## ABSTRACT

## ANALYSIS OF THE USE OF ANTIBIOTICS PROFILE AND FACTORS OF SURGICAL SITE INFECTIONS (SSI)

## (Study at digestive surgery and oncology in SMF Surgical Hospital

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**Background** -Surgical operations of digestive surgery and oncology with surgical methods of incisions with a high risk of surgical site infection (SSI) which can occur immediately (24-48 hours postoperatively) such as contaminated clean and clean operations that of the use antibiotics prophylactic to minimize risk occurrence of infection.

**Objective** - This study was designed to analyze the effectiveness of prophylactic antibiotics in patients with Surgical operations of digestive surgery and oncology.

**Method** - In this study, in surgical patients with clean and clean contaminated surgery criteria who received prophylactic antibiotics in accordance with the inclusion criteria, there were 67 patients out of 382 patients at SMF surgery D in April-June 2020. Clinical parameters were measurements of temperature changes, pulse, Respiratory and laboratory examinations in the form of WBC values before surgery, 24 hours after surgery and on days 3-7 after surgery as well as monitoring the condition of the surgical wound on day 30. The statistical method used is chi-square to determine risk factors for infection in the surgical site infections (SSI) in patients with digestive surgery and surgical onkology. This study has received ethical approval from the Ethics Committee of Dr. H. Slamet Martodirdjo Hospital, Pamekasan.

**Results** - 67 patients were consisting of 48 digestive surgery (71.6%) and 19 oncology surgery (28.4%). Patients with male sex 40 (59.7%) with the majority age between 18 - 45 years as many as 37 patients (55.2%) using JKN insurance as many as 64 (95.5%) and observations from 30 days there are 1 (1.5%) IDO patients have purulent, inflammatory, erythema around the surgical wound so an analysis of p > 0.05 is carried out so there is no relationship with the incidence of SSI during hospitalization, but other factors that come from patients, for example, lack of personal hygiene. at home and lack of nutritious food intake with the results of measurements of temperature, pulse, and respiration as well as WBC checks before surgery and 24 hours after surgery are all within normal ranges. Qualitative analysis of prophylactic antibiotics with the Gyssens method that is shows that it is correct and rational = 31 (46.26%) category 0, category I-2 (2.9%); Category II 6 (8.9%); Category III 5 (7,4%); Category IV 23 (34.3%).

**Conclusion** - Prophylactic antibiotics that are widely used are cefazoline 64.2% and the rational use of antibiotics in 31 patients (46.26%). Need evaluation in the administration of prophylactic antibiotics in the room, as well as a uniform medical team in using prophylactic antibiotics.

Keywords – prophylactic antibiotics, Surgicals, SSI, Gyssens