

**HUBUNGAN DRUG RELATED PROBLEMS KATEGORI DRUG
SELECTION ANTIHIPERTENSI TERHADAP OUTCOME KLINIK
PASIEN HEMODIALISA DI RS PKU MUHAMMADIYAH
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INTISARI

Latar Belakang: Prevalensi Gagal Ginjal Kronik di Indonesia meningkat dari tahun 2013 sebanyak 2% menjadi 3,8% di tahun 2018. Gagal ginjal kronik stadium V membutuhkan hemodialisa untuk mempertahankan kualitas hidup yang baik. Antihipertensi bermanfaat untuk mencapai target tekanan darah dan memperlambat progresifitas gagal ginjal dan sering digunakan dalam bentuk kombinasi jangka panjang sehingga berpotensi terjadi DRPs. Efek DRPs merugikan pasien dan terapi menjadi tidak efektif dengan tidak tercapainya *outcome* klinik pasien dan berisiko terjadi efek yang tidak diinginkan.

Tujuan Penelitian: Untuk mengevaluasi DRPs kategori pemilihan obat pasien gagal ginjal kronik terhadap *outcome* klinik dengan hemodialisa di Rumah Sakit PKU Muhammadiyah Yogyakarta.

Metode Penelitian: Penelitian dilakukan dengan studi observasional analitik dengan desain *cross sectional*. Pengambilan data dilakukan dengan pendekatan retrospektif metode *purposive sampling* menggunakan sampel data sekunder berupa rekam medis. Analisis dilakukan dengan menggunakan metode analisis univariat dan bivariat menggunakan program SPSS uji *chi square*.

Hasil Penelitian: Dari 63 pasien prevalensi tertinggi pada pria usia 41-75 dengan jumlah obat antihipertensi 141 dengan penggunaan regimen terapi terbanyak yaitu kombinasi 73% dan pilihan obat yang sering digunakan yaitu furosemid 25%, candesartan 24%, dan amlodipine 20%. Kejadian DRPs kategori pemilihan obat sebanyak 25% dengan sebaran obat tidak sesuai pedoman 17%, terlalu banyak obat diresepkan 4%, duplikasi kelompok terapi tidak tepat 2,6%, sesuai pedoman tetapi menjadi kontraindikasi 1,4%. *outcome* klinik target tekanan darah tidak tercapai. Hasil analisis bivariat dengan uji *chi square p value* 0,053 ($p>0,050$).

Kesimpulan : Tidak terdapat hubungan antara kejadian *Drug Related Problems* kategori pemilihan obat dengan *outcome* klinik pada pasien.

Kata kunci: Antihipertensi, *Drug Related Problems* (DRPs), Gagal ginjal kronik, Hemodialisa, Pemilihan obat.

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**RELATIONSHIP OF ANTIHYPERTENSIVE DRUG RELATED
PROBLEMS ON DRUG SELECTION TO CLINICAL CATEGORY
OUTCOMES OF HEMODIALYZED PATIENTS AT PKU
MUHAMMADIYAH HOSPITAL YOGYAKARTA 2020**

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ABSTRACT

Background: The prevalence of chronic kidney failure in Indonesia increased from 2% in 2013 to 3.8% in 2018. Stage V chronic kidney failure demanded on hemodialysis to maintain a good quality of life. Antihypertensives are useful for achieving blood pressure targets and slowing the progression of renal failure and are often used in long-term combinations so that DRPs have the potential to occur. The effect of DRPs is detrimental to the patient and therapy would becomes ineffective with the patient's clinical outcome not being achieved and the risk of unwanted effects occurring.

Research Objectives: To evaluate DRPs for the category of drug selection for patients with chronic kidney failure on clinical outcomes with hemodialysis at PKU Muhammadiyah Hospital, Yogyakarta.

Research Methods: The study was comed out with an analytic observational study with a cross sectional design. Data collection was using a retrospective approach with a purposive sampling, samples were using secondary data samples in the form of medical records. The analysis was carried out using univariate and bivariate analysis methods using the SPSS chi square test program.

Results: Of the 63 patients, the highest prevalence was in men aged 41-75 with 141 antihypertensive drugs with the most use of the therapeutic regimen, which was a combination of 73%, and the most frequently used drugs were furosemide 25%, candesartan 24%, and amlodipine 20%. The incidence of DRPs in the category of drug selection was 25% with the distribution of drugs not according to the guidelines 17%, too many drugs being prescribed 4%, duplication of the therapy group was not right 2.6%, according to the guidelines but being contraindicated 1.4%. clinical outcome target blood pressure is not achieved. The results of the bivariate analysis with chi square test p value of 0.053 ($p > 0.050$).

Conclusion: There is no relationship between the incidence of Drug Related Problems in the category of drug selection with clinical outcomes in patients.

Keywords: Antihypertensive, Drug Related Problems (DRPs), Chronic kidney failure, Hemodialysis, Drug selection.

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