## **ABSTRACT**

Drug Utilization Study of Acid Suppressive in Patients with Chronic Kidney Disease Undergoing Hemodialysis (Study was Conducted in Hospitalized Patients at Bhayangkara H.S Samsoeri Mertojoso Hospital Surabaya)

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Chronic kidney disease (CKD) is defined as abnormalities in kidney structure or function, present for 3 months or longer, with implications for health. It is becoming a major health problem worldwide. CKD Stage V, previously referred to as end-stage renal disease (ESRD), occurs when the GFR falls below 15 mL/min/1.73 m2 (<0.14 mL/s/m2) or in patients receiving renal replacement therapy (RRT) such as hemodialysis (HD) and etc. Patients with ESRD are more susceptible to dyspepsia and ulcer because of uremic condition and hypergastrinemia. These symptoms of can be resolved and controlled by using acid suppressive such as Histamine-2 Receptor Antagonist (H<sub>2</sub>RA) and Proton Pump Inhibitor (PPI). The aim of this study is to find out the drug utilization pattern of acid suppressive including the type, route, dose, frequency of administration, duration of acid suppressive used and identify drug related problems (DRP) that may occurs. Data was collected retrospectively and analyzed descriptively from Medical Record Patient within period January 1<sup>st</sup> – December 31<sup>st</sup> 2019 at Bhayangkara H.S Samsoeri Mertojoso Hospital. Total samples obtained were 33. Patients received single or combination therapy of acid suppressive, and the most widely used for single therapy was Ranitidin (2x50 mg) intravenous (iv) (50%), and for combination therapy was Omeprazole (1x40mg) iv + Sucralfate (3x1gram) oral (38%). The most duration of used of acid suppressive was 3 days (35%). There are drug related problem such as moderate drug interactions was found in this study. There are so many factors to determine the success of therapy for patients, and to the better acid suppressive therapy, we need collaboration of health care practitioners and patients.

**Keywords:** Drug Utilization Pattern, End Stage Renal Disease, Proton Pump Inhibitor, Histamine-2 Receptor Antagonist, Medical Record Patient