

Tesis

**UJI KESESUAIAN SKOR MODIFIKASI DENGAN SKOR
DISSEMINATED INTRAVASCULAR COAGULATION
ISTH PADA PASIEN SEPSIS**



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ABSTRAK

UJI KESESUAIAN SKOR MODIFIKASI DENGAN SKOR *DISSEMINATED INTRAVASCULAR COAGULATION* ISTH PADA PASIEN SEPSIS

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Latar Belakang: *Disseminated intravascular coagulation* (DIC) merupakan sindrom yang terjadi karena aktivasi koagulasi intravaskular yang luas menyebabkan bekuan fibrin dalam vaskular, disfungsi organ, konsumsi faktor pembekuan dan trombosit, dan perdarahan. *Disseminated intravascular coagulation* terjadi pada 30 – 50% pasien sepsis, dan dapat terjadi pada seluruh usia dan ras. Tahun 2001 ISTH mengeluarkan kriteria untuk diagnosis *overt* DIC dalam bentuk skor DIC dengan sensitivitas 91% dan spesifisitas 97%. Skor ini menilai parameter yaitu jumlah trombosit, *fibrin degradation product* (FDP)/D-dimer, PT dan fibrinogen. Skor modifikasi DIC ISTH tahun 2018 oleh Ding *et al.* menghapuskan fibrinogen dari skor. Penelitian ini bertujuan untuk menganalisis kesesuaian skor modifikasi terhadap skor DIC ISTH pada sepsis.

Metode: Penelitian analitik dengan rancangan potong lintang dilakukan terhadap 82 pasien sepsis dengan DIC di RSUP Dr. M. Djamil Padang pada bulan Juni 2023 sampai November 2023. Pasien sepsis dilakukan pemeriksaan trombosit, PT, D-dimer, dan fibrinogen. Data dianalisis dengan uji kesesuaian Kappa.

Hasil: Rerata usia subjek penelitian adalah 57 (13) tahun. Sebanyak 42% subjek penelitian adalah laki-laki. Rerata trombosit 207,43 (119,31) dan fibrinogen 1,07 (0,26). Median D-dimer 3013,50 (707–10.000) dan pemanjangan PT 12,4 (9,9–25,2). Analisis kesesuaian Kappa didapatkan 0,626. Sensitivitas, spesifisitas, *positive predictive value*, dan *negative predictive value* skor modifikasi terhadap skor DIC ISTH didapatkan 100%, 77%, 58,8%, dan 100%.

Simpulan: Kesesuaian skor modifikasi terhadap skor DIC ISTH pada pasien sepsis adalah baik dengan sensitivitas 100%, spesifisitas 77%, *positive predictive value* 58,8%, dan *negative predictive value* 100%.

Kata Kunci: *overt* DIC, sepsis, skor ISTH,

ABSTRACT

COMPATIBILITY OF THE MODIFIED SCORES WITH THE DISSEMINATED INTRAVASCULAR COAGULATION ISTH SCORES IN SEPSIS PATIENTS

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Background: Disseminated intravascular coagulation (DIC) is a syndrome that occurs due to widespread activation of intravascular coagulation causing fibrin clotting in the vessels, organ dysfunction, consumption of clotting factors and platelets, and bleeding. Disseminated intravascular coagulation occurs in 30 – 50% of sepsis patients, and can occur at any age and race. In 2001 ISTH issued criteria for the diagnosis of overt DIC in the form of a DIC score with a sensitivity of 91% and a specificity of 97%. This score assesses parameters, namely platelet count, fibrin degradation products (FDP)/D-dimer, PT and fibrinogen. The 2018 ISTH modified DIC score by Ding et al. Eliminates fibrinogen from the score. This study aims to discuss and determine the diagnostic value of the modified ISTH DIC score in sepsis.

Methods: Analytical research with a cross-sectional plan was carried out on 82 sepsis patients with DIC at RSUP Dr. M. Djamil Padang from June 2023 to November 2023. Sepsis patients were examined for platelets, PT, D-dimer and fibrinogen. Data were analyzed using the Kappa goodness-of-fit test.

Results: The average age of the research subjects was 57 (13) years. As many as 42% of research subjects were male. Mean platelets 207.43 (119.31) and fibrinogen 1.07 (0.26). Median D-dimer 3013.50 (707–10,000) and PT prolongation 12.4 (9.9–25.2). Kappa analysis obtained 0.626. The sensitivity, specificity, positive predictive value, and negative predictive value of the modification score for the ISTH DIC score were obtained 100%, 77%, 58.8%, and 100%.

Conclusion: The compatibility of the modified score to the ISTH DIC score in sepsis patients is good with a sensitivity of 100%, specificity of 77%, positive predictive value of 58.8%, and negative predictive value of 100%.

Keywords: overt DIC, sepsis, ISTH score,