

## INTISARI

# Hubungan Radikalitas Operasi dan Kemoterapi Terhadap Rekurensi Karsinoma Kolorektal Stadium Lanjut di RSUP dr Sardjito 2012 - 2017

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**Latar Belakang Penelitian** Kanker kolorektal merupakan tumor ganas yang ditemukan pada kolon dan rektum. Terapi utama penyakit kanker antara lain, yaitu pembedahan, radioterapi, kemoterapi dan terapi hormon. Kanker kolorektal memiliki risiko kekambuhan pasca terapi. Kekambuhan dapat terjadi ditempat anastomosis kolon atau rektum atau di tempat lain.

**Tujuan Penelitian** Mengetahui Hubungan Radikalitas Operasi dan Kemoterapi Terhadap Rekurensi Karsinoma Kolorektal Stadium Lanjut di RSUP dr Sardjito 2012 - 2017

**Metode Penelitian** Penelitian ini merupakan penelitian deskriptif analitik non eksperimental, dengan pendekatan kuantitatif. Rancangan penelitian adalah *Kohort Retrospektif*. Data diambil dari bagian catatan medik rawat jalan di rekam medik pusat dan catatan medik rawat jalan di poli bedah digestif dan kanker Tulip RSUP Dr. Sardjito Yogyakarta.2012-2017. Data dianalisa dengan menggunakan analisis berupa *Chi Square test* ( $\chi^2$ ) dengan tingkat kemaknaan  $p < 0,05$  serta uji regresi logistik untuk mengetahui hubungan antar variabel.

**Hasil** Ada hubungan bermakna antara usia, jenis patologi anatomi, status gizi, komorbid, jenis kemoterapi dan operator (konsulen, trainee, residen) dan radikalitas dengan angka kejadian rekurensi pada stadium lanjut dengan nilai ( $P < 0.000$ ). Dianjurkan pemberian kemoterapi kombinasi pada R0 dan R1.

**Kesimpulan** Faktor prognostik rekurensi pasien karsinoma kolorektal stadium lanjut pasca operasi dan kemoterapi di RSUP dr Sardjito 2012-2017 dipengaruhi oleh Usia, Komorbid, Status Gizi, Operator, Jenis Patologi, Radikalitas dan Jenis Kemoterapi.

**Kata Kunci** Karsinoma kolorektal. Operasi, Kemoterapi, Rekurensi.

## Abstract

# Correlation between Radicality of Surgery and Chemotherapy towards Reccurence Frequency of Advanced Stage Colorectal Carcinoma in RSUP Dr. Sardjito 2012-2017

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**Background :**Colorectal cancer is a malignant tumor found in the colon and rectum. The main therapies for this cancer are surgery, radiotherapy, chemotherapy, and hormone therapy. Chemotherapy is a treatment to kill the cancer cells with anticancer drugs (cytostatic) systemically. Despite advances in colorectal cancer therapy, the 5-year survival rate for stadium III and IV is still low. Pathologic stadium at the time of diagnosis, remains the most important prognostic indicator for colorectal cancer (Greene *et al*, 2002).

**Aim:** To determine the prognostic factors for recurrence of colorectal cancer stadium III and IV after surgery and chemotherapy in RSUP Dr. Sardjito Yogyakarta 2012 - 2017.

**Method:** This a non-experimental descriptive analytic study, with a quantitative approach. The study design was retrospective cohort. Study was conducted in RSUP DR. Sardjito Yogyakarta. Data was obtained from the central medical record section in inpatient ward and medical record in digestive surgery and integrated cancer ward (TULIP) RSUP Dr. Sardjito Yogyakarta 2012 – 2017. The population in this study consists of patient that present with advance stadium colorectal carcinoma recurrence after resection surgery and chemotherapy in RSUP Dr Sardjito 2012 - 2017 will be analysed using Chi-square test if fulfilling the criteria, if not, Fisher's Exact test will be applied. For survival analysis, Kaplan-Meier surveillance analysis will be used.

**Result:** The highest recurrence rate is 50 patients (83%), non-recurrence 10 patients (17%). Recurrence valuation is determined by symptoms (difficulties to

defecate, blood in stool), CEA level ( $>10$ ) and radiology result (USG and thorax x-ray). Significant correlations are found between recurrence and variables such as patient age ( $p=0.00$ ), pathology anatomy ( $p=0.00$ ), operator ( $p=0.00$ ), surger procedure ( $p=0.00$ ), chemotherapy regimen ( $p=0.00$ ), nutrition status ( $p=0.00$ ) and presence of comorbidity ( $p=0.00$ ).

**Conclusion:** There are numerous factors contributing to recurrence in colorectal cancer case after treated through surgery and chemotherapy, namely age $>50$  years, poor nutrition status, comorbidity, type of chemotherapy, and operator in RSUP Dr. Sardjito Yogyakarta 2012 - 2017.

**Keyword:** colorectal cancer, recurrence, comorbidity, age, chemotherapy, surgeon