

INTISARI

Pengobatan rasional merupakan muara dari efisiensi dan efektifitas terapi dalam rangka peningkatan pelayanan kesehatan. Penelitian ini bertujuan untuk mengetahui jenis dan persentase *Drug Related Problems* (DRPs), perbedaan *prescription cost* rasional dan *prescription cost* aktual sepuluh besar penyakit yang teridentifikasi DRPs, serta hubungan DRPs dengan *outcome* terapi hipertensi di puskesmas Kota Yogyakarta.

Penelitian ini merupakan penelitian observasional dengan desain *cross-sectional* dan subyek penelitian adalah pasien sepuluh besar penyakit rawat jalan di puskesmas kota Yogyakarta. Data diambil secara retrospektif dan dilakukan identifikasi DRPs berdasarkan penggolongan DRPs oleh *Pharmaceutical Care Network Europe Foundation* versi 6.2 terkait pemilihan obat, dosis obat dan durasi terapi. Uji *Mann-Whitney* untuk mengetahui perbedaan *prescription cost* aktual yang dihitung dari sampel lembar resep teridentifikasi DRPs dengan resep yang rasional. Uji *Chi Square* untuk mengetahui hubungan DRPs dan *outcome* terapi hipertensi.

Hasil analisa menunjukkan bahwa sebanyak 632 resep (83,05 %) teridentifikasi DRPs, mayoritas DRPs yang terjadi adalah masalah terkait penggunaan obat tanpa indikasi sebanyak 629 resep (99,5%). Terdapat perbedaan ($p < 0,05$) antara nilai *prescription cost* aktual (Rp4.701.658,98) dan *prescription cost* rasional (Rp2.714.217,40) dari resep yang teridentifikasi DRPs pada sepuluh besar penyakit. Tidak terdapat hubungan yang bermakna ($p > 0,05$) antara DRPs dengan *outcome* terapi pada pasien hipertensi.

Kata kunci: Puskesmas, DRPs, *Prescription cost*, *outcome* terapi

ABSTRACT

In this JKN era, the quality of health services and the utilization of capitation funds are still the government's attention. Rational treatment is the estuary of the efficiency and effectiveness of therapy in order to improve health services. This study aims to determine the kind and percentage of DRPs, differences in prescriptions of rational cost and actual prescriptions of ten major diseases identified DRPs, DRPs relationship with outcome of hypertension therapy at the Yogyakarta city health center.

This study was an observational study using cross-sectional design, the research subjects used were the top ten outpatient illnesses in the Yogyakarta city health center, the data were retrospectively and DRPs were identified based on DRPs classification by Pharmaceutical Care Network Europe Foundation version 6.2 related to drug selection, Drug dose and duration of therapy. The impact of DRPs on the value of prescription cost is done by comparing the actual value calculated from the prescribed DRPs recipe sheet sample with a rational prescription through the Mann-Whitney Test. The association of DRPs and outcome of hypertension therapy were analyzed using Chi Square Test.

The results of the analysis showed that as many as 632 prescriptions (83,05%) identified DRPs, majority of DRPs that occurred was a problem related to the use of prescription drugs as many as 629 prescription (99,5%). There was a difference ($p < 0.05$) between the actual prescription costs (4.701.658,98) of the DRP-identified prescription and the cost of a rational prescription (2.714.217,40) of the DRP-identified prescription in the top ten diseases. There was no significant relationship ($p > 0.05$) between DRPs with therapy outcome in hypertensive patients.

Keywords: Puskesmas, DRPs, prescription costs, therapy outcome