ANALISIS EFEKTIVITAS BIAYA PENGOBATAN ANTIBIOTIK AZITROMISIN-SEFTRIAKSON DAN AZITROMISIN-SEFOTAKSIM PASIEN *COMMUNITY-ACQUIRED PNEUMONIA* DI SALAH SATU RSUD KOTA BANDUNG TAHUN 2024

SKRIPSI

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A233026

SEKOLAH TINGGI FARMASI INDONESIA

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Kutipan atau saduran baik sebagian ataupun seluruh naskah, harus menyebut nama pengarang dan sumber aslinya, yaitu Sekolah Tinggi Farmasi Indonesia.

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ABSTRAK

Community-Acquired Pneumonia (CAP) merupakan infeksi saluran pernapasan akut yang memerlukan terapi antibiotik yang tepat dan efisien. Kombinasi azitromisin–seftriakson dan azitromisin–sefotaksim merupakan rejimen empiris yang umum digunakan, namun efektivitas biaya dari keduanya belum diketahui secara pasti. Penelitian ini bertujuan untuk menganalisis efektivitas biaya dari dua kombinasi antibiotik tersebut pada pasien CAP di salah satu RSUD Kota Bandung tahun 2024. Penelitian ini menggunakan desain retrospektif dengan data rekam medis dan biaya medis langsung pasien, serta dianalisis menggunakan metode *Average Cost Effectiveness Ratio* (ACER). Hasil menunjukkan bahwa kombinasi azitromisin–seftriakson memiliki efektivitas lebih tinggi (93,55%) dan biaya lebih rendah (Rp2.258.401) dibandingkan dengan azitromisin–sefotaksim (74,07%; Rp2.529.270). Berdasarkan nilai ACER, kombinasi azitromisin–seftriakson lebih efektif. Kesimpulannya, terapi kombinasi azitromisin–seftriakson lebih hemat biaya dan lebih efektif dibandingkan kombinasi azitromisin–sefotaksim, sehingga dapat direkomendasikan sebagai pilihan terapi pada pasien CAP. Berdasarkan analisis sensitivitas faktor yang mempengaruhi efektivitas biaya pengoatan CAP adalah lama rawat inap, karena semakin panjang durasi perawatan di Rumah Sakit maka semakin besar biaya yang harus dikeluarkan pasien.

Kata kunci: *Community-Acquired Pneumonia*, Azitromisin, Seftriakson, Sefotaksim, ACER

ABSTRACT

Community-Acquired Pneumonia (CAP) is an acute respiratory infection that requires appropriate and efficient antibiotic therapy. Azithromycin–seftriakson and azithromycin–sefotasim are commonly used empirical regimens, but their cost-effectiveness comparison remains unclear. This study aimed to analyze the cost-effectiveness of these two antibiotic combinations in CAP patients at one of the public hospitals in Bandung City in 2024. This research used a retrospective design, collecting data from patient medical records and direct medical costs. Analysis was conducted using the Average Cost Effectiveness Ratio (ACER) method. The results showed that the azithromycin–seftriakson combination had higher effectiveness (93.55%) and lower cost (IDR 2,258,401) compared to azithromycin–sefotasim (74.07%; IDR 2,529,270). Based on the ACER value, the azithromycin–seftriakson regimen was more cost-effective. In conclusion, azithromycin–seftriakson is more cost-effective and can be recommended as the preferred therapy for CAP patients. Based on the sensitivity analysis, the factor that influences the cost-effectiveness of CAP strengthening is the length of hospitalization, because the longer the duration of treatment in the hospital, the greater the costs that the patient must incur.

Keywords: *Community-Acquired Pneumonia, Azithromycin, Seftriakson, Sefotasim, ACER*

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Gambar Halaman

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