

ABSTRAK

Penyakit kanker adalah salah satu penyakit katastrofik yang memiliki karakteristik berbiaya tinggi (*high cost*), banyak penderitanya (*high volume*) dan berisiko kematian tinggi (*high risk*). Berdasarkan Risesdas 2013, dari 240.000 kasus baru kanker stadium lanjut per tahun, 65% diantaranya mencari bantuan kesehatan dimana tatalaksana kuratif tidak lagi efektif. Perawatan paliatif adalah pendekatan yang bukan lagi mengeradikasi penyakit melainkan mengoptimalkan kualitas hidup pasien hingga akhir hayatnya. Penelitian ini menggunakan rancangan kasus-kontrol yang bertujuan mengevaluasi hubungan lama rawat inap dan biaya layanan pasien kanker terminal dewasa yang mendapat intervensi paliatif dibanding tanpa intervensi paliatif. Penelitian dengan studi kuantitatif melibatkan 120 penderita, dimana 29 penderita kasus; 91 penderita kontrol) yang diambil dari data rekam medis rawat inap RSCM yang terdiagnosa penyakit kanker terminal, berusia 18 tahun, serta minimal mendapat satu kali konsultasi tim paliatif maksimal 24 hari perawatan. Hasil analisis bivariat menggunakan uji *mann-whitney test* menunjukkan terdapat hubungan yang bermakna antara intervensi paliatif dengan tarif pelayanan rawat (nilai-p=0,041) dan tidak terdapat hubungan yang bermakna antara intervensi paliatif dengan lama hari rawat (nilai-p=0,873). Meskipun, diperlukan penelitian lanjut untuk mengeksplorasi variabel yang mempengaruhi lama rawat dan tarif pelayanan rawat inap penderita kanker terminal yang mendapat intervensi paliatif.

Kata Kunci: Intervensi perawatan paliatif, lama hari rawat, tarif pelayanan rawat

ABSTRACT

Cancer is one of the catastrophic diseases which have the characteristics of high cost, high volume, and high risk. Based on Basic Health Research (Riskesdas) 2013, 65% among 240.000 new cases of advanced cancer per year are seeking medical assistance where the curative treatment no longer effective. Palliative care is an approach that is no longer eradicates the disease, in contrary, it's an approach to increase the quality of patient's life until the end of life period (death). This research used a case control design which aims to evaluate the correlation of length of stay (LOS) and rates of hospital services of terminal cancer patients who got palliative care intervention or not receive palliative care intervention. This is a quantitative study (case-control study) involving 120 patients (29 cases and 91 controls) which taken from medical records of hospitalized patient in RSCM. The inclusion criteria consist of patient has been diagnosed as terminal cancer disease, aged 18 years, and got palliative care consultation. The results of the bivariate analysis using *Mann-Whitney* test showed a significant correlation between rates of hospital services and palliative care intervention (p-value=0.041) and no significant relationship between length of stay (LOS) and palliative intervention (p-value=0.873). However, it's necessary to further research to explore variables that influence LOS and rates of hospital services in palliative care intervention patients with terminal cancer.

Keywords : *Palliative care intervention, length of stay, rates of hospital services*