

INTISARI

MEGARISMANITA, 2015. ANALISIS EFEKTIVITAS BIAYA PENGGUNAAN ANTIBIOTIK INJEKSI CEFTRIAZONE DAN INJEKSI CEFOTAXIME PADA PASIEN PNEUMONIA BALITA RAWAT INAP DI BLUD DI RUMAH SAKIT BENYAMIN GULUH KOLAKA SULAWESI TENGGARA PERIODE 2014. TESIS, FAKULTAS FARMASI UNIVERSITAS SETIA BUDI, SURAKARTA.

Terapi empiris antibiotik cephalosporin generasi ketiga seperti ceftriazone dan cefotaxime dapat diberikan anak-anak rawat inap di rumah sakit, dimana tempat tinggal pemukiman terdapat pneumonia yang disebabkan strain dari bakteri *pneumococcus* yang mempunyai resistan terhadap penggunaan penicillin. Tujuan pemilihan antibiotik ceftriazone dan cefotaxime di BLUD RSBG Kolaka yaitu untuk mengetahui keefektivitas biaya pengobatan pasien pneumonia balita rawat inap.

Penelitian ini dilakukan di BLUD RSBG Kabupaten Kolaka, secara *observational* dengan rancangan *cross sectional* dan retrospektif pada pasien JKN rawat inap kelas III dengan penyakit pneumonia balita berjumlah 50 pasien. Berdasarkan jenis kelamin, yaitu laki-laki 33 pasien dan perempuan 17 pasien. Biaya total terapi dihitung berdasarkan biaya medik langsung menurut perspektif rumah sakit. Analisis data dilakukan dengan membandingkan biaya terapi pengobatan pneumonia balita dengan efektivitas yang diukur berdasarkan hilangnya gejala klinis.

Total biaya rata-rata penggunaan terapi antibiotik ceftriazone yaitu Rp.1.379.460,00 dan terapi antibiotik cefotaxime Rp. 1.588.700,00. Persentase pasien yang mencapai target terapi ceftriazone 97% dan terapi cefotaxime 90%. Nilai *ACER* (*Average Cost-Effectiveness Ratio*) terapi antibiotik injeksi ceftriazone lebih rendah yaitu Rp. 1.422.123,71 dan terapi antibiotik injeksi cefotaxime yaitu Rp. 1.765.222,22. Kelompok terapi ceftriazone lebih *cost-effective* dibandingkan kelompok terapi cefotaxime.

Data Kunci : Keefektivitas Biaya, Ceftriazone dan Cefotaxime, Pneumonia Balita

ABSTRACT

MEGARISMANITA, 2015. COST EFFECTIVENESS ANALYSIS of the USE of the ANTIBIOTIC INJECTION of CEFTRIAXONE and CEFOTAXIME INJECTION on PATIENTS of PNEUMONIA TODDLER INPATIENT in HOSPITAL BENJAMIN BLUD GULUH KOLAKA SOUTHEAST SULAWESI 2014 PERIOD. THESIS, FACULTY OF PHARMACY UNIVERSITY OF FAITHFUL BUDI, SURAKARTA.

Empirical antibiotic therapy is a third generation cephalosporin ceftriaxone and cefotaxime as can be given to children hospitalization in hospitals, where the place of residence there are neighbourhoods of pneumonia caused by *Streptococcus pneumoniae* strains of bacteria that have a high level of usage is resistant to penicillin. The purpose of the election of the antibiotic ceftriaxone and cefotaxime in the Kolaka RSBG BLUD to know the patient's medical expenses keefektivan toddler pneumonia hospitalization. This research was conducted in BLUD RSBG Kolaka, observational basis with retrospective cross sectional design and on fitting.

This research was conducted in BLUD RSBG Kolaka district , in observational with the design of cross sectional and retrospective regarding patients on inpatient class iii with a disease of pneumonia toddlers total 50 patients .Based on sex , namely men 33 patients and women 17 patients .The total cost therapy calculated based on direct medical costs according to the perspective of the hospital .Data analysis done by comparing.

The total average cost of the use of antibiotic therapy and therapeutic antibiotic ceftriaxone Rp.1.379.460,00 cefotaxime is Rp .1.588.700,00. The percentage of patients reach the target therapy and therapeutic cefotaxime ceftriaxone 97 percent 90 percent. The ACER(*Average Cost-Effectiveness Ratio*) therapy antibiotic ceftriaxone lower is Compared with cefotaxime Rp.1.422.123,71 antibiotic therapy is Rp 1.765.222,22. Group therapy ceftriaxone more cost-effective than a group therapy cefotaxime.

The key words: keefektivan costs ceftriaxone and cefotaxime, pneumonia toddlers