

## ABSTRAK

### FAKTOR RISIKO KEPARAHAN DISFAGIA PADA PASIEN STROKE

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**Latar belakang:** Stroke dan disfagia dapat berkaitan erat. Masalah menelan berhubungan dengan stroke telah dikenal sebagai disfagia paska stroke dan menjadi salah satu komplikasi stroke.

**Tujuan:** Penelitian ini bertujuan untuk menganalisa faktor risiko terhadap keparahan disfagia pada pasien stroke.

**Metode penelitian:** Studi menggunakan *cross sectional* dengan estimasi risiko relatif diperoleh dengan menghitung rasio prevalens. Keparahan disfagia didapatkan dari pemeriksaan *Gugging Swallowing Screen* (GUSS). Serta faktor risiko yang diperiksa dari jenis stroke, lokasi lesi stroke, usia, lamanya diabetes mellitus, lamanya hipertensi dan malnutrisi dengan kriteria GLIM.

**Hasil:** Subjek terdiri 54 pasien stroke. Dari pasien stroke yang diteliti, sebanyak 34 orang (63%) memiliki disfagia ringan dan sebanyak 20 orang (37%) memiliki disfagia yang berat. Dari analisis didapatkan lokasi lesi menjadi faktor risiko bermakna terhadap keparahan disfagia dengan  $p = 0,04$ , RP = 5,5 CI 95% (2,3-12,8), lamanya diabetes mellitus menjadi faktor risiko bermakna terhadap keparahan disfagia dengan  $P = 0,048$  RP = 2,1 CI 95% (1,1-3,9) dan malnutrisi menjadi faktor risiko bermakna terhadap keparahan disfagia dengan  $p < 0,001$ , RP = 4,4 CI 95% (2,1-8,9).

**Simpulan:** Jenis stroke, usia, lamanya hipertensi bukan faktor risiko bermakna terhadap keparahan disfagia. Lokasi lesi, lamanya diabetes mellitus dan malnutrisi merupakan faktor risiko bermakna terhadap keparahan disfagia.

**Kata kunci:** stroke, disfagia, GUSS, GLIM

## **ABSTRACT**

### **RISK FACTORS FOR SEVERITY OF DYSPHAGIA IN STROKE PATIENTS**

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**Background:** Stroke and dysphagia can be closely related. Swallowing problems associated with stroke have been known as post-stroke dysphagia and are one of the complications of stroke.

**Objective:** This study aims to analyze risk factors for the severity of dysphagia in stroke patients.

**Research method:** The study used cross sectional study with relative risk estimates obtained by calculating the prevalence ratio. The severity of dysphagia is obtained from the Gugging Swallowing Screen (GUSS) examination. The risk factors examined were the type of stroke, location of the stroke lesion, age, duration of diabetes mellitus, duration of hypertension and malnutrition using GLIM criteria.

**Results:** Subjects consisted of 54 stroke patients. Of the stroke patients studied, 34 people (63%) had mild dysphagia and 20 people (37%) had severe dysphagia. From the analysis it was found that the location of the lesion was a significant risk factor for the severity of dysphagia with  $p = 0.04$ ,  $RP = 5.5$  CI 95% (2.3-12.8), the duration of diabetes mellitus was a significant risk factor for the severity of dysphagia with  $P = 0.048$   $RP = 2.1$  CI 95% (1.1-3.9) and malnutrition is a significant risk factor for the severity of dysphagia with  $p < 0.001$ ,  $RP = 4.4$  CI 95% (2.1-8.9).

**Conclusion:** Type of stroke, age, duration of hypertension are not significant risk factors for the severity of dysphagia. Lesion location, duration of diabetes mellitus and malnutrition are significant risk factors for the severity of dysphagia.

**Key words:** stroke, dysphagia, GUSS, GLIM