

## INTISARI

SISTEM PENILAIAN ACTION UNTUK MENENTUKAN KEJADIAN KARDIOVASKULAR MAYOR PADA PASIEN ANGINA PEKTORIS STABIL DI RSUP DR SARDJITO YOGYAKARTA

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**Latar Belakang :** Penyakit kardiovaskular menempati peringkat pertama penyebab kematian secara global maupun di Indonesia. Sistem penilaian *a coronary disease trial investigating outcome with nifedipine GITS* (ACTION) terdiri dari 16 faktor risiko untuk memprediksi kejadian kardiovaskular mayor (KKM) pada pasien angina pektoris stabil yang objektif, lengkap dan memuat banyak faktor risiko.

**Tujuan:** Menentukan risiko skor ACTION tinggi dibandingkan skor ACTION rendah terhadap KKM pada pasien angina stabil dalam kurun waktu 5 tahun di RSUP Dr. Sardjito Yogyakarta.

**Metode:** Penelitian ini merupakan penelitian observasional yang menggunakan metode kohort retrospektif. Sampel berupa data rekam medis pasien yang didiagnosa angina pektoris stabil di RSUP Dr. Sarjito periode 2009-2010 yang kemudian diskoring dan di follow up. Analisis data dengan kurva ROC dan tabel uji prognosis 2x2.

**Hasil:** Total sampel penelitian 342 data rekam medis, namun yang berhasil diteliti sampai akhir berjumlah 15 sampel. Nilai titik potong dari sistem penilaian ACTION adalah 19,5. Risiko relatif skor tinggi adalah 8,25 dengan interval kepercayaan 1,171-58,133. Skor ACTION tinggi memiliki risiko lebih tinggi dibandingkan skor ACTION rendah terhadap KKM.

**Kesimpulan:** Skor ACTION tinggi memiliki risiko lebih tinggi 8.25 kali dibandingkan skor ACTION rendah terhadap KKM.

**Kata Kunci:** ACTION, angina pektoris stabil, KKM, risiko relatif

## ABSTRACT

ACTION SCORING SYSTEM TO DETERMINE MAJOR ADVERSE CARDIAC EVENTS IN STABLE ANGINA PEKTORIS PATIENTS AT DR SARDJITO HOSPITAL YOGYAKARTA

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**Background:** Cardiovascular diseases are in the first position as a mortality cause globally and in Indonesia. A coronary disease trial investigating outcome with nifedipine GITS (ACTION) scoring system is consisted of 16 risk factors to predict Major Adverse Cardiac Events (MACE) in stable angina pectoris which objective, complete and have many risk factors.

**Objective:** To determine the risk of high ACTION score compared to low ACTION score for the development of MACE in patients with stable angina in 5 years at RSUP Dr. Sardjito, Yogyakarta.

**Methods:** This research was observational study which uses retrospective cohort method. The samples were medical records from patients who were diagnosed stable angina pectoris at RSUP Dr. Sadjito in 2009-2010, which will be scored and followed up. Data analysis with ROC curve and diagnostic test table 2x2.

**Results:** Total research samples were 342 medical records, however, only 15 samples which were successfully followed up. Cut off point from ACTION scoring system was 19,5. Relative risk of high score was 8,25 with confidence interval was 1,171-58,133. The high ACTION score had higher risk compared to low ACTION score for the development of MACE.

**Conclusion:** The high ACTION score had 8.25 higher risk compared to low ACTION score for the development of MACE.

**Keyword:** ACTION, stable angina pectoris, MACE, relative risk