

ABSTRAK

Latar Belakang: Plasenta akreta atau disebut juga *Morbidly Adherent Placenta* merupakan suatu kondisi patologis implantasi plasenta pada myometrium uteri. Kejadian plasenta akreta telah mengalami peningkatan selama beberapa tahun terakhir baik secara global maupun di Indonesia. Hal tersebut berpotensi meningkatkan morbiditas dan mortalitas pada ibu hamil.

Tujuan: Mengetahui gambaran luaran maternal dengan plasenta akreta di RSUP Dr. Kariadi Semarang tahun 2019 – 2022.

Metode: Penelitian deskriptif observasional menggunakan pendekatan belah lintang (*cross-sectional*) di RSUP Dr. Kariadi Semarang periode 1 januari 2019-31 desember 2022.

Hasil: Ditemukan 38 kasus kehamilan dengan plasenta akreta, mayoritas berusia 20-34 tahun (52,6%), paritas multipara (81,6%), IMT 18,5-24,9 kg/m² (50%), usia kehamilan 34-36 minggu (57,9%), kunjungan ANC ≥ 6 kali (50%), diagnosis antenatal *moderate probability* (42,1%), riwayat seksio sesarea ≥ 2 kali (60,5%), plasenta previa (89,5%), riwayat luka di uterus (42,1%), Hb pre-operatif < 11 mg/dL (60,5%). Luaran maternal meliputi perdarahan ≥ 1.000 ml (57,9%), transfusi darah < 4 kolf (71,1%), histerektomi (78,9%), cedera traktus urinarius (23,7%), perawatan di ICU (23,7%), dan lama perawatan di ICU ≥ 24 jam (100%). Tidak ditemukan kematian maternal.

Kesimpulan: Luaran maternal yang paling banyak ditemukan pada kehamilan dengan plasenta akreta adalah perdarahan ≥ 1.000 ml, histerektomi, dan lama perawatan ICU ≥ 24 jam.

Kata kunci : Plasenta akreta, luaran maternal

ABSTRACT

Background: Placenta accreta or also called Morbidly Adherent Placenta is a pathological condition of placental implantation in the uterine myometrium. The incidence of placenta accreta has increased over the last few years both globally and Indonesia. This has the potential to increase morbidity and mortality in pregnant women.

Objective: To determine the maternal outcomes with placenta accreta at Dr. Kariadi Semarang in 2019 – 2022.

Methods: Observational descriptive research using a cross-sectional approach at RSUP Dr. Kariadi Semarang period 1 January 2019-31 December 2022.

Results: There were 38 cases of pregnancy with placenta accreta, the majority were aged 20-34 years (52.6%), multiparous parity (81.6%), BMI 18.5-24.9 kg/m² (50%), gestational age 34- 36 weeks (57.9%), ANC visits ≥ 6 times (50%), antenatal diagnosis moderate probability (42.1%), history of caesarean section ≥ 2 times (60.5%), placenta previa (89.5%), history of uterine injury (42.1%), pre-operative Hb < 11 mg/dL (60.5%). Maternal outcomes included bleeding ≥ 1,000 ml (57.9%), blood transfusion < 4 colf (71.1%), hysterectomy (78.9%), urinary tract injury (23.7%), ICU admission (23, 7%), and length of stay in the ICU ≥ 24 hours (100%). No maternal deaths were found.

Conclusions: The most common maternal outcomes in pregnancies with placenta accreta are bleeding ≥ 1,000 ml, hysterectomy, and ICU stay ≥ 24 hours.

Keywords : Placenta accreta, maternal outcomes