

BAB 5

KESIMPULAN DAN SARAN

5.1 Kesimpulan

Berdasarkan hasil penelitian yang berjudul Studi penggunaan carboplatin-paclitaxel terhadap penderita EOC (*Epithelial Ovarian Cancer*) di RUMKITAL Dr. Ramelan Surabaya periode 1 Januari 2016 sampai 31 Juli 2016 diperoleh kesimpulan sebagai berikut :

1. Carboplatin-paclitaxel dosis 450 mg – 240 mg paling banyak digunakan pada 9 pasien (36%), dengan riwayat kombinasi kemoterapi ketiga yaitu carboplatin-paclitaxel-bleomycin sebanyak 1 pasien (4%).
2. Riwayat penggunaan kemoterapi selain carboplatin-paclitaxel sebanyak 2 pasien (8%).
 - Ifosfamide-carboplatin (2x2500 mg – 1x450 mg)
 - Cyclophosphamide-cisplatin (1x1000 mg – 1x80 mg)
3. Toksisitas berupa nyeri di alami paling banyak oleh 20 pasien (80%).
4. Protokol penggunaan kemoterapi carboplatin-paclitaxel yang diberikan sudah sesuai dengan guidelines *Scottish Intercollegiate Guidelines Network* (SIGN) dengan ketentuan sesuai dosis anjuran carboplatin-paclitaxel masing-masing 300 mg/m² atau AUC 5 sampai AUC 6 dan 135 – 175 mg/m².

5.2 Saran

1. Diperlukan penelitian lebih lanjut dengan menggunakan metode lain seperti metode prospektif dalam mengamati permasalahan terapi dalam kemoterapi yang terkait, efektivitas obat dengan pengamatan jumlah sampel yang lebih besar dan rekam medis yang lebih lengkap, serta pembahasan yang berkaitan dengan perspektif pemerhati kesehatan seperti dokter, para klinisi lain, serta keikutsertaan peran pasien dalam menghasilkan profil penggunaan kemoterapi yang aman, tepat dan rasional.
2. Diperlukan pemeriksaan laboratorium terutama yang berhubungan dengan toksisitas yang membatasi dosis pemberian kemoterapi, seperti halnya pemeriksaan hematologi, fungsi hati, dan fungsi renal secara pre kemoterapi dan post kemoterapi agar didapatkan data yang lengkap dalam menunjang pemantauan terapi.
3. Diharapkan peran farmasis secara maksimal dalam memberikan informasi dan edukasi secara langsung terhadap tenaga kesehatan dan pasien terkait penggunaan kemoterapi agar dapat dicapai efek terapi yang maksimal.
4. Diharapkan untuk seluruh tenaga kesehatan yang terkait dalam penanganan pasien kanker dapat memberikan upaya pelayanan kesehatan yang maksimal terutama dari segi terapi farmakologi sehingga *quality of life* pasien meningkat dari hasil efek terapi yang maksimal.

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