



ABSTRAK

Latar belakang: Infeksi dengue merupakan salah satu penyakit infeksi yang menjadi masalah kesehatan di dunia terutama negara tropis, termasuk Indonesia. Trombosit memegang peranan penting dalam patogenesis dengue. Selama ini yang ditekankan mengenai trombosit hanya sebatas jumlah trombosit dan sangat jarang yang membahas dari sisi kualitas trombosit (baik aktivasi maupun disfungsi). Terdapat konsep baru mengenai kebocoran plasma pada dengue, yaitu berkaitan dengan aktivitas trombosit. Dalam hal ini aktivasi trombosit dapat diamati secara tidak langsung melalui perubahan indeks trombosit (MPV, PDW, PCT, MPC, PCDW, MPM, PMDW, dan *large platelet*).

Tujuan: Menganalisis kemaknaan perbedaan nilai indeks trombosit pada pasien DD dan DBD.

Metode: Penelitian ini merupakan penelitian observasional analitik dengan desain potong lintang untuk menganalisis indeks trombosit pada pasien infeksi dengue dengan melihat perbedaan indeks trombosit pada pasien DD dan DBD. Subyek penelitian adalah pasien dengue yang dirawat inap di RSUP Dr. Sardjito dan RS PKU Muhammadiyah Yogyakarta yang memenuhi kriteria inklusi dan eksklusi. *ADVIA 120 Hematology System* digunakan untuk memeriksa panel hematologi. Perbedaan indeks trombosit antara DD dan DBD dianalisis menggunakan *independent t test* dan *Mann Whitney U test*.

Hasil: Penelitian dilakukan pada 100 subyek yang dibagi menjadi kelompok DD 50 subyek dan kelompok DBD 50 subyek. Subyek diklasifikasikan menjadi DD dan DBD berdasarkan kriteria WHO 2011. Pasien DBD memiliki PCT ($0,01 - 0,10\%$), MPC ($25,1 \pm 1,30$ g/dL), MPM ($2,2 \pm 0,16$ pg), dan *large platelet* ($1000 - 9000/\mu\text{L}$) yang signifikan lebih rendah daripada pasien DD. Pasien DBD memiliki MPV ($11,1 \pm 1,30$ fL), PDW ($73,9 \pm 7,76\%$), PCDW ($5,5 \pm 0,73$ g/dL), dan PMDW ($0,9 \pm 0,07$ pg) yang signifikan lebih tinggi dibandingkan dengan pasien DD.

Simpulan: Diperoleh perbedaan bermakna pada semua indeks trombosit (MPV, PDW, PCT, MPC, PCDW, MPM, PMDW, dan *large platelet*) pada pasien dengan DD dan DBD.

Kata kunci: *infeksi dengue, ADE, kebocoran plasma, indeks trombosit*



ABSTRACT

Background: Dengue infection is one of the infectious disease which becomes a health problem in the world, especially the tropical countries, including Indonesia. Platelets play an important role in the pathogenesis of dengue. The quantity of platelet related to dengue were often discussed but the quality (the activation or dysfunction) of platelet related to dengue infection were rarely discussed. However, new concept was introduced in dengue in term of platelet activity related to plasma leakage. The activation of platelets can be observe indirectly through changes in platelet indices (MPV, PDW, PCT, MPC, PCDW, MPM, PMDW, and large platelets).

Objective: Aim of this study was to analyze the significance difference of platelet indices in patients with DF and DHF.

Method: This study was an observational analytical study with a cross-sectional design to analyze the platelet indices in dengue infected patients, by looking at the difference of platelet indices in DF and DHF patients. The subjects were dengue infected patients that hospitalized in Dr. Sardjito General Hospital and PKU Muhammadiyah Hospital Yogyakarta who meet the inclusion and exclusion criteria. The ADVIA 120 Hematology System was used to measured hematological examination. Independent t test and *Mann Whitney U* test were used to analyze the difference of platelet indices in DF and DHF.

Result: One hundred subjects were participated in this study (50 DF and 50 DHF). The subjects were classified into DF and DHF based on WHO 2011 criteria. Patients with DHF were significantly lower in PCT (0,01 – 0,10%), MPC ($25,1 \pm 1,30$ g/dL), MPM ($2,2 \pm 0,16$ pg), and *large platelet* (1000 – 9000/ μ L) compared to patients DF. Patients with DHF were significantly higher in MPV ($11,1 \pm 1,30$ fL), PDW ($73,9 \pm 7,76\%$), PCDW ($5,5 \pm 0,73$ g/dL), and PMDW ($0,9 \pm 0,07$ pg) compared to patients DF.

Conclusion: The result showed that all platelet indices (MPV, PDW, PCT, MPC, PCDW, MPM, PMDW, and large platelets) have significant different between DF and DHF.

Key words: dengue infection, ADE, plasma leakage, platelet indices