

ABSTRACT

Drug Utilization Study of Antituberculosis Drugs (OAT) in Patient with Extrapulmonary Tuberculosis (Study at RSUD Dr. Soetomo Surabaya)

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Tuberculosis (TB) is infectious disease caused by *Mycobacterium Tuberculosis* which mostly (80%) attacks the lungs but also can infect other body organs such as the pleura, lymph nodes, abdomen, intestines, urinary tract, kidneys, genitals, skin, meningitis, pericardium, bone and joints, referred to extrapulmonary TB. Therefore, the aim of this study was to review the use of antituberculosis drugs (OAT) in patient with extrapulmonary TB at Poli TB RSUD Dr. Soetomo Surabaya and identify drug related problem (DRP) that may occur. It was a retrospective observational descriptive study using time limited sampling conducted from January 2014 to October 2016. The inclusion criteria was medical record of adult extrapulmonary TB patient (18-65 years old) with complete treatment and/or additional diagnosis which had been given OAT as therapy.

The results showed that from 48 patients, the most common sites of extrapulmonary TB were lymph nodes (N=23). The most widely used regimen in intensive phase was HRZE (combination of isoniazid, rifampicin, pyrazinamide, ethambutol) and in continuation phase was HR (combination of isoniazid and rifampicin) (67%). OAT-FDC Category 1 was the most often given to patients with appropriated the route and frequency of administration. While some patients with weight gain, allergic, drug induced hepatitis (DIH), complication and kidney function deterioration required types, combinations, and OAT dose adjustment. Most patient underwent therapy for up to 12 until 14 months (40%). Two types of DRP identified in this study were actual adverse drug reactions and potential drug interactions.

Keywords: Drug utilization study, extrapulmonary tuberculosis, OAT, drug related problem