GAMBARAN TINGKAT NYERI SETELAH PEMBERIAN ANALGETIK PADA PASIEN PASCA OPERASI LAPARATOMI MENGGUNAKAN NUMERIC RATING SCALE (NRS)

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ABSTRAK

Nyeri pasca operasi merupakan masalah utama yang dapat menghambat pemulihan pasien, meningkatkan risiko komplikasi dan menurunkan kualitas hidup. Laparatomi sebagai salah satu pembedahan mayor dengan anestesi umum memiliki tingkat nyeri yang tinggi, sehingga penanganan nyeri dengan analgetik perlu dievaluasi efektivitasnya. Penelitian ini bertujuan untuk mengetahui gambaran tingkat nyeri pasien pasca operasi laparatomi setelah pemberian analgetik Ketorolac 30 mg intravena serta kombinasi Ketorolac 30 mg dan Tramadol 100 mg dalam ringer laktat 500 ml di RSUD Ciamis. Penelitian ini menggunakan metode kuantitatif deskriptif dengan studi longitudinal. Jumlah responden sebanyak 37 pasien pasca operasi laparatomi dengan anestesi umum yang dipilih melalui *purposive sampling*. Karakteristik responden relatif homogen, mayoritas usia 26–45 tahun (59,5%) dan berjenis kelamin perempuan (62,2%). Penilaian nyeri dilakukan dengan Numeric Rating Scale (NRS). Observasi pertama dilakukan 30 menit setelah pemberian Ketorolac 30 mg intravena (OOA 10-15 menit dan DOA 6–8 jam), sedangkan observasi kedua pada 6-8 jam pasca operasi setelah pemberian kombinasi Ketorolac 30 mg dan Tramadol 100 mg (OOA 10-15 menit dan DOA 4-6 jam) dalam drip ringer laktat 500 ml. Hasil penelitian menunjukkan pada 30 menit setelah pemberian Ketorolac, lebih dari setengah responden 54,1% mengalami nyeri sedang (NRS 4–6) dan 37,9% nyeri berat terkontrol (NRS 7–9). Pada 6-8 jam setelah pemberian kombinasi, sebagian besar responden 51,4% mengalami nyeri ringan (NRS 1–3) dan 43,2% nyeri sedang (NRS 4–6). Hal ini menunjukkan adanya penurunan tingkat nyeri setelah pemberian analgetik multimodal. Dapat disimpulkan pemberian intensitas nyeri pasca operasi laparatomi menurun meskipun persepsi nyeri tetap bervariasi antar individu. Penata anestesi perlu mempertimbangkan penggunaan kombinasi analgetik multimodal untuk mengoptimalkan manajemen nyeri pasca operasi serta menyesuaikan dosis berdasarkan usia dan jenis kelamin pasien.

Kata kunci: Nyeri pasca operasi, Laparatomi, Anestesi umum, Analgetik, Numeric Rating Scale (NRS), Ketorolac, Tramadol.

DESCRIPTION OF THE PAIN LEVEL OF POSTOPERATIVE LAPARATOMY PATIENTS WITH GENERAL ANESTHESIA USING THE NUMERIC RATING SCALE (NRS)

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ABSTRACT

Postoperative pain is a major problem that can hinder patient recovery, increase the risk of complications, and reduce quality of life. Laparotomy, as one of the major surgeries performed under general anesthesia, is associated with a high level of postoperative pain; therefore, the effectiveness of analgesic administration needs to be evaluated. This study aimed to describe the pain levels of postoperative laparotomy patients after administration of Ketorolac 30 mg intravenously and a combination of Ketorolac 30 mg with Tramadol 100 mg diluted in 500 ml of Ringer's lactate at Ciamis District Hospital. This research employed a quantitative descriptive method with a longitudinal design. A total of 37 postoperative laparotomy patients under general anesthesia were selected using purposive sampling. Respondents were relatively homogeneous, with the majority aged 26–45 years (59.5%) and female (62.2%). Pain intensity was assessed using the Numeric Rating Scale (NRS). The first observation was conducted 30 minutes after administration of Ketorolac 30 mg intravenously (onset of action 10–15 minutes; duration of action 6–8 hours), while the second observation was carried out at 6–8 hours postoperatively after administration of the combination of Ketorolac 30 mg and Tramadol 100 mg (onset of action 10–15 minutes; duration of action 4–6 hours) via drip in 500 ml Ringer's lactate. The results showed that at 30 minutes after Ketorolac administration, more than half of the respondents (54.1%) experienced moderate pain (NRS 4–6), and 37.9% experienced controlled severe pain (NRS 7–9). At 6–8 hours after administration of the combination therapy, most respondents (51.4%) reported mild pain (NRS 1–3), and 43.2% reported moderate pain (NRS 4–6). These findings indicate a decrease in pain levels after multimodal analgesic administration. In conclusion, postoperative pain intensity following laparotomy decreased after administration of Ketorolac and the Ketorolac–Tramadol combination, although pain perception varied among individuals. Nurse anesthetists are recommended to consider multimodal analgesic combinations to optimize postoperative pain management and adjust dosing according to patients' age and sex.

Keywords: Postoperative pain, Laparotomy, General anesthesia, Analgesics, Numeric Rating Scale (NRS), Ketorolac, Tramadol