ABSTRACT

STUDY OF DIURETIC USE IN PATIENT WITH ACUTE HEART FAILURE
(The Study had been conducted in Inpatient Room at Universitas Airlangga Hospital Surabaya)

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The inability of the heart to pump blood in AHF allows fluid to accumulate in certain parts of the body (oedema) and cause shortness of breath. Thus diuretic is used to reduce those symptoms. Diuretic administration in patients with acute heart failure can lead to the possibility of drug-related problems. This study aimed to examine the use of diuretics in patients with acute heart failure including type, dose, route of administration, frequency of administration and duration of administration associated with clinical and laboratory data, and to identify drug related problems that may occur. This is non-experimental and retrospective study. Data from Medical record of acute heart failure patients in the period of Januari-December 2018 were collected. Based on 98 patients data, diuretics used in the treatment of most acute heart failure patients was a combination of furosemide and spironolactone (83.7%). The most diuretic dose used were spironolactone 1x25 mg (35.7%) and furosemide 3x20 mg (27.6%). The route of diuretic administration was dominated by intravenous bolus administration (95.9%). Improvement in congestion condition occurred in 93 patients (94.9%) and oedema in 17 patients (17.3%) at the time of discharge. The most potential drug interactions occur in the use spironolactone and ACE-I (39.8%). Drug side effects that are suspected to occur are hyponatremia (1%) and hypokalemia (7.1%). It can be concluded that the use of diuretics in patients with guideline.

Keywords: Acute Heart Failure, Diuretics, Loop Diuretics, Potassium Sparing Diuretics, Thiazides