

**PREDIKTOR MORTALITAS PASIEN ACUTE CORONARY SYNDROME
DENGAN ST-ELEVATION MYOCARDIAL INFARCTION (STEMI)
PASCA TINDAKAN PERCUTANEOUS CORONARY INTERVENTION
(PCI) DI RS BHAYANGKARA TK. I PUSDOKKES POLRI**

Winda Husni Arifah

ABSTRAK

Tujuan: Penyakit kardiovaskular memiliki prevalensi sebesar 31% yang menyebabkan kematian, diantaranya penyakit *Acute Coronary Syndrome* (ACS). ACS umumnya lebih serius pada kasus STEMI dibandingkan NSTEMI yang segera dilakukan tindakan reperfusi. Oleh karena itu, penelitian ini bertujuan untuk mengetahui prediktor mortalitas pasien ACS dengan STEMI pasca tindakan PCI.

Metode: Penelitian deskriptif analitik dengan menggunakan pendekatan *cohort retrospective* di RS Bhayangkara Tk. 1 PUSDOKKES Polri tahun 2022-2024. Sampel yang diambil dengan teknik total sampling. Jumlah sampel adalah 292 pasien, yang terdiri 211 pasien yang hidup dan 81 pasien yang mengalami mortalitas. Analisis data menggunakan uji regresi logistik sederhana dan dilakukan analisis univariat, bivariat, dan multivariat.

Hasil: Kejadian mortalitas sebesar 27,7%. Analisis bivariat menunjukkan bahwa jenis kelamin, usia, merokok, riwayat penyakit kardiovaskular sebelumnya, diabetes mellitus, riwayat PCI sebelumnya, dan gangguan fungsi ginjal ($p= 0,004; 0,022; 0,009; 0,000; 0,003; 0,003; 0,000$) terdapat hubungan yang bermakna dengan kejadian mortalitas. Analisis multivariat didapatkan prediktor yang berpengaruh.

Kesimpulan: Prediktor yang berpengaruh terhadap mortalitas pasien ACS dengan STEMI pasca tindakan PCI meliputi usia <65 tahun, kebiasaan merokok, riwayat penyakit kardiovaskular sebelumnya, dan gangguan fungsi ginjal.

Kata kunci: ACS, STEMI, Prediktor, Mortalitas, Gangguan Fungsi Ginjal

**PREDICTORS OF MORTALITY ACUTE CORONARY SYNDROME
PATIENT WITH ST-ELEVATION MYOCARDIAL INFARCTION (STEMI)
AFTER PRIMARY PERCUTANEOUS CORONARY INTERVENTION (PCI)
IN RS BHAYANGKARA TK. 1 PUSDOKKES POLRI**

Winda Husni Arifah

ABSTRACT

Background: Cardiovascular disease has a prevalence of 31% which causes death, including Acute Coronary Syndrome (ACS). ACS is generally more serious in cases of STEMI than NSTEMI which is immediately reperfused. Therefore, this study aims to determine the predictors of mortality of ACS patients with STEMI after reperfusion.

Methods: Analytic descriptive research using a retrospective cohort approach at Bhayangkara Tk. 1 PUSDOKKES Polri Hospital in 2022-2024. Samples were taken with total sampling technique. The total sample was 292 patients, consisting of 211 living patients and 81 patients who experienced mortality. Data were analyzed using simple logistic regression test and univariate, bivariate, and multivariate analysis were performed.

Results: The mortality rate was 27.7%. Bivariate analysis showed that gender, age, smoking, previous history of cardiovascular disease, diabetes mellitus, previous history of PCI, and renal dysfunction ($p = 0.004; 0.022; 0.009; 0.000; 0.003; 0.003; 0.000$) were significantly associated with mortality. Multivariate analysis obtained predictors that influence

Conclusion: Predictors of mortality were age <65 years, smoking, previous history of cardiovascular disease, and renal dysfunction.

Keywords: ACS, STEMI, Predictors, Mortality, Renal Dysfunction