

ABSTRAK

BESAR RISIKO SKOR *PERIOPERATIVE NUTRITION SCREEN* (PONS) TERHADAP LUARAN PASCAOPERASI BEDAH DIGESTIF

Angeline Budiman¹, Niken Puruhita², Febe Christianto², Hertanto Wahyu Subagio²,
Enny Probosari²

¹Peserta Program Pendidikan Dokter Spesialis Gizi Klinik, Fakultas Kedokteran UNDIP

²Staf Program Pendidikan Dokter Spesialis Gizi Klinik, Fakultas Kedokteran UNDIP

Latar belakang: Malnutrisi umum terjadi pada pasien bedah digestif. Namun, penerapan skrining menggunakan skor PONS di Indonesia masih terbatas dan belum banyak diteliti.

Tujuan: Menentukan besar risiko skor PONS terhadap lama rawat inap, komplikasi pascaoperasi, dan mortalitas pada pasien bedah digestif.

Metode: Studi observasional kohort prospektif melibatkan 70 pasien dewasa (18–59 tahun) yang menjalani operasi bedah digestif elektif di RSUP Dr. Kariadi Semarang (Juli 2024–Februari 2025). Subjek dibagi berdasarkan skor PONS menjadi kelompok skor PONS positif (berisiko malnutrisi) dan negatif (tidak berisiko malnutrisi). Data yang diperoleh dianalisis menggunakan risiko relatif (RR) dengan interval kepercayaan (IK) 95%.

Hasil: Sebagian besar pasien (77,1%) memiliki skor PONS positif. Skor PONS tidak terbukti menjadi faktor risiko lama rawat inap, komplikasi, atau mortalitas. Namun, pasien dengan kanker memiliki risiko 3,34 kali lebih tinggi mengalami komplikasi (RR 3,34; $p=0,017$). Tidak mendapat terapi medik gizi tampak berakitan dengan luaran klinis yang lebih baik, kemungkinan karena lebih sering diberikan pada pasien dengan kondisi klinis yang lebih berat sejak awal perawatan.

Simpulan: Skor PONS bukan merupakan faktor risiko luaran pascaoperasi bedah digestif. Namun, prevalensi risiko malnutrisi tetap tinggi sehingga skrining gizi preoperasi penting untuk diimplementasikan dalam praktik klinis.

Kata kunci: *Perioperative Nutrition Screen* (PONS), malnutrisi perioperatif, bedah digestif, komplikasi pascaoperasi, lama rawat inap, mortalitas rumah sakit

ABSTRACT

RELATIVE RISK OF PERIOPERATIVE NUTRITION SCREEN (PONS) SCORE ON POSTOPERATIVE OUTCOMES IN DIGESTIVE SURGERY PATIENTS

Angeline Budiman¹, Niken Puruhita², Febe Christianto², Hertanto Wahyu², Enny Probosari²

¹Participant of Clinical Nutrition Speciality Medical Program, Faculty of Medicine, UNDIP

²Staff of Clinical Nutrition Speciality Medical Program, Faculty of Medicine, UNDIP

Background: *Malnutrition is common among digestive surgery. However, the implementation of screening using the PONS score in Indonesia remains limited and has not been widely studied.*

Objective: *To determine the risk of PONS scores on length of hospital stay, postoperative complications, and in-hospital mortality in digestive surgery patients.*

Methods: *A prospective cohort observational study involving 70 adult patients (18–59 years) undergoing elective digestive surgery at Dr. Kariadi General Hospital, Semarang (July 2024–February 2025). Subjects were classified into PONS-positive (risk of malnutrition) and PONS-negative groups (non-risk). Data were analyzed using relative risk (RR) with 95% confidence interval (CI).*

Results: *The majority of patients (77.1%) had a positive PONS score. PONS score was not found to be a risk factor for prolonged hospitalization, postoperative complications, or mortality. However, patients with cancer had a 3.34-fold higher risk of complications (RR 3.34; $p=0.017$). Interestingly, those who did not receive medical nutrition therapy showed better clinical outcomes, possibly due to therapy being more frequently provided to patients with more severe conditions at baseline.*

Conclusion: *PONS score was not a risk factor for postoperative outcomes in digestive surgery patients. However, the prevalence of malnutrition risk remains high, thus preoperative nutrition screening is important to be implemented in clinical practice.*

Keywords: *Perioperative Nutrition Screen (PONS), perioperative malnutrition, digestive surgery, postoperative complications, length of stay, in-hospital mortality.*