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**ANALISIS KETEPATAN PENGGUNAAN SITOSTATIKA
DAN PENATALAKSANAAN *CHEMOTHERAPHY INDUCED TOXICITIES*
PASIEN KANKER PARU-PARU DI RUMAH SAKIT
ISLAM SULTAN AGUNG SEMARANG**

ABSTRAK

Latar belakang : Kanker paru-paru merupakan penyebab kematian urutan kedua akibat kanker di dunia. Prevalensi di Indonesia pada tahun 2022 mencapai 9.5%, di kota Semarang 2018 kanker paru-paru sebanyak 182 kasus. Peran kemoterapi dalam pengobatan kanker telah mengalami perubahan signifikan dari paliatif menjadi kuratif, pengobatan ini dapat memperpanjang angka harapan hidup pasien, biasanya berupa obat sitostatika. Tujuan penelitian untuk menganalisis ketepatan regimen obat sitostatika kanker paru-paru di Rumah Sakit di RSI Sultan Agung Semarang.

Metode : Penelitian dilakukan secara non eksperimental dengan metode deskriptif yang bersifat retrospektif dengan data rekam medik pasien kanker paru-paru di Rumah Sakit di RSI Sultan Agung Semarang periode Januari - Desember 2023. Teknik *Total sampling* dengan 13 sampel yang memenuhi kriteria inklusi. Analisis ketepatan regimen dan terapi paliatif menggunakan *National Comprehensive Cancer Network Guidelines (NCCN)* dan pedoman nasional pelayanan kedokteran tatalaksana kanker paru Kementerian Kesehatan Republik Indonesia tahun 2023.

Hasil : Karakteristik pasien kanker paru-paru jenis kelamin laki-laki (69%) jenis kelamin perempuan (23%). Usia muda (23%) pertengahan (54%) lanjut usia (23%). Kemoterapi yang digunakan yaitu meliputi paklitaksel + carboplatin (77%), gemzikal + novelbin (15%) dan doxorubicin + holoxane (8%). Tepat regimen sebanyak (100%) dan tepat dosis (100%). Penatalaksanaan *chemotherapy induced toxicities* berupa antiemetik ondansetron difenhidramin ranitidine dan dexametason untuk mengatasi mual dan muntah, untuk anemia dan leukopenia diberi transfusi Packed Red Cell (PRC) dan leukogen.

Simpulan : Ketepatan regimen, tepat (100%). Ketepatan dosis obat sitostatika (100%).

Kata kunci : kanker paru-paru, kemoterapi, sitostatika, *chemotherapy induced toxicities*

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**ANALYSIS OF THE ACCURACY OF THE USE OF CYTOSTATICS
AND MANAGEMENT OF *CHEMOTHERAPY INDUCED
TOXICITIES* LUNG CANCER PATIENTS IN RUMAH SAKIT ISLAM
SULTAN AGUNG SEMARANG**

ABSTRACT

Background: *Lung cancer is the second leading cause of death from cancer in the world. The prevalence in Indonesia in 2022 reached 9.5% of 38 904 cases, in the city of Semarang in 2018 there were 182 cases of lung cancer. The role of chemotherapy in cancer treatment has undergone significant changes from previously palliative to curative, this treatment can extend the patient's life expectancy, usually in the form of cytostatic drugs. The purpose of the study was to analyze the accuracy of the lung cancer cytostatic drug regimen at the Rumah Sakit Islam Sultan Agung Semarang.*

Method: *The study was conducted in a non-experimental manner with a retrospective descriptive method with medical record data of lung cancer patients at the Hospital at RSI Sultan Agung Semarang for the period January - December 2023. Total sampling technique with 13 samples that met the inclusion criteria. Analysis of the appropriateness of regimens and palliative therapy using the National Comprehensive Cancer Network Guidelines (NCCN) and the national guidelines for lung cancer management medical services of the Ministry of Health of the Republic of Indonesia in 2023.*

Results: *Characteristics of lung cancer patients male gender (69%) female gender (23%). Young age (23%) middle age (54%) elderly (23%). Chemotherapy used included paklitaxel + carboplatin (77%), gemzikal + novelbin (15%) and doxorubicin + holoxane (8%). Appropriate regimen (100%) and appropriate dose (100%). Management of chemotherapy induced toxicities in the form of antiemetics ondansetron diphenhydramine ranitidine and dexamethasone to overcome nausea and vomiting, for anaemia and leukaemia given Packed Red Cell (PRC) and leucogen transfusions.*

Conclusion: *Accuracy of the regimen, right (100%). Accuracy of the dosage of cytostatic drugs (100%).*

Keywords : lung cancer, chemotherapy, cytostatics, *chemotherapy induced toxicities*