EVALUASI *DRUG RELATED PROBLEMS* (DRPS) INFEKSI SALURAN PERNAPASAN AKUT (ISPA) PADA PASIEN PEDIATRI DI PUSKESMAS TANJUNG BUNTUNG KOTA BATAM

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ABSTRAK

Infeksi Saluran Pernapasan Akut (ISPA) merupakan penyakit yang sering terjadi pada pasien pediatri dan berpotensi menimbulkan *Drug Related Problems* (DRPs). DRPs adalah permasalahan terkait penggunaan obat yang dapat mengganggu keberhasilan terapi, baik karena ketidaktepatan dosis, pemilihan obat, maupun adanya interaksi obat. Penelitian ini bertujuan untuk mengetahui profil terapi obat, persentase kejadian DRPs, serta hubungan karakteristik pasien dengan DRPs pada pasien pediatri penderita ISPA di Puskesmas Tanjung Buntung Kota Batam. Metode penelitian ini menggunakan desain deskriptif kuantitatif dengan sampel sebanyak 80 pasien pediatri berusia 1–9 tahun yang memenuhi kriteria inklusi pada periode Januari–Maret 2025, ditentukan dengan rumus *Slovin*. Hasil penelitian menunjukkan bahwa obat yang paling banyak digunakan adalah amoksisilin (63,6%) sebagai antibiotik utama, serta ambroxol (25,3%), cetirizine (20,3%), dan parasetamol (20,3%) sebagai terapi suportif. Persentase kejadian DRPs mencapai 75%, dengan distribusi dosis rendah 30%, dosis tinggi 25%, obat tanpa indikasi 13,75%, salah obat 11,3%, indikasi tanpa obat 11,25%, dan interaksi obat 7,5%. Analisis chi-square menunjukkan adanya hubungan signifikan antara usia dengan DRPs kategori dosis rendah (p=0,007) dan dosis tinggi (p=0,046), serta antara jumlah obat dengan DRPs kategori obat tanpa indikasi (p=0,008), sementara jenis kelamin tidak menunjukkan hubungan signifikan dengan DRPs. Kesimpulan penelitian ini adalah terapi ISPA pediatri di Puskesmas Tanjung Buntung paling banyak menggunakan antibiotik amoksisilin dan terapi suportif ambroxol, cetirizine dan paracetamol, dengan angka kejadian DRPs 75% terutama dosis rendah dan tinggi, serta terbukti berhubungan signifikan dengan usia dan jumlah obat, namun tidak dengan jenis kelamin.

Kata Kunci: ISPA, Pediatri, Antibiotik, Terapi, Evaluasi Obat, DRPs

EVALUATION OF DRUG RELATED PROBLEMS (DRPS) OF ACUTE RESPIRATORY TRACT INFECTION (ARI) IN PEDIATRIC PATIENTS AT TANJUNG BUNTUNG PUBLIC HEALTH CENTER BATAM CITY

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ABSTRACT

Acute Respiratory Tract Infection (ARI) is a common disease in pediatric patients and has the potential to cause Drug Related Problems (DRPs). DRPs are issues related to drug use that may interfere with the success of therapy, either due to inappropriate dosage, drug selection, or drug interactions. This study aimed to determine the drug therapy profile, the percentage of DRPs, and the relationship between patient characteristics and DRPs in pediatric patients with ARI at Tanjung Buntung Health Center, Batam City. This research employed a descriptive quantitative design with a total of 80 pediatric patients aged 1–9 years who met the inclusion criteria during the period of January–March 2025, determined using the Slovin formula. The results showed that the most frequently prescribed drug was amoxicillin (63.6%) as the main antibiotic, followed by ambroxol (25.3%), cetirizine (20.3%), and paracetamol (20.3%) as supportive therapy. The percentage of DRPs reached 75%, with the distribution consisting of underdose 30%, overdose 25%, drug without indication 13.75%, wrong drug 11.3%, indication without drug 11.25%, and drug interaction 7.5%. Chi-square analysis showed a significant relationship between age and DRPs in the categories of underdose (p=0.007) and overdose (p=0.046), as well as between the number of drugs and DRPs in the category of drug without indication (p=0.008), while gender did not show a significant association with DRPs.This study concludes that pediatric ARI therapy at Tanjung Buntung Health Center predominantly used the antibiotic amoxicillin and supportive therapies such as ambroxol, cetirizine, and paracetamol, with a DRPs incidence of 75% mainly in underdose and overdose categories, which showed significant associations with age and the number of medications, but not with gender.

Keywords**:** *ISPA, Pediatrics, Antibiotics, Therapy, Drug Evaluation, DRPs*

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