

INTISARI

Pasien geriatri umumnya mengalami kerentanan terhadap berbagai macam penyakit karena menurunnya fungsi organ tubuh salah satunya adalah gangguan penyakit saraf. Ketidaktepatan penggunaan obat-obat yang bekerja pada sistem saraf berdasarkan *Beers Criteria 2015* banyak dilaporkan. Penelitian ini dilakukan untuk mengetahui prevalensi pereseptan obat dengan diagnosis gangguan saraf pada pasien geriatri rawat inap berdasarkan *Beers Criteria 2015* di Rumah Sakit Umum Daerah Panembahan Senopati Bantul.

Penelitian ini merupakan penelitian observasional dan pengumpulan data dilakukan secara *retrospektif* berdasarkan data rekam medik pasien geriatri dengan diagnosis gangguan saraf yang di rawat inap di RSUD Panembahan Senopati Bantul periode Januari – Desember 2016. Pengambilan sampel dilakukan secara *systematic random sampling*. Data dikumpulkan dari 153 rekam medik pasien yang masuk kriteria inklusi. Data dianalisis berdasarkan *guideline American Geriatrics Society Beers Criteria 2015*.

Hasil penelitian menunjukkan bahwa, dari 153 pasien geriatri di RSUD Panembahan Senopati Bantul yang masuk dalam kriteria inklusi terdapat 85 pasien (55,6%) teridentifikasi *Potentially Inappropriate Medications* (PIMs). Analisis PIMs meliputi 4 kategori yaitu kategori obat-obat yang harus dihindari pada pasien geriatri persentase terbanyak yaitu diazepam sebanyak 24 penggunaan (33,3%) dan nifedipin *immediate release* sebanyak 10 penggunaan (13,9%), kategori obat yang harus dihindari berdasarkan penyakit atau sindrom tertentu persentase terbanyak yaitu ranitidin dengan diagnosis demensia sebesar 5 pasien (62,5%), kategori obat yang digunakan dengan hati-hati pada pasien geriatri persentase terbanyak yaitu furosemid sebanyak 37 penggunaan (71,2%), dan kategori interaksi obat-obat yang harus dihindari yaitu diazepam dengan ≥ 2 obat SSP sebanyak 4 pasien (66,7%), dexometason dengan ketorolac sebanyak 1 pasien (16,7%), dan tramadol dengan amitriptilin dan morfin sebanyak 1 pasien (16,7%).

Kata kunci : geriatri, potentially inappropriate medications, Beers Criteria 2015

ABSTRACT

Geriatric patients generally experience susceptibility to various diseases because of decreased function of organs and one of them is a nervous disorder. The inaccuracy of the use of drugs acting on the nervous system based on the Beers Criteria 2015 is widely reported. This study was conducted to determine the prevalence of prescribing drugs with the diagnosis of neurological disorders in geriatric inpatients based on Beers Criteria 2015 at Rumah Sakit Umum Daerah Panembahan Senopati Bantul.

This study was an observational study and data collection was conducted retrospectively based on medical record data of geriatric inpatients with diagnosis of neurological disorders at RSUD Panembahan Senopati Bantul from January - December 2016. Sampling was done by systematic random sampling. Data were collected from 153 medical records of patients which included in inclusion criteria. Data were analyzed under the guidelines of the American Geriatrics Society Beers Criteria 2015.

The results showed that from 153 geriatric patients in RSUD Panembahan Senopati Bantul included in the inclusion criteria, 85 patients (55.6%) were identified Potentially Inappropriate Medications (PIMs). The PIMs analysis included four categories: drugs to be avoided from geriatric patients categories with the highest percentage is diazepam with 24 usage (33.3%) and nifedipine immediate release with 10 usage (13.9%), drug to be avoided based on disease or a certain syndrome categories with the highest percentage is ranitidine which were used for 5 patients with dementia (62.5%), drug used with caution in geriatric patients categories with the highest percentage is furosemide with 37 usage (71.2%), and drugs interaction to be avoided categories including diazepam with \geq 2 CNS medications from 4 patients (66.7%), dexamethasone with ketorolac from 1 patient (16.7%), and tramadol with amitriptilin and morphine from 1 patient (16.7%).

Keywords: geriatric, potentially inappropriate medications, Beers Criteria 2015