

**HUBUNGAN GEJALA KLINIS PASIEN RINOSINUSITIS KRONIK DENGAN  
KRITERIA TASK FORCE AMERICAN ACADEMY OF OTOLARYNGIC  
ALLERGY DAN AMERICAN RHINOLOGIC SOCIETY DI POLIKLINIK  
RINOLOGI THT-KL RSUP DR. M. DJAMIL PADANG  
PERIODE OKTOBER 2017-SEPTEMBER 2019**



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## **ABSTRACT**

### **ASSOCIATION BETWEEN CLINICAL SYMPTOMS OF CHRONIC RINOSINUSITIS PATIENTS WITH AMERICAN ACADEMY OF OTOLARYNGIC ALLERGY AND AMERICAN RHINOLOGIC SOCIETY'S TASK FORCE CRITERIA IN RSUP DR. M. DJAMIL PADANG PERIOD OCTOBER 2017-SEPTEMBER 2019**

**By :**  
**Muthia Sani**

*Chronic rhinosinusitis (CRS) is an inflammatory disease of the nasal mucosa and paranasal sinuses that lasts more than 12 weeks. Clinical symptoms of CSR is important in diagnosis. Task Force on Rhinosinusitis developed consensus recommendations for the definition and diagnosis of rhinosinusitis chronic that were accepted and published by the American Academy of Otolaryngic Allergy (AAOA), and the American Rhinologic Society (ARS), symptoms are the more important determinants for rhinosinusitis rather than diagnostic objective findings. These clinical symptoms can be classified into major and minor symptoms. The study purpose to determine the association between clinical symptoms of CSR patients and AAOA-ARS Task Force criteria.*

*This was a cross-sectional study. The sampling techniques which was being used consecutive sampling with a total sample of 99 people obtained from the ENT-KL Rhinology Polyclinic RSUP Dr. M. Djamil Padang from October 2017-September 2019 based on medical record data. The data was analyzed by using the Chi-Square test.*

*The results showed that there was significant association between major symptoms and AAOA-ARS Task Force criteria ( $p = 0.005$ ), and there was no significant association between minor symptoms and AAOA-ARS Task Force criteria ( $p = 1,000$ ).*

*The conclusion of this study are there is a significant association between major symptoms with AAOA-ARS Task Force criteria, and there is no significant association between minor symptoms with AAOA-ARS Task Force criteria.*

**Keywords:** chronic rhinosinusitis, Task Force, AAOA, ARS, major symptoms, minor symptoms

## **ABSTRAK**

# **HUBUNGAN GEJALA KLINIS PASIEN RINOSINUSITIS KRONIK DENGAN KRITERIA TASK FORCE AMERICAN ACADEMY OF OTOLARYNGIC ALLERGY DAN AMERICAN RHINOLOGIC SOCIETY DI POLIKLINIK RINOLOGI THT-KL RSUP DR. M. DJAMIL PADANG PERIODE OKTOBER 2017-SEPTEMBER 2019**

**Oleh :**  
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Rinosinusitis kronik adalah penyakit inflamasi mukosa hidung dan sinus paranasal yang berlangsung lebih dari 12 minggu. Gejala klinis yang timbul akibat RSK merupakan salah satu hal penting dalam menegakkan diagnosis. *Task Force on Rhinosinusitis* mengembangkan rekomendasi konsensus untuk definisi dan diagnosis dari rinosinusitis kronik yang diterima dan dipublikasikan oleh *American Academy of Otolaryngic Alergy (AAOA)* dan *the American Rhinologic Society (ARS)*, aspek penentu lebih kepada gejala daripada penemuan objektif untuk menegakkan diagnosis. Gejala klinis ini dapat digolongkan menjadi gejala mayor dan minor. Penelitian ini bertujuan untuk mengetahui hubungan gejala klinis pasien RSK dengan kriteria *Task Force AAOA-ARS*.

Penelitian ini menggunakan desain *cross sectional*. Teknik pengambilan sampel menggunakan *consecutive sampling* dengan jumlah sampel sebanyak 99 orang yang diperoleh dari Poliklinik Rinologi THT-KL RSUP Dr. M. Djamil Padang periode Oktober 2017-September 2019 berdasarkan data rekam medik. Analisis data menggunakan uji *Chi-Square*.

Hasil penelitian menunjukkan bahwa terdapat hubungan yang bermakna secara statistik antara gejala mayor dengan kriteria *Task Force AAOA-ARS* ( $p=0,005$ ), serta tidak terdapat hubungan yang bermakna antara gejala minor dengan kriteria *Task Force AAOA-ARS* ( $p=1,000$ )

Kesimpulan penelitian ini adalah terdapat hubungan yang bermakna antara gejala mayor dengan dengan kriteria *Task Force AAOA-ARS*, serta tidak terdapat hubungan yang bermakna antara gejala minor dengan kriteria *Task Force AAOA-ARS*

**Kata kunci :** rinosinusitis kronik, *Task Force*, *AAOA*, *ARS*, gejala mayor, gejala minor.