

FAKTOR PREDIKTOR MORTALITAS INFEKSI INTRAKRANIAL YANG DIRAWAT DI PICU

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INTISARI

Latar belakang: Infeksi intrakranial merupakan penyebab utama kegawatan dan kematian pada anak. Pengetahuan tentang prediktor mortalitas penting diketahui untuk membantu pengambilan keputusan klinis dalam tatalaksana pasien. Belum banyak studi tentang faktor prediktor mortalitas anak dengan infeksi intrakranial di Indonesia.

Tujuan: Mengetahui faktor prediktor mortalitas anak dengan infeksi intrakranial.

Metode: Penelitian kohort retrospektif, menggunakan data rekam medik pasien anak dengan infeksi intrakranial yang dirawat di Instalasi Rawat Intensif Anak (IRIA) RSUP Dr. Sardjito Yogyakarta dari tahun 2014 –2018. Kriteria eksklusi adalah rekam medis tidak lengkap dan lama rawat < 24 jam. Analisis bivariat dilakukan pada variabel status epileptikus, *Glasgow Coma Scale* < 8, edema serebri, hiponatremia, anemia, dan penggunaan ventilasi mekanik. Variabel yang memenuhi syarat disertakan dalam analisis multivariat dengan regresi logistik.

Hasil: Dari 112 pasien yang memenuhi kriteria penelitian, 58 (51,8%) didiagnosis sebagai meningoensefalitis, 43 (38,4%) dengan ensefalitis, dan 11 (9,8%) dengan meningitis. Analisis multivariat menunjukkan kebutuhan penggunaan ventilasi mekanik (OR 22,76, IK 95%: 2,81;184,38) merupakan faktor prediktor independen.

Kesimpulan: Kebutuhan penggunaan ventilasi mekanik merupakan prediktor independen mortalitas anak dengan infeksi intrakranial.

Kata kunci: *infeksi intrakranial, prediktor mortalitas*

PREDICTORS OF MORTALITY IN CHILDREN WITH INTRACRANIAL INFECTION IN THE PICU

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ABSTRACT

Background: Intracranial infection is a leading cause of serious illness and death among children. Knowledge about predictors of mortality helps in clinical decision regarding the management of patient. To date there have been few studies about the predictors of mortality in children with intracranial infection in Indonesia.

Objective: To acknowledge the predictors of mortality in children with intracranial infection.

Methods: This retrospective cohort study includes children with intracranial infection who were admitted to Pediatric Intensive Care Unit (PICU) of Dr. Sardjito Hospital during 2014 - 2018. Those with incomplete data and length of stay less than 24 hours were excluded. Bivariate analysis was conducted to variables; had status epilepticus, Glasgow Coma Scale < 8, cerebral edema, hyponatremia, anemia, and the need for mechanical ventilations support. Variables which made the cut were included in multivariate analysis with logistic regression.

Results: Of 112 eligible children, 58 (51,8%) were classified as meningoenzephalitis, 43 (38,4%) with enzephalitis, and 11 (9,8%) with meningitis. Multivariate analysis showed the need for mechanical ventilation support was highly correlated with mortality (OR 22.76, 95% CI 2.81-184.38).

Conclusion: The need for mechanical ventilation support was the independent predictor of mortality in children with intracranial infection.

Key words: *intracranial infection, predictors of mortality*