

# HUBUNGAN RASIONALITAS PENGGUNAAN ANTIBIOTIK TERHADAP LAMA RAWAT INAP PASIEN PEDIATRIK DENGAN PNEUMONIA DI RSUD SLEMAN

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## INTISARI

**Latar Belakang:** Pengobatan pneumonia dilakukan dengan pemberian antibiotik untuk mengobati infeksi terhadap bakteri. Penggunaan antibiotik yang salah atau tidak tepat akan menimbulkan beberapa dampak yang kurang baik seperti kurang efektifnya pengobatan, efek samping, dan resistensi antibiotik sehingga dapat memperlama kesembuhan dan meningkatkan lama rawat inap. Studi penggunaan antibiotik pada pneumonia mengungkapkan masih terdapat ketidakrasionalan pada penggunaan antibiotik.

**Tujuan:** Penelitian ini bertujuan untuk mengidentifikasi rasionalitas penggunaan antibiotik dan hubungannya terhadap lama rawat inap pasien pediatrik dengan pneumonia.

**Metode:** Penelitian ini adalah penelitian non eksperimental bersifat analitik observasional dengan desain *cross-sectional*. Data dilakukan dengan mencatat data hasil rekam medik dari pasien rawat inap pediatrik usia 0-60 bulan dengan pneumonia di RSUD Sleman dari bulan Januari 2018 hingga Desember 2020 dengan sampel berjumlah 63 anak secara retrospektif. Pengambilan sampel dengan teknik *consecutive sampling*. Analisis univariat dilakukan pada karakteristik pasien, karakteristik pengobatan, rasionalitas penggunaan antibiotik yang disajikan dalam bentuk persentase. Analisis bivariat digunakan untuk melihat hubungan antara rasionalitas penggunaan antibiotik terhadap lama rawat inap.

**Hasil:** Pasien rawat inap pediatrik dengan pneumonia di RSUD Sleman sebagian besar berusia 13 hingga 60 bulan (57,14%), berjenis kelamin laki-laki (52,4%), dan didiagnosis CAP (98,4%). Pengobatan paling banyak dilakukan dalam bentuk kombinasi 2 obat (80,96%) dengan pilihan obat ampicilin dan gentamisin (46,03%). Hasil rasionalitas antibiotik diperoleh tepat pasien (100%), tepat obat (44,26%) dan tepat dosis (41,80%). Nilai p pada hubungan antara rasionalitas penggunaan antibiotik terhadap lama rawat inap pasien pediatrik dengan pneumonia di RSUD Sleman pada kategori tepat obat dan tepat dosis berturut-turut adalah 0,125 dan 0,885 ( $p > 0,05$ ).

**Kesimpulan:** Tidak terdapat hubungan antara rasionalitas penggunaan antibiotik terhadap lama rawat inap pasien pediatrik dengan pneumonia di RSUD Sleman.

**Kata kunci:** antibiotik, lama rawat inap, pneumonia, rasionalitas obat

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# THE RELATIONSHIP BETWEEN THE RATIONALITY OF ANTIBIOTIC USE AGAINST LENGTH OF STAY OF PEDIATRIC PATIENTS WITH PNEUMONIA IN SLEMAN GENERAL HOSPITAL

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## ABSTRACT

**Background:** Pneumonia's treatment was conducted with antibiotics to treat bacterial infections. Incorrect or inappropriate use of antibiotics will have some unfavorable impacts such as less effective treatment, side effects, and antibiotic resistance, thus it might prolong recovery and increase hospitalization. Studies on the use of antibiotics in pneumonia revealed that the irrational uses of antibiotics were still exist.

**Objective:** This study aims to identify the rationality of antibiotic. Its relationship against length of a stay of pediatric patients with pneumonia.

**Methods:** This research was a non-experimental in observational analytic type with cross-sectional design. The data was carried out by recording medical record data from pediatric in patients aged 0-60 months with pneumonia at Sleman General Hospital from January 2018 to December 2020 with a retrospective sample of 63 children. Sampling was using consecutive sampling technique. Univariate analysis was carried out on patient characteristics, treatment characteristics, rationality of antibiotic use which were presented in percentage form. Bivariate analysis was used to see the relationship between the rationality of antibiotic use and length of stay.

**Results:** The highest prevalence in the pediatric patients with pneumonia in RSUD Sleman aged 13 to 60 months (57.14%), male (52.4%), and diagnosed with CAP (98.4%). Pharmacological treatment was mostly delivered in the form of combination of 2 drugs (80.96%) with the choice of ampicillin and gentamicin (46.03%). The rationality of antibiotics were right patient (100%), right medication (44.26%) and right dose (41,80%). The p-value on the relationship between the rationality of antibiotic use against the length of stay of pediatric ii patients with pneumonia in Sleman Hospital in the right medication and right dose categories were 0.125 and 0.885, respectively ( $p > 0.05$ ).

**Conclusion:** There is no relationship between the rationality of antibiotic use against the length of stay of pediatric in patients with pneumonia in Sleman General Hospital.

**Keywords:** antibiotics, length of hospitalization, pneumonia, drug rationality

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