

**PROFIL PASIEN TUBERKULOSIS PARU YANG DISERTAI DIABETES MELLITUS TIPE 2 DI SMF PARU RSUD DR. SOETOMO SURABAYA PERIODE JANUARI – DESEMBER 2017**

**ABSTRAK**

**Latar Belakang:** TB adalah penyakit infeksi yang disebabkan oleh *Mycobacterium tuberculosis* dan paling banyak menginfeksi paru. Menurut WHO tahun 2018, Indonesia menjadi urutan ke-3 paling banyak di dunia dengan kasus TB. Namun, tidak semua yang terpapar MTB menjadi terinfeksi TB aktif, status sistem imun menjadi faktor utama penentu terinfeksi TB aktif atau hanya LTBI. Pada pasien DM tipe 2 banyak ditemukan *immunocompromise*. DM di Indonesia mengalami peningkatan menjadi urutan ke-4 paling banyak di dunia berdasarkan IDF tahun 2017. Dengan adanya peningkatan kejadian DM tipe 2 dengan status *immunocompromise* akan berhubungan dengan meningkatnya infeksi TB aktif.

**Tujuan:** Menganalisis profil pasien TB paru yang disertai DM tipe 2 di SMF Paru RSUD Dr. Soetomo Surabaya.

**Metode:** Penelitian ini merupakan penelitian deskriptif observasional dengan desain *cross-sectional*. Data penelitian diperoleh dari rekam medis pusat pasien TB yang disertai DM tipe 2 di SMF Paru RSUD Dr. Soetomo Surabaya periode Januari – Desember 2017 yang memenuhi kriteria inklusi.

**Hasil:** Dari total 414 pasien di rawat inap SMF Paru Januari – Desember 2017 didapatkan 74 pasien TB paru yang disertai DM tipe 2. Jumlah yang masuk kriteria inklusi 53 pasien. Hasil profil pasien TB paru yang disertai DM tipe 2 ini menunjukkan bahwa yang dominan adalah laki -laki (62.3%) dengan kategori usia > 40 tahun (92.5%) yang memiliki hasil pemeriksaan BTA positif (88.7%) paling banyak (1+) (35.5%) dan Gene Xpert TB/RIF Sensitif (66.7%). Dengan status paling dominan kasus TB riwayat pengobatan sebelumnya (54.7%), lama menderita DM 2 – 5 tahun (44.7%), GDA rata-rata 311.83 mg/dl, G2JPP rata-rata 263.31 mg/dl, GDP rata-rata 238 mg/dl, HbA1C > 10% (68%), memiliki DM tipe 2 yang tidak teregulasi (88.4%) sehingga komplikasi paru dan sistemik (67.9%) dengan memiliki riwayat terapi TB sebelumnya (54.7%).

**Kesimpulan:** Profil pasien TB paru yang disertai DM tipe 2 di SMF Paru RSUD Dr. Soetomo Surabaya memiliki hasil gambaran kedua penyakit yang lebih berat dengan kadar gula darah yang lebih tinggi sehingga kekambuhan pengobatan TB, kesulitan meregulasi gula darah, dan komplikasi berat dapat terjadi.

**Kata kunci:** Profil, Tuberkulosis, Diabetes Mellitus tipe 2

**PROFILE OF PULMONARY TUBERCULOSIS PATIENTS WITH BY TYPE 2 DIABETES MELLITUS IN SMF PARU GENERAL HOSPITAL DR. SOETOMO SURABAYA FROM JANUARY TO DECEMBER 2017**

**ABSTRACT**

**Background:** TB is an infectious disease caused by *Mycobacterium tuberculosis* and most infects the lungs. According to WHO in 2018, Indonesia is the third most in the world with TB cases. However, not all those who were exposed to MTB became infected with active TB, the immune system status was the main determinant of active TB infection or only the LTBI. Immunocompromise is easier to become an active TB infection. Immunocompromise is commonly found in type 2 DM patients. DM in Indonesia has increased to number 4 in the world by IDF in 2017. With the increase in the incidence of type 2 DM, it will be associated with increased active TB infection.

**Purpose:** To analyze the profile of pulmonary tuberculosis patients accompanied by type 2 DM in Lung SMF Dr. Soetomo Surabaya.

**Methods:** This study was an observational descriptive study with a cross-sectional design. The research data were obtained from the central medical record of TB patients accompanied by type 2 DM in Pulmonary SMF Dr. Soetomo Surabaya period January - December 2017 that meets the inclusion criteria.

**Results:** Out of a total of 414 patients hospitalized with SMF Lung, January - December 2017, 74 patients with pulmonary TB were found accompanied by type 2 diabetes mellitus. The number included in the inclusion criteria was 53 patients. The results of the profile of pulmonary TB patients accompanied by type 2 DM showed that the dominant were men (62.3%) with the age category > 40 years old (92.5%) who had the most positive smear (88.7%) results (1+) (35.5%) and Sensitive Gene Xpert TB / RIF (66.7%). With the most dominant status of previous TB treatment history cases (54.7%), duration of suffering from DM 2-5 years (44.7%), RBG average 311.83 mg / dl, PPBS on average 263.31 mg / dl, FBG on average 238 mg / dl, HbA1C > 10% (68%), had unregulated type 2 DM (88.4%) resulting in pulmonary and systemic complications (67.9%) with a history of previous TB therapy (54.7%).

**Conclusion:** Profile of pulmonary TB patients accompanied by type 2 DM in Pulmonary SMF Dr. RSUD Soetomo Surabaya has a picture of the two more severe diseases with higher blood sugar levels so that recurrence of TB treatment, difficulty regulating blood sugar, and severe complications can occur.

**Keywords:** Profile, Tuberculosis, Type 2 Diabetes Mellitus