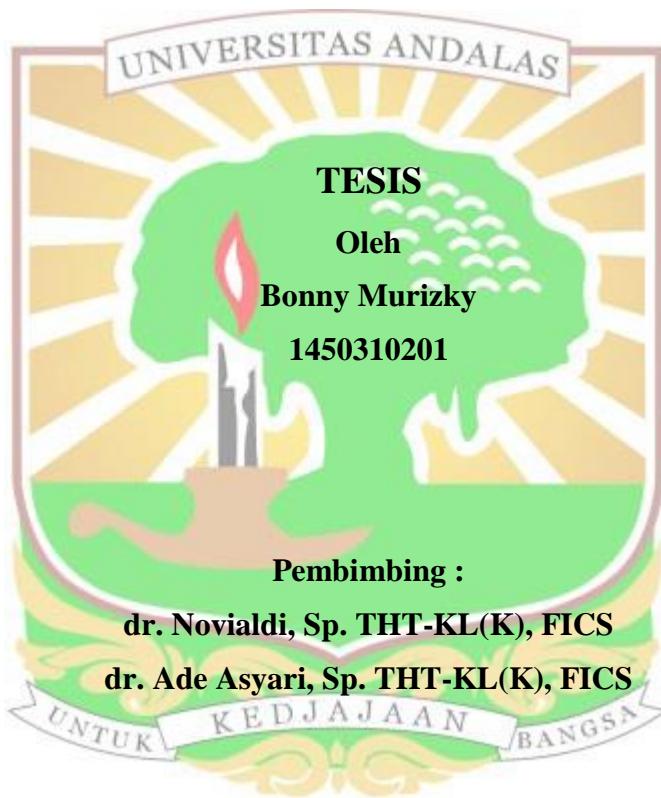


**GAMBARAN HIPERTROFI TONSIL LINGUAL PADA PEMERIKSAAN  
RONTGEN CERVICAL SOFT TISSUE LATERAL DAN LARINGOSKOPI  
SERAT OPTIK FLEKSIBEL PADA PASIEN LARYNGOPHARINGEAL  
REFLUX DI RSUP DR. M. DJAMIL PADANG**



**UNIVERSITAS ANDALAS**



**FAKULTAS KEDOKTERAN PROGRAM  
PENDIDIKAN DOKTER SPESIALIS  
TELINGA HIDUNG TENGGOROK BEDAH KEPALA LEHER  
PADANG  
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## ABSTRAK

Nama : Bonny Murizky  
Program Studi : THT-KL  
Judul tesis : Gambaran Hipertrofi Tonsil Lingual Pada Pemeriksaan *Rontgen Cervical Soft Tissue Lateral* dan Laringoskopi Serat Optik Fleksibel Pada Pasien *Laryngopharyngeal Reflux* di RSUP DR. M. Djamil Padang

**Latar Belakang :** *Laryngopharyngeal reflux* terjadi karena aliran balik asam lambung ke esofagus dan merusak struktur jaringan di sekitar laring. Diduga terdapat hubungan yang kuat antara *Laryngopharyngeal reflux* sebagai penyebab potensial hipertrofi tonsil lingual. Evaluasi hipertrofi tonsil lingual dengan penggunaan laringoskopi serat optik fleksibel sebagai baku emas pemeriksaan selain sulit di dapatkan di semua rumah sakit juga memiliki kekurangan lain seperti mahalnya biaya perawatan dan pemeriksaan, maka dipikirkan untuk mencari pemeriksaan alternatif dengan penggunaan *rontgen cervical soft tissue lateral*, selain murah pemeriksaan ini dapat dilakukan di semua rumah sakit. **Tujuan :** Mengetahui gambaran hasil pemeriksaan *rontgen cervical soft tissue lateral* dan laringoskopi serat optik fleksibel pada penderita laryngopharyngeal reflux di RSUP dr. M Djamil Padang. **Metode :** Penelitian deskriptif dengan menggunakan desain potong lintang (*cross sectional*), dilakukan terhadap 30 pasien *laryngopharyngeal reflux*. Data dianalisis secara statistik dengan program computer. **Hasil :** Pada penelitian ini gambaran hipertrofi tonsil lingual grade 2 banyak ditemukan pada pemeriksaan *rontgen cervical soft tissue lateral* dan pada pemeriksaan laringoskopi serat optik banyak ditemukan gambaran hipertrofi tonsil lingual grade 3. **Kesimpulan :** Terdapat penurunan grade pada gambaran hipertrofi tonsil lingual pada pemeriksaan *rontgen cervical soft tissue lateral*.

**Kata kunci :** *Laryngopharyngeal reflux*, hipertrofi tonsil lingual, *rontgen cervical soft tissue lateral*

## ABSTRACT

Name : Bonny Murizky

Study program: THT-KL

Thesis title : Overview of Lingual Tonsil Hypertrophy on Examination Of Cervical Lateral Soft Tissue X-rays and Flexible Fiber Optic Laryngoscopy In Laryngopharyngeal Reflux Patients at RSUP DR. M. Djamil Padang

**Background:** Laryngopharyngeal reflux occurs due to the backflow of stomach acid into the esophagus and damages the tissue structure around the larynx. It is suspected that there is a strong association between laryngopharyngeal reflux as a potential cause of lingual tonsillar hypertrophy. Evaluation of lingual tonsillar hypertrophy with the use of flexible fiber optic laryngoscopy as the gold standard for examination is not only difficult to find in all hospitals but also has other disadvantages such as the high cost of treatment and examination, so it is considered to find other alternative examinations with the use of lateral cervical soft tissue X-rays, in addition to cheap examinations this can be done in all hospitals. **Objective:** To find out the description of the results of X-ray examination of lateral soft tissue cervical and flexible fiber optic laryngoscopy in patients with laryngopharyngeal reflux in RSUP dr. M. Djamil Padang. **Methods:** A descriptive study using a cross sectional design was conducted on 30 patients of laryngopharyngeal reflux with laryngeal disorders. Data were analyzed statistically with a computer program. **Results:** In this study, grade 2 lingual tonsil hypertrophy was most found on X-ray examination of lateral soft tissue cervical and on fiber-optic laryngoscopy examination, was most found lingual tonsil hypertrophy grade 3 images. **Conclusion:** There is a decrease in grade in the appearance of lingual tonsil hypertrophy on X-ray examination of the lateral soft tissue cervical

**Keywords:** Laryngopharyngeal reflux, hypertrophy of tonsil lingual, lateral cervical

