

PERBANDINGAN KUALITAS HIDUP DAN *ACTIVITY DAILY LIVING* (ADL) PADA PASIEN HEMODIALISA DENGAN AKSES VASKULAR CVC DAN AVF

Bidari Mansurotul Hamidah

Abstrak

Salah satu terapi pengobatan utama pada pasien gagal ginjal kronis adalah hemodialisa. Akses vaskular hemodialisa yang paling banyak digunakan yaitu CVC dan AVF. Perbedaan akses vaskular membedakan pula risiko komplikasi yang berkaitan erat dengan kualitas hidup dan *activity daily living* pasien. Tujuan penelitian ini untuk mengetahui perbandingan kualitas hidup dan *activity daily living* pada pasien hemodialisa dengan akses vaskular CVC dan AVF. Metode penelitian yang digunakan adalah *cross sectional* dengan kausal komparatif. Teknik pengumpulan sampel menggunakan *nonprobability sampling* dengan metode *purposive sampling* sebanyak 112 responden. Analisis univariat menggunakan uji proporsi dan analisis bivariat menggunakan uji t-independen dan *mann whitney*. Instrumen yang digunakan adalah KDQOL-SF 36 dan *Barthel Index*. Hasil penelitian menunjukkan terdapat perbedaan pada kelima domain kualitas hidup dan *activity daily living* antara CVC dan AVF ($p\text{-value} < 0,05$). Selanjutnya, didapatkan skor rata-rata AVF lebih besar dibandingkan dengan CVC pada kelima domain kualitas hidup dan *activity daily living* (perbedaan skor 11,97; 18,96; 26,79; 13,69; 12,12; 12,59). Penelitian ini diharapkan dapat memberikan gambaran kualitas hidup dan *activity daily living* pada akses vaskular CVC dan AVF, sehingga pasien CVC dapat lebih meminimalisasi risiko infeksi dengan selalu mempertahankan teknik aseptik pada lokasi insersi kateter.

Kata Kunci: *Activity Daily Living*, Akses Vaskular, Gagal Ginjal Kronis, Hemodialisa, Kualitas Hidup.

COMPARISON OF QUALITY OF LIFE (QOL) AND ACTIVITY DAILY LIVING (ADL) IN HEMODIALYSIS PATIENTS WITH CVC AND AVF VASCULAR ACCESS

Bidari Mansurotul Hamidah

Abstract

One of the main therapies for chronic kidney failure patients is hemodialysis. The most widely used hemodialysis vascular access is CVC and AVF. Differences in vascular access also differentiate the risk of complications that are closely related to the quality of life and daily living activities of patients. The purpose of this study was to determine the comparison of quality of life and daily living activities in hemodialysis patients with CVC and AVF vascular access. The research method used was cross-sectional with comparative causality. The sample collection technique used nonprobability sampling with a purposive sampling method of 112 respondents. Univariate analysis used the proportion test and bivariate analysis used the t-independent and mann whitney tests. The instruments used were KDQOL-SF 36 and Barthel Index. The results showed that there were differences in the five domains of quality of life and daily living activities between CVC and AVF (p -value < 0.05). Furthermore, the average score of AVF was greater than CVC in the five domains of quality of life and daily living activities (difference in scores 11.97; 18.96; 26.79; 13.69; 12.12; 12.59). This study is expected to provide an overview of the quality of life and daily activities in CVC and AVF vascular access, so that CVC patients can further minimize the risk of infection by always maintaining aseptic techniques at the catheter insertion site.

Keywords: Activity Daily Living, Vascular Access, Chronic Kidney Failure, Hemodialysis, Quality of Life.