

## **BAB 5**

### **KESIMPULAN DAN SARAN**

#### **5.1 Kesimpulan**

Berdasarkan hasil penelitian kajian pustaka dari 8 jurnal ilmiah terkait Efek pleiotropik dan efek samping golongan statin pada pasien penyakit jantung koroner dapat disimpulkan bahwa:

1. Efek anti dislipidemia ditunjukkan penurunan LDL pada atorvastatin (1x20-80 mg) po sebesar 52,1% - 64,6% dan pada rosuvastatin (1x20-40 mg) po sebesar 53,1% - 66,6%. Efek anti inflamasi ditunjukkan penurunan hs-CRP pada atorvastatin (1x20-80 mg) po sebesar 35,4% - 85,8% dan pada rosuvastatin (1x20-40 mg) po sebesar 51,8% - 60,4%, serta penurunan Interleukin-6 pada atorvastatin (1x80 mg) po sebesar 52,5% dan pada rosuvastatin (1x20 mg) po sebesar 58,9%. Efek anti platelet simvastatin atau atorvastatin atau pravastatin (1x40 mg) po menunjukkan penghambatan agregasi platelet yang diinduksi ADP sebesar 24% dan AA sebesar 13%
2. Efek samping mialgia simvastatin atau atorvastatin (1x40-80 mg) po ditunjukkan peningkatan nilai kreatin kinase sebesar 27,6%.

#### **5.2 Saran**

Sebaiknya peneliti selanjutnya mengamati pengaruh penggunaan obat golongan statin dengan kombinasi terapi lain terhadap kadar CRP, *ADP-Induce aggregation*, dan kreatinin kinase pada pasien penyakit jantung koroner.

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