

POLA PENGGUNAAN DIURETIKA PADA PASIEN PENYAKIT GINJAL KRONIK
(Penelitian dilaksanakan di ruang Rawat Inap Departemen Penyakit Dalam Rumkital Dr.
Ramelan Surabaya)

REINE RISA RISTHANTI

Drs. Sumarno, Apt., Sp.FRS

KKB KK FF 255 11 Ris p

ABSTRACT

Background: Chronic kidney disease (CKD) is defined either as kidney damage or decreased kidney function with GFR <60 ml/min/1,73 m² for 3 or months. Fluid and sodium retention was early manifestation of complication in CKD patient. Therefore, diuretic therapy was often necessary to prevent the associated symptoms from fluid and sodium retention. Problems that arise related to the use of diuretics is a varied clinical outcomes in CKD patients.

Objective: The purpose of this study was to assess the pattern of diuretic therapy in CKD patients.

Method: The prospective descriptive observational study was done to the CKD patients using diuretics at Department of Internal Medicine Dr. Ramelan Naval Hospital Surabaya during March 25th to June 4th 2011 with the total number of samples is 35 patients.

Result: Diuretics used were furosemide and spironolactone. Furosemide as a single therapy was the most widely used (91.4%) by patient with CKD. Whereas the combined use of furosemide and spironolactone at 5.7%. Furosemide dosage regimentation of the most widely used in patients with CKD stage V was an intravenous bolus at a dose of 2x20 mg, both in CKD patients with or without hypertension. Continuous intravenous infusion of furosemid was used when the patient's edema has not diminished despite it had been treated with intravenous furosemide bolus. An increase in clinical outcomes in the use of continuous intravenous infusion of furosemid characterized by decreased edema and increased urine volume in patients. Drug related problems (DRPs) that could be found in this study were drug interaction between diuretics and the other drugs, less appropriate use of furosemide in anuria patients (11.4%) and spironolactone in patients with CKD stage V (5.7%).

Keywords: chronic kidney disease (CKD), fluid and sodium retention, diuretics