

BAB 5

PENUTUP

5.1 Kesimpulan

Berdasarkan hasil penelitian yang telah dilakukan dan pembahasan pada bab 4, maka dapat disimpulkan bahwa :

- a. Karakteristik klinis pasien stroke iskemik akut di RSUP Persahabatan periode Juni 2023–Juni 2024 menunjukkan dominasi kelompok usia non-lansia sebanyak 60 pasien (58,3%) dan mayoritas jenis kelamin laki-laki sebanyak 66 pasien (64,1%).
- b. Distribusi parameter leukosit pada saat diagnosis awal menunjukkan bahwa sebagian besar pasien memiliki nilai rasio neutrofil-limfosit (NLR) dan rasio monosit-limfosit (MLR) yang abnormal, sedangkan rasio platelet-limfosit (PLR) relatif seimbang antara kategori normal dan abnormal.
- c. Distribusi nilai *Red Cell Distribution Width* (RDW) pada saat diagnosis awal menunjukkan bahwa sebagian besar pasien stroke iskemik akut memiliki RDW dalam kategori normal.
- d. Distribusi data skor NIHSS pasien stroke iskemik akut pada saat diagnosis awal didapatkan 40 responden (38,8%) dengan derajat ringan, 53 responden (51,4%) derajat sedang, dan 10 responden (9,7%) dengan derajat berat.

- e. Analisis hubungan menunjukkan bahwa rasio neutrofil-limfosit (NLR) dan rasio monosit-limfosit (MLR) memiliki hubungan yang signifikan dengan derajat keparahan stroke iskemik akut berdasarkan skor NIHSS, sedangkan rasio platelet-limfosit (PLR) dan *Red Cell Distribution Width* (RDW) tidak menunjukkan hubungan yang signifikan dengan derajat keparahan stroke.

5.1 Saran

- a. Bagi RSUP Persahabatan
 - 1. RSUP Persahabatan Jakarta diharapkan dapat meningkatkan pencatatan skor NIHSS secara rutin dan terstandar pada pasien stroke iskemik akut saat diagnosis awal.
 - 2. RSUP Persahabatan Jakarta dapat menggunakan pemanfaatan parameter hematologi sederhana, khususnya NLR dan MLR, sebagai informasi tambahan dalam penilaian awal derajat keparahan stroke iskemik akut.
- b. Bagi Peneliti Selanjutnya
 - 1. Peneliti selanjutnya diharapkan dapat melakukan analisis lanjutan dengan mempertimbangkan faktor *confounding* yang dapat mempengaruhi nilai NLR, PLR, MLR, dan RDW.
 - 2. Peneliti diharapkan meneliti faktor-faktor lain yang tidak diteliti pada penelitian ini yang dapat mempengaruhi derajat keparahan stroke.

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