $p=0,000$).

Kesimpulan: Secara keseluruhan luaran tiga modalitas terapi limfangioma pada penelitian ini tidak berbeda signifikan. Setiap modalitas terapi memiliki keunggulan masing-masing: dari aspek estetika ST unggul; dari aspek kebutuhan intervensi lanjutan terapi kombinasi unggul; dan dari aspek jumlah intervensi pembedahan unggul.

Kata kunci: Bleomycin, anak, limfangioma, skleroterapi, pembedahan



PERBANDINGAN LUARAN PEMBEDAHAN, SKLEROTERAPI BLEOMYCIN, DAN KOMBINASI KEDUANYA PADA ANAK DENGAN LIMFANGIOMA DI SENTER BEDAH ANAK UGM

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Comparison of Different Therapeutic Approaches for Children with Lymphangioma in a Pediatric Surgical Center in Indonesia

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ABSTRACT

Our study compared the outcomes of three different therapies: surgery (Group I), bleomycin sclerotherapy (Group II), and a combination of both (Group III), for children with lymphangioma at a pediatric surgical center in Yogyakarta, Indonesia. Medical records of patients who were treated for lymphangioma at our hospital from January 2015 to January 2019 were reviewed retrospectively. Scoring systems were used to assess the outcomes, including reduction of size, aesthetics' problems, functional problems, complications, necessity of further interventions, and interventions' frequencies. Our study included 31 children, consisting of 6, 5, and 20 patients in Groups I, II, and III, respectively. The mean values of the scoring systems almost reached a significant level between Groups I, II, and III (14.67 ± 2.80 vs 13.40 ± 2.07 vs 12.50 ± 1.47 , respectively; $p=0.056$). Group II scored better in aesthetic problems than other groups ($p=0.001$), Group III scored higher in necessity of further interventions compared to the other groups ($p=0.026$), and Group I was higher in interventions' frequencies than the other groups ($p=0.000$). However, there were no significant differences in reduction of size, functional problems, and complications among groups ($p=0.554$, 0.151 , and 0.076 , respectively). In conclusion, the surgical group tended to have a higher score than the sclerotherapy and the combination groups, although one group might have more beneficial effects than the other groups due to different scoring system parameters. Further multicenter studies with a larger number of patients are necessary to confirm our findings.

Key Words: Bleomycin Sclerotherapy; Children; Combination Therapy; Lymphangioma; Surgery