

## BAB 5

### KESIMPULAN DAN SARAN

#### 5.1 Kesimpulan

Berdasarkan hasil studi literatur terhadap 10 jurnal mengenai penggunaan antiplatelet pada pasien stroke iskemik, dapat disimpulkan bahwa:

1. Pola penggunaan antiplatelet yang paling banyak adalah tunggal: aspirin (1 x 100 mg) po dan clopidogrel (1x75 mg) po, sedangkan kombinasi adalah: aspirin (1 x 80-100 mg) po + clopidogrel (1x75 mg) po, serta aspirin (1 x 100 mg) po + tikagrelor (2 x 90 mg) po dan telah sesuai dengan *guideline* AHA/ASA 2018.
2. Efektivitas aspirin ditunjukkan penurunan induksi asam arakidonat rata-rata sebesar 85,80%, penurunan induksi adenosin difosfat rata-rata sebesar 29,84%, clopidogrel ditunjukkan penurunan PT rata-rata sebesar 12,23%, aPTT rata-rata sebesar 14,69%, kombinasi aspirin + clopidogrel ditunjukkan penurunan PT rata-rata sebesar 8,31%, aPTT rata-rata sebesar 8,03% dan ditunjukkan penurunan induksi asam arakidonat sebesar 83,52% dan penurunan induksi adenosin difosfat sebesar 45,66%, juga aspirin + clopidogrel ditunjukkan penurunan inhibitor P2Y12 rata-rata sebesar 41,63%, kombinasi aspirin + cilostazol ditunjukkan penurunan induksi asam arakidonat sebesar 95,61%, penurunan induksi adenosin difosfat sebesar 43,69% dan aspirin + tikagrelor ditunjukkan penurunan inhibitor P2Y12 rata-rata sebesar 64,67%.

## **5.2 Saran**

1. Perlu dilaksanakan kajian literatur dengan memperluas *database* yang digunakan sehingga jurnal yang digunakan semakin banyak agar dapat melakukan kajian secara lebih luas dan mendalam.
2. Untuk penelitian selanjutnya disarankan dilakukan penelitian mengenai efektivitas penggunaan antiplatelet pada pasien stroke iskemik dengan kombinasi aspirin-tikagrelor dengan menggunakan parameter yang tepat.

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