

INTISARI

Preeklampsia merupakan salah satu gangguan hipertensi selama kehamilan yang ditunjukkan dengan peningkatan tekanan darah sistolik ≥ 140 mmHg dan atau tekanan darah diastolik ≥ 90 mmHg. Belum banyak bukti yang menunjukkan pilihan terapi paling efektif bagi pasien preeklampsia untuk mengatasi hipertensi selama kehamilan. Tujuan penelitian ini adalah membandingkan efektivitas dan profil keamanan terapi antihipertensi yaitu nifedipin dengan metildopa pada pasien preeklampsia.

Penelitian ini dilakukan menggunakan metode kohort retrospektif. Kriteria inklusi penelitian ini adalah pasien preeklampsia yang menjalani rawat inap dan mendapatkan terapi nifedipin atau metildopa. Kriteria eksklusi penelitian ini adalah pasien preeklampsia dengan terapi kombinasi nifedipin-metildopa dan menjalani rawat inap kurang dari 48 jam. Analisis efektivitas diukur berdasarkan perbedaan penurunan tekanan darah setelah penggunaan antihipertensi menggunakan *independent sample t test* atau *mann whitney test*. Profil keamanan diukur berdasarkan kejadian hipotensi setelah penggunaan antihipertensi menggunakan *chi square test*. Pengukuran tekanan darah diamati selama 48 jam pasien menjalani rawat inap.

Terdapat 64 pasien preeklampsia dalam penelitian ini, 34 mendapatkan nifedipin dan 30 mendapatkan metildopa. Rata-rata penurunan tekanan darah sistolik setelah penggunaan nifedipin adalah $22,56 \pm 15,91$ mmHg dan metildopa $26,70 \pm 12,46$ mmHg ($p=0,255$). Rata-rata penurunan tekanan darah diastolik setelah penggunaan nifedipin adalah $14,38 \pm 10,89$ mmHg dan metildopa $13,31 \pm 10,40$ mmHg ($p=0,550$). Kejadian hipotensi tekanan darah sistolik terjadi pada 5 pasien dengan nifedipin dan 2 pasien dengan metildopa ($p=0,433$), hipotensi tekanan darah diastolik terjadi pada 1 pasien kelompok metildopa ($p=0,469$). Tidak terdapat perbedaan efektivitas dan profil keamanan pemberian nifedipin maupun metildopa pada pasien preeklampsia. Metildopa maupun nifedipin dapat digunakan untuk mengontrol tekanan darah pasien preeklampsia tanpa meningkatkan risiko hipotensi.

Kata kunci: Preeklampsia, nifedipin, metildopa

ABSTRACT

Preeclamps is a hypertensive disorder during pregnancy, which one of the signs experienced by the patient is an increase in blood pressure as indicated by increases in systolic blood pressure ≥ 140 mmHg and or diastolic pressure ≥ 90 mmHg. There is less evidence shows the most effective treatment options for preeclamps patients to treat hypertension during pregnancy. This study aimed to compare the effectiveness and safety profile of nifedipin or methyldopa in preeclamptic patients.

This study was conducted using a retrospective cohort method. The inclusion criteria of this study were preeclamptic patients who were hospitalized and received nifedipine or methyldopa therapy. The exclusion criteria for this study were patients with preeclampsia who received combination therapy of nifedipine-methyldopa and underwent hospitalization for less than 48 hours. The effectiveness analysis was measured based on the difference in the decrease in blood pressure after the use of antihypertensives using the independent sample t test or the Mann Whitney test. The safety profile was measured based on the incidence of hypotension after antihypertensive use using the chi square test. Blood pressure measurements were observed during the 48 hours the patient was hospitalized

There were 64 preeclamptic patients in this study, of which 34 received nifedipine and 30 received methyldopa. The mean reduction in systolic blood pressure after nifedipine use was 22.56 ± 15.91 mmHg and methyldopa 26.70 ± 12.46 mmHg ($p = 0.255$). The mean reduction in diastolic blood pressure after nifedipine use was 14.38 ± 10.89 mmHg and methyldopa 13.31 ± 10.40 mmHg ($p = 0.550$). Systolic blood pressure hypotension occurred in 5 patients with nifedipine and 2 patients with methyldopa ($p = 0.433$), while diastolic blood pressure hypotension occurred in 1 patient in the methyldopa group ($p = 0.469$). There is no difference in the effectiveness and safety profile of nifedipine or methyldopa administration in preeclamptic patients. Both methyldopa and nifedipine can be used to control blood pressure in preeclamptic patients without increasing the risk of hypotension.

Key word: nifedipin, methyldopa, preeclampsia