

EVALUATION OF ANEMIA THERAPY ON HEMOGLOBIN IN CHONIC KIDNEY DISEASE INPATIENTS AT Dr. MOEWARDI SOLO HOSPITAL

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ABSTRACT

Anemia is a common complication in Chronic Kidney Disease (CKD) patients undergoing hemodialysis. Decreased kidney function worsens anemia, so management aims to increase hemoglobin levels and monitor hematological parameters to improve patients' quality of life. This research aimed to evaluate the profile use, rationality, and effectiveness of anemia therapy in increasing hemoglobin in inpatient CKD patients at Dr. Moewardi Solo Regional General Hospital. This research used a prospective, observational design in 50 CKD patients receiving anemia therapy who met the inclusion criteria. The data collected included anemia treatment profiles and hematological parameters. The rationality of therapy was evaluated based on Right indications, Right drugs, Right route of administration, Right dose, and Right interval/frequency. The effectiveness of anemia therapy was analyzed using a paired sample t-test comparing patients before and after therapy. The most commonly used therapies were PRC alone (36%) and combination therapy of PRC and folic acid (24%). The rationality evaluation showed fairly good results, with Right indications (100%), Right dose (100%), Right route of administration (100%), Right interval (100%), and Right drug (24%). A paired sample t-test showed a significant increase ($p < 0.05$) in hemoglobin and hematocrit, while MCV (66%), MCH (66%), and MCHC (66%) did not experience significant changes ($p > 0.05$). Anemia therapy in CKD patients at Dr. Moewardi Regional Hospital has been proven to be rational and effective in increasing hemoglobin levels. The indication, dosage, intervals, and routes administration are in rightly aligned with therapy guidelines. However, the accuracy of drug use still needs to be considered to ensure Right and optimal therapy for CKD patients with anemia.

Keywords: Anemia, CKD, Rationality, Effectiveness.