

***ABSTRACT***

**SELECTIVE BETA-BLOCKER USE IN PATIENT WITH  
ACUTE MYOCARDIAL INFARCTION  
(Study was conducted at hospitalized patient  
of Cardiology Department of RSUD Dr. Soetomo Surabaya)**

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Acute myocardial infarction (AMI) is the occurrence of myocardial cell death caused by occlusion of the coronary arteries. This occlusion is mainly due to result of atherosclerosis in the coronary arteries. The purpose of this study were to identify the use and drug related problems of selective beta-blocker in patient with AMI at hospitalized patient of cardiology department of RSUD Dr. Soetomo Surabaya. This is a prospective study with time limited sampling method using 19 patient's medical records during the period of March 25<sup>th</sup> to June 11<sup>th</sup> 2015 and was analyzed descriptively. Selective beta-blocker that administered to the patients was only bisoprolol. Initial dose of bisoprolol was mostly 1x1,25 mg. 3 patients (16%) only administered bisoprolol, but patient may administered other type of drugs to improve the antihypertensive effect. Such as, 2 combinations (bisoprolol + ACEI) used by 9 patients (47%), 3 combinations (bisoprolol + ACEI or ARB + diuretic) used by 10 patients (51%), and 4 combinations (bisoprolol + ACEI + 2 diuretics) used by 2 patient (10%). Hypotension and bradycardia were found as side effects of bisoprolol in 3 patients. Bisoprolol therapy for AMI require careful considerations for achieving optimal outcomes.

**Keywords :** Drug use study, selective beta-blocker, bisoprolol, acute myocardial infarction