

PENYAKIT GINJAL KRONIS TERPASANG DIALISIS PERITONEAL MANDIRI BERKESINAMBUNGAN DENGAN AGENESIS RENAL DEXTRA, HIPOPLASIA RENAL SINISTRA, HIDRONEFROSIS SINISTRA, DAN INFEKSI SALURAN KEMIH KOMPLEKS

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INTISARI

Latar belakang: Penyakit ginjal kronis (PGK) merupakan masalah kesehatan global dengan insidensi dan prevalensi yang terus meningkat, prognosis yang buruk, serta biaya perawatan yang mahal. Penyakit ginjal tahap akhir merupakan penyakit yang membutuhkan perawatan berkesinambungan dan dukungan berbagai pihak terutama keluarga sehingga menghasilkan luaran yang baik.

Tujuan: Mengamati luaran klinis jangka panjang pada anak dengan PGK serta dari intervensi yang dilakukan.

Metode: Penelitian ini merupakan studi observasional dan intervensi dengan subjek tunggal, yakni anak berusia 9 tahun dengan PGK. Variabel bebas yang diamati adalah adekuasi DPMB, infeksi DPMB, anemia, komplikasi kardiovaskular, infeksi saluran kemih, progresivitas *congenital anomalies of the kidney and urinary tract* (CAKUT), status gizi dan pertumbuhan, sosioekonomi serta kepatuhan minum obat, terhadap luaran klinis *residual renal function*, kualitas hidup dan tumbuh kembang.

Hasil: Pengamatan dilakukan selama 18 bulan. Kondisi pasien saat awal pemantauan yaitu penyakit ginjal tahap akhir, agenesis renal dekstra, hipoplasia renal sinistra, hidronefrosis sinistra, infeksi saluran kemih kompleks, gizi buruk dengan motivasi sekolah yang kurang baik. Hasil intervensi menunjukkan perbaikan status nutrisi, dan motivasi sekolah, namun secara keseluruhan belum menunjukkan perbaikan berarti karena progresivitas CAKUT. Infeksi saluran kemih belum teratasi meskipun telah mendapatkan antibiotik adekuat, dan terapi pembedahan. Pasien rawat inap 2 kali untuk pemasangan DPMB dan *double J stent* karena stenosis *ureterovesic junction*.

Kesimpulan: Tata laksana holistik pada penyakit kronis pada anak melibatkan peran petugas pelayanan primer, sekunder, dan petugas pelayanan tersier, sebagai tempat rujukan tertinggi. Kolaborasi yang baik antara anak dan orang tua, dapat membantu anak mempertahankan kualitas hidupnya.

Kata kunci: penyakit ginjal tahap akhir, *congenital anomalies of the kidney and urinary tract*, dialisis peritoneal mandiri berkesinambungan, infeksi saluran kemih kompleks

**CHRONIC KIDNEY DISEASE WITH *CONTINUOUS*
AMBULATORY PERITONEAL DIALYSIS, RIGHT KIDNEY AGENESIS,
LEFT KIDNEY HYPOPLASIA, LEFT HYDRONEPHROSIS AND COMPLEX
*URINARY TRACT INFECTION***

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ABSTRACT

Background: Chronic kidney disease (CKD) is a global health problem with increasing incidence and prevalence, prognosis and expensive treatment cost. End stage renal disease is a disease that requires care and support from interprofessional collaborative practice.

Objective: To observe long term clinical outcome in CKD and its intervention

Method: This study was an observational study and an intervention with single subject, a 9-year-old child with CKD. Independent variables observed were CAPD adequacy, CAPD infection, anemia, cardiovascular complications, urinary tract infections, progression of congenital anomalies of the kidney and urinary tract (CAKUT), nutritional status, socioeconomic status and medication compliance. Outcome being assessed were residual renal function, quality of life, growth and development.

Results: Study period was 18 months old that consist of observation and intervention. Initial subject condition was end stage renal disease, right kidney agenesis, left kidney hypoplasia, left hydronephrosis, complex urinary tract infections, severe malnutrition, with poor school motivation. The results of the intervention show improvements in nutritional status, and school motivation, but overall did not shown significant improvement due to progressivity of CAKUT. Urinary tract infections have not been resolved even though with adequate antibiotics and surgical interventions. There was twice rehospitalization due to continuous ambulatory peritoneal dialysis (CAPD) insertion and double J stent replacement due to ureterovesical junction.

Conclusion: Holistic management of chronic disease in children involves the role of primary, secondary and tertiary medical services in referral hospital. Good collaboration between children and parents could improve the quality of life.

Keyword: end stage renal disease, congenital anomalies of the kidney and urinary tract, continuous ambulatory peritoneal dialysis complex urinary tract infection.