

ABSTRACT

Drug Utilization Study of Type 2 Diabetic Patient with Nephropathy Complication (Study at Dr. Soetomo General Hospital Surabaya)

Diabetic nephropathy is the most common cause of renal failure. The mortality rate from all causes in diabetic patients with nephropathy is 20-40 times higher than that of patients without nephropathy. In this study, the drug utilization profile on type 2 diabetic patient with nephropathy was analyzed descriptively used patient's medical records by retrospective method. The results showed that patients with type 2 diabetic nephropathy use either ACEIs, CCBs, ARBs, ACEI and diuretic, ACEI and CCB as their antihypertensive therapy; insulin to control blood glucose intensively; the third generation cephalosporins antibiotics for urinary tract infection therapy; sodium bicarbonat, calsium carbonat or calsium gluconas for therapy of body electrolyte imbalance; aspirin and dipiridamol as antiplatelet/haemoreology agents; H2 receptor antagonist as stress ulcer therapy;

Packed Red Cell/PRC tranfusion as anemia therapy; allopurinol as hyperuricemia

therapy; etc. Drug therapy of type 2 diabetic patient with nephropathy is quite complicated because it depends on the clinical presentation of patient. Diabetic nephropathy needs some potential therapeutic strategies primarily in the treatment proteinuria with the ACEI and/or ARBs, intensive blood pressure control, and intensive blood glucose control to prevent the proteinuria progression and the renal function's decline. Further study is needed to learn more (dose, adverse drugs reaction, etc) about drug utilization of type 2 diabetic patient with nephropathy.

Keyword : type 2 diabetic nephropathy, ACEI, drug utilization study