

MONITORING TEKANAN DARAH INTRAOPERASI PADA PASIEN SUBDURAL HEMATOMA UNTUK MENGATSI RESIKO PENINGKATAN TEKANAN INTRA KRANIAL

Ekki Nursatria Rokhman¹, Bondan Palestin, SKM., M.Kep., Sp.,Kom²
Jurusan Keperawatan Poltekkes Kemenkes Yogyakarta
Jl. Tata Bumi No.3 Banyuraden, Gamping, Sleman, Yogyakarta, 55293
*Email: xq.n.rahman@gmail.com

ABSTRAK

Latar Belakang: Perdarahan subdural merupakan salah satu kelainan penyerta pada kasus cedera kepala berat. Insiden perdarahan subdural akut mencapai 12-30% dari pasien yang masuk dengan cedera kepala berat dan terjadi terutama pada usia dewasa muda dibawah 45 tahun dengan penyebab tersering adalah kecelakaan lintas. Prosedur bedah saraf, menjaga stabilitas hemodinamik dan perfusi optimal serebral adalah suatu hal yang sangat penting. Tekanan intrakranial dapat meningkat dengan cepat, mengakibatkan terjadinya perubahan sistemik seperti hipertensi, hipotensi, takikardia, bradikardia, perubahan irama jantung, perubahan EKG, gangguan elektrolit, hipoksia, dan *Neurogenic Pulmonary Edema* (NPE). Tujuan dari tinjauan ini adalah untuk merangkum pengaruh pemantauan tekanan darah terhadap peningkatan tekanan intra kranial.

Tujuan: Menggambarkan monitoring tekanan darah intra operasi pada pasien *Subdural Hematoma* untuk mengatasi RK peningkatan tekanan intra kranial

Hasil: Terdapat perbedaan yang tidak terlalu signifikan antara kedua pasien, dimana gambaran tekanan darah dalam intraoperasi selama 2 jam yang dimonitoring dengan interval waktu per 15 menit tidak menunjukkan adanya peningkatan tekanan darah yang signifikan sehingga RK peningkatan tekanan intra kranial teratasi.

Kesimpulan: Memonitoring kesetabilan tekanan darah intra operasi sangat penting diterapkan untuk menentukan pengambilan tindakan selama fase intraoperasi dan mengurangi resiko komplikasi pasca anestesi.

Kata Kunci: Hemodinamik; Tanda-tanda vital; tekanan intrakranial; bedah saraf

¹⁾ Mahasiswa Jurusan Keperawatan Poltekkes Kemenkes Yogyakarta

²⁾ Dosen Jurusan Keperawatan Poltekkes Kemenkes Yogyakarta

INTRAOPERATIVE BLOOD PRESSURE MONITORING IN SUBDURAL HEMATOMA PATIENTS TO REDUCE THE RISK OF INCREASED INTRA-CRANIAL PRESSURE

Ekki Nursatria Rokhman¹, Bondan Palestin, SKM., M.Kep., Sp.,Kom²
Department of Nursing, Polytechnic, Ministry of Health, Yogyakarta
Jl. Tata Bumi No.3 Banyuraden, Gamping, Sleman, Yogyakarta, 55293
*Email: xq.n.rahman@gmail.com

ABSTRACT

Background: Subdural hemorrhage is one of the comorbidities in cases of severe head injury. The incidence of acute subdural hemorrhage reaches 12-30% of patients admitted with severe head injury and occurs mainly in young adults under 45 years of age with the most common cause being traffic accidents. In neurosurgical procedures, maintaining hemodynamic stability and optimal cerebral perfusion is of paramount importance. Intracranial pressure can increase rapidly, resulting in systemic changes such as hypertension, hypotension, tachycardia, bradycardia, heart rhythm changes, ECG changes, electrolyte disturbances, hypoxia, and Neurogenic Pulmonary Edema (NPE). The aim of this review is to summarize the effect of blood pressure monitoring on elevated intra-cranial pressure.

Objective: Describe intraoperative blood pressure monitoring in Subdural Hematoma patients to overcome RK increased intra cranial pressure.

Results: There was a not too significant difference between the two patients, where the blood pressure picture intraoperatively for 2 hours monitored at intervals of time per 15 minutes did not show a significant increase in blood pressure so that RK increased intra-cranial pressure was resolved.

Conclusion : Monitoring intraoperative blood pressure stability is essential to determine the course of action during the intraoperative phase and reduce the risk of post-anesthesia complications.

Keywords: Hemodynamics; vital signs; intracranial pressure; neurosurgery

¹⁾ *Students of the Department of Nursing, Polytechnic of the Ministry of Health Yogyakarta*

²⁾ *Lecturer of the Department of Nursing, Polytechnic of the Ministry of Health, Yogyakarta*