

INTISARI

Latar Belakang : Penanganan definitif penyakit Hirschsprung (HSCR) saat ini melalui prosedur pembedahan dengan membuang usus aganglionik dan menganastomosis usus berganglionik dengan anus. Baru-baru ini dikenalkan metode operasi yaitu *transanal Swenson-like pull-through*, dimana teknik ini menggunakan metode Swenson dan prinsip posterior sagittal anorectoplasty. Sehingga, perlu dilakukan penelitian mengenai luaran operasi *transanal Swenson-like pull-through* beserta hubungan RNL, RPL, dan karakteristik subjek terhadap komplikasi pasien HSCR pascaoperasi *transanal Swenson-like pull-through*

Tujuan : Untuk menentukan hubungan karakteristik pasien HSCR yang dilakukan terapi *transanal Swenson-like pull-through* dan risiko inflamasi dengan komplikasi jangka pendek dan panjang, evaluasi luaran fungsional, dan mortalitas di RSUP Dr. Sardjito.

Metode : Studi retrospektif pada pasien HSCR pascaoperasi *transanal Swenson-like pull-through* di RSUP Dr. Sardjito dari Januari 2017 – Agustus 2020. Klasifikasi Krickenbeck digunakan untuk menilai luaran fungsional (VBM, *soiling*, dan konstipasi) sedangkan skor HAEC adaptasi metode Delphi untuk menentukan komplikasi berupa HAEC.

Hasil : Diantara 13 pasien HSCR yang menjalani *transanal Swenson-like pull-through* di RSUP Dr.Sardjito, hanya 3 pasien yang dapat dievaluasi luaran fungsional yang menunjukkan 1 pasien dengan VBM baik, 2 pasien mengalami *soiling grade 1*, dan 1 pasien mengeluhkan konstipasi. Diantara 13 pasien , terdapat 8 pasien yang mengalami beberapa komplikasi pasca operasi termasuk yaitu HAEC. Data dari nilai RNL dan RPL, jenis kelamin, status nutrisi dan usia dilakukan *transanal Swenson-like pull-through* menunjukkan tidak ada keterkaitan dengan ada tidaknya komplikasi pasca operasi.

Kesimpulan : Tidak ada hubungan antara karakteristik subjek, RNL, RPL dengan ada tidaknya komplikasi pascaoperasi *transanal Swenson-like pull-through*

Kata Kunci : penyakit Hirschsprung ; *transanal Swenson-like pull-through* ; enterocolitis ; Krickenberk ; RNL ; RPL ; Metode Delphi

ABSTRACT

Background: The definitive management of Hirschsprung's disease (HSCR) is now a surgical procedure by removing the aganglionic intestine and anastomosing the ganglionic intestine with the anus. Recently, the transanal Swenson-like pull-through method of surgery was introduced, which uses the Swenson method and the principle of posterior sagittal anorectoplasty. Thus, it is necessary to conduct research on the outcome of Swenson-like pull-through transanal surgery along with the relationship between RNL, RPL, and subject characteristics to complications of postoperative Swenson-like pull-through HSCR patients.

Objective: To determine the relationship between the characteristics of HSCR patients undergoing transanal Swenson-like pull-through therapy and the risk of inflammation with short and long-term complications, evaluation of functional outcomes, and mortality in Dr. Sardjito.

Methods: Retrospective study of postoperative transanal Swenson-like pull-through HSCR patients at Dr. Sardjito from January 2017 - August 2020. Krickenbeck classification is used to assess functional outcomes (VBM, soiling, and constipation) while the HAEC score is adapted to the Delphi method to determine complications in the form of HAEC.

Results: Among the 13 HSCR patients who underwent transanal Swenson-like pull-through at RSUP Dr.Sardjito, only 3 patients were evaluated for functional outcomes which showed 1 patient with good VBM, 2 patients had grade 1 soiling, and 1 patient complained of constipation. Among the 13 patients, there were 8 patients who experienced some postoperative complications including HAEC. Data from the RNL and RPL values, gender, nutritional status and age, transanal Swenson-like pull-throughs showed no association with postoperative complications.

Conclusions: There was no relationship between subject characteristics, RNL, RPL and the presence or absence of complications after transanal Swenson-like pull-through

Keywords: Hirschsprung disease; transanal Swenson-like pull-through ; enterocolitis ; Krickenberk ; RNL ; RPL ; Delphi method