

INTISARI

PRASETYO, E.Y., 2014, EVALUASI PENGGUNAAN OBAT ANTIHIPERTENSI PADA PENYAKIT HIPERTENSI DISERTAI GAGAL GINJAL KRONIK (ICD I12.0) PASIEN GERIATRI RAWAT INAP DI RSUD A.W. SJAHRANIE SAMARINDA PADA TAHUN 2012 DAN 2013 DENGAN METODE ATC/DDD, SKRIPSI, FAKULTAS FARMASI, UNIVERSITAS SETIA BUDI, SURAKARTA.

Hipertensi pada pasien geriatri dicirikan dengan peningkatan tekanan darah pada serial 160/90 mmHg. Hipertensi merupakan faktor pemicu penyakit gagal ginjal kronik karena menyebabkan kerusakan pembuluh darah ginjal. Sebelumnya evaluasi penggunaan obat Antihipertensi pada penyakit hipertensi disertai gagal ginjal kronik pasien geriatri belum pernah dilakukan di RSUD A.W.Sjahanie Samarinda. Evaluasi perlu dilakukan dengan tujuan mengetahui gambaran jenis Antihipertensi yang digunakan dan kuantitas penggunaannya berdasarkan metode *Defined Daily Dose* (DDD) serta dibandingkan kesesuaiannya dengan Standar Pelayanan Medis (SPM) dan *guidelines* JNC 7.

Penelitian ini berjenis deskriptif dengan pengambilan data retrospektif. Sampel penelitian ini adalah data rekam medik mengenai antihipertensi yang digunakan pada penyakit hipertensi disertai gagal ginjal kronik pasien geriatri (usia \geq 60) rawat inap. Data dicatat meliputi golongan, nama obat, kekuatan, frekuensi, durasi, lama hari rawat. Data diolah dan dihitung dengan rumus DDD

Hasil penelitian menyimpulkan obat Antihipertensi dalam segmen DU 90% tahun 2012 adalah Amlodipin (39,19 %), Furosemid (24,14 %), Captopril (14,14 %), Telmisartan (11,36%), Valsartan (2,04 %). Tahun 2013 adalah Amlodipin (35,11%), Furosemid (22,88%), Captopril (18,80%), Telmisartan (7,02%), Valsartan (6,51%). Kesesuaian berdasarkan SPM tahun 2012 (78,57%) dan 2013 (63,63%). Kesesuaian JNC 7 tahun 2012 (42,85) dan 2013 (36,36%). Tidak ada perubahan pola penggunaan Antihipertensi antara tahun 2012 dan 2013.

Kata kunci : Hipertensi, Gagal Ginjal Kronik, Geriatri, ATC/DDD.

ABSTRACT

PRASETYO, E.Y., 2014. EVALUATION OF DRUG USE ANTIHYPERTENSIVE AT HYPERTENSION WITH CHRONIC RENAL FAILURE (ICD I12.0) GERIATRIC PATIENS HOSPITALIZED IN THE RSUD A.W. SJAHRANIE SAMARINDA IN 2012 AND 2013 WITH THE ATC/DDD METHOD, THESIS, FACULTY OF PHARMACY, SETIA BUDI UNIVERSITY SURAKARTA

Hypertension in geriatric patients is characterized by an increase in diastolic and systolic blood pressure at serial $\geq 160/90$ mmHg. Hypertension is a trigger factor of chronic kidney disease because it can cause damage the blood vessels in the kidneys. Previously, evaluation of the use of antihypertensive drugs in hypertensive disease of Chronic Renal Failure in geriatric patients have not been conducted in RSUD A.W. Sjahranie Samarinda. Evaluation needs to be done with the aim of knowing description the type of antihypertensive drugs used and the quantity of its use based methods Defined Daily Dose (DDD) and suitability compared with Standar Pelayanan Medis (SPM) and the JNC 7.

This research was a descriptive study with retrospective data collection. The sample was medical record data regarding the use of antihypertensive drugs in hypertension with chronic renal failure in geriatric patients ($\text{age} \geq 60$) hospitalization. The data collected includes classes and antihypertensive drug name, strength, frequency and duration of usage, and length of stay the hospitalization. Then the data to be processed to determine the quantity of drug use in the ambulatory DDD/100 Hari Rawat and Drug Utilization (DU 90 %).

Based on the calculation DDD method and DU 90 %, the results of this study concluded that antihypertensive drugs included in the DU 90 % segment in 2012 is amlodipine (39.19%), furosemide (24.14%), captopril (14.14%), Telmisartan (11.36%), valsartan (2.04%). And in 2013 was amlodipine (35.11%), furosemide (22.88%), captopril (18.80%), Telmisartan (7.02%), valsartan (6.51%). Conformity based on SPM in 2012 (78.57%) and in 2013 (63.63%) and by the JNC 7 in 2012 (42.85) and in 2013 (36,36%). There is no change in the pattern of use of antihypertensive drugs between 2012 and 2013.

Keywords : Hypertension ,Chronic Renal Failure, Geriatrics, ATC/DDD.