

**FAKULTAS KEDOKTERAN
UNIVERSITAS PEMBANGUNAN NASIONAL “VETERAN” JAKARTA**

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**GAMBARAN LUARAN KLINIS PASIEN *ACUTE CORONARY SYNDROME* (ACS)
PASCA *PERCUTANEOUS CORONARY INTERVENTION* (PCI) DENGAN TERAPI
DUAL ANTIPLATELET (DAPT) DI RSUP PERSAHABATAN TAHUN 2023-2024**

ABSTRAK

Tujuan: Dual Antiplatelet (DAPT) terapi, kombinasi aspirin dan inhibitor P2Y12 merupakan standar terapi pada pasien *Acute Coronary Syndrome* (ACS) pasca *Percutaneous Coronary Intervention* (PCI) untuk mencegah thrombosis stent, kejadian iskemik berulang, dan menurunkan kejadian mortalitas kardiovaskular. Penelitian ini bertujuan untuk mendeskripsikan karakteristik pasien meliputi usia, jenis kelamin, IMT, Klasifikasi ACS, komorbid diabetes mellitus (DM) dan hipertensi, luaran klinis mortalitas dan kejadian reinfark, serta perbaikan gejala klinis angina dan dyspnea pada pasien ACS pasca PCI yang mendapat terapi DAPT di RSUP Persahabatan tahun 2023-2024.

Metode: Penelitian menggunakan metode deskriptif dengan pendekatan *cross-sectional* menggunakan 65 data rekam medis pasien ACS pasca PCI.

Hasil: Pasien terbanyak berusia antara 56-65 tahun (43.1%) yang termasuk dalam kategori lansia akhir dengan dominasi laki-laki (75.4%). IMT pasien paling banyak berada di antara 23-24,9 dengan status gizi *overweight* (41.5%) Klasifikasi ACS didominasi angina pektoris tidak stabil (92.3%). Sebagian besar tidak memiliki komorbid DM (53.8%), namun mayoritas memiliki komorbid hipertensi (87.7%). Selama 12 bulan terapi DAPT tidak ditemukan kejadian mortalitas dan mayoritas pasien tidak mengalami kejadian reinfark (96.9%), namun gejala klinis angina (81.5%) dan dyspnea (87.7%) masih banyak ditemui.

Kesimpulan: Gambaran karakteristik pasien ACS pasca PCI yang mendapat terapi DAPT di RSUP Persahabatan Tahun 2023-2024 didominasi usia lansia akhir, laki-laki, IMT *overweight*, ACS tipe angina pektoris tidak stabil, tanpa komorbid DM, dengan hipertensi sebagai komorbid utama. Tidak ditemukan kejadian mortalitas, sebagian besar bebas reinfark, namun masih mengalami gejala klinis angina dan dyspnea. Temuan ini dapat menjadi dasar peningkatan pengelolaan pasien ACS di masa mendatang.

Kata Kunci: *acute coronary syndrome*, dual antiplatelet, luaran klinis, *percutaneous coronary intervention*

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***DESCRIPTION OF CLINICAL OUTCOME OF ACUTE CORONARY SYNDROME (ACS)
PATIENTS POST PERCUTANEOUS CORONARY INTERVENTION (PCI) WITH DUAL
ANTIPLATELET THERAPY (DAPT) AT PERSAHABATAN HOSPITAL IN 2023-2024***

ABSTRACT

Introduction: Dual Antiplatelet Therapy (DAPT), combining aspirin and a P2Y12 inhibitor, is the standard treatment for Acute Coronary Syndrome (ACS) patients after Percutaneous Coronary Intervention (PCI). It prevents stent thrombosis, recurrent ischemic events, and reduces cardiovascular mortality. This study aims to describe patient characteristics and clinical outcomes of ACS patients post PCI who received DAPT therapy at Persahabatan General Hospital in 2023–2024.

Method: A descriptive cross-sectional study was conducted using 65 medical records of ACS patients post PCI who received DAPT therapy.

Results: Most patients were aged 56–65 years (43.1%) and male (75.4%). The majority had BMI in the overweight category (23–24.9; 41.5%). ACS classification was dominated by unstable angina pectoris (92.3%). More than half had no diabetes mellitus (53.8%), but hypertension was highly prevalent (87.7%). During 12 months of DAPT therapy, no mortality was recorded, and 96.9% of patients did not experience reinfarction. However, angina (81.5%) and dyspnea (87.7%) remained common clinical symptoms.

Conclusion: Characteristics of post-PCI ACS patients receiving DAPT therapy at Persahabatan General Hospital in 2023-2024 were predominantly late elderly males with overweight BMI, unstable angina, and hypertension as the main comorbidity. All patients survived and most remained reinfarction-free, though angina and dyspnea persisted. These findings highlight favorable survival outcomes but emphasize the need for ongoing symptom management in ACS care.

Keywords: acute coronary syndrome, dual antiplatelet, clinical outcomes, percutaneous coronary intervention