

INTISARI

Dg. MASIKKI, M.F.D. 2013. PENGARUH KARAKTERISTIK, STADIUM KLINIK, TERAPI DAN BIAYA MEDIK LANGSUNG TERHADAP KUALITAS HIDUP PASIEN KANKER PAYUDARA DI RSUD DR. MOEWARDI TAHUN 2013. TESIS. FAKULTAS FARMASI. UNIVERSITAS SETIA BUDI. SURAKARTA.

Penyakit kanker saat ini masih menjadi masalah kesehatan dunia. Di negara maju, kanker merupakan penyebab kematian kedua setelah penyakit kardiovaskuler. Penatalaksanaan kanker payudara dilakukan dengan serangkaian pengobatan meliputi pembedahan, kemoterapi, terapi hormon, terapi radiasi (radioterapi) dan terapi biologi (*targeted therapy*). Sebagai dasar tindakan lanjut pasca terapi, dapat digunakan nilai kualitas hidup. Literatur yang ada menyebutkan bahwa faktor determinan yang dapat mempengaruhi kualitas hidup antara lain karakteristik pasien, stadium klinis, terapi, dan biaya perawatan. Tujuan penelitian ini adalah untuk menilai pengaruh karakteristik pasien, stadium klinis, terapi, dan biaya medik langsung terhadap kualitas hidup pasien kanker payudara.

Penelitian ini merupakan *Observasional Crossectional* yang dilakukan pada sekali waktu tanpa melakukan *follow-up*. Subjek penelitian adalah pasien kanker payudara rawat jalan yang menerima kemoterapi di RSUD DR. Moewardi sebanyak 38 pasien. Pengambilan data dilakukan secara *concurrent* yaitu membagikan kuesioner kualitas hidup *EORTC QLQ-C30*; dan *QLQ-BR Patient* untuk pasien kanker payudara. Analisa data yaitu analisa bivariat dengan menggunakan *SPSS 16,0 for windows*.

Hasil penelitian menunjukkan bahwa jenis kelamin berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,041$) dan QLQ-BR *Patient* ($p = 0,018$). Usia berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,046$) dan QLQ-BR *Patient* ($p = 0,036$). Tingkat pendidikan berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,006$) dan QLQ-BR *Patient* ($p = 0,010$). Golongan pekerjaan berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,022$) dan QLQ-BR *Patient* ($p = 0,038$). Stadium klinik tidak berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,638$) dan QLQ-BR *Patient* ($p = 0,779$). Terapi tidak berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,132$) dan QLQ-BR *Patient* ($p = 0,219$). Biaya pengobatan tidak berpengaruh signifikan terhadap kualitas hidup berdasarkan kuesioner QLQ-C30 ($p = 0,140$) dan kuesioner QLQ-BR *Patient* ($p = 0,746$).

Kata kunci: kualitas hidup, karakteristik pasien, terapi, stadium klinis, biaya

ABSTRACT

Dg. MASIKKI, M.F.D. 2013. EFFECT OF CHARACTERISTIC, STADIUM CLINIC, THERAPY AND DIRECT MEDICAL COST TO QUALITY OF LIFE IN BREAST CANCER PATIENT AT Dr. MOEWARDI HOSPITAL IN 2013. THESIS. FACULTY OF PHARMACY. SETIA BUDI UNIVERSITY. SURAKARTA.

Cancer is still a world health problem. In developed countries, cancer is the second leading cause of death after cardiovascular disease. Breast cancer management done with series of treatment include surgery, chemotherapy, hormone therapy, radiation therapy (radiotherapy) and biologic therapy (targeted therapy). As a follow-up post-treatment basis, can use quality of life value. Existing literature mentions that determinant factors that affect the quality of life are patient characteristic, clinical stage, treatment, and treatment cost. The purpose of this study was to assess the effect of patient characteristic, clinical stadium, therapy, and direct medical cost to quality of life in breast cancer patient.

The study was observational cross-sectional which conducted at one time without doing follow - up. Subjects were breast cancer outpatient receiving chemotherapy in Dr. Moewardi hospitals as 38 patients. Data collection was concurrently which is distributing the quality of life questionnaire EORTC QLQ-C30, and QLQ-BR Patient for breast cancer patient. Data analysis was bivariate analysis using SPSS 16.0 for windows.

The results showed that gender has affect significantly to the quality of life based QLQ-C30 ($p = 0.041$) and QLQ-BR Patient ($p = 0.018$) questionnaires. Age has affect significantly to the quality of life based QLQ-C30 ($p = 0.046$) and QLQ-BR Patient ($p = 0.036$) questionnaires. Levels of education has affect significantly to the quality of life based QLQ-C30 ($p = 0.006$) and QLQ-BR Patient ($p = 0.010$) questionnaires. Class of work has affect significantly to the quality of life based QLQ-C30 ($p = 0.022$) and QLQ-BR Patient ($p = 0.038$) questionnaires. Clinical stadium has not affect significantlt to the quality of life based QLQ-C30 ($p = 0.638$) and QLQ-BR Patient ($p = 0.779$) questionnaires. Therapy has not affect significantly to the quality of life based QLQ-C30 ($p = 0.132$) and QLQ-BR Patient ($p = 0.219$) questionnaires. Treatment cost has not affect significantly to the quality of life based QLQ-C30 ($p = 0.140$) and QLQ-BR Patient ($p = 0.456$) questionnaires.

Keywords : quality of life, patient characteristic, treatment, clinical stadium, cost