

EVALUASI RASIONALITAS ANTIBIOTIK PADA PASIEN PNEUMONIA KOMUNITAS RAWAT INAP DI RS PKU MUHAMMADIYAH GAMPING

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INTISARI

Latar Belakang: Pneumonia Komunitas atau *Community Acquired Pneumonia* (CAP) sering kali memerlukan penggunaan antibiotik, terutama jika penyebab infeksi adalah bakteri. Beberapa hasil penelitian menunjukkan bahwa belum sepenuhnya pemberian antibiotik pada pasien pneumonia komunitas dilakukan secara rasional. Evaluasi rasionalitas penggunaan antibiotik yang berkelanjutan perlu dilakukan untuk mengontrol penggunaan antibiotik dan meningkatkan rasionalitas penggunaannya, sehingga mampu mencegah risiko terjadinya resistensi antibiotik.

Tujuan Penelitian: Untuk mengevaluasi rasionalitas penggunaan antibiotik empiris pada pasien pneumonia komunitas yang menjalani rawat inap di RS PKU Muhammadiyah Gamping.

Metode Penelitian: Penelitian observasional deskriptif dengan teknik *purposive sampling*. Pengambilan sampel secara retrospektif menggunakan data rekam medis pasien pneumonia komunitas yang menjalani rawat inap periode Februari 2024-Februari 2025 di RS PKU Muhammadiyah Gamping. Jumlah sampel yang diperoleh sejumlah 81 pasien. Analisis data secara univariat untuk menggambarkan karakteristik pasien, pola penggunaan antibiotik, dan karakteristik rasionalitas penggunaan antibiotik berdasarkan kriteria tepat obat, tepat dosis, tepat pasien, dan tepat indikasi.

Hasil Penelitian: Sebagian besar pasien pneumonia komunitas berusia >65 tahun (51,85%) berjenis kelamin laki-laki (61,73%), dan 50,62% diantaranya tidak memiliki penyakit penyerta. Sebagian besar pasien pneumonia komunitas mendapatkan terapi antibiotik dalam bentuk tunggal (83,95%). Golongan antibiotik yang banyak digunakan adalah sefalosporin (41,49%) dan fluorokuinolon (39,36%). Berdasarkan kriteria rasionalitas antibiotik yang digunakan pada pasien pneumonia komunitas diperoleh hasil tepat obat sebesar 34,57%, tepat dosis 96,30%, tepat pasien 100% dan tepat indikasi sebesar 100%.

Kesimpulan: Penggunaan antibiotik empiris pada pasien pneumonia komunitas yang menjalani rawat inap di RS PKU Muhammadiyah Gamping menunjukkan sebesar 32,10% adalah rasional dan 67,90% tidak rasional.

Kata Kunci: Antibiotik, Pneumonia Komunitas, Rasionalitas.

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RATIONALITY EVALUATION OF COMMUNITY ACQUIRED PNEUMONIA ANTIBIOTIC INPATIENTS AT PKU MUHAMMADIYAH GAMPING HOSPITAL

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ABSTRACT

Background: Community-acquired pneumonia (CAP) Community-acquired pneumonia (CAP) often requires the use of antibiotics, especially if the infection is caused by bacteria. Several studies have shown that the administration of antibiotics to patients with community-acquired pneumonia is not always rational. Continuous evaluation of the rationality of antibiotic use is necessary to control antibiotic use and improve its rationality, thereby preventing the risk of antibiotic resistance.

Objective: To evaluate the rationality of empirical antibiotic use in-patients with community-acquired pneumonia at PKU Muhammadiyah Gamping Hospital.

Method: This was a descriptive observational study using purposive sampling. Data collection was conducted retrospectively using medical records of community-acquired pneumonia patients who were hospitalized from February 2024 to February 2025 at PKU Muhammadiyah Gamping Hospital. The sample size was 81 patients. Univariate data analysis was conducted to describe patient characteristics, antibiotic usage patterns, and the rationality of antibiotic utilization based on the criteria of appropriate medication, appropriate dosage, appropriate patient, and appropriate indication.

Result: Most of community-acquired pneumonia patients were over 65 years old (51,85%), male (61,73%), and 50,62% of them had no comorbidities. Predominantly community-acquired pneumonia patients received single-agent antibiotic therapy (83,95%). The most commonly used antibiotic classes were cephalosporins (41,49%) and fluoroquinolones (39,36%). Based on the criteria of rationality of antibiotics used in patients with community-acquired pneumonia, the results obtained were 34,57% for appropriate medication, 96,30% for appropriate dosage, 100% for appropriate patients, and 100% for appropriate indications.

Conclusion: The use of empirical antibiotics in community-acquired pneumonia patients hospitalized at PKU Muhammadiyah Gamping Hospital showed that 32,10% was rational and 67,90% was irrational.

Keywords: Antibiotic, Community Acquired Pneumonia, Rationality.

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