

**PERBANDINGAN LUARAN PADA PASIEN APENDISITIS PERFORASI PASCA
LAPAROTOMI APENDEKTOMI DENGAN IRISAN *MIDLINE* DAN TRANSVERSAL**
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ABSTRAK

Latar belakang: Apendisitis perforasi adalah suatu keadaan dimana ditemukan lubang pada dinding apendik atau didapatkan fekolit pada saat operasi(2). Tindakan pembedahan merupakan tatalaksana pada apendisitis perforasi. Angka kejadian apendisitis akut di Indonesia diperkirakan berkisar 24,9 kasus per 10.000 populasi (10). Ahli bedah bedah anak umumnya menggunakan irisan tranversal tetapi beberapa menggunakan sayatan midline sehingga dapat berpengaruh pada luaran pasca operasi.

Tujuan: Mengetahui perbandingan: 1) luaran nyeri post operasi; 2) ILO; dan 3) LOS pada pasien apendisitis perforasi pasca laparotomi apendektomi dengan irisan *midline* dan transversal.

Metode: Penelitian ini *cross sectional*. Data diambil dari rekam medis dengan metode consecutive sampling RSUP. Dr. Sardjito Yogyakarta dan RS. Panti Rapih periode 1 Januari 2015 - 2018. Luaran nyeri pasca operasi diukur dengan skala Visual Analog Scale (VAS). Data karakteristik dianalisa dan dilakukan uji *chi square* dengan tingkat perbedaan bermakna ditandai dengan nilai $p < 0,05$.

Hasil: Didapatkan Jumlah pasien total dengan nyeri VAS dengan ≤ 2 sebanyak 42(65,5%), VAS 3-5 sebanyak 22(34,4%) (Tabel 4) irisan tranversal lebih nyeri dibandingkan irisan midline dengan $p=0,000$. Pasien dengan ILO sebanyak 19(29,7%%) tidak ILO sebanyak 45(70,3%) nilai $p=0,055$. Pada kelompok A didapatkan LOS sebesar 6,656 hari \pm 5,326 hari sedangkan pada kelompok B



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sebesar 4,969 hari \pm 1,379 hari dengan nilai $p=0,123$. Menunjukkan bahwa ILO dan LOS dibandingkan antara kelompok A dan B tidak bermakna signifikan.

Kesimpulan: Tidak terdapat perbedaan bermakna perbandingan luaran ILO dan LOS pasca laparotomi apendektomi irisan midline dan transversal kecuali pada nyeri pasca operasi didapatkan irisan midline lebih minimal.

Kata kunci: apendisitis perforasi; laparotomi apendektomi; teknik irisan; luaran

Comparisson outcome of midline and transverse laparotomy appendectomy for children with acute appendicitis

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Abstract

Background: Perforated appendicitis is a condition where a hole is found in the appendix wall or fecolites are found during surgery (2). Surgery is the management of perforated appendicitis. The incidence of acute appendicitis in Indonesia is estimated to be around 24.9 cases per 10,000 population (10). Pediatric surgeons generally use a transverse incision but some use a midline incision so that it can affect the postoperative outcome.

Objectives: To determine the ratio of: 1)postoperative pain outcome; 2)surgical site infection(SSI); and 3) length of stay(LOS) in patients with perforated appendicitis after laparotomy appendectomy with midline and transverse incisions.

Method: This study was cross sectional. Data were taken from medical records using RSUP consecutive sampling method. Dr. Sardjito Yogyakarta and RS. Panti Rapih period January 1, 2015 - 2018. Postoperative pain output was measured by a Visual Analog Scale (VAS) scale. Characteristic data were analyzed and chi square test was performed with significant differences marked with p value <0.05.

Results: Total number of patients with VAS pain with ≤ 2 was 42 (65.5%), 22 (34.4%) VAS 3-5 (Table 2). The transverse incision was more painful than the midline with p = 0.000. Patients with SSI are 19 (29.7 %) without SSI are 45 (70.3%) p value = 0.055. In group A, the LOS was 6.656 \pm 5.326 days, while in group B it was 4.969 days \pm 1.379 days with p value = 0.123. It shows that the SSI and LOS are compared between groups A and B is not significant.

Conclusion: There was no significant difference in the comparison of the outcome of the SSI and LOS after laparotomy for midline and transverse appendectomy, except that the postoperative pain was more minimal.

Key words: perforated appendicitis; laparotomy appendectomy; incision technique, outcome