ABSTRACT

DRUG UTILIZATION STUDY ON PSORIASIS PATIENTS (Study was done at RSUD Dr. Soetomo Surabaya)

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Psoriasis is a skin disease included in the group of erythrosquamous dermatoses. The disease is chronic residive with a tightly defined erythema macular lesion covered by a plated asymmetal column, clear white as mica, accompanied by wax drip phenomenon, Auspitz sign and Koebner phenomenon. The purpose of this study was to analyze the profile of drug use in psoriasis patients including the type, dose, route of administration, frequency, and duration of drug administration and also to describe Drug Related Problems (DRPs) that may occur related to the use of therapy including drug side effects and drug interactions. This is an observational study that is retrospective. The sample was all patients with psoriasis who received psoriasis therapy at Inpatient Installation (IRNA) Medical Room Kemuning I and Kemuning II RSUD Dr. Soetomo Surabaya during the period of January 1, 2016 until December 31, 2017. The number of research samples that meet the inclusion criteria was 40 patients. Distribution of patients with sex-based psoriasis is 60% of men and 40% of women with age range between 15 years - 44 years are the most psoriasis sufferers. While most types of psoriasis suffered by patients is psoriasis vulgaris. The results showed that most use of therapy given in RSUD Dr. Soetomo is topical corticosteroid, immunosuppressant and skin care. Methotrexate as immunosuppressant was used (77%). Methotrexate is given orally at a dose of 2.5mg and frequency 2 times daily for 6-7 days. The most widely used topical corticosteroids are Desoximethasone ointment (55%) and he most widely used skin care is vaseline album (63%). Supportive therapy provided includes antihistamines (Cetirizine), antibiotics (doxycycline), folic acid and others. The complex of drugs used in therapy can lead to Drug Related Problems (DRPs), the most common of which 33% of patients receiving Methotrexate therapy experience adverse effects of SGOT and SGPT increase so monitoring liver function is required. Psoriasis may occur due to the presence of drug-induced, therefore, it is necessary to monitor the potential drug inducing psoriasis such as βblocker, tetracycline, or oral / systemic corticosteroids (withdrawal effects of corticosteroid use). In addition, there is a need for good PASI measurements at the start of admission to the hospital and out of the hospital, to evaluate the decrease in the severity of psoriasis in the patient.

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xii