

# Analisis Hubungan Kepatuhan Pengobatan, Riwayat Pengobatan Sebelumnya, dan Co-Infeksi HIV dengan Ketidakberhasilan Pengobatan Pasien Tuberkulosis Sensitif Obat (TBC SO) di Kota Jakarta Barat tahun 2022

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## Abstrak

Abstrak Proporsi keberhasilan pengobatan pasien TBC di Jakarta Barat trend-nya mengalami penurunan dari tahun 2020 hingga 2022. Penelitian ini bertujuan untuk mengetahui hubungan kepatuhan pengobatan, co-infeksi HIV, dan riwayat pengobatan dengan ketidakberhasilan pengobatan TBC SO di Kota Jakarta Barat tahun 2022. Desain studi penelitian yaitu kohort retrospektif, bersumber dari laporan TB03.SO Sistem Informasi Tuberkulosis (SITB) Kota Jakarta Barat tahun 2022. Analisis penelitian meliputi analisis deskriptif, survival dengan Kaplan Meier, dan multivariat (cox regression). Dari 2116 pasien yang terdapat 1846 pasien menjadi sampel penelitian. Hasil penelitian menunjukkan insiden rate kumulatif: 4,9/1000 orang-minggu; probabilitas survival kumulatif: 70,5%. Pada kelompok negatif DM, tidak patuh minum obat HR: 47,78 kali (95% CI: 32,59-70,03; p-value: <0,001). Pada kelompok ada riwayat pengobatan, tidak patuh minum obat HR: 26,28 (95% CI: 12,54-55,03; p-value: <0,001) setelah dikontrol variabel jenis kelamin. Pada kelompok patuh pengobatan, pada saat pasien TBC SO memiliki riwayat pengobatan sebelumnya memiliki HR: 2,3 (95% CI: 1,06-5,01; p-value: 0,035). Diharapkan menguatkan koordinasi dengan poli lainnya (Poli HIV/PDP atau Poli Penyakit Dalam) untuk memantau keteraturan minum OAT dan juga obat untuk penyakit penyerta lainnya untuk kasus TBC dengan komorbid. Perlu dilakukan pemantauan efek samping, konsultasi, tatalaksana efek samping sesuai standar, dan juga follow up pengobatan pasien. Kata kunci: Ketidakberhasilan Pengobatan, TBC Sensitif Obat, Analisis Survival

Abstract The proportion of successful treatment for TB patients treated in West Jakarta has decreased by 83.40% (2020), 79.36% (2021), and 77.18% (2022) (22.82% failure) . This study aims to determine the relationship between treatment adherence, HIV co-infection, and previous treatment history with TB SO patient survival and treatment failure in West Jakarta City in 2022. The study design of this research is a retrospective cohort with data sourced from the TB03.SO System report. Information on Tuberculosis (TBC SO) for West Jakarta City for the period January-December 2022. The analysis used in this research is descriptive analysis, survival using Kaplan Meier, and multivariate using cox regression. Of the 2116 eligible patients in this study, 1846 patients were included in the research sample. The results showed that the cumulative incidence rate was 4.9/1000 person-weeks with a cumulative survival probability of 70.5%. in the DM negative group, when TB SO patients were non-compliant with taking medication HR: 47.78 times (95% CI: 32.59-70.03; p-value: <0.001) after controlling for the gender variable. The results of the multivariate analysis showed that in the group with no history of treatment, when TB patients did not adhere to taking medication, the HR was: 65.65 times (95% CI: 43.09-100.03; p-value: <0.001) after controlling for variables gender. In the group with a history of treatment, when TB patients did not comply with taking medication, the HR was 26.28 times (95% CI: 12.54-55.03; p-value: <0.001) after controlling for the gender variable. in the treatment adherent group, when TB SO patients had a history of previous treatment, the HR was: 2.3 times (95% CI: 1.06-5.01; p-

value: 0.035). It is hoped that coordination with other polyclinics (HIV/PDP Polyclinic or Internal Medicine Polyclinic) will be strengthened to monitor the regularity of taking OAT and also medication for other comorbidities for TB cases with comorbidities, for example ARVs for HIV patients and DM therapy for DM patients. It is necessary to monitor side effects, consult, manage side effects according to standards, and also follow up on patient treatment so as to increase treatment compliance and reduce the rate of treatment failure. Key words: Treatment Unsuccessful, Drug-Sensitive Tuberculosis, Survival Analysis