

## INTISARI

**Latar belakang** : Tingginya angka harapan hidup dan luasnya akses ke pelayanan kesehatan untuk melakukan terapi dengan berbagai macam obat menyebabkan bertambahnya laporan mengenai reaksi simpang obat pada kulit. *Adverse Cutaneous Drug Reaction* merupakan reaksi *Adverse Drug Reaction* yang paling sering dilaporkan.

**Tujuan** : Untuk mengetahui prevalensi gambaran klinis kasus *Adverse Cutaneous Drug Reaction* dan jenis obat penyebab dari masing-masing gambaran klinis di RSUP Dr. Sardjito periode 2011-2015

**Metode** : Rancangan *crosssectional* dengan metode deskriptif retrospektif. Pengambilan data dari sampel rekam medik subyek penelitian dilakukan di Instalasi Rekam Medik RSUP Dr. Sardjito.

**Hasil** : Prevalensi gambaran klinis *Adverse Cutaneous Drug Reaction* dengan hipersensitivitas tipe IV periode 2011-2015 adalah 0,58%. Terdiri dari erupsi makulopapular yaitu sebanyak 203 orang (51%), diikuti *Steven Johnson Syndrom* (SJS) sebanyak 56 orang (14%), *Fixed Drug Eruption* (FDE) sebanyak 52 orang (13%), *Drug Reaction with Eosinophilia and Systemic Symptoms* (DRESS) sebanyak 40 orang (10%), eritroderma sebanyak 22 orang (5.5%), SJS-TEN sebanyak 15 orang (3,8%), *Acute Generalized Exanthematous Pustulosis* (AGEP) 8 orang (2%), dan yang terakhir *Toxic Epidermal Necrolysis* (TEN) 4 orang (1%). Persentase golongan beta laktam pada masing-masing gambaran klinis adalah 35,14% eritroderma, DRESS 32,91%, AGEP 26,67%, EMK 15,56%. Golongan OAINS yaitu pada FDE 27,03%, DRESS 18,99%, EMK 9,44%. Berikutnya adalah golongan obat antikonvulsan yaitu 22% pada TEN dan SJS 14.05%.

**Kesimpulan** : Prevalensi gambaran klinis *Adverse Cutaneous Drug Reaction* dengan hipersensitivitas tipe IV tergolong rendah dibandingkan dengan penelitian di negara berkembang lainnya. Erupsi makulopapular dan *Steven Johnson Syndrom* merupakan gambaran klinis terbanyak. Obat yang paling sering menyebabkan ACDR adalah Golongan antibiotik diikuti OAINS dan golongan antikonvulsan.

**Kata kunci** : *Adverse cutaneous drug reactions*, erupsi obat.

## ABSTRACT

**Background:** The high life expectancy and increasing access using healthcare for therapy with a variety of drugs causes an increase in reports of adverse drug reactions in the skin. Adverse Cutaneous Drug Reaction is the most frequently Adverse Drug Reaction.

**Objective:** To determine the prevalence of clinical features Adverse Cutaneous Drug Reaction case and the type of drugs cause of each clinical features in Dr. Sardjito Hospital period 2011-2015

**Methods:** The design was crosssectional descriptive method. The data was obtained from a sample of medical records of subjects of research conducted in the Medical Record Installation of Dr. Sardjito Hospital.

**Results:** The prevalence of Adverse Cutaneous Drug Reaction with type IV hypersensitivity in the period of 2011-2015 was 0.58%. Consisting of the maculopapular eruption as many as 203 people (51%), followed by Steven Johnson Syndrome (SJS) as many as 56 people (14%), Fixed Drug Eruption (FDE) as many as 52 people (13%), Drug Reaction with Eosinophilia and Systemic Symptoms (DRESS) as many as 40 people (10%), erythroderma as many as 22 people (5.5%), SJS-TEN as many as 15 people (3.8%), AGEP 8 (2%), and the latter Toxic Epidermal Toxic (TEN) 4 people (1%). Percentage of beta-lactam class of the respective clinical features is erythroderma 35.14%, 32.91% DRESS, AGEP 26.67%, 15.56% EMK. NSAID group caused 27.03% FDE, 18.99% DRESS, 9.44% EMK. Next is a class of anticonvulsant drugs, namely 22% on TEN and 14,05% SJS.

**Conclusion:** The prevalence of clinical features Adverse Cutaneous Drug Reaction with type IV hypersensitivity is relatively low compared to research in other developing countries. Maculopapular eruption and Steven Johnson Syndrome are the most clinical features. The drug class that causes ACDR is a group of antibiotics followed by NSAIDs and anticonvulsants group.

**Keywords:** Adverse Cutaneous Drug Reaction, drug eruption