Assalamualaikum Wr. Wb

All praise and gratitude we say to the presence of Allah SWT for all His graces and gifts, so that we can still work in the Faculty of Medicine, University of Syiah Kuala until now. Our prayers and greetings praise the Prophet Muhammad SAW, Who brought us from the dark realms to the bright world full of knowledge.

The 4th Aceh Surgery Update International Conference in 2021 will be held in a webinar conference with the theme Current Update on Covid 19: Clinical and Surgery, this will be attended by General Surgeons, other Specialist, General Surgery Resident, General Practitioners from around Indonesia to share their expertise and knowledge in the latest updates in the field of Surgery, especially in the fields of Thoracic Cardiac & Vascular Surgery, Digestive Surgery, Pediatric Surgery, Orthopedic & Traumatology Surgery, Urology Surgery, Neurosurgery, Plastic Surgery, Surgical Oncology, Disaster Management, Pain Management and all about Covid-19 in Indonesia.

In this regards, I would like to express my appreciation and gratitude to the committee for compiling this Final Program Book well, I hope this book can be our commitment to be able to work together in advancing Medical Education at Universitas Syiah Kuala. Hopefully this joint effort will always receive protection and blessings from Allah SWT. Amin

Best Regards.

Prof. Maimun Syukri, MD, PhD, Sp. PD-KGH, FINASIM
Dean of Medical Faculty Universitas Syiah Kuala
CHAIRMAN FOREWORD

Assalamualaikum Wr.Wb
Praise and gratitude we pray the presence of Allah SWT for all His grace and guidance so we can still work to help in the fields of education and humanity. With greetings and prayers we praise the prophet Rahmatan lil alamin Rasulullah Muhammad SAW who has brought us from the realm of darkness to a realm full of knowledge.

In the fourth year it was held during the Covid 19 pandemic, 4th Aceh Surgery Update International Conference in 2021 will be held virtually on February 26-28, with theme Current Update on Covid 19; Clinical and Surgery. This virtual science event will be attended by international and national speakers who have expertise in the field of surgery and the latest information regarding Covid 19 from the Indonesia government. This scientific event felt very special with the presence of the Bali Medical Journal indexed by SCOPUS and Web of Science in scientific publications for all topics presented, both in symposium and free paper sessions.

I would like to welcome all experts who are willing to attend to be native speaker at this scientific even. I would like to thank all the committees and sponsors who have helped make this scientific webinar a success. Finally, I am also welcome all the participants and delegated, really hope you all get valuable scientific experiences in extra ordinary city of Banda Aceh.

Sincerely Yours,

Yopie Afriandi Habibie, MD, Sp. BTKV (K)-D, FIHA, FICS, FACS
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The impact of COVID-19 on surgery and surgical education in Australia: present and future

Glenn Douglas
Director of Surgical Training South West Victorian Hub. Deakin University, Epworth Geelong Hospital, Australia

Since the first case of COVID-19 was diagnosed in Australia in late January 2020, Australia has joined the global effort to control this pandemic. There was both benefit and anxiety in observing from afar the experience of other countries and the impact it had on the community and health systems. Whilst many parts of Australia were highly successful in controlling and even eliminating the disease, the city of Melbourne in the state of Victoria was not so lucky and experienced two waves of substantial community spread. Early decisions by political leaders and Health leaders were made with a paucity of information and now with the benefit of hindsight there are many lessons that can be learnt to deal with a health system that has changed but is more prepared to deal with a global pandemic. In addition to the changes that were made by hospitals, Universities and the Royal Australasian College of Surgeons (RACS) also needed to rapidly evolve to allow them to continue to deliver education to the health workforce and particularly in the training of doctors and surgeons. These changes needed to be made quickly but without knowledge of whether they would be for the short term or a permanent part of the future. This presentation focuses on the practical measures that were adopted in hospitals in Victoria and shares these lessons to look to the future for what might be needed to minimize the impact of COVID-19 on the health system and medical training.

Keyword: COVID-19, pandemic, surgery

The ethical deliberation in surgery

Peter Johannes Manoppo
General Surgeon, Bioethicist Indonesian Bioethics Forum

Ethically and clinically appropriate surgery is the destiny of performing surgeons. Therefore, the surgeon should be prudent in preparing the patient before the surgery with the good procedures and mutual communication with the surgical team and the patient, doing the surgery properly and proceed to post-operative care securely. All parts of these procedures should be done on the proper ethical deliberation. Some issues could be challenging in surgery, like severe cases, multiple trauma, surgical complications, bad prognosis, scarcity of human resources or equipment. Those situations would inflict some ethical concerns, during pre-operative preparation, surgical intervention and post-operative care, among others: autonomy, informed-consent, beneficence, non-maleficence, justice, vulnerability, dignity, confidentiality.

Keywords: ethically and clinically appropriate surgery, ethical deliberation, pre-operative care, surgical intervention, post-operative care.

Endourology surgery in covid-19 pandemic: our experiences

Dong Nguyen
Urologist at BINH DAN Hospital, Vietnam

Since Covid-19 outbreaks, it causes unpredictable crises all over the world. The health workers are struggling to cure the infected patients and stop this pandemic. Our daily practice has changed following the government’s regulations, we are not only treating the patients but also protecting ourselves and preventing the spreading of virus. Endourology surgeries in COVID-19, treating the patient with urinary stone and prostate problems, has been evolved to adaptation the “new normal” condition. We should categorize the patient to who needs urge intervention or who can put in waiting list. Moreover, our endourologic procedures need to be more effective, shorter patients’ hospital staying and less complications. COVID-19 pandemic makes bad and long-lasting effects to our lives, but the ways we react are more important, we should consider this pandemic as a chance to improve ourselves, think positively and make our life more better than before.

Keywords: surgery, pandemic era, urology, experiences.

Life and surgery in the time of COVID-19

Georgios Tsoulfas
World President of International College of Surgeon (ICS) Global, Greece

The following brief report will not be about presenting the science behind COVID-19 and its management, as people far more knowledgeable than I have been doing this tirelessly. It will be an attempt to provide a glimpse of the picture in a small European country, Greece, and at the same time share some personal thoughts.

When we first heard about COVID-19 in Greece, it was seen as “someone else’s” problem as it had affected China, which was far away. When it surfaced in Italy, the country and the health care system started experiencing the “aftershock” of the devastating reality in a neighboring country. This was a critical point, as the news and the pictures from Italy and the fact that a health care system with more resources than the Greek National Health System was actually being overrun by the virus, was an awakening for the authorities health care system. The result was that there was almost immediate enforcement right from the beginning of the strictest measures, including social distancing, staying at home (unless there was one of six different specific reasons to move, including employment, health care, supplies, limited walking exercise for example), banning travel, airport and port closure from naming a few.

Keywords: surgery, pandemic era, urology, experiences.
ABSTRACT

Although this is very challenging for a country that just last year was able to come out of a significant economic depression and for a population very proud of its independent spirit, the pictures and news from Italy and several other countries led to acceptance of the necessary measures.

For surgeons and other medical personnel there were mixed feelings. On the one hand, we were able to go about our daily mission of providing health care (and so our “independence” was somewhat preserved) and there was that ever-lasting surgical determination of “let’s find the problem and solve it”; unfortunately, this was not a bleed to be stopped or a cancer to be resected. Over time that created a feeling of uneasiness as we were not able to deal with the problem ourselves, yet still we could focus on helping our patients in the best possible way during a difficult time. On the other hand, the health care system around us was changing as hospitals had to create space and prepare for the upcoming storm. This meant that all non-essential surgeries had to be canceled, which sounds easier than it is, as between the extremes of the spectrum (aesthetic plastic surgery and trauma surgery to name an example) there is a gray zone that can include problems such as gallbladder disease, different types of cancer and many others. The guidance from international surgical organizations allowed us to continue and help our patients by doing what we know best and at the same time gave each surgeon the strength of feeling useful and active in this fight.

Most importantly being able to contribute made us feel that we were the ones in control again, instead of “the virus”. However, there were new pressures that we had to face: protecting the well-being of our families, staying away from elderly relatives from the fear that we may transmit the infection and the guilt involved, and the helplessness that you feel when you find out that a patient that you were operating on trying to save their life, may actually have been a COVID-19 carrier which then meant that you were placed on quarantine and your whole life suddenly changed.

Perhaps the most important word here is change, as it is becoming obvious that things will not be the same from now on. Yet we will adapt, but there are maybe lessons to be learned:

a) Globalization may become challenged, but there is a need to remember the value and importance of Global Surgery and the role of Humanitarian Surgery, principles that the ICS has strongly supported with words and with actions

b) There will be severe economic challenges that will affect our patients and the whole health care system

c) There is suddenly a feeling of vulnerability, when we realized that while we are traveling to Mars, at the same time our presence on earth could be threatened by a “tiny virus”

d) We have found ways to adapt and many of those will stay with us. For example the use of technology in education during the times of school closures or the use of telemedicine in health care. The latter was one of the first steps taken to help our patients in a safe manner and with the emergence of Artificial Intelligence, we will be seeing much more of this in the future irrespective of the current situation

We are not done with COVID-19 yet, not by a long-shot. However, in Europe and many other places, there is talk about possibly easing restrictions slowly over the next month or so. The bottom line is that we will overcome this too, and we have to remember that whatever doesn’t kill us, will only make us stronger.

Keywords: surgery, pandemic, COVID-19, learn.

How COVID-19 affecting surgical education; experience from Indonesia, present and the future

Andi Asadul Islam
Faculty of Medicine, Universitas Hasanuddin, Makasar, Indonesia

The wave of COVID–19 pandemic in Indonesia started in early March 2020 with a rapid, obvious, and massive spread. It has made unexpected changes in health service and surgical training. With outpatient clinics have reduced, elective operating reduced or stopped, reduction in the number of patients presenting as an emergency. Conferences, workshop, and many meetings were canceled. All of these factors will drastically affect in medical education, especially surgical specialty program, although we are not act as the frontline specialty in managing COVID–19 patients. Surgical residents and supervisor surgeons have adapted, initiating a different, innovative and extraordinary ways to continue learning, enabling progression through surgical training. The digital environment becomes popular in the academic term. The use of virtual learning, videoconferencing, and telemedicine could work effectively as a quick solution in medical education. However, digital ways could not replace direct exposure to real patients. With rising COVID–19 cases across the world, we reflect on recent surgical training changes and discuss how best to support the next generation of surgeons during this uncertainty period.

Keywords: surgery, pandemic era, caution, preparation.

New insight on rib’s fracture; what the evidence says for surgical stabilization of rib fracture

Yopie Afriandi Habibie
Division of Thoracic Cardiac & Vascular Surgery, Department of Surgery, Faculty of Medicine Universitas Syiah Kuala, The Zainoel Abidin General Hospital, Banda Aceh Indonesia

The clinical management options of thoracic trauma for flail chest and multiple rib fractures are still debating. For example, the treatment for rib fracture between conservative and surgical treatment, still have different conclusions and recommendation. Rib fractures account for 10% of all trauma admissions and are seen in up to 39% of patients after thoracic trauma, and is often associated with other serious injuries. With morbidity and mortality rate primarily derive from pain-induced hypventilation, pneumonia and respiratory failure, as well as poor quality of life at long-term follow-up, multiple rib fractures pose a serious health hazard. Clinical and radiographic scoring systems have been developed to predict risk of complications. Clinical strategies to reduce morbidity have been studied, including multimodal pain management, catheter-based analgesia, pulmonary hygiene, and operative stabilization. However, we face many challenges for the treatment of rib fractures, and the constant controversies and debates in terms of treatment options, timing of surgery, and surgical techniques. Current evidence indicates that a greater number of rib fractures is associated with an increased risk for pneumonia and death, particularly in the elderly. Treatment of rib fractures is controversial, but the goal of management is to prevent or minimize associated complications. With the emergence of more and more research, the understandings of the rib fractures treatment has gradually improved; for example, the benefits provided to patients under
the open reductions and internal fixation of fractures treatment. Surgical stabilization of rib fractures (SSRF) of flail chest is more beneficial compared to nonoperative treatment, among others, pneumonia and both intensive care unit (ICU) and hospital length of stay. Eventually, we described the new insight in rib fractures management after thoracic trauma, which mainly included four aspects, damage control, adequate pain management, fixation selection, and long term quality of life.

**Keywords:** rib fractures, flail chest, current evidence, pain management, surgical stabilization of rib fractures.

**Appendicitis in pediatric, and place to non-operative management**

Dian Adi Syahputra  
Pediatric Surgery Division, Department of Surgery, Faculty of Medicine, Universitas Syiah Kuala/Dr. Zainoel Abidin Hospital, Banda Aceh, Aceh, Indonesia

Acute appendicitis is a common gastrointestinal disease in children, generally considered to require operative intervention, with a lifetime incidence of 7% to 8%. This ancient strategy is based on the entrenched idea that appendicitis is an irreversibly progressive disease, starting with an uncomplicated stage and leading to a complicated stage with gangrene, perforation, and peritonitis. There are 2 types of appendicitis: simple (uncomplicated or nonperforated) appendicitis with no tendency to progress, and complex (complicated or perforated) appendicitis. Recently, this paradigm has shifted especially for uncomplicated appendicitis. Based on epidemiologic, radiologic, and pathologic studies, several surgeons no longer consider uncomplicated appendicitis as an invariably irreversible progressive disease. Specific anatomical and pathophysiologic features of children, the clinical scenario of acute appendicitis in pediatric patients is different from that in adults, and treatment decisions for children are more difficult. Several randomized clinical trials (RCTs) have proven the effectiveness and safety of non-operative treatment for uncomplicated appendicitis in pediatric patients with an uncomplicated disease with success rates ranging from 63% to 85%. Meta-analyses and systematic reviews of such trials have yielded supportive conclusions. Non-operative management of uncomplicated appendicitis with antibiotics was associated with significantly fewer complications, better pain control, and shorter sick leave. However, the failure rate, mainly caused by the presence of appendicitis, is higher than for appendectomy. Surgery is preferably suggested for uncomplicated appendicitis with appendicolith.

**Keywords:** uncomplicated appendicitis, pediatric, non-operative management.

**Locally advanced breast cancer, is immediate mastectomy is the best option?**

Fachrul Razi  
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Locally advanced breast cancer encompasses a heterogeneous collection of breast neoplasms and constitutes approximately 10%-20% of the newly diagnosed breast cancers. These cancers may have widely different clinical and biological characteristics. Patients with these tumors may be classified as stage IIB, III or IV breast cancer according to the American Joint Committee for Cancer Staging and End Results Reporting (TNM classification). Multidisciplinary therapy has become the treatment of choice for these patients. Primary or neoadjuvant chemotherapy followed by locoregional therapy, either surgery and/or radiotherapy, and postoperative systemic chemotherapy is now an accepted strategy. More than 70% of patients achieve an objective response (including complete pathological remission in 10%-25% of cases), and many patients experience downsizing through primary chemotherapy. Breast conservation is possible in 10%-40% of patients with locally advanced breast cancer; almost all patients initially are rendered disease-free, and long-term local control is achieved in over 70% of these patients. Primary chemotherapy is the initial choice of treatment for patients with locally advanced tumors, but it is unclear what the optimal sequence of subsequent therapies should be, whether one or two local treatment modalities are necessary, and whether any or different postoperative chemotherapy is needed. The efficacy of primary chemotherapy was demonstrated in several large prospective studies in patients with locally advanced breast cancer. The natural history of this disease was changed dramatically by the introduction of these combined modality therapies. Five-year disease-free survival rates of 35%-70% are commonly reported, and about 25%-40% of patients will survive beyond 10 years without recurrence. In summary, multidisciplinary therapy that includes primary chemotherapy provides appropriate local control and the possibility of breast conservation therapy; it increases surgical resectability and survival rates in patients with locally advanced breast cancer.

**Keywords:** locally advanced breast cancer, surgery, chemotherapy, breast conservation therapy, surgical resectability, survival rates.

*Management of spinal cord injury during COVID-19 era*

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Coronavirus disease (COVID-19) was declared a pandemic in March 2020 and has the potential to overload health system, compromise hospital staffs and use up essential hospital supplies. Patients with Spinal Cord Injuries (SCI) are classified as patient with disability and has increased morbidity from COVID-19 due to physiological changes from the nature of pathology, subsequently their clinical and social characteristics puts them in high risk of contracting COVID-19. Patients with SCI might present different symptoms of COVID-19 than others. Weakness in thoraco-abdominal and diaphragm muscles might impair cough, reduce lung volumes, and reduce flow rates. Interrupted pathway between hypothalamus and efferent nerves (sympathetic and motoric) might results in temperature dysregulation (poikilothermia) and dysfunction of febrile response. Patients with injuries at higher levels would present with more severe symptoms. The pandemic of COVID-19 further complex the situation of delivering adequate and dignified treatment. Therefore, the main goal is for complete avoidance of infection in this specific population and should be considered with high index of suspicion when mild symptoms of COVID-19 are present. This vulnerable group of patients deserves more attention when presented with extraordinary situations such as pandemics or earthquakes. This overview summarizes the symptom and pathophysiology of SCI in COVID-19 pandemic.

**Keywords:** spine, injury, pandemic era, strategy.
Renal trauma

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Renal trauma is the most common trauma in the urinary tract. It occurs in 10-30% of cases in patients with an abdominal trauma. The main causes of renal trauma are traffic accidents, deceleration injuries, and penetrating wounds.¹

Renal trauma mostly occurs in males, accounting for 72-93% of cases and it is more common in the young adult with age range from 31 to 38 years old.²

Renal trauma due to blunt injury in the adult population primarily caused by motor vehicle accidents (63%), falls (43%), and sports injuries (11%), whereas blunt trauma in the pediatric population is mainly caused by falls (27%) and motor vehicle accidents (30%).¹ Renal trauma is the most frequent urinary tract trauma, but isolated severe renal trauma is rarely reported.

The most common classification used for renal injury is the American Association for the Surgery of Trauma (AAST) classification, which is divided into 5 grades. The management of renal trauma depends on the severity of the renal trauma. Adequate management can reduce mortality and morbidity due to renal trauma. Complications of renal trauma also need more attention, both those with rapid onset such as hemorrhagic shock and long onset complication of renal function after fibrosis tissue formation.

Keywords: Renal trauma, management, epidemiology.

Management of lower urinary tract symptoms in adult patients

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Urologic problems are the third most common complaint in patients 65 years of age or older. One of the most predominant urologic problems in elderly persons is lower urinary tract symptoms (LUTS). Several diseases can lead to LUTS include: benign prostate hyperplasia, prostate cancer, bladder stone, urethral stricture, infection, medication, and neurogenic bladder. Storage LUTS are characterized by an altered bladder sensation, increased daytime frequency, nocturia, urgency and urgency incontinence. Evaluation of the severity of storage LUTS, and the concomitance of these symptoms with voiding and postmicturition symptoms, is mandatory for improving the diagnosis and personalizing treatment. In generally, several drugs are available for the treatment of LUTS secondary to benign prostatic obstruction (BPO). Alpha-blockers (α-blockers), 5-α-reductase inhibitors and phosphodiesterase type 5 inhibitors (PDE5Is) are commonly used to manage storage LUTS occurring with voiding symptoms associated with BPO. In infection case, α-blockers also can be used in combination with antibiotics to reduce the symptoms. Advance evaluation including radiology examination and laboratory are important to make the diagnosis and definitive treatment (conservative or operation). First-line treatment for patients with storage LUTS should be lifestyle advice and behavioral modifications. α-blockers, 5-ARIs and PDE5Is allow some improvement in storage LUTS in men with concomitant voiding LUTS due to benign prostatic obstruction.

Keywords: LUTS in adult, BPO, α-blockers, 5-ARIs, PDE5Is.

Hirschsprung’s disease in COVID-19 era and when best time to refer

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Introduction: Hirschsprung’s disease (HD) is a malformation of the hindgut, characterized by congenital aganglionosis with variable proximal extension manifested by megacolon. Although most HD cases are diagnosed in the newborn period or during infancy, some milder cases are well tolerated and diagnosed after infancy.

Case Report: This study described several HD patients treated during pandemic era and review the available evidence regarding its management. All patients complained of abdominal distention, constipation and delayed meconium passage as a "common symptoms" of HD. The Rapid test and RT-PCR analysis of COVID-19 were done for all the patients as universal precautions during pandemic era. The diagnostic modality in these cases include barium-enema for assessing transitional zone and suction biopsy for evaluating aganglionic zone. The diagnosis of HD is based on a combination of clinical features, radiological findings, and histopathological evaluation of the biopsied sample.

The histopathologic examination of the rectal biopsy confirms the diagnosis of the disease by highlighting the association of absence of GC in submucosal and myenteric plexus with hypertrophy of nerve fibers in the aganglionic segment. The confirmed case of HD underwent Trans Anal Endorectal Pull-Through Procedure either Soave or Swenson technique. The incision mostly started in 0.7 cm of dentate line until the ganglionic segment of colon. The post-operative showed good results with no Hirschsprung Associated Enterocolitis (HAEC) found as complication.

Conclusion: The standard management of HD during pandemic era must not lowered due to the risk of COVID-19 infection with enhancing precautions and safety for both patients and medical staff regarding COVID-19 infection. Early surgical management of this case can significantly improve quality of life for both patients and family.

Keywords: hirschsprung’s disease, management, COVID-19 pandemic.

Epidural hematoma: when to refer

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Epidural Hematoma (EDH) is a traumatic accumulation of blood between the inner table of the skull and the stripped of dural membrane, occurs in 1-2% of patients who present with traumatic cases and about 10% of patients who present with traumatic coma. EDH results from traumatic head injury, usually with an associated skull fracture and arterial laceration. The outcome from surgical hematoma evacuation is related directly to patients preoperative neurologic condition. Mortality rates are essentially nil for patients not in coma preoperatively and approximately 10% for obtunded patients and 20% for patients in deep coma. If treated early, prognosis usually is excellent.
because the underlying brain injury generally is limited. In rural area, where commonly a CT Scan facility and a neurosurgeon are not available, a general practitioner or a general surgeon should have the ability to diagnose and to give an initial treatment in head injury cases. The ability to assess the level of consciousness (Glasgow Coma Scale), lucid interval symptoms, isochoric and an isochoric pupil, and neurologic motor defect are needed in order to assess and to treat the patients, to determine when the patients should be observed or when should be referred to a Neurosurgery centre, and even when Burholle Exploration surgery should be performed in Epidural Hematoma with signs of brain herniation by a general surgeon.

Keywords: epidural hematoma, head injury, refer, outcome.

Management of kidney stone

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Kidney stone affects 5-15% of the population worldwide. The areas most affected kidney stone are countries in the Middle East and North Africa as well as Thailand, Indonesia, and Myanmar. Initial evaluation of the patient with urolithiasis should include a complete medical history and physical examination. Stones that are primarily calcium oxalate or calcium phosphate typically start as renal calculi, become trapped in the kidney, before developing additional layers of stone material until they are too large to pass and become symptomatic. Typical symptoms of acute renal colic are intermittent colicky flank pain that may radiate to the lower abdomen or groin, often associated with nausea and vomiting. Lower urinary tract symptoms such as dysuria, urgency, and frequency may occur once a stone enters the ureter. Urgent intervention is most often needed in acute obstruction. Open surgery was the mainstay of treatment for urolithiasis, but it has now been supplanted by less invasive treatments. The management of patients with kidney stones varies greatly, each procedure depending on the size and symptoms.

Keywords: kidney stones, diagnostic, and management.

Overview of plastic reconstructive and aesthetic surgery

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Plastic surgery is a branch of surgery including reconstructive and aesthetic surgery. The word plastic is derived from the ancient Greek word plastikos, meaning to mold or to form. Plastic surgery scope includes congenital disabilities reconstruction, acquired defects reconstruction, bum injury, and aesthetic or cosmetic surgery. Birth defects include cleft lip and palate, facial cleft, birth without ears (anotia), birth without nose (arhinia), polydactyly, syndactyly, and others. Acquired defects include maxillofacial trauma, hand trauma including replantation, trauma resulting in degloving, and other acquired defects resulting in loss of one's original appearance. Aesthetic surgery, known as cosmetic surgery, aims to change normal appearance into supernormal appearance. These aspects need comprehensive approach, therefore the management can be undergone well and the final result will be satisfactory.

Keywords: plastic surgery, reconstructive, aesthetic, birth defect, acquired defect, burn injury.

Sports injury, prevention, and treatment during COVID-19 era

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Sport injuries are injuries that occur during sport, athletic activities, or exercising. Incidence and distribution of sport-related injuries vary based on sports affiliation, participation level, gender, and player position. Sports injuries are not because of single causative variable but because of a variety of factors that interact at the time of injury. They may be intrinsic (personal, host), extrinsic (environmental) and previous injury. It is important to establish sport-specific dynamic warm-ups, stretching, and exercises, that can help prevent injuries common to each individual sport. The most common types of sports injuries include: sprains, strains, knee injuries, archilles tendon rupture, fractures, dislocations, and rotator cuff injury. The coronavirus disease 2019 (COVID-19) pandemic forced the athletes and world’s population to alter daily routines, including exercise habits. There are many treatments for sport injuries since there are many ways for athletes to get injured. The RICE (rest, ice, compression, elevation) method is a common treatment regimen for sports injuries. Depending on the nature and the severity of injury, the treatment may include: painkillers, supportive devices, surgery, and physical therapy.

Keywords: sports injury prevention, sports injury treatment, sports injury during covid 19 era.

Current diagnosis and treatment of colorectal cancer

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Colorectal cancer (CRC) is the fourth most widely diagnosed cancer in the United States and the second leading cause of death from cancer. In the European Union, the incidence of rectal cancer is 125,000 per year. The incidence of CRC in patients <50 years of age has increased, despite the reported changes in the overall CRC incidence rate. Rectal tumors are defined as tumors with distal extension to 15 cm from the anal margin with diagnosis based on digital rectal examination (DRE) and endoscopy with biopsy for histopathological confirmation. Functional status and presence of metastases are evaluated through and physical examination including DRE, full blood count, liver and renal function tests, serum carcinoembryonic antigen (CEA), and computed tomography (CT) scan of thorax and abdomen. If the diagnosis of rectal cancer has been identified, the local and distant extent of the tumor should be assessed for further care. Imaging modalities such as abdominopelvic CT or MRI and transrectal endoscopic ultrasound (TRUS) are frequently used for the evaluation of metastasis with the TNM (Tumor, Node, and Metastasis) staging system for colorectal cancers provided by the American Joint Committee on...
Cancer (AJCC). Different forms of treatment modalities have been suggested. For cases of resectable rectal cancers, surgery is the primary therapy with the primary goal of complete removal of the tumor and related lymphatic tissues. For locally advanced cancers found in the middle or distal rectum, neoadjuvant therapy has been strongly suggested either with short-course radiotherapy (SCRT) or long-course chemotherapy (LC CRT). In the case of recurrent rectal cancer, the proper management has been a matter of debate where it depends on previous therapies and the local extent of the recurrent tumor. In such cases, surgery alone or with radiation therapy has been recommended. **Keywords:** colorectal cancer, rectal tumors, metastasis, surgery, neoadjuvant therapy.

### Small bowel obstruction due to Meckel's diverticulum band: a case report

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Meckel's Diverticulum is the most common congenital anomaly of the gastrointestinal system. It is the remnant of the persistent intestinal part of the vitello-intestinal or omphalo-enteric duct, it caused by the failure of vitelline duct to obliterate. Most of them are detected incidentally during a surgical procedure or autopsy. Hemorrhage and diverticulitis are the most common presenting features. Intestinal obstruction is the second common complication, which is due to trapping of bowel loops by mesodiverticular band, volvulus of the diverticulum, intussusception and Littre's Hernia. Small bowel obstruction due to Meckel's Diverticulum is a rare complication. Herein, we present a case of small bowel obstruction due to the mesodiverticular band of Meckel's Diverticulum. Meckel's Diverticulum was first reported by Fabricius Hildanus in 1598 and then described in detail by Johann Friedrich Meckel, in 1809. It is found in 2% of total population, 2 feet from the ileocaecal junction, and 2 inch in length and has 2 types of common ectopic tissue (gastric and pancreatic). Surgery is the mainstay of treatment. The diverticulum is excised in a Diamond shape form and small- intestine is sutured transversely. If the base of the diverticulum is wide or the intestine appears non-viable, resection and end to end ileo-ileal anastomosis may be required. **Keywords:** Meckel's diverticulum band, intestinal obstruction, management.

### Spleen injury: a case report

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Spleen injuries are among the most frequent trauma-related injuries. At present, they are classified according to the anatomy of the injury. The optimal treatment strategy, however, should keep into consideration the hemodynamic status, the anatomic derangement, and the associated injuries. The management of splenic trauma patients aims to restore the homeostasis and the normal physiopathology especially considering the modern tools for bleeding management. Thus, the management of splenic trauma should be ultimately multidisciplinary and based on the physiology of the patient, the anatomy of the injury, and the associated lesions. Male, 18 years old, came to Fauziah ER with chief complaint pain throughout the abdominal area. Pain was felt since 5 days ago before entering the hospital. This was complained by the patient after falling from the tree with a height of 5 meters. Pain is continuous and persistent. The patient also complains of difficulty breathing, pain when inhaling. Nausea and vomiting are not felt by the patient and no lesion at the left stomach. There is no history of decrease of consciousness. No defecation and flatulence. Previously the patient comes to traditional medicine. Performed intra operative found bleeding 1500 cc. Performed exploration from spleen, there was vertical lacerated with rupture hilus lienalis. Spleen rupture AAST grade V Performed ligation at the artery lienalis and performed total splenectomy Release splenocolic ligament, splenorenal ligament and splenophrenic ligament and bleeding controlled. Spleen injuries require early diagnosis and prompt treatment to avoid fatal consequences. Late diagnosis increases the risk of death. Exploratory laparotomy is the best treatment for spleen trauma. Splenectomy is a highly recommended procedure for grade V AAST spleen trauma. **Keywords:** spleen injury, management, splenectomy.

### Extra corporeal membrane oxygenator experience of Surabaya: team base decision making and timing

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Extra Corporeal Membrane Oxygenator (ECMO) has been widely used to treat cases ranging from heart failure to respiratory failure. This device helps physician to oxygenate blood ex-vivo and delivers the blood into the patient's body. Cardiothoracic surgeons use this device mostly in cardiac surgery cases especially in those which are failed to wean from Cardio-Pulmonary Bypass. The utilization of ECMO is emerging in the era of the COVID-19 pandemic. We know that this disease has been burdening our medical facility since early 2020 and in so many places, the fatality rate is high due to respiratory failure which is often very difficult to treat. ECMO brings new hope in managing COVID patients who develop refractory respiratory failure. However, determining the right indication still a challenging aspect besides other concerns. In Surabaya, a team, consist of Cardiothoracic surgeons, intensivists, perfusionists, scrub nurses, and ICU nurses, determines whether a patient is suitable candidate for ECMO. Slight changes during the running of ECMO could determine the course of treatment of COVID patient, therefore the team carefully watch over the patient during this time, treat the abnormalities accordingly, until the patient is successfully weaned from ECMO. The right timing and indication are the key of success in the setting of ECMO in COVID patients. **Keyword:** ECMO, COVID-19, experience.

### Children small bowel injury: case report

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**Introduction:** Small bowel injury can result from either blunt or penetrating trauma. A small bowel perforation due to blunt abdominal trauma (BAT) is relatively uncommon. Approximately three percent of blunt abdominal trauma results in intestinal injury, with the small bowel being the most common location. Blunt intestinal injury is usually caused by the intestine being...
crushed between external objects (e.g., car door, handlebars, etc.) and internal structures (e.g., vertebrae, pelvis, etc.). When the intestine is injured, the child may develop stomach pain and a tight, distended belly. If the material inside the intestine leaks out into the abdomen, it can cause a serious and possibly life-threatening infection. X-rays, a computed tomography (CT) scan (more detailed x-ray), blood tests, or even a diagnostic laparoscopy surgical procedure can be done to diagnose an intestinal injury.

Case: Boy, 10 years old, came to H Sahuddin District Hospital ER with chief complaint pain of the whole abdomen for 2 hours. This happens after patient falls down from bridge and his abdominal area hit a big rock. Patient consciousness, with elevated heart rate 120 x/min dan have fever with temperature 38°C. There was hemotoma at the left side of abdomen, tenderness of the whole abdomen, loose of rectal exam. There was elevated of leukocyte 17.500 and free air at the top of left lateral decubitus abdomen x-ray. Performed the resuscitation with kristaloid, get NGT, and chaterer. Immediately, laparotomy exploration is performed. There was intestinal juice at cavum abdomen about 100cc. There was laceration of jejunum greater than 50% circumferential full-thickness laceration but without complete transection (AAST grade 3), about 50 cm from treitz ligament. Performed refreshing edge wound, primary sutured site to site with absorbing 3-0, performed 2 drain and fasted to patient for 1 day. Patient get clear water until porridge. Patient discharged from the hospital on post-operation day 5.

Conclusion: Small bowel perforation should early diagnosis and treatment, especially in children. Patient prepares until surgery performed fast and precise. Early feeding must performed after surgery when there was intestinal movement.

Keywords: children, small bowel injury, management.

Case report: intrauterine device malposition into the bladder and abdominal

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Intrauterine device (IUD) is accepted and used as effective contraception globally. Malposition of intrauterine device into the bladder and abdominal formation was very rare complication. In this study, we report a case in which IUD malposition had caused bladder stone formation to omental in a female patient. Case 1, Female, 37 years old, came to Fauziah ER with chief complaint pain at the lower abdomen and complained was painful. Pain was felt since 2 years ago before entering the hospital. Patient also had history of IUD insertion for eight years. After one years incursion IUD the patient was pregnant their third children. Case 2, Female, 35 years old came to Fauziah ER with chief complaint pain at the lower abdomen since one week. The patient was history incerssion of IUD three months ago. In the both of cases performed to Ultrasound and CT Scan Abdominal. In the first case acquired IUD in the bladder with encrustation and calcification in the device. The second case acquired IUD in the omentum. For the both of cases, we performed by laparotomy exploration to release the IUD. The postoperative evaluation we found no complications and send home the patient 5 days after the procedure. IUD malposition can be found to bladder and abdominal. Pain at the abdominal and pain on voiding needs radiological investigation to provide for any abnormality in urinary tract and abdominal. An intrauterine device can be released with laparotomy exploration.

Keywords: intrauterine device, malposition, laparotomy.

The next pandemic: will we learn from our past?

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The world is slowly coming to terms, that we will have to live in a new normal !. After the SARS 2003 epidemic, we were warned by many that we should be prepared to handle another epidemic from another emerging disease. Experts warned us and many discussions, conferences were held to see how we could prevent the occurrence of another epidemic or minimise its impact to our communities. Nevertheless many epidemics have occurred since… H1N1, Swine Flu, MERS, Ebola, Zika… etc. During this pastyear, all countries in the world have encountered this coronavirus which emerged and spread rapidly. COVID—19 infects people when people come together. Slowly, we are learning that it is together that we will beat it. 2020 saw the world trying to unite against this virus !. Today over a year after COVID—19 arrived we can reflect on the measures taken to help contain and control the pandemic in this region. The speaker will review what happened in 2003 and if any lessons were learnt in Hong Kong… did it help the community here to reduce the impact during this pandemic? This presentation will attempt to assess the situation in this area with comparison to the impact levels in the other parts of the world ? Did we learn any lessons and utilise the benefits of past experience… did other communities fare better or worse because they lack such experiences ?. Experienceisagreatteacherbutcomeswith an exceptionally expensive price-tag. Good judgment comes from experience, and experience comes from bad judgment…

“Failure is not a crime but failure to learn from failure is. (Walter Wriston)”

Keywords: respiratory distress, learn, experiences.

Cholangitis update: diagnosis, treatment, prognosis

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Cholangitis is a complex end-stage hepatobiliary disease with a serious life-threatening situation affecting the hepatobiliary system. With heterogeneous etiology and pathogenesis, Cholangitis may be triggered by both genetic and acquired factors. Cholangitis cases can be classified into three main groups in a wide classification scheme, namely primary sclerosing cholangitis (PSC), secondary cholangitis, and immune cholangitis. The classical presentation of cholangitis, The Charcot’s triad shows very high specificity but it has low sensitivity. The TG18 which currently recommended diagnostic criteria for acute cholangitis is consists of three main parts, that is signs of systemic inflammation, signs of cholestasis, and imaging. Total blood count, erythrocytes, and laboratory tests should include sedimentation levels or CRP, metabolic profile full prothrombin time, including renal and liver function, and INR. Culture of the blood should be performed as early as its possible. Imaging studies may
include abdominal ultrasound, normal or helical computed tomography (CT), cholangiopancreatography with magnetic resonance (MRCP), and endoscopic ultrasound (EUS). Patients with cholangitis are considered as an emergent condition and must be treated at the hospital. Intravenous fluid resuscitation fresh frozen plasma, vitamin K, antibiotics are required in such cases. Biliary drainage must be done and can be best done by therapeutic endoscopic retrograde cholangiopancreatography (ERCP). Surgical drainage is limited while other types of drainage are used. Surgical drainage is reserved only when other modalities of biliary drainage are contraindicated or fail. It is rarely performed due to high morbidity and mortality of 20% to 60%. To prevent prolonged surgery, cholecodochotomy with T-tube drainage is recommended. The prognosis depends on the timing of biliary drainage, antibiotic administration, and patient comorbidity.

**Keywords:** cholangitis, charcot’s triad, TG18 criteria, endoscopic retrograde cholangiopancreatography, surgical drainage.

Management of COVID-19 patient with ECMO in intensive care unit from basic to advance

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Hypoxic respiratory failure due to COVID-19 is a devastating disease, so far infecting more than 100 million worldwide. In its most severe form, it results in acute respiratory distress syndrome (ARDS). Where mechanical ventilation may not be enough, extracorporeal membrane oxygenation (ECMO) can temporarily replace the gas exchange function of the lungs and allows lower ventilator settings, providing adequate systemic oxygenation and allowing the lungs to rest. The World Heath Organization (WHO) currently recommends centers with ECMO expertise to consider ECMO support in COVID-19 related ARDS refractory to lung protective mechanical ventilation strategies. Results from the latest Extracorporeal Life Support Organization (ELSO) registry suggests mortality rates of COVID-19 patients treated with ECMO are comparable to ARDS of other etiologies. It is likely that ECMO will continue to play a significant role in our battle with the ongoing pandemic. In this session, we will go through the basics of ECMO and the key aspects of ECMO management in the ICU.

**Keywords:** respiratory failure, management, ECMO.

Prognostic scoring of critical limb ischemia patient’s amputation

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Critical Limb ischemia (CLI) is the most severe form of peripheral arterial disease (PAD) or chronic peripheral artery disease of the lower extremities with ischemic pain at rest or tissue damage (gangrene or ulcers that do not heal). Symptoms of CLI last for more than 2 weeks and are associated with ankle pressure less than 50 mmHg or toe pressure less than 30 mmHg or ankle-brachial index (ABI) less than 0.40. Approximately <5% of patients with intermittent claudication develop CLI. The risk of amputation in CLI patients can now be assessed using various scoring systems established by various vascular committees around the world. Among them are the Wound, Ischemia, and foot Infection (WIFI) scoring method, Finland National Vascular (FINNVASC), Bypass versus Angioplasty in Severe Ischemia of the Leg (BASIL), Valladolid Critical Limb Ischemia Risk Scale (ERICVA), and Perfusion, Extent, Depth, Infection, and Sensation (PEDIS) score. Most of these scores have not been applied to patients at Dr. Zainoel Abidin General Hospital in predicting the risk of amputation in patients with CLI. Therefore, we felt the need to make a literature review regarding the scoring system as a predictor of the risk of limb amputation in patients with critical limb ischemia.

**Keywords:** prognostic scoring, critical limb ischemia, amputation.

The new algorithm in pediatric surgery according to COVID-19 era

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The COVID-19 global pandemic is the most extensive to afflict humanity in a century. From the data of National Health Commission of China, as of 24:00 of Feb 19, 2021, a cumulative total of 89824 confirmed cases had been reported on the Chinese mainland, 84734 infected had been cured and discharged from hospital, and 4636 people had died. This demonstrates a cure rate of 94.3% and a mortality rate of 5.2 %. Pediatric patients accounted for 2.4%, with 96% mild cases and 4% severe. At the early stage of the pandemic, we established a multi-centered collaboration research team besides the routine anti epidemic work to help the Public health planning. Totally, 244 consecutive COVID-19 positive children were accumulated. Hematological and immunological data of these children was collected. A comparative study of the clinical characteristics and epidemiological trend of COVID-19 infected children with or without GI symptoms was established. Additionally, we also investigated the clinical and laboratory features in two representative Chinese pediatric cohorts with SARS and COVID-19. Followed the standardized algorithm suggested by experts of joint prevention and control mechanism of the State Council, we have achieved zero in hospital infection in our department.

**Keyword:** covid-19, pandemic, Chinese pediatric, algorithm
**ABSTRACT**

**Folate acid analysis in predicting complicated appendicitis in animal model Oryctolagus cuniculus**

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**Introduction:** Appendicitis usually presents as an acute disease presentation within 24 hours. Folic acid plays a role in the synthesis of DNA nucleotides, methionine amino acids, and homocysteine (Hcy) level regulation, also regulates DNA stability through DNA methylilation, synthesis, and repair mechanisms. This study investigated whether reduction of folic acid level affected the risk of inflammation.

**Methods:** This study was designed as an experimental analytic study that involved twenty male rabbits weighing for 2,500-3000 g. The appendix lumen was then obstructed with silk no.0 at 18, 24, 36, and 48-hours. Blood samples were taken for serological examination of folic acid using ELISA method. Appendectomy was performed for histopathological examination.

**Conclusion:** There were significant differences in folic acid levels between 18-hours and 24-hours group, 24-hours and 36-hours group, 24-hours and 48-hours after the intervention done. Decreased levels of folic acid could be a predictive factor for complicated appendicitis in experimental animals.

**Keywords:** folic acid, predictive factor, complicated appendicitis.

**Biorespon analysis of sea bidara leaves (Ziziphus mauritiana) ethanol extract to hydrophobicity and phospholipase of streptococcus pyogenes cell surface in isolate tonsillitis**

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**Introduction:** Tonsillitis is an inflammation of palatine tonsil that is often found in otorhinolaryngology and is one of world’s socio-economic health problems. Streptococcus pyogenes is the most common bacterial cause of tonsillitis which has hydrophobicity and phospholipase activity on cell surface that has major effect on pathogenicity of tonsillitis. Ethanol extract of the leaves of sea bidara (Ziziphus mauritiana) has an antibacterial effect containing neophytiadiene, hexadecanolic acid, linolenic acid, octadecanoic acid, squalen, and vitamin E. To determine the ability of ethanol extract of sea bidara (Ziziphus mauritiana) leaves in inhibiting the hydrophobicity and phospholipase activity of the Streptococcus pyogenes cell surface of tonsillitis isolate.

**Methods:** Laboratory experimental design with post-test only control group.

**Result:** Ethanol extract of Ziziphus mauritiana leaves could inhibit the surface hydrophobicity activity of Streptococcus pyogenes cell with different quantity and quality at each concentration and incubation time. Analysis of independent sample T test (p>0.05; 0.965) and (p>0.05; 0.683) proved that there was no significant difference in incubation time inhibiting hydrophobicity and phospholipase activity of Streptococcus pyogenes cell surface. Kruskal-Wallis analysis (p>0.05; 0.689) and (p>0.05; 0.162) proved that there was no significant difference in inhibiting the hydrophobicity and phospholipase activity of Streptococcus pyogenes cell surface.

**Conclusion:** Ethanol extract of Ziziphus mauritiana leaves can inhibit the hydrophobicity and phospholipase activity of Streptococcus pyogenes cell surface in isolate tonsillitis.

**Keywords:** tonsillitis, streptococcus pyogenes, hydrophobicity, phospholipase, ziziphus mauritiana.

**The Effectiveness of perineural injection therapy for chronic low back pain**

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**Introduction:** Chronic low back pain can decrease quality of life and reduce work productivity, so it has impact in social and economic. Perineural injection therapy is a regenerative injection therapy that downregulates transient receptor potential vanilloid 1 (TRPV1) through an modulaation effect reducing substance P (SP) and calctitonin gene-related peptide (CGRP) levels and hence decreasing neurogenic inflammation. The study assessed the effectiveness of perineural injection therapy on the functional outcome in chronic low back pain patients at the neurological clinic of dr. Zainoel Abidin General Hospital, Banda Aceh.

**Methods:** A one-group pretest-posttest design was used. Altogether, 20 patients with chronic low back pain were selected using non-probability sampling. The functional outcomes before, and after perineural injection therapy was measured using the Numeric Rating Scale (NRS) and Oswestry Disability Index (ODI) questionnaire.

**Results:** There was a statistically significant relationship between before and after perineural injection therapy on the functional outcome of patients with chronic low back pain (p<0.001). The mean of NRS before and after perineural injection therapy was significantly different (p<0.001). The mean ODI score was significantly lower after perineural injection therapy than that before (p<0.001).

**Conclusion:** Perineural injection therapy is effective in reducing pain intensity and improving functional outcomes in chronic low back pain patients.

**Keywords:** chronic low back pain, numeric rating scale, oswestry disability index.
ABSTRACT

Nasal rinse and gargling as an effort in preventing COVID-19 infection with islamic approach

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Introduction: The COVID-19 pandemic requires the public to comply with health protocols and adopt new habits as this disease can spread through droplets and enter the respiratory tract through the nose and mouth. Breathing water into the nasal cavity (istinsyaq) and then letting it out (istintsar) during ablation has the same concept as the nasal rinse and gargling methods, which can prevent mechanical and chemical attachment of the virus. This paper aims to review the effect of gargling and nasal rinse on the prevention of COVID-19 infection.

Methods: This literature review is carried out by using a descriptive method, utilizing search engines of various pieces of literature on nasal rinse (istinsyaq) and gargling (istintsar).

Results: Gargling and nasal rinse may mechanically and chemically clear the surface of the oral and nasal mucosa from various particles and microorganisms. The mechanical mechanism causes the detachment and evacuation of foreign particles through the water stream. Chemically, the types of liquids used have different effects; plain water, saline, povidone-iodine, and antiseptic or antiviral solutions. The effects found include improved nasal clearance, reduced mucosal edema, and eradication of pathogens.

Conclusion: Gargling and nasal rinse are proven to have an important role in preventing COVID-19 infection, especially if they are practiced routinely. Both of these methods are always practiced in ablation before prayer, an obligatory act of worship for Muslims.

Keywords: covid-19, nasal rinse, gargling, Islamic.

Application of bovine dry amniotic membrane as a protection of penetrated gastric injury suture on collagen type 1 and 3 formations (study on the new zealand rabbits)

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Introduction: Abdominal trauma is a common problem in an emergency room. Penetrating abdominal trauma has a lower incidence but with a higher morbidity and mortality rate than blunt trauma. The gastric is one of the most frequent predilection, with the higher risk of leakage after primary repair. Various attempts have been studied to reduce the leakage, but the results is still unsatisfying. However, nowadays, the use of materials that can be applied to reduce the leakage and help accelerate healing is of particular concern. A Dry Amniotic Membrane is a material known to help stimulate the healing process and has comparable effectiveness with human amniotic membranes in wound healing.

Methods: This was experimental laboratory research to evaluate the increased amount of collagen type 1 and 3 in protecting penetrating gastric sutures using cow dry amniotic membrane in New Zealand white rabbits.

Results: Forty-two experimental rabbits were divided into two groups: the control group without a dry amniotic membrane and the treatment group using a dry amniotic membrane. Collagen density was evaluated on day 7. In type 1 collagen, the treatment group (12/21 samples) significantly (p-value = 0.011) increase score of 3 in collagen density than control group (11/21 samples). But, in type 3 collagen, there was no significant difference score of collagen density between treatment group and control group (p-value =0.072).

Conclusion: Group using dry amniotic membrane significantly increase type 1 collagen density scores than group with none, while there was no significant difference in collagen type 3 density scores in the two groups.

Keywords: gastric wound, collagen, dry amniotic membrane.

Telemedicine strategy in diabetic foot treatment: a literature review

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Introduction: Diabetes mellitus (DM) is a disease characterized by high blood glucose levels because the body cannot release or use insulin adequately. DM can cause various complications, one of which is diabetic foot. Limitations in access to health and the availability of inadequate services have resulted in less diabetic foot care and increased amputation rates. This requires a solution to overcome this problem, one of which is telemedicine. Telemedicine can be used as a strategy in overcoming diabetic foot problems.

Method: The research method used is literature study by collecting various sources from books and certain journals about telemedicine to deal with diabetic foot. The analysis technique used is descriptive analysis of content analysis which is intended to detail a particular message or text. Telemedicine is a health facility that allows a person to consult virtually with medical personnel. Medical conditions that cause diabetic foot patients to experience limitations in movement and visiting health facilities make them need telemedicine which they can access anytime and anywhere. Telemedicine is the right strategy, considering that it is currently in the COVID-19 pandemic.

Result: In this article, it is noted that telemedicine is the right strategy in overcoming diabetic foot problems. This is because patients can consult virtually anywhere and anytime without being limited by distance and time.

Conclusion: Diabetic foot is a complication of DM. Limited access to health and the COVID-19 pandemic is increasingly limiting the movement of diabetic foot patients. Telemedicine can be used as a strategy and solution in overcoming diabetic foot problems.

Keywords: diabetes mellitus, foot diabetic, telemedicine, amputation.
The effect of *Chromolaena odorata* jelly extract on inflammatory cells in phase I and phase II wound healing in white rats (*Rattus norvegicus*)

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**Introduction:** Various attempts have been investigated in a number of ways to accelerate the wound healing. *Chromolaena odorata* is one of the plants that contains tannin, phenol, flavonoid, saponin and steroid that can accelerate the wound healing. The aims of this study were to determine the effect of jelly extract of *Chromolaena odorata* in phase 1 and phase 2 of wound healing in white rats (*Rattus norvegicus*) based on the microscopic feature.

**Methods:** A total of 64 male white rats, adult and healthy, 3-4 months old, which has undergone a 2x2 cm open wounds on the back were divided into 4 groups; group P0 with no *Chromolaena odorata* extract jelly intervention; group P1, P2 and P3 with 10%, 30%, and 50% of *Chromolaena odorata* extract jelly intervention, respectively. The *Chromolaena odorata* extract jelly was administered every day topically on the wound surface. Wound healing rates was assessed, skin biopsy specimens were collected and evaluated histopathologically on days 0, 3, 7 and 14 post treatment. The histologic assessment of wound healing was based on the rate of inflammatory cells using Nagaoka criteria.

**Result:** Data were analyzed by analysis of variance (ANOVA) and followed by Duncan’s test to determine differences among the treatment groups. The rate of inflammatory cells in the 10%, 30%, and 50% of *Chromolaena odorata* extract jelly group were significantly different compared to the control (p<0.05).

**Conclusion:** The administration of *Chromolaena odorata* extract jelly can accelerate the phase I and phase II of wound healing by microscopically.

**Keywords:** *Chromolaena odorata*, wound healing, inflammation, white rat.

Does patellar denervation reduce anterior knee pain in knee arthroplasty? a systematic review and meta-analysis

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**Introduction:** Knee arthroplasty is considered to be the best option for osteoarthritis that does not respond to conservative treatment and has shown remarkable results. However, anterior knee pain has been a frequent complaint after surgery. The aim of this systematic review is to evaluate the outcome of patellar denervation in reducing anterior knee pain (AKP) in knee arthroplasty.

**Methods:** A comprehensive search was conducted in Pubmed, Cochrane Library, and Google Scholar in December 2020. Eligible randomized controlled trials (RCTs) and prospective observational studies comparing clinical outcomes of patellar denervation (PD) and non-patellar denervation were included. Measured outcomes were incidence of AKP, visual analog score (VAS), patellar score (PS), Knee Society Score (KSS), Knee Society Functional Score (KSF), and range of motion (ROM). Analyses were carried out according to follow-up period (3-, 6-, 12-, >12-months).

**Results:** A total of 22 studies (15 RCTs) involving 2,504 knees were included in this meta-analysis. Incidence of AKP was significantly lower in PD group at 3-month (p = 0.001 (95% CI: 0.07-0.53)), 12-month (p = 0.01 (95% CI: 0.35-0.88)), and >12-month (p = 0.0002 (95% CI: 0.3-0.69)) follow-up. Visual analog scale did not significantly different between both groups. Patellar score, KSS, and ROM were significantly favorable in PD group only at >12-month follow-up. Knee Society Functional Score was significantly increased in PD group during 3 months after surgery but did not showed significant difference afterward.

**Conclusion:** Patellar denervation could provide benefit in knee arthroplasty by reducing incidence of AKP, as well as improving long term outcomes after surgery.

**Keywords:** anterior knee pain, electrocautery, patellar denervation, knee arthroplasty.

Correlation between the closest pin distance of the fracture line to the stability of the external fixation: a biomechanical study on bovine tibia

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**Introduction:** External fixation is a surgical procedure that is often performed for the management of trauma patients with fractures, especially in patients with severe soft tissue damage. The use of external fixation with a uniplanar frame has the disadvantage of stability to axial compression forces. Ideally, to gain stability in the 6 pin construction, try to locate the first pin as close to the fracture as possible. The stability of external fixation can be tested on the bovine tibia because it has a density and compression resistance of axial forces that are approximately the same as the human tibia. To determine the effect of the closest pin distance from the fracture line on the stability of the external fixation which is applied axial compression force.

**Methods:** This study was an experimental study with a post-test only controlled group design, using bovine tibia. This research was conducted in the Orthopedic and Traumatology Department of dr. Moewardi Hospital and Engineering Laboratory of Sebelas Maret University from June to September 2020. External fixation stability measured using a Universal Testing Machine. There were three treatment groups with different closest pin spacing (2 cm, 3 cm, 4 cm).

**Results:** This study used 30 bovine tibial bones (10 bones for each treatment group). The closest 2 cm pin distance group has the largest mean value of compressive strength 7036.56 ± 453.37 Newton. Linear regression analysis shows the value of p = 0.000 with a regression coefficient of -912.55. The significant correlation proves the near-far law theory, where the pins are placed as close as possible from the fracture line could give the greater amount of external fixation stability.
Conclusion: There is a significant correlation between the closest pin distance and the compressive strength of the external fixation.

Keywords: axial compression, closest pin distance, bovine tibia, external fixation stability.

The relevance of baxter-parkland formula in more than 8 hours delayed burn fluid resuscitation

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Introductions: Burn injury is a trauma with a high morbidity and mortality, especially in a developing country. One of the causes is delayed in the first aid and fluid resuscitation, particularly in this Covid-19 pandemic. Baxter-Parkland formula is the most often applied fluid resuscitation in burn injury. This fluid resuscitation is best given in the first 8 hours. Therefore, it is important to understand the relevance of Baxter-Parkland formula application in more than 8 hours delayed burn fluid resuscitation.

Method: This is a systematic review and meta-analysis study with 20 literatures that met the inclusion criteria and tested using the Newcastle Ottawa Scale. The result was analyzed by random-effect meta-analysis or fixed-effect meta-analysis to test the hypothesis.

Result: The application of the Baxter-Parkland Formula in delayed burn injury can increase the mean of urine output about of 2.97 ml/kg/hour, the mean arterial pressure by an estimate of 100 mmHg, and the survival rate up to 79%.

Conclusion: The Baxter-Parkland Formula is relevant for more than 8 hours delayed burn fluid resuscitation.

Keywords: baxter-parkland formula, burn, delayed resuscitation.

Expression of IL-1α and IL-6 in traumatic brain injury model using wistar albino (Rattus norvegicus) approved with hypertonic lactat natrium 3%

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Introduction: Traumatic brain injury (TBI) has long been referred to as a “silent epidemic” which means it is an event that often occurs but has never been reported so it is not recorded by statistics. The increased inflammatory response that occurs in the brain with head trauma stimulated by free radicals is a complex process. Lactate is a physiological metabolite and acts as an energy substrate. Hypertonic sodium lactate is a hypertonic solution containing sodium lactate, potassium chloride, and calcium chloride in physiological concentrations. Knowing the differences in IL-1α and IL-6 expression between Wistar strain albino rats (Rattus norvegicus) and TBI treated with 3% Hypertonic Sodium Lactate and those not given 3% Hypertonic Sodium Lactate

Methods: Nine rats were divided into three groups and received traumatic brain injury with a load of 450 grams. The first group received physiological sodium (0.9% NaCl), the second group received hypertonic sodium (3% NaCl) therapy and the third group received 3% hypertonic sodium lactate therapy. The rats were decapitated after 24 hours. The brain tissue of the rats around the lesion was taken for histopathological examination of the brain tissue that had edema. Differences were analyzed by normality test for variables with the Shapiro-Wilk test. One-way ANOVA for groups with normal distribution and Kruskal-Wallis test for groups with abnormal distribution

Result: The quantitative analysis showed that the group treated with hypertonic sodium lactate had the lowest level of immunoreactivity compared to those treated with hypertonic sodium and physiological sodium against IL-1α and IL-6. The mean value of the group giving sodium lactate was smaller than the hypertonic sodium and physiological sodium groups which were statistically significant (p<0.05). Hypertonic sodium lactate was able to reduce IL-6 expression compared to hypertonic sodium and physiological sodium, but it was not statistically significant (p=0.390).

Conclusion: Giving Hypertonic Sodium Lactate can reduce IL-1α expression in rat brain 24 hours post-TBI and statistically significant and hypertonic sodium lactate can decrease IL-6 expression in rat brain 24 hours post-TBI but it is not statistically significant.

Keywords: traumatic brain injury, IL-1α expression, IL-6 expression, physiological sodium, 3% hypertonic sodium, 3% hypertonic sodium lactate

Role of ACE inhibitors on changes in troponin levels in breast cancer with anthracycline chemotherapy

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Introduction: Breast cancer is the most common cancer among women throughout the world. Anthracycline is widely used to treat breast cancer. Although it is very effective, its use is still limited by the side effects of heart problems. Angiotensin-converting enzyme (ACE) inhibitors (ACEi) have been reported to slow down the process of LV dysfunction in several clinical conditions. This study assesses the role of ACE in changes in troponin levels in breast carcinoma with anthracycline chemotherapy.

Methods: This research is a clinical trial Quasi-experimental design which is a type of research design that has a control group and the treatment group is not randomly determined. The treatment group received anthracycline chemotherapy plus ACEi. ACEi interventions were given before chemotherapy
until to third chemotherapy. Before and after treatment measured troponin levels in the blood. Sample size with the calculation of the sample size formula obtained 15 people each group.

**Results:** The administration of ACEi could prevent an increase in troponin levels by an average of 0.1133 ng/dl from 0.120 ± 0.077 ng/dl to 0.233 ± 0.219 ng/dl, with a p-value = 0.014. Delta Troponin’s in mann-whitney test value has a p-value of 0.021, so it can be concluded that there is a significant difference between Control and Treatment of Delta Troponin. Where the value of control is lower than the treatment.

**Conclusion:** The treatment group that received the ACEi intervention could prevent an increase in troponin levels after chemotherapy. Overall, it can be concluded that the consumption ACEi can inhibit the rise in Troponin.

**Keywords:** early breast cancer locally advanced breast cancer, anthracycline chemotherapy, ACE-I, troponin.

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### Toxicity evaluation of ethanolic extract of local binahong leaves on white rats

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**Introduction:** Binahong (*Anredera cordifolia*) has been used for various benefits including reducing uric acid levels, healing wounds and combating pathogen microorganisms. This study aims to determine the safety of ethanolic extract of local binahong leaf (EEBL) in white rats thus providing evidence for drug development and assuring the safety of herbal use in society.

**Methods:** The research is an experimental study with a post-test-only method with control group design. A total of 25 white male rats (*Rattus norvegicus*) Wistar strain were divided into 1 control group and 4 treatment groups. The treatment group was given single dose of EEBL suspension at different doses: 300 mg/kg, 600 mg/kg, 1200 mg/kg and 2400 mg/kg body weight. Death numbers were recorded to identify lethal dose (LD₅₀) using the Weil C.S method. Symptoms of toxicity, the macroscopic changes in the liver, liver weight and body weight of experimental animals were observed and analyzed.

**Result:** The results showed that death did not occur at all test doses, no LD₅₀ was identified. Some of the symptoms of toxicity that were documented included changes in locomotor activity, somatic response, sensitivity to pain, and bowel movements as well as changes in liver color, increased liver weight, and weight loss in experimental animals.

**Conclusion:** It can be concluded that in this dosage range the use of binahong did not cause death even minor toxic effects were observed.

**Keywords:** binahong, LD₅₀, toxicity symptoms, extract.
Epidemiology of cleft lip and palate to live birth rate at Malahayati Hospital from 2019 until 2020: a cohort retrospective study

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Introduction: Cleft lip and palate (CLP) is one of the most prevalent orofacial malformations occurring in the head and neck region. A study found that orofacial clefts occur in approximately 1 in 500 to 2500 live births. It is considered a debilitating condition associated with significant feeding, hearing, speech, and psychological impairments. Conclusion: In conclusion, the higher birth rate was associated with a higher prevalence of cleft lip and palate. Based on data analysis, the different gender does not affect the prevalence of cleft lip and palate.

Successful salpingectomy of the ruptured fallopian tube in heterotopic pregnancy that continuous until full term: case report

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Introduction: Heterotopic pregnancy is simultaneous pregnancy that happens in two different implantation sites. The incidence rate of heterotopic pregnancy depends on the incidence rate of ectopic pregnancy. This is a rare case and only happen 1 in 30,000 pregnancy. The introduction of Assisted Reproductive Technology (ART), intrauterine insemination, and In Vitro Fertilization is increasing the incidence rate of heterotopic pregnancy to 1 in 3900 pregnant.  

The similarity of desmoid tumor with uterine leiomyoma: a case report

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Introduction: Desmoid tumors are rare cases that arise from aponeurotic tissue. Uterine leiomyoma is the most benign pelvic tumor in reproductive age is a differential diagnostic that has similarities. The similarity between both diseases in clinical manifestation, radiographic, and histological appearance need further investigation by performing another diagnostic tool. Misdiagnosis might occur and would make their management have become not optimal. Recurrence in desmoid tumors needs more attention to differentiate these two diseases.

Conclusion: Based on tissue examination results, the desmoid fibromatosis tumor was obtained from histological findings. Preoperative management by performing another diagnostic tool. Misdiagnosis might occur and would make their management have become not optimal.
Ovarian cancer with metastatic deposit in the cervix as rare case: case report and review of literature

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Introduction: Although incidence ovarian cancer lower than cervical and uterine cancer, ovarian cancer has the highest mortality rate of all gynecological malignancies, thus ovarian cancer is a serious threat to women’s health. Usually, patients with ovarian cancer have advanced disease in the pelvis, with expansion associated with the uterus, fallopian tubes, ovaries and sigmoid colon. Ovarian cancer cell metastasis mechanism through passive spread and different hematogenous routes. Malignant disease in obstetrics and gynecology, supporting examinations and management

Case description: A woman, 52 years old, presented with abdominal pain since 1 month before being admitted to the hospital. She complained about difficulty urinating, patient also complained about not having a smooth bowel movement. According to the ultrasound examination, it appeared that an intra-abdominal mass measuring 14 x 11 x 11 cm and the origin of the mass remains unclear, from the results of a contrast pelvic CT scan, it appeared that a solid mass has spread to the uterine cervix, vagina and reaching the uterine body, infiltrated to the bladder, attaches part of the rectum without intestinal obstruction, with a mass size of 7.8 x 7.2 x 16 cm, the procedure to this patient was total abdominal hysterectomy and bilateral salpingo-oophorectomy, the results of the pathology anatomy showed Serous Ovary Adenocarcinoma.

Conclusion: Ovarian cancer metastasis is a process that involves interactions between cancer cells that spread from the primary tumor into the peritoneal cavity or migrate through the bloodstream and the omentum. In this case we had metastasis of ovarian cancer with cervical adhesions, and a suspected mass in the sigmoid colon on intraoperative findings. With increasing knowledge about ovarian cancer, ovarian cancer pathogenesis and metastases, new approaches to the management of metastatic disease may be developed.

Keywords: serous ovary adenocarcinoma, diagnostic imaging, surgery, management.

Pregnancy success of patients with ovarian tumors: a case report report

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Introduction: Ovarian tumors during pregnancy are rare. Most ovarian tumors associated with pregnancy are diagnosed at an early stage, when disease is confined to the ovaries. Germ cell tumors are much more common than other types of malignancy. This case report will discuss the management of pregnancy with ovarian tumors.

Case Description: 30 years old women, was referred with complaints of contraction since 6 hours before admitted the hospital which was felt to be increasingly accompanied by blood mucus. She claimed to be more than 9 months pregnant. Last menstrual period: 02-08-2019, estimated delivery: 9-05-2020. Patients always control pregnancy to the obstetrician every month, and the last ultrasound found the fetus in good condition and latitude position. She was diagnosed with G1 38-39 weeks pregnant fetus latitude of the head right dorso superior intrapartum. Mothers with ovarian tumors problems. Management of ovarian tumors during pregnancy, including surgery, chemotherapy and radiation. Chemotherapy and radiation are generally avoided in early pregnancy because they are teratogenic. Surgery is the main treatment for ovarian cancer and depends on the development of the tumor itself, whereas chemotherapy can be postponed until after birth if possible. Termination of pregnancy can be done at a pregnancy that is termed. Tumor removal can also be done during cesarean delivery.

Conclusion: Ovarian tumor cases in pregnant patients are indeed rare cases, but the management of patients with ovarian tumors during pregnancy requires careful management. Delaying chemotherapy until delivery and terminating pregnancy at full term are wise choices.

Keywords: ovarian tumors, management, surgery, termination of pregnancy.

Diagnosis and management of acute fatty liver of pregnancy: a case report

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Introduction: Acute fatty liver of pregnancy (AFLP) is a serious condition and is a life-threatening complication of the mother. This case report discusses the diagnosis and treatment of a 22-year-old lady with Acute fatty liver of pregnancy.

Case Description: A Woman 22-year-old comes with regular contractions. Since 1 month ago, the patient experienced yellow, especially in the eye. The patient does not complain of pain in the upper right. History of leucorrhoea is denied, and yellow urinate. Her symptoms of nausea and vomiting more than 5 times a day. Laboratory tests found an elevate in liver function. This condition is caused by mitochondrial dysfunction. Patients diagnosed with AFLP generally have a gestational age of 28-40 weeks. Clinical symptoms vary from mild to severe and are associated with other third trimester symptoms, making it difficult to diagnose early.

Conclusion: Early diagnosis, rapid delivery, and intensive support services are the basis of AFLP management. Childbirth is the next step if the mother is stable.

Keywords: Acute fatty liver of pregnancy, elevated in liver function, neonatal outcome.

Unexpected leiomyosarcoma after total abdominal hysterectomy with indication uterine myoma in nullipara women: case report

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**ABSTRACT**

**Background:** Uterine sarcomas are rare tumors, with 3-7% incidence and occur in women aged 40-60 years. Abnormal uterine bleeding, abdominal or pelvic masses, and pain are the patient’s most common symptoms. Non-specific clinical symptoms or preoperative diagnostic techniques to differentiate uterine myoma and uterine sarcoma lead to the general diagnosis after surgery. A number of studies have shown that the incidence of diagnosed uterine sarcoma is 0.09% -0.49% in women undergoing benign hysterectomy or myomectomy.  

**Case description:** Miss A, 47 years old with complaints of an enlarged stomach since 2 years, felt abdominal pain and also complained about prolonged menstruation since 4 years. Defecate and urinate within normal limits. The patient is unmarried and has no previous history of surgery. The patient has high blood pressure and has been taking the drug amlodipine since 2015. 

**Results:** Magnetic resonance imaging, 3D doppler sonography and preoperative sarcoma score (Press) are required to increase the accuracy of uterine sarcoma diagnosis.  

**Conclusion:** Pelvic sonography is the first line of diagnostic imaging. Abnormal uterine bleeding is the main clinical manifestation. The rapidly increasing mass indicates a uterine sarcoma. MRI can be used to differentiate uterine sarcoma and uterine myoma. A degenerative uterine myoma found on MRI may be considered a uterine sarcoma. Preoperative sarcoma score (PRESS) needs to improve preoperative diagnosis of uterine sarcoma.  

**Keywords:** uterine sarcoma, preoperative sarcoma score, management.

**COVID-19 in pregnant woman with pre-existing HIV infection: a case report**

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**Introduction:** Human Immunodeficiency Virus and Covid-19 are pandemic diseases caused by viruses; both are a concern in pregnancy. Spreading of Covid-19 more than 100 countries and the mortality rate is 0.9-3%. The number of COVID-19 cases in Aceh until February 13, 2021 is 9399 cases while the total death has reached 380 cases. 

**Case description:** Mrs. 33 years old G3P2 term pregnancy came with contractions. She doesn’t have complaints of fever, cough, and breathlessness. The first patient’s husband died caused by AIDS. Current pregnant from new relationship, two previous delivery with CS. Vital signs within normal limits. The obstetric examination was in labor with 2 cm cervix dilatation. Ultrasound and CTG within normal limits. The laboratory results of microscopic hypochromic anemia (Hb 9.9 mg/dl), reactive IgG antibody, and PCR were positive SARS-nCoV-2. Reactive HIV is found on regular screening. An emergency CS was performed with the universal precaution and Covid-19 protocol. Born a male baby with a birth weight of 2.900 gr, Apgar scores 8/9. The patient chosen sterilization for contraception. Both were discharged from the hospital on the 3rd postoperative day. The mode of delivery in HIV pregnant patients depends on the duration of ARV therapies and viral load. The mode of delivery for pregnant patients with COVID-19 depends on obstetric indication. Both delivered with closed personal protective equipment. In our case, a CS was performed caused of previous twice CS, didn’t ARV use, and unknown viral load. There is no contraindicating of breastfeeding from a mother with COVID-19. While for HIV, formula milk is recommended and avoids breastfeeding.  

**Conclusion:** The mode of delivery in this case depends on the patient’s condition. Both require personal protective equipment.  

**Keywords:** AIDS, breastfeeding, Covid-19, delivery, HIV, protective equipment.

**Hyperprolactinemia induced by risperidone and prolactinoma: a case report**

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**Introduction:** Prolactin is a hormone produced by anterior pituitary known as regulator of lactation in women. Hyperprolactinemia is a condition of elevated levels of prolactin in the blood. Antipsychotic drugs have an affinity for dopamine receptors that block secretion of dopamine and causing disturbance in regulation. Prolactinoma is a benign tumor of pituitary lactotroph cells. Any lesions affecting pituitary and hypothalamus can induce hypersecretion of prolactin. Purpose to make early diagnosis of hyperprolactinemia induced by risperidone and prolactinoma as well as make the prompt treatment.

**Case description:** A 35-year-old female presented to the hospital with complaints of secondary amenorrhea for 6 months. She has also experienced milk discharge from both the breast and feeling heaviness in breast. She has history of paranoid schizophrenia since 1 year ago and regularly takes Risperidone 2mg twice daily. From examination found elevated level of prolactin in blood while Magnetic Resonance Imaging (MRI) revealed microadenoma. In this case hyperprolactinemia might be caused by either the use of antipsychotic drugs or microadenoma. Risperidone was then replaced with trifluoperazine. The patient was also prescribed Bromocriptine. Milk discharge ended and patiently got her menstruation after 5 month-treatment.  

**Conclusion:** Thorough history taking and examination are needed to determine the cause of hyperprolactinemia. Both risperidone use and microadenoma might be the causes in this patient. Treatment according to the cause was taken by giving agonist dopamine and substitute the antipsychotic drug.  

**Keywords:** hyperprolactinemia, prolactinoma, risperidone, antipsychotic drugs.

**Primary amenorrhea in turner syndrome (a chromosome analysis): a case report report**

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**Introduction:** Primary amenorrhea is delayed menarche at age 14 years without secondary sex or absence of menstruation at 16 years of age in the presence of normal growth in secondary sex. Turner syndrome is the chromosomal disorder most commonly responsible for gonadal dysgenesis, which has an incidence of about 1/2500 female live births. The diagnosis of Turner syndrome is made based on the typical phenotypic characteristics of phenotypic women who have partial or total absence of one X chromosome, with or without mosaicism. This case report will discuss the management of Turner Syndrome.  

**Case Description:** 28 years old female with complaints of amenorrhea which she never had a period until 1 (one) year ago after going to the obstetrician and given birth control pills and folic. If patients taking that medicine, she will get menstruation. The patient’s family do not have history of menstrual disorder. We got Tanner Stage I from physical examination, there is a vagina with length 3 cm, rudimentary uterus found from USG and the result of chromosome analysis is described the presence of 2 cell population (mosaic). She was diagnosed with primary amenorrhea et causa Turner Syndrome.
Results: Management of primary amenorrhea et causa Turner Syndrome, including growth hormone therapy, estrogen, and oksandrolon therapy. Early detection and replacement of hormone replacement have a strong effect on children’s psychosocial and cognitive abilities with Turner Syndrome. Conclusion: Primary amenorrhea et causa Turner Syndrome are indeed rare cases, but the management of patients with requires careful management and early diagnosis are wise choices. Keywords: amenorrhea, turner syndrome, management.

Endobronchial tuberculosis

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Endobronchial tuberculosis (EBTB) is a tuberculosis infection of the tracheobronchial tree. Diagnosis requires a high suspicion of EBTB because it is usually difficult to detect with a chest X-ray. Bronchoscopy, computed tomography and bacteriological examination are important examinations to confirm the diagnosis as well as evaluate the tracheobronchial stenosis that has occurred. The goal of therapy is to eradicate the M. tuberculosis bacillus while preventing airway stenosis. Interventional bronchoscopy and surgery are necessary for patients with severe dyspnea and recurrent infections. Keywords: endobronchial tuberculosis (EBTB), bronchoscopy, stenosis, surgery.

Breakthrough pain management due to metastatic adenocarcinoma prostate: a case report

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Introduction: Breakthrough pain is a specific pain syndrome mainly caused by cancer, common in patients with breast, prostate and lung cancer. Breakthrough pain is defined as a transient exacerbation of pain that occurs either spontaneously or in relation to a predictable or unpredictable trigger despite relatively stable and adequately controlled background pain. Breakthrough pain can lead to a high level of distress, decreased physical functioning, and impaired quality of life, so it needs accurate diagnosis and adequate assessment, leading to effective management. This paper describes the breakthrough pain management due to metastatic adenocarcinoma prostate in Zainoel Abidin General Hospital Banda Aceh. Case Description: The patient was a 50 years old man with adenocarcinoma prostate and spine metastases in the lumbosacral region. The patients complained of lower back pain that radiated to the left and right limbs, described as numbness and burning. The patient was treated with methylprednisolone injection 125 mg/12 h, oral gabapentin 300 mg three times daily and tramadol injection 50 mg/8 h. In the second day, the patients reported stable mild pain (NRS 4). On the third days, the patient had transient exacerbation of pain recurred twice daily on average, in the form of electric shock with severe intensity (NRS 10, PainDETECT: 20), sudden onset and duration 20-30 minutes. Pain occurred spontaneously and was not associated with any trigger. The tramadol injection was stopped and the patient was treated with fentanyl transdermal 25 ug/72 h. In the fifth day, the exacerbation of pain did not occur and the patients reported stable mild pain (NRS 4). Conclusion: Cancer pain patients need 24 hours pain evaluation to assess breakthrough pain. Cancer pain without breakthrough pain can be treated with a combination of anticonvulsant and weak opioid, but cancer pain with breakthrough pain mainly controlled with strong opioids. Keywords: breakthrough pain, breakthrough pain management, cancer pain, opioid, prostate cancer.

Abducens nerve palsy in unidentified tuberculous meningitis and post curettage patient: a case report

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Introduction: The abducens nerve is the sixth cranial nerve that responsible for ipsilateral eye abduction. Abducens nerve palsy results in an inability of the abducens nerve to transmit signals to the lateral rectus, resulting in an inability to abduct the eye and horizontal diplopia. Dysfunction of the abducens nerve can occur at any point of its transit from the pons to the lateral rectus muscle. The palsy may be secondary to nerve infarction, trauma, infection, increased intracranial pressure, tumor or it may be idiopathic. An abducens nerve palsy as an initial presentation of tuberculous meningitis is quite common. One such case has presented here. This case report focuses on the fact that tuberculous meningitis should be included in the differential diagnosis of abducens nerve palsy.

Case Description: The patient was 23 years old woman with recurrent vaginal bleeding after 3 months before undergoing curettage due to miscarriage. The patient has previously been admitted to a hospital dan referred to Zainoel Abidin Hospital (RSUDZA) to undergo endometrial biopsy because of suspicion of gestational trophoblast disease. During treatment at RSUDZA the patient experienced seizures that last for 30 seconds. The patient was conscious during and before the seizure. The patient also complained of headaches and double vision. The patient was then consulted to the neurology department for further treatment and then underwent a contrast and non-contrast CT scan of the head to look for the neurological deficit’s cause. The patient was then concluded to have tuberculous meningitis and was supported by a chest X-ray which showed a typical tuberculous lesion.

Conclusion: The complications of cranial nerve palsy in tuberculous meningitis patients are common, and the rate of misdiagnosis is high, which makes them vulnerable to emergencies such as disturbance of consciousness. Effective anti-tuberculous treatment can restore most cranial nerve palsy. Keywords: abducens nerve palsy, tuberculous, meningitis.
**ABSTRACT**

**A rare case of porokeratosis mibelli in 3 years old boy treated with topical 1% 5-flourourasil**

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**Introduction:** Porokeratosis mibelli is a rare, chronic and slowly progressive genodermatosis characterized by abnormality of keratinization. The clinical manifestations are hyperkeratotic papules, or plaques surrounded by thread-like elevated border which widens centrifugally.

**Case description:** We reported a 3 years old boy, suspect of porokeratosis mibelli. His mother complained of few reddish spots and patches that sometimes itchy, healed into white and brownish patches with atrophic center since 5 months before admission. Physical examination: few lesions on the back, waist, left side of buttock, back of the neck, and lateral upper left arm. Hypopigmented and hyperpigmented patches with atrophic centers, and erythematous plaques with central erosion were found. No abnormality of internal organs or laboratory findings. Histopathology examination showed epidermis contains invagination rete malpighi filled keratin. Slightly thinned stratum germinativum with corneum contains basket weave pattern. Topical therapy with 1% 5-flourourasil cream twice daily showed mild improvement after 10 days.

**Conclusion:** Although clinical examinations of the lesions on this patient did not fit the criteria of porokeratosis mibelli, however, the results of histopathology examination supported the diagnosis. Treatment with 1% 5-flourourasil cream showed slow but progressive healing on the patient.

**Keywords:** porokeratosis mibelli, topical 1% 5-flourourasil, children.

**Pulmonary valve infective endocarditis**

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**Introduction:** Right-sided infective endocarditis is rarely reported and often occurs in the tricuspid valve. In this case, infective pulmonary valve endocarditis with a predisposition of congenital heart disease - ventricular septal defect was reported.

**Case description:** Male, 4 years old, with fluctuating fever since 2 months before being admitted to the hospital, and easily tired since 2 months. Chest radiograph showed cardiomegaly, with an increased bronchovascular. Echocardiography showed a subaortic VSD with a 9.3 mm, R to L shunt diameter, showing vegetation in the pulmonary valve leading to the pulmonary artery, measuring 7.9 x 10 mm and 6.8 x 10.4 mm. the laboratory showed a leukocytosis of 20,500 / mm3. There was not growing of bacteria in blood culture.

**Conclusion:** VSD is more commonly associated with tricuspid valve IE. The proposed mechanisms of right-sided IE with co-existing shunts include turbulent jet flow, causing shear stress, and circumferential stretch, which damages the valves' endothelial cells. The endothelial disruption causes fibrin deposition and consequent vegetation formation. Most reports showed high success rate of antibiotics treatment for right-sided IE. The need for surgical intervention is <30%.

**Keywords:** pulmonary valve infective endocarditis, right side infective endocarditis.

**Appendicitis and terminal ileum perforation: case report and review of literature**

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**Introduction:** Perforation peritonitis is the most common surgery performed in an emergency room. Upper gastrointestinal tract perforation is more common than lower gastrointestinal perforation. Perforation of the bowel, especially typhoid perforation is a significant surgical problem in developing nations. It is usually associated with high mortality and morbidity as it occurs mostly in underdeveloped countries in places where medical facilities are not readily available. Perforation of terminal ileum is a cause for obscure perforitation, heralded by exacerbation of abdominal pain associated with tenderness, rigidity and guarding, most pronounced over right iliac fossa. We present a case of appendectomy combined with partial ileal resection for necrotic changes and small perforation of the ileum.

**Case description:** A 30-year-old male patient was hospitalized with whole abdomen pain and fever 3 days after the onset of symptoms. A median incision was performed. The small perforation in ileum was found about 1 cm in diameter, located 5 cm from ileocaecal valve with small necrotic changes onto the ileal wall. We perform a resection and ileoileum anastomosis of the involved ileum combined with appendectomy. The patient was discharged on the 9th day. Perforation of ileum is an uncommon differential diagnosis for acute appendicitis. Laparotomy is usually carried out late often suspecting perforated appendicitis or a duodenal ulcer. The cause maybe from the Typhoid.

Various surgical procedures have been used for distal ileal perforations with variable results. Unfortunately, no matter what procedure is used, postoperative mortality and morbidity remain high. Resection anastomosis carried a high morbidity and mortality.

**Conclusion:** Appendicitis with terminal ileal perforation should be considered as a possibility in obscure perforititis. Early diagnosis and treatment avoid extensive procedures and is associated with lower morbidity and mortality. The operative management consists of appendectomy, peritoneal lavage with closure of perforation.

**Keywords:** appendicitis, ileum perforation, management.

**Rosai dorfman disease: case report**

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ABSTRACT

Introduction: Rosai–Dorfman Disease (RDD) is an idiopathic, non-Langerhans cell histiocytosis of unknown etiology. RDD is a very rare histiocytic disorder typically presenting as painless cervical lymphadenopathy.

Case description: A 9-year-old girl came in with a complaint of a lump in her left neck that was getting bigger. The beginning of a lump as big as marble and now as big as a tennis ball becomes multiple. The initial biopsy examination and conducted a review of histopathology and immunohistochemistry (IHC) obtained from Rosai Dorfman Disease. This patient obtained a huge lump by causing emphasis to essential structures in the neck, such as the internal jugular vein and common carotid artery, so that the mass was resected with debulking surgery. The patient also got prednisone medication and adjuvant radiotherapy. Confirmation of postoperative histopathology results in histiocyte sinus appears to contain a massive amount, lymphocytes, histiocytes, plasma cells accompanied by dilatation, and a picture of emperipolesis histiocyte cytoplasm, and also seems multinucleated giant cell. Examination of IHC S100 (+) and CD68(+), concluded RDD. Kinds of literature were reviewed to obtain a better understanding of the disease course, diagnosis, and treatment of this uncommon condition.

Conclusion: We report a case with Classical RDD. The disease is very rare with unknown etiology. Surgery can be an option in cases of large lesions causing end-organ compromise.

Keywords: Rosai Dorfman disease, cervical lymphadenopathy, non-Langerhans cell histiocytosis

Omental torsion

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Introduction: Omental torsion is one of the rare causes of acute abdominal pain, which is difficult to diagnose because the main symptoms are similar to those of other abdominal diseases. It clinically mimics acute appendicitis. Torsion of omentum causes twisting of omentum along its long axis resulting in impaired blood supply. This rare condition is more predominant in middle-aged males. According to several studies, the correct preoperative diagnosis must be made as omental torsion can be treated conservatively in most cases without any complications avoiding surgical intervention. However, patient should be under clinical and laboratory observation in order to detect symptoms that would lead to surgical intervention in which laparoscopy is the appropriate surgical treatment, but explorative laparotomy is the definitive and therapeutic procedure of choice.

Case Description: A 31-year-old man presented at our emergency room with right lower quadrant pain as the main symptom, followed with nausea and vomiting. The symptom was similar to acute appendicitis. After abdominal CT-scan examination, we decided to undergo the laparotomy. During the operation, torsion of the omentum was present in a clockwise direction. The operation proceeded with resection of the affected part of his omentum. He recovered well with immediate resolution of the symptoms and without any postoperative complication.

Conclusion: Greater omental torsion is difficult to diagnose preoperatively. It presents as acute abdominal pain located more often in the right iliac fossa. Omental torsion is a benign self-limiting disorder and in most cases can be treated conservatively avoiding laparotomy. When the patient's clinical, laboratory and radiological findings worsen or when diagnosis is doubtful surgical intervention such as laparoscopy is the proper method for diagnosis and treatment.

Keywords: omental torsion, omentum, differential diagnosis

Martius flap repair in patients with rectovaginal fistulas

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Introduction: Rectovaginal fistula is an abnormal relationship of two epithelium between the rectum and the vagina. Fistulas can be caused due to congenital malformations, childbirth, infection in the rectovaginal tract, malignancy, trauma due to surgery, or inflammatory bowel disease. In case of obstetric trauma, for example during childbirth, the presence of perineal laceration, prolonged ischemia and nerosis of the perineal tissue in slow labor could be resulted in the formation of the rectovaginal fistula.

Case description: A 28-year-old woman presented with complaints of feces coming out of the vagina one month ago. The patient had a history of giving birth eight months ago and underwent an episiotomy procedure. The patient underwent a gluteus-perianal MRI examination with and without IV contrast administration, there was a perianal fistula leading to the vagina. The length of the fistula tract is 4 – 5 cm, no visible pocket abscess. The patient has diagnosed with a Grade 5 ST James's University Hospital Classification: Trans sphincteric fistula. The patient was treated for rectovaginal fistula repair with a marlin flap, and after one month the wound had healed and the fistula was closed properly.

Conclusion: Rectovaginal fistula is a connection from the rectal lumen that extends to the vaginal lumen. The diagnosis of the rectovaginal fistula is confirmed from fecal discharge through the vagina and confirmed using MRI imaging to determine the fistula's path and the involvement of the surrounding tissue. Martius flap is one of the widely used techniques for vaginal surgery repair.

Keywords: martius flap, MRI imaging, rectovaginal fistula.

Low grade fibromyxoid sarcoma of the abdominal wall

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Background: Low grade fibromyxoid sarcoma (LGFMS) is rare sarcoma subtype predominantly affecting younger adults, with equal predilection for males and females. Sarcomas account for 1% of adult cancer and LGFMS are estimated to represent fewer than 5% of soft-tissue sarcomas. In spite of the low-grade and benign histological appearance, early studies of retrospectively diagnosed LGFMS have shown a distinct biological behaviour, with a relatively high and atypical metastasizing potential, making the correct diagnosis of LGFMS important.
Case description: A 25-year-old female patient presented to surgery department with a painless mass in the abdomen for 15 months which was gradually increasing in size. On examination, a single abdominal mass involving umbilical, hypogastric, and both iliac regions and extending vertically from xiphiosternum to pubic symphysis and transversely from right anterior axillary line to left anterior axillary line. CT scan revealed a neoplastic mass arising from mesenterial, extending to involve upper and lower region of the abdomen that compressed other abdominal organ and caused bilateral hydroptic. Complete excision of the tumor with wide surgical margins along with the anterior abdominal wall down to the peritoneum was performed, resulting in a large wall defect of about 18 × 20 cm which was repaired after mobilization and release of rectus abdominis and reconstructed with polypropylene mesh.

Conclusion: In spite of the low-grade and benign histological appearance, LGFMS have shown a distinct biological behaviour, with a relatively high and atypical metastasizing potential, making the correct diagnosis of LGFMS important. Diagnosis of low-grade fibromyxoid sarcoma is problematic due to its deceptive bland histologic features. Complete cytoreductive surgery with clear margin is the standard of care for localised disease with or without radiotherapy.

Keywords: Low grade fibromyxoid sarcoma, hydroptic, polypropylene mesh, cytoreductive surgery

Gastric volvulus: a case report

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Introduction: Gastric volvulus is recognized to be a life-threatening condition, thus prompt diagnosis and treatment are imperative. It is characterized by abnormal rotation of the stomach of more than 180°. Acute GV is associated with a high morbidity and mortality (30-50%). This is typically achieved using upper gastrointestinal barium studies or computer tomography. The principal aims of surgery include reducing the volvulus, the prevention of recurrence and repairing any predisposing factors such as diaphragmatic defects.

Case description: Female 15 years old came to emergency room with pain in the epigastric area with vomiting since 1 day. CT Scan shows a mesenteroaxial gastric volvulus. During operation we found gastric volvulus mesenteroaxial type. We released and reduced volvulus and we perform anterior abdominal wall gastropexy.

Conclusion: Gastric volvulus is rare case, and associated with a high morbidity and mortality (30-50%). Prompt diagnosis and management are necessary to mitigate morbidity. CT Scan or upper gastrointestinal barium studies are most being diagnostic for gastric volvulus. In this case, patient get emergency operation, so patient get improves quickly.

Keywords: gastric volvulus, CT Scan, Emergency operation.

A case report: Hirschsprung disease in adult patient

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Introduction: Hirschsprung disease (HD) or congenital megacolon is a disease characterized by the absence of intestinal parasympathetic ganglion cells, Meissner submucosal plexus and Auerbach myenteric plexus. This aganglionic segment extends from the anorectal segment towards the proximal with varying distances. The absence of these ganglion cells causes peristaltic movement resistance resulting in ileus, hypertrophy and excessive distension of the proximal colon.

Case Description: A 22-year-old woman came recurrent constipation and a bloating stomach, she has been suffering from the condition for over a year. The patient had undergone colostomy procedure in January 2019 with histopathological results of intestinal tissue of Hirschsprung disease with a sufficient number of ganglion. The results of distal colon in loop examination found a narrowing of the lumen in the rectum area. Immunohistochemical examination of S-100 and Calretinin showed that the ganglion was sufficient. Another biopsy was taken in May 2019 with results of Hirschsprung’s disease. This confirmed the underlying disease of Hirschsprung’s disease in this patient.

Conclusion: Diagnosis of Hirschsprung’s disease in adulthood is rare. This disease is generally found in infants with the classic triad of late meconium discharge more than 24 hours, green vomiting, and bloating stomach. Distal colon in loop imaging and immunohistochemical examinations have not confirmed the diagnosis of Hirschsprung’s disease. Thus another histopathological biopsy examination is needed as the gold standard. A diagnostic assessment is needed to differentiate a diagnosis of Hirschsprung’s disease from chronic constipation and other intestinal obstruction.

Keywords: colostomy, hirschsprung disease, histopathological biopsy.

Antiretroviral therapy-induced bilateral breasts hypertrophy

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Introduction: The main strategy in HIV therapy is antiretroviral (ARVs) drugs that aim to reduce viral loads and decrease death rate due to opportunistic infections. ARVs have been used in 46% of HIV patients in various countries and have successfully reduced the death rate related to HIV/AIDS from 1.5 million to 1.1 million in 2010. The administration of ARVs is beneficial in improving the quality of life of patients but has many side effects including lipodystrophy, metabolic disturbances, and cardiovascular problems. The most common ARV drugs that cause an increase in the fat mass ratio are zidovudine, stavudine and raltegravir. The prevalence of this case varies widely, ranges 18%-83%. Lipodystrophy causes morphological changes that lower self-confidence and less inclined to maintain treatment adherence.

Case Description: A 27-year-old pregnant woman was diagnosed with HIV positive and administered zidovudine, lamivudine, nevirapine until she gave birth. 3 months later, she was diagnosed with pulmonary tuberculosis and received antituberculosis therapy combined with tenofovir, lamivudine, efavirenz for 8 months. The patients were cured of tuberculosis and ARVs were continued. Patients developed slow-growing breasts after initiation of new regimen, each symmetrically sized 50×30 cm. The regimen was switched to tenofovir, lamivudine, nelfinavir and patient were consulted to surgical oncology. A 20 milligrams of Tamoxifen was prescribed as hormonal therapy and reduction mammoplasty bilateral was performed.
Conclusion: The incidence of lipodystrophy generally occurs months to years after the initial ARVs therapy. Efavirenz is the most frequently reported as a cause of bilateral or unilateral breast hypertrophy.
Keywords: antiretroviral therapy, bilateral breast hypertrophy.

Open abdomen management in abdominal tuberculosis: case report

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Introduction: Tuberculosis is still a problem globally, especially in endemic countries, which is one of the leading causes of death due to infection. Tuberculosis manifestation in bowel is a great mimicker of other abdominal conditions and often causes complications in adhesions of the visceral organs, intestinal perforation and impaired wound healing. There is risk of wound dehiscence in patients who require surgery and the inability to perform the surgical wound’s primary closure. Management of the open abdomen is an option for these conditions.
Case Description: 36 years old female patient with complaints of abdominal pain for 1 month before admission. The examination revealed a tubo-ovarian abscess and was decided for surgery. During surgery, there were great adhesions of the visceral organs and caseous necrotic tissue throughout the abdominal fields. There were several lacerations and repaired with primary suture. 7 days after surgery, there was dehiscence from the laparotomy wound and multiple perforations of the small intestine creating fistule. Direct closure of the surgical wound was not possible. Therefore open abdomen management was done.
Conclusion: In abdominal tuberculosis cases where primary closure is not possible, wound closure is done by secondary intention with open abdominal management and administration of anti-tuberculosis. Management of open abdomen can be done by using a Bogota bag, which is the installation of sterile plastic to cover open surgical wounds. This management provides good results when accompanied by good wound care and supportive therapy.
Keywords: abdominal tuberculosis, open abdomen, bogota bag, wound healing.

Thyroid residive follicular carcinoma

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Introduction: Thyroid cancer ranks first as endocrine malignancy and accounts for 1% of all malignancies. Indonesia’s incidence rate (1989–1993 at RSUD Dr. Soetomo Surabaya) as thyroid nodules in adults is 5% malignant. The incidence of thyroid follicular carcinoma is 10–20% of all thyroid cancers. Iodine deficiency is thought to be a major contributing factor.
Case Description: A 52-year-old male, with a lump in the neck that had reappeared since 1 year ago, with a thyroid surgery history 5 years ago, no hoarseness, no tightness and no difficulty in swallowing. The lump moves when swallowing. There is no lump in the right armpit and left and right thigh crease. On examination there was a lump with a size of 12 x 8 x 5 cm and 6 x 5 x 3 cm in right neck area. A postoperative scar and lumps with a size of 2 x 2 x 1 cm and 2 x 1 x 1 cm in left neck area, the skin above the lump is the same as the surrounding area, dense, no tenderness, limited mobility, unclear border. The result of fine-needle aspiration biopsy (FNAB) is Papillary Thyroid Carcinoma. Total Thyroidectomy and Bilateral Functional Neck Dissection (FND) were performed and the pathological result was papillary thyroid carcinoma.
Conclusion: A hard nodule on the thyroid requires a complete and careful examination. Also, in determining the operative action, careful analysis is required since it is one of the success factors in the therapy of thyroid nodules.
Keywords: papillary thyroid carcinoma, total thyroidectomy, functional neck dissection.

Type III naso-orbito-ethmoidal complex fracture

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Introduction: The bony naso-orbital-ethmoid complex (NOE) fracture is one of the maxillofacial fractures. It is about 5% incidence of maxillofacial fractures. NOE complex fracture damage may result in severe facial dysfunction and malformation.
Case Description: We report an 18-year-old Indonesian woman presenting with pain in the right side face after falling from motorcycle in a traffic accident 3 days before hospital admission. There is no history of unconsciousness. The physical examination was found right periorbital hematoma, right periorbital bleeding, crepitation in right orbital superior and inferior, positive bowstring test. The patient conduct CT 3D reconstruction and found type III NOE complex fracture. Elective open reduction and internal fixation were made. Follow up after surgery, there is no epiphora and diplopia, visual acuity and eye movement still in normal
Conclusion: The management of NOE complex fractures is challenging. It needs comprehensive clinical examination and radiographic analysis to assess the type and severity of the fracture. Immediate and proper reconstruction can give better prognosis.
Keywords: naso-orbital-ethmoid, fracture, maxillofacial injury.

Pleomorphic adenomas in children

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Introduction: Tumors of the salivary glands are rare cases with an incidence of 1% of all neoplasms in the head and neck region. The incidence of salivary gland tumors is more common in adult patients than in children. The incidence
The redundant colon is a rare case, often resulting in a late diagnosis. The average person has a large intestine/colon length is 120-150 cm. The redundant colon is a condition where the colon is longer than normal and can cause various symptoms such as pain, cramping, and difficulty passing stool. It is often accompanied by an abdominal mass. The treatment usually involves surgical resection to remove the redundant segment of the colon. The case report describes a patient with a large abdominal mass that was found to be a redundant colon. The patient underwent a subtotal colectomy and is doing well post-surgery. The case highlights the importance of considering the diagnosis of redundant colon in patients with abdominal masses and difficulty with bowel movements. Keywords: redundant colon, surgical resection, abdominal mass.
ABSTRACT

We report a rare case of acute necrotizing colitis of a 40-year-old patient of female reportedly came to the BIMC Hospital and complaints of her abdominal pain, unable to defecate for 3 weeks ago, and did not improve with enemas. The patient had a history of total hysterectomy 13 years ago. In the physical examination of the abdomen, it is distended while inspected, there is no tenderness during palpation, and has normal auscultation. In CT-SCAN investigations found redundant transverse colon, low ileocecal junction location, and many intraluminal (colonic) stools, as well as plain abdominal images with obstruction of the large intestine. In patients, an exploratory laparotomy has been performed. Ileus obstruction was found due to omentum adhesion which tangle the sigmoid colon and was found to be redundant in the transverse colon during the surgery. The surgeon done end to end anastomose resection and release the adhesion.

Conclusion: It often results in a late diagnosis. Its variation often get difficulty diagnosed or suspected preoperatively. It requires though, complicated surgical maneuvers and radiographic analysis. Thus, need knowledge of this malformation is mandatory in order to establish correct diagnose and for its appropriate management.

Keywords: colon redundant, redundant sigmoid, management.

A rare entity of acute necrotizing enterocolitis due to sigmoid colon cancer

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Introduction: Adult necrotizing enterocolitis and non-occlusive mesenteric ischemia are rare causes of acute abdomen. Necrotizing enterocolitis usually affects children and only few cases have been described in adults especially in geriatric patients.

Case description: We report a rare case of acute necrotizing colitis of a 61 years old male patient. X-ray abdomen led to bowel dilatation. We performed emergency laparotomy under general anesthesia and revealed that the dilatation of intestines and colon was caused by obstructive colitis due to sigmoid tumour. The digestive system was expanded proximally and the mucosa were seen turning black from the sigmoid colon to 80 cm proximal to the terminal ileum, from the findings we concluded that the patient was suffering from acute necrosis without significant vessel occlusion. The occlusion from the tumour may increase intraluminal pressure that affects colonic blood flow, and in closed-loop colonic obstruction without perforation, mucosal ischemia may be the primary event leading to massive colonic gangrene.

Conclusion: Necrotising enterocolitis usually affects children and only few cases have been described in adults especially in geriatric patients. We performed complete colectomy with 90 cm resection of terminal ileum and ileostomy to remove the necrotic colon during surgery. Hartmann procedure was performed to distal part of rectum. The surgery was successful and patient was stable after the surgery.

Keywords: Acute necrotizing enterocolitis, Sigmoid colon cancer, Obstructed colon cancer

Case report: breast cancer with incidental manifestation of Horner’s syndrome and esophageal metastasis in a young woman after a period of a lost to follow-up

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Introduction: Breast cancer with metastases to esophagus is rare, accounts for less than 0.5% distant metastases. Although very rare, Horner’s syndrome can occur as an additional manifestation. Breast cancer among young women is more aggressive with relatively poor prognosis. Lost to follow-up is related to increased risk in distant metastases, treatment resistance, and poor outcomes. This study’s purpose was to present a rare case of esophageal metastasis and Horner’s syndrome manifestation due to breast cancer distant metastasis.

Case Description: This is an observational study, reporting descriptively a case of breast cancer in a young woman age 36 years, with metastasis to esophagus and Horner’s syndrome. This patient had a medical history of unfinished breast cancer treatment four years ago. The patient underwent thorough medical examination, including endoscopy, laryngoscopy, cervical X-ray, and computed tomography (CT)-scan. The patient experienced dysphagia, hoarseness, and frequent hiccups. Before admission the patient had a tingling feeling in the neck and shoulder area. In addition, there was an abnormal drop of the left eyelid. Previously, the patient was diagnosed and treated for tuberculoid laryngitis. The X-ray result showed burst fractures of the cervical vertebrae and slight pleural effusion. The endoscopy examination revealed esophageal metastases.

Conclusion: This report presents a very rare case of breast cancer in young women with co-occurrence of esophageal metastases and Horner’s syndrome, to our knowledge has not been reported elsewhere. Physicians should be aware of a thorough examination in breast cancer patients with neurological symptoms of the face and hoarseness for further diagnosis and treatment.

Keywords: esophageal metastasis, Horner’s syndrome, breast cancer, diagnosis.
**ABSTRACT**

**Bilateral gynecomastia in a young male: a case report**

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**Introduction:** Gynecomastia is the benign proliferation of the glandular tissue in the male breast. This condition is thought to be caused by the imbalance between estrogen level relative to androgen level. Gynecomastia may affect up to 50% of adult men over age 50 years old and can be related to underlying medical illness or caused by certain medications.

**Case presentation:** A young male age 20 who presented with complaints of bilateral enlargement of breast tissue are reported. Breast Ultrasonography confirmed bilateral well-circumscribed hypoechoic, prominent fibroglandular component, homogenous breast masses. I was decided to performed surgical resection.

**Discussion:** Due to the feminization of the male breast, the patient may develop major physical problems and suffer negative social consequences. The objective of surgery therapy is to restore the phenotype male breast that would predict a fundamentally pre-operative evaluation. The main pathophysiology of gynecomastia is alteration in the balance between the stimulatory effect of estrogens and the inhibitory effects of androgens on the development of the breast. If there is no causal treatment, surgical resection is the therapy of first choice.

**Conclusion:** Since gynecomastia could be a sign of possible underlying diseases, a thorough examination and further research is recommended. The evident psychological impact of the unacceptable cosmetic appearance of the bilateral tumors. If there is no causal treatment, surgical management is the therapy of choice.

**Keywords:** gynecomastia, breast ultrasonography, surgical resection, feminization.

**Comparison of short-term clinical outcomes (ASES scores) on clavicular fractures between open reduction internal fixation and non-operative in Haji Adam Malik General Hospital, Medan, Indonesia**

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**Background:** Management of clavicle fractures has changed in the last decade. Primary fixation as the initial treatment is the main choice in the current literature, with the aim of reducing the incidence of complications and better functional outcome.

**Methods:** This research is a descriptive analytic study with a cross-sectional approach. Samples were taken from January 2019 to December 2019 with a diagnosis of clavicle fracture at the H. Adam Malik General Hospital Medan, which met the inclusion and exclusion criteria, namely 34 samples. The data analysis used was using independent T test.

**Result:** The median age of patients who underwent open reduction internal fixation (ORIF) action was 34.50 with 28 people (82.4%) being male, compared to 6 (17.6%) female. ASES results were higher in patients who received ORIF management compared to non-ORIF with a mean value of 98.52 ± 3.02 (p<0.001).

**Conclusion:** There are differences in short-term clinical outcomes between patients with clavicle fractures who were treated with ORIF compared to non-operatives at Haji Adam Malik Hospital, Medan, Indonesia.

**Keywords:** Clavicle fracture, ORIF, ASES score.

**Surgical excision with paramedian forehead flap reconstruction in recurrent basal cell carcinoma of the nose**

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**Introduction:** Basal cell carcinoma (BCC) is the most common malignancy worldwide, especially in fair-skinned people. Along with squamous cell carcinoma (SCC), these malignancies are grouped as non-melanoma skin cancer (NMSC). The nose is a common site for BCC because it is exposed to the sun. The rates of recurrence are variable in the literature, between 10% and 67%. The ideal surgical treatment for BCC is complete tumor removal with safety margins. Wide excision of the BCC will leave the nose with a soft tissue defect and sometimes part of cartilage or skeleton, which requires nasal reconstruction.

**Case Description:** An 80-year-old female was admitted to the General Surgery Department of Soebandi General Hospital Jember, presenting with ulceration on the right side of her nose 4 months before admission. The patient had a previous history of surgical excision on the nose 15 years ago on the left side of the nose.

**Conclusion:** Recurrent cases of BCC are still the main issue in treating BCC. Wide excision of the BCC will leave the nose with a soft tissue defect, which requires nasal reconstruction. The paramedian forehead flap is recommended for defect closure in nasal reconstruction.

**Keywords:** basal cell carcinoma, wide excision, nasal reconstruction.

**Unusual foreign body ingestion in a schizophrenic patient - a case report**

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**Introduction:** Ingestion of foreign bodies is a common clinical case in medical practices. It can be accidentally as seen in children or can be intentional in psychiatric patients. Approximately 80% to 90% of ingested foreign bodies are excreted from the digestive tract without any complications or morbidity. Less than 1% of foreign bodies, especially large, sharp, and/or pointed objects,
cause bowel perforation. Therefore, detailed physical examination, and a multidisciplinary approach are required to achieve the best outcome.

**Case Description:** A 28-year-old male came was admitted to the Emergency Department of Soebandi General Hospital Jember presenting with generalized abdominal pain, inability to fart, and a repeated episode of vomiting 5 days before admission. On further investigation, the patient was reported to have auditory hallucinations commanding to swallow any object around him.

**Conclusion:** Foreign body ingestion in adults is often related to mental retardation, alcohol drinking, or psychiatric disorder. Ingestion of foreign bodies should be treated with a multidisciplinary approach to achieve the best outcome. Critical and detailed physical examination should be carried out at all times. Right intervention at the right time is of paramount importance. Psychiatric medications and counsel are needed to prevent the reoccurrence of this case.

**Keywords:** foreign body, schizophrenia, multidisciplinary approach.

**Total hip arthroplasty in ankylosing hip as sequele of childhood hip septic arthritis**

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**Introduction:** In recent decades, hip joint ankylosis in young patients are resulted by sequele of infection or severe trauma, this could happen spontaneously or due to surgical fusion. Hip joint ankylosis is difficult for surgeon and could only be treated by an experienced surgeon followed comprehensive pre-operative planning.

**Case description:** A 22-year-old female with sequele of septic arthritis of the right hip complication of pain and difficulty walking normally. Physical examination demonstrated contractured of unilateral right Hip, loose range of movement (ROM) and also occurred 5cm LLD on lower limbs. The decision was made to perform a total hip arthroplasty (THA) in order to allow her to walk without difficulties. Performed osteotomy, reaming, measure the diameter of the acetabulum and planting stem cementing. Three days post-operation, the wound was dry and ROM was improved. One week after the operation patient was painless and motric excellent. Mobilization physiotherapy with walker. Three months later the patient can walk without additional stuff and able to sitting cross-legged. If there are excellent muscle and biomechanic therefore will improve the strength of muscle and joint. Based on literature usually take 12 months to restore. They were performing THA on Hip ankylosing still a difficult procedure.

**Conclusions:** Preoperative planning and measuring Hip muscle strength are necessary before doing THA on ankylosing condition. Moreover, only experienced surgeons can performed this treatment.

**Keywords:** hip joint, ankylosing, childhood infection, sequele, total hip arthroplasty.

**Arteriovenous fistula aneurysm management in a.w sjahranie hospital: a case report**

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**Introduction:** One of arteriovenous fistula (AVF) complications was aneurysm formation and its incidence 5-60 %. This complication is prone to rupture. Surgical indications for AVF aneurysm were erosion of overlying skin, shortness of cannulation area, overlying pain aneurysm, low flow due to aneurysm stenosis or high flow associated with multiple aneurysms or massive venous dilatation.

**Case Description:** Mr. M 54 years old suffered from swollen on his left upper arm for 3 months. The patient was undergoing hemodialysis by using a fistula in his left arm since two years ago. We found there was vein enlargement snake-like appearance, skin erosion, and without any pain in physical examination. Fistulography examination revealed that there was no stenosis along the draining vein of AVF and central vein. The patient underwent repair of aneurysms by using partial aneurysmectomy technique.

**Conclusion:** There was no aneurysm above the skin. The patient was discharged 1 day after the procedure. AVF cannulation was performed 2 weeks after the operation. In this case, AVF aneurysm is caused by distal stenosis due to cannulation repeatedly. Indication for surgery procedure there were skin erosion and huge aneurysm. AVF aneurysm reduced by partial aneurysmectomy. This procedure was useful to repair AVF aneurysm and maintain the site of AVF for hemodialysis access.

**Keywords:** arteriovenous fistula, aneurysm, partial aneurysmectomy.

**Scrotal tuberculosis in adolescent male: a case report**

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**Introduction:** Tuberculosis (TB) is a global disease and if not adequately treated can lead to morbidity and mortality. Globally in 2019, an estimated 10.0 million (range 8.9-11.0 million) people infected with TB. Between 15% and 40% of the 10 million new patients diagnosed with TB annually present with Extrapulmonary TB (EPTB), of which a considerable proportion have Genitourinary TB (GUTB). GUTB TB is the most common extrapulmonary site. ¹² We present a case: a male patient with pulmonary tuberculosis with complications of pleural effusion and scrotal tuberculosis by open surgical biopsy.

**Case Description:** A 38-years-old male presented to the Surgical clinic of Lewoleba General Hospital with painful swelling of the right testis for 6 months before admission to the hospital. This enlargement was progressive, getting bigger by the time. He told it was produced pus from his right scrotum. He complained of recurrent fever for 6 months of his illness. He experienced a dry cough for several months. He experienced a weight loss total 10 kg in 6 months of the ill. He was never diagnosed with TB in the past. He denied any family history of TB.
Conclusions: The presentation of GUTB is often vague and physicians must have a high degree of awareness to make the diagnosis. With the holistic examinations and cross-specialist collaboration, patients with scrotal tuberculosis will be well diagnosed so it will be treated well and properly. The most important thing to remember that tuberculosis is a preventable disease.

Keywords: scrotal tuberculosis, genitourinary tuberculosis, surgical biopsy, extrapulmonary tuberculosis.

Spontaneous posterior wall rupture in an unscarred multigravida uterus during labour: a rare case

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Introduction: Posterior wall uterine rupture during pregnancy from an unscarred uterus is an extremely rare case and frequently results in life-threatening fetal and maternal. The overall incidence of pregnancy-related spontaneous rupture of unscarred uterus in developing country, the rate was 1 per 2,000 pregnancies.

Case Description: We presenting an unusual case of 33 years old female with posterior rupture of an unscarred uterus on 10 months of gestation developed prolonged labor and intrauterine fetal death with previous all normal vaginal deliveries. Massive intraperitoneal hemorrhage was found and the rupture was irreparable, so the patient required a total abdominal hysterectomy with informed consent and agreement from her family. The patient obtained high dependency treatment in intensive care unit after surgery. Then, she returned home on day 5 postnatally.

Conclusion: Uterine rupture in an unscarred uterus can occur with devastating consequences. The medical personnel, obstetricians, and other health workers should be prepared for the complication while conducting or assisting the delivery in women with no previous history of the uterine scar.

Keywords: posterior wall uterine rupture, multigravida, unscarred uterus.

The first treatment of Fraser’s type IIC floating knee at the rural area: a case report

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Introduction: Floating Knee is applied to the flail knee joint-segment resulting from a fracture of the shaft or adjacent metaphysis of the ipsilateral femur and tibia. The fractures range from simple diaphyseal to complex articular types. Floating Knee is a rare injury that is generally caused by high-energy trauma. When the Floating Knee is severely affected, the MESS (Mangled Extremity Severity Score) scale is used to decide between initial amputation or salvage. This tool has proven to be useful in the clinical and legal management of such lesions.

Case Description: An Eighteen-year-old man was administered to the Emergency Unit with an opened wound at the right knee region after crashed by a motorcycle. The certain mechanism of injury was unknown, yet it was expected as a high-energy trauma. The bone was exposed to the environment. The acute trauma life support (ATLS) algorithm was done. The massive fluid resuscitation, blood transfusion, and vasoconstrictor drug were given. The splint was set at the right lower extremity. After several hours observed at the Emergency Unit, the patient was brought to the Intensive Care Unit (ICU). The patient was planned to be referred to another hospital that had Orthopedic Surgeon.

Conclusion: The need for Orthopedic Surgeons at Lembata Regency, East Nusa Tenggara is truly a concern. People’s high expectations of the bonesetter and superstition make it even harder to refer patients to other hospitals with Orthopedics Surgeon. The first thing that can be done at the Emergency Unit in the rural area is the ATLS algorithm before planning to refer the patient.

Keywords: floating knee, rural area, ATLS.

Total flexor tendons rupture repaired with Unhas suture technique: a rare case report

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Introduction: Flexor tendon injuries are rare, with an incidence of 4.83 per 100,000 people. The volar hand is divided into 5 atomic zones. The principles of flexor tendon repair are the easy placement of sutures in the tendon, secure suture knots, smooth juncture of the tendon ends, minimal gapping at the repair site, minimal interference with tendon vascularity, and sufficient strength throughout healing to allow application of early motion stress to the tendon. The Unhas suture is a modified tendon repair technique adopted from the Tsuge method which is classified as a 2-strand core suture with the knot placed on the tendon's surface.

Case description: A 5-year-old male with a right-hand crush injury caused by a truck run over. We found a degloving injury on the volar hand, neurovascular injury, and all of the hand’s flexor tendon zones were ruptured. We did debridement and repaired the tendon immediately using the Unhas suture technique. The polypropylene 3-0 was used for the core tendon repair and the peripheral suture. After 2 weeks of follow-up, the fingers were still on the flexion form, and necrotic skin was found on the thenar area.

Conclusion: Immediate tendon repair with the simple and robust suture technique would expedite the tendon healing to a greater degree. Thus, tendon healing in children is much more progressive than in adults.

Keywords: crush injury, flexor tendons rupture, tendon repair, unhas suture.

Management of enterovesical fistula: case report

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Introduction: Enterovesical fistula (EVF) is an abnormal channel between the gastrointestinal tract and urinary tract. EVF is often associated with diverticular is the most cause accounting for approximately 50-70% of cases,
and malignancy is the second most cause accounting for approximately 20% of cases. EVF can be misdiagnosed if the patient has been asymptomatic and still a complex problem for a surgeon.

Case description: a 33-year-old woman sent to the ER at Sito Husada Hospital Atambua with abdominal pain, pneumatic and fecaluria. History of Caesarean section and myomectomy. The laboratory showed leukocytosis. Cystography gave a picture of entero vesical fistula and was performed through multidisciplinary management.

Conclusion: It is necessary to be aware EVF early in order to be arranged as precisely.

Keywords: entero vesical fistula, pneumaturia, fecaluria, management.

A large splenic cyst: a case report

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Introduction: The splenic cyst is a rare disease. Splenic cysts are categorized etiologically into parasitic and non-parasitic cysts, non-parasitic cysts can be primary or congenital cysts and secondary cysts. Large splenic cyst are susceptible to complication such as bleeding, rupture after abdominal trauma or infection

Case description: A 30-year-old male presented with progressive abdominal mass in left upper quadrant, abdominal discomfort and temporary nausea. History of minor trauma 6 months ago. On physical examination: a huge mass located in upper left side of abdomen, solid mass, Schuffner 5. Ultrasound imagine showed a large hypoechoic fluid-filled lesion with a thin wall. Contrast-enhanced Computerized Tomography (CT) showed a 19x20x20 cm homogenous hypodense lesion originating from spleen, thin wall, lacking septations and enhancing or a solid component. Laparotomy exploration was performed. The operative findings revealed a large cyst from the upper pole involving the hilum and occupying almost the entire surface of spleen, adhesion to omentum retroperitoneal wall and left diaphragm wall, and total splenectomy was performed. The patient was discharged on postoperative day 6. Routine outpatient control has not revealed any complications.

Conclusion: Splenic cyst is rare and its management continues to evolve. Patients with large cysts should be advised of the risk of cyst rupture. The treatment of a large splenic cyst advocates total splenectomy in splenic hilum condition is involved in cyst wall, lack of healthy spleen tissue or risk of infection or abscess.

Keywords: splenic cyst, pseudocyst, splenectomy.

Multiple nodules colon and transverse colon perforation in geriatric patients associated with nonsteroidal anti-inflammatory drugs: a case report

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Introduction: Long-term use of NSAIDs in geriatric patients has complications of gastrointestinal perforation, especially gastric. In contrast to this case report, there was a perforation in the colon.

Case description: A 70-year-old man complained of generalized abdominal pain and high fever. The patient had a long history of taking nonsteroidal anti-inflammatory drugs (NSAIDs) for a long time. Physical examination of the abdomen reveals distension, decreased bowel sounds and tenderness of the muscular defenses. The results of blood leukocytes 20.8 x 10⁹/L and CT scan of the abdomen showed free air and free fluid intra-peritoneum. Performed a laparotomy, obtained perforation in the transverse colon and multiple lesions ascending to transverse colon. Hollow organs within normal limits. With the consent of the family, only resection of the transverse colon 10 cm from the perforation to the proximal and distal direction, followed by end to end anastomose. The patient was treated for 5 days and went home. The results of histopathological examination showed that MN and PMN inflammatory cells from submucosa to serosa.

Conclusion: Perforation complications due to long-term use of NSAIDs can also be found in the colon. The choice of resection surgery only in the perforated area without having to resection all colon that has multiple lesions gives good results in geriatric patients.

Keywords: NSAIDs, colon perforation, Multiple nodules colon, geriatric.

Close fractures of radius and ulna in a patient with post open reduction internal fixation of radius a year ago: a case report

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Introduction: Fracture is discontinuation of bone commonly accompanied by soft tissue damage due to external trauma/force. Fractures of the radius and ulna, also called both-bone forearm fractures, are among the most common fractures in adults in upper extremity. The incidence of fractures of forearm bones are increasing in frequency with most common cause is rapid industrialization, road traffic accidents, competitive sports.

Case description: A 24-year-old man, was referred from Riau Island hospital to our hospital emergency room with chief complaints of pain on the right and the left forearms. Three days before, he had a motorcycle crash accident. The patient had the same accident a year ago and was already performed open reduction internal fixation (ORIF) procedure on the right radius bone. Clinical examination revealed tenderness, swelling, crepitation and deformity in the middle of both forearms. The radiological examination showed incomplete closed-fracture middle 1/3 of the radius-ulna on the right antebrachial with a bone plate tacked on. Meanwhile, a complete close-fracture middle 1/3 of the radius-ulna was also found on the left antebrachial at the same time. The patient has performed surgery for open reduction and internal fixation of left radius-ulna bone and close reduction reposition of right forearm. Pain killer and antibiotics were also given. The prognosis of this patient is dubia ad bonam depends on patient activity and rehabilitation procedure.

Conclusion: Most cases of adult forearm fractures require surgery to make sure the bones are stabilized and line up for successful healing. Because the radius and ulna rely on each other for support, they must be properly stabilized. If the bones are not accurately aligned during healing, it may result in future problems with wrist and elbow movement.

Keywords: radius and ulna fractures, forearm fractures, operative stabilization.
Fracture tibia and fibula dextra managed with long leg cast

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Introduction: A fracture is a break in the structural continuity of bone. It may be no more than a crack, a crumbling or a splintering of the cortex; more often the break is complete and the bone fragments are displaced. If the overlying skin remains intact it is a closed (or simple) fracture. In this case, a complete open fracture of the right tibia and fibula was obtained by x-ray imaging of the patient. In a study of tibia fractures that had an accident at Sanglah General Hospital in Denpasar, May 2015-April 2016, it was found that the tibia and fibula were the most fractured bones (65.2%). Initial management is carried out with the principle of advanced trauma life support by placing a splint and pressing the wound. Subsequently, the wound debridement and bone reduction were performed under anesthesia and the installation of a long leg cast.

Case description: A 17-year-old man, who previously complained of pain and difficulty moving in his right leg after the accident, the patient’s hemodynamics was stable and on physical examination found crepitus and deformity in the right tibial fibula, and open wounds with a size of 0.5x0.7 cm. based on x-ray results, it was found that the tibia fibula grade II fracture was opened. Resuscitation and immobilization are performed by debridement of the wound temporarily and reducing the fracture under anesthesia followed by a long leg cast.

Conclusion: After placing the long leg cast, the bone was acceptable and the patient went home for observation for 1 month.

Keywords: fraktur, tibia fibula , long leg cast

Relationship of environmental factors and mother’s knowledge with diarrhea in children in the working area of Rantau Aceh Tamiang Primary Health Care 2019

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Introduction: Diarrhea is still fully guarded to fell in children under five years old. It’s one of the main factors of death and illness to children in the developed country as Indonesia. Many factors influenced this phenomenon. Some of them were environment, social-economy and well-informed mother. The aim of this research was conducted to map the condition and specifically executed it.

Methods: A cross sectional study design was used to observe the correlation between mothers’ knowledge and incidences of diarrhea in mothers who have children under five years old at Rantau Tamiang Primary Health Care.

Result: From this research was founded that percentage of respondent environment condition at 41.7 % was good health. 54.4% was moderate and 3.9% was bad environment. Instead, respondent social-economy can be categorized 3.9% was under prosperous, 79.1% was prosperous level I, 4.8% was prosperous level II, 4.4% was prosperous level III and 7.8% was upper prosperous. Looking at well-informed factor research concludes that 46.5 % was good and 53.5% was moderate. This research also concludes that Diarrhea percentage of children under five was 53% of sample. There was a positive correlation between environment, and knowledge among mothers towards incidents of acute diarrhea on children under five years old in Rantau Aceh Tamiang Primary Health Care.

Keywords: environment, knowledge diarrhea, children.

Diffuse large B cell lymphoma of the breast

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Introduction: Primary Breast Lymphoma is a very rare case, which is a subtype of Non-Hodgkin Lymphoma. Diffuse Large B-Cell Lymphoma is the most common histopathology. There are 2 types of lymphoma in the breast, Primary and Secondary. Wiseman and Liao, first define Primary Breast Lymphoma.

Case description: A woman, 43 years old, was married, there was a lump in the right breast since ± 1 year ago. There were no other complaints. The physical examination found a mass in the right breast with a size of ± 8x6x4 cm in the central to upper outer quadrant. Lymph nodes ipsilateral not felt. In patients, complete blood tests, Mamma ultrasound, Core biopsy, CT Thoracic - Abdomen, Brain MRI and CSF aspiration were performed. With a diagnosis of Diffuse Large B-Cell Lymphoma of Breast (stage I), primary type, low risk. Therapy is chemotherapy with a CHOP-R (Cyclophosphamide, Doxorubicin, Vincristine, Prednisone, Rituximab) regimen for 6 cycles per 21 days. After chemotherapy, the results are partial responses, with still a mass with a size of 2x1x1 cm and the therapy continued with radiotherapy.

Conclusion: Primary Breast Lymphoma is a rare case. There is currently no therapeutic protocol yet. Combined chemotherapy regimens used alone or continued with radiotherapy and depending on histopathological type, disease stage and prognostic index, provide optimal results. Mastectomy is not recommended because it does not have a positive effect on survival and recurrent. Surgery is only for biopsy, and even then it has been abandoned since the core biopsy.

Keywords: primary breast lymphoma, non-hodgkin lymphoma, diffuse large b-cell lymphoma, chemotherapy.

Pain management in carpal tunnel syndrome and de Quervain syndrome with multi analgesic allergy: case report

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Introduction: Carpal tunnel syndrome (CTS) is a neuropathy caused by compression of the median nerve passing through the wrist’s carpal tunnel. Initial symptoms of Carpal Tunnel Syndrome: pain, numbness, and paresthesia. (1) These symptoms usually present, with some variability, in the thumb, index finger, middle finger, and semi-radial (thumb side) ring finger. (2) Pain may also
radiate to the affected arm. The main treatment in this patient is corticosteroids and analgesics. Allergy drugs are unwanted and dangerous reactions of drugs that are given in standard doses by appropriate routes. (3)

Case description: A 49-year-old woman with decreased consciousness, shortness of breath, swollen eyelids, swollen lips, after the patient had taken analgesics since 4.5 hours before hospital admission, due to pain in the thumb and left wrist. The patient is also known to have a history of allergy to many drugs, from the drug allergy test results at the Medan hospital. The ultrasound examination results showed that the left wrist joint showed inflammation in tenosynovitis. The results of electromyography showed that the elongated median nerve latency and decreased motor nerve conduction velocity. The incidence of multi-analgesic allergy in patients with Carpal Tunnel Syndrome and De Quervain Syndrome is rare, so further research is needed. The choice of analgesics and corticosteroids as the main treatment for Carpal Tunnel Syndrome and De Quervain Syndrome must be very careful, especially in patients with multi-analgesic allergies. In these patients showed improvement in clinical and pain scale. With 100 mg gabapentin per day combined with 10 mg prednisone which begins with cetirizine 10 mg.

Conclusion: Gabapentin combined with prednisone can be used as an alternative treatment for patients with Carpal Tunnel Syndrome and De Quervain Syndrome with multi-analgesic allergies.

Keywords: carpal tunnel syndrome, de Quervain syndrome, drugs allergy, gabapentin, prednisone.

A cause of obstructive jaundice: common bile duct stricture after cholecystectomy

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Introduction: Common bile duct stricture frequently occurs after open cholecystectomy. Roughly 80% of considerate injury is post-cholecystectomy injury. The occurrence pace of common bile duct stricture is 0.2-0.3% after laparoscopic cholecystectomy. After the presentation of laparoscopic cholecystectomy as the best quality level in cholelithiasis treatment, the quantity of elective cholecystectomies has expanded, and hence the quantity of bile duct injury.

Case description: We report a female aged 48 years of age, with a background marked by open cholecystectomy because of gallbladder stones. She was admitted to Haji Adam Malik Hospital Medan with side effects and indications of obstructive jaundice: common bile duct stricture after cholecystectomy itself, intraoperative cholangiography ought to be performed and fix of bile duct injury quickly began.

Keywords: obstructive, jaundice, cholecystectomy, stricture.

Prevalence of pregnant women with malaria in Aceh, symptoms and fetomaternal outcome

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World Health Organization estimates that as many as 300 to 500 million people are infected with malaria each year. Of these, there are around 3 million cases of severe malaria (complicated malaria) and deaths due to malaria. Other sources say that as many as 1.5 million to 2.7 million people die every year, especially children and pregnant women. Malaria is a disease case that never goes away (emerging). Diagnostics and proper treatment malaria will improve maternal and fetal outcomes. Malaria in pregnancy is a serious problem considering its effects on the mother and fetus, which, if not treated quickly and accurately, can increase maternal and neonatal mortality rates. Prevention of malaria in pregnancy can be started early through ANC visits by providing health education/education about malaria prevention and prophylactic treatment for those living in endemic areas. Recommendations that can be given to the Government of Aceh, especially the Aceh Provincial Health Office, to pay special attention to eliminating malaria cases in Aceh Jaya District, Sabang City and South Aceh District the highest level of susceptibility to malaria cases compared to other districts/cities. For people who live in these three areas, it is hoped that they will be more concerned with the factors that cause malaria and participate in the success of government programs in efforts to eliminate malaria cases in Aceh Province.

Keywords: malaria, pregnancy, fetal, maternal outcome.

Synchronous primary malignancy of endometrial cancer and cervical cancer: case report and review literature

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Introduction: Multiple primary malignancies can occur in the same organs or multiple organs. Asynchronous primary malignancy of the genital tract is relatively rare comprising only 1–6% of genital neoplasms. The tumor is usually found as the primary tumor or the metastasis of cervical, endometrial, or ovarian tumors. Endometrial carcinoma is the most common malignant tumor of the female genital tract affecting women in the western population. At the same time, cervical cancer is the second most common malignant tumor and the third most common cause of death of the female genital tract affecting women in developing countries. Synchronous primary malignancies of the uterus which located on the cervix and endometrium are extremely rare. Hence, the management and prognosis of the patients are not easily predicted.

Case description: a 48-year-old-female PSA0 presented to the hospital with vaginal bleeding for 8 months which has been worsening for the last 3 months followed by intermittent abdominal pain. The patient has also experienced post-
ADDITIONAL CONTENT

ABSTRACT

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The simultaneous occurrence of tumors in the genital tract is extremely rare. Hence, the Management has become more complicated than the primary tumor and needs attention to distinguish between synchronous primary tumor and metastasis tumor.

Conclusion: The simultaneous occurrence of tumors in the genital tract is extremely rare. Hence, the Management has become more complicated than the primary tumor and needs attention to distinguish between synchronous primary tumor and metastasis tumor.

Keywords: endometrial carcinoma, cervical carcinoma, synchronous malignancy

Adenoma parathyroid presenting with muscle paralysis: a case report

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Introduction: Parathyroid adenoma is part of a parathyroid proliferative disorder. Eighty percent of primary hyperparathyroidism (PHPT) is caused by parathyroid adenoma. Adenomas are most common in patients 50 to 70 years old; however, they can occur at any age. Women are affected times more often than men.

Case description: A 30 years old woman presented with difficulty of walk within one year. In physical examination, we found a lump on the right cruris region size ± 3x4 cm. In laboratory examination, we found hyperparathyroidism, hypercalcemia, and hypophosphatemia. From Tc99m MIBI examination, we found adenoma parathyroid. The patient was referred to surgical oncology for the only effective treatment for patients with PHPT.

Conclusion: Parathyroid adenoma should be considered a differential diagnosis if hypercalcemia and hyperparathyroidism are presented in asymptomatic patients. If parathyroid adenoma is proven, then surgery has a major role in its management.

Keywords: parathyroid adenoma, primary hyperparathyroidism, parathyroid hormone.

Top urology issues while COVID-19 pandemic in rural Indonesia

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Introduction: The COVID-19 pandemic has caused a global health threat. This disease has brought about huge changes in the priorities of medical and surgical procedures. This pandemic created a terrifying atmosphere which made people avoid to visit the hospital. The beginning of peak of COVID-19 cases in Tarakan was in November. Our hospital, Pertamina Hospital Tarakan also in this situation. Nearly a half of the bed in the entire emergency room became dedicated to COVID-19.

Methods: this research is a descriptive study which retrieval patients data from medical record during March 2020-December 2020.

Results: A total of 86 patients were served from march 2020-December 2020. There were 51 males (59.30%) and 35 females (40.70%) with the average of 41 years old. The youngest was 1 years old and the oldest was 71 years old. The most common diagnoses were urinary tract infection (UTI) 46 cases (53.48%), calculus of urinary tract 9 cases (10.46%), renal colic 8 cases (9.30%), benign prostate hyperplasia 7 cases (8.13%), urinary retention 4 cases (4.65%), urethritis 4 cases (4.65%), phimosis 3 cases (3.48%), balanitis 3 cases (3.48%), hydronephrosis 1 case (1.16%), and hematuria 1 case (1.16%).

Conclusion: This pandemic may change the priority and habit of our society to come to the hospital.

Keywords: COVID-19, urology, pandemic, rural Indonesia.

Endovascular therapy for chronic limb-threatening ischemia: successful infra-popliteal revascularization

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Introduction: Chronic limb-threatening ischemia (CLTI), a manifestation of peripheral arterial disease (PAD) characterized by chronic, inadequate tissue perfusion at rest, is associated with decreased quality of life and substantial morbidity and mortality. Patients with PAD may present with CLTI; however, with increasing life expectancy and the prevalence of diabetes type 2, obesity, and sedentary lifestyles, these estimates are likely to increase. CLTI is defined as ischemic pain in the foot, non-healing wounds, or gangrene attributable to the objectively proven arterial occlusive disease.

Case description: A 57-year-old man presents to the Zainoel Abidin General Hospital emergency room with a chief complaint of pain in the right foot foot since 3 months. The pain is worse with elevation and lessens with dependency. The complaint of pain being extremely progressive for 10 days before coming to the hospital. The patient has no history of smoking and the 10-year history of controlled type 2 diabetes mellitus. The physical examination revealed a stable hemodynamic, an unhealed wound in the right lower limb, and an open wound size 7cm x 3cm x 3cm. He has palpable femoral pulses but not distal pulses. Performed CT angiography lower limb obtained low perfusion at rest, is associated with decreased quality of life and substantial morbidity and mortality. Patients with PAD may present with CLTI; however, with increasing life expectancy and the prevalence of diabetes type 2, obesity, and sedentary lifestyles, these estimates are likely to increase. CLTI is defined as ischemic pain in the foot, non-healing wounds, or gangrene attributable to the objectively proven arterial occlusive disease.

Conclusion: Chronic limb-threatening ischemia represents the end-stage of peripheral artery disease. The goal of treatment is to relieve pain, heal wounds, and preserve a functional limb. A cornerstone of treatment is timely arterial revascularization.

Keywords: Chronic limb-threatening ischemia, revascularization, endovascular surgery, limb saving.

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Keywords: Chronic limb-threatening ischemia, revascularization, endovascular surgery, limb saving.
Exploratory laparotomy with tumor resection for the giant intraabdominal tumor with cytologically result in plexiform fibromyxoma

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Introduction: Giant intraabdominal tumor with plexiform fibromyxoma is a benign mesenchymal gastric tumor recognized by World Health Organization (WHO) classification of tumors editorial board, digestive system tumors 2019. Most are multinodular masses involving the muscular propria or submucosa of the antral / prepyloric region. Histologically, the tumors exhibited a plexiform growth pattern and were composed of a rich myxoid stroma and cytologically bland uniform spindle cells without mitotic figures, except one case that displayed nuclear pleomorphism and increased mitosis. Exploratory laparotomy with tumor resection is an important clinical technique for the debridement of the tumor in order to decrease the morbidity acquired by the patient, no mutations were identified on histological result. We presented a case of the giant intraabdominal tumor with plexiform fibromyxoma using exploratory laparotomy with tumor resection technique.

Case description: A 39 years old female came with the chief complaint of abdominal pain in all areas since 3 months before admission. The other symptoms are distented abdomen, no defecating for a week. The patient has felt a tumor in upper right stomach, whose size is getting bigger. The patient has a history of mastectomy since 3 years ago. On arrival to the emergency department, hemodynamic status was stable. Physical examination showed abdomen distention, peristaltic increase and abdominal pain in all areas. Palpable humped mass with unclear boundaries. Rectal toucher examination showed normal function. Laboratory’s result for preoperative showed normal function. The histological result showed a plexiform fibromyxoma overview and no mutations were identified.

Conclusion: The success of this approach depends on the time of surgery. When surgery is delayed, the mass becomes more massive, making exploratory laparotomy much more difficult for surgical technique.

Keywords: giant intraabdominal tumor, plexiform fibromyxoma, benign mesenchymal gastric tumors, laparotomy exploration, tumor resection technique.

Reconstruction of occipital squamous cell carcinoma with trapezius pedicle flap at Dr. Zainoel Abidin General Hospital, Banda Aceh, Indonesia

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Introduction: The trapezius flap is used in various salvage procedures for head and neck reconstruction. It is a better procedure for an older patient with the Squamous Cell Carcinoma (SCC), as it is associated with a shorter operation time and minimal functional deficits. In this case report we will discuss cases with occipital defects treated with trapezius flap using a branch from the transverse cervical artery.

Case description: We report a man 55 years old man with soft tissue located in the occipital area. Microscopic examination showed a stratified squamous epithelium with keratosis. In the sub epithelium, a proliferative squamous epithelium appears with a pleomorphic nuclei, hyperchromatic, increased N/C (Nuclear-Cytoplasmic) ratio and mitosis that infiltrates the connective tissue with polymorphonuclear (PMN) inflammatory cells. Imaging workup initially included a non-contrast computed tomography (CT) of the head, which demonstrated an expansile, mixed lucent and sclerotic mass in the occipital bone. The technique that can be used to reconstruct the effects of SCC, in this case, is the Trapezius Pedicle Flap. This surgical technique isolates and utilizes site of the abnormality that differentiate them elsewhere on the skin. Although mostly benign, the diagnosis and treatment of these lesions can pose significant challenges due to visual impairment (and delayed detection), anatomical state, exposure to harmful (exogenous) agents, different histological features, and the advanced age of the affected individual. This is even more true for malignant tumors in scalp, which are rare but associated with a poor prognosis. Therefore, adequate patient care requires interdisciplinary management.

Cases descriptions: A 32-year-old female patient presented with a complaint of a lump on the right head 10 years ago, initially a small lump like a marble and not easy to move. Then the longer it gets bigger and is accompanied by pain. Initially, the patient had surgery to remove the tumor in the last 3 years ago, but the lumps reappeared. The patient also complained of headaches. Physical examination found a lump in the right capitits region measuring 10 x 10 cm, firmly demarcated solid consistency, immobilized, fixed, tender (-), the color of the lump is the same as the surrounding skin tissue. CT scan shows a soft tissue mass in the vertex region and an intact impression of the cranium. Then a scalp tumor excision and an elective biopsy were performed. The mass was removed by means of a blunt dissection. Defect of tumor were closed by rotation flap method. The specimen is sent to the anatomical pathology laboratory and awaits the histopathology.

Conclusion: It has been reported that a 32-year-old woman diagnosed with scalp tumor in the left parietal region based on history, physical examination and CT-scan and has undergone surgical excision of the scalp tumor craniotomy and the closure of defect with rotation flap. After surgery, the tissue or sample is checked again in the pathology anatomy and awaits the results.

Keywords: scalp tumor, tumor excision, craniotomy, rotation flap.

Excision of scalp tumor in parietal region and the closure of defect with rotation flap at Dr Zainoel Abidin Hospital, Banda Aceh, Indonesia

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Introduction: Scalp tumors are characterized by a very broad and heterogeneous clinical spectrum. They often exhibit special features based on the...
the dorsal scapular artery during the harvest of the trapezius flap.

**Conclusion:** The trapezius pedicle flap is a reliable and good alternative option to cover complex occipital-cervical of Occipital Squamous Cell Carcinoma.

**Keywords:** trapezius flap, squamous cell carcinoma, occipital.

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**Mechanochemical venous ablation for severe chronic venous insufficiency**

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**Introduction:** Chronic venous insufficiency (CVI) is an advanced stage of venous hypertension caused by a pathological event that causes impaired venous return. Treatment of CVI with Mechanochemical Endovenous Ablation (MOCA) procedures have been shown to provide faster recovery and less post-procedure pain and discomfort. Minor complications such as localized hematoma, thrombophlebitis, and ecchymosis may occur.

**Case Description:** A 69-year-old man complained of pulsating pain in both legs and burs that broke out and wound up in 2001. In 2005, the patient underwent surgery at a hospital in Malaysia. Post-surgery, the patient complained of wounds and pain only got better temporarily. In 2019, the patient went to the dr. Zainoel Abidin Hospital, Aceh. Local status of left peds, there was a wound with pus and necrotic tissue. The patient was decided to undergo Mechanochemical Endovenous Ablation (MOCA) surgery at Dr. Zainoel Abidin Hospital. MOCA is a hybrid endovascular that mechanical abrasion through a special catheter and chemical abrasion by injecting a foam sclerosant. The patient underwent MOCA surgery in August 2019, and second operation Phlebectomy in December 2019, and third operation Debridement in January 2020. Post-surgery continued with wound care on both legs of patient and medical stocking compression. There was no on pain in both legs. On January 20, 2020, the patient was declared cured. Currently, without any complaints of pain in both limbs, injury, and edema.

**Conclusion:** MOCA is a surgical procedure for severe CVI with a high level of support and has the advantage of reducing pain intensity. MOCA has been shown to reduce complications such as DVT, painful skin burns, hematomas, and nerve injuries. The MOCA procedure can be an alternative procedure in the management of chronic venous insufficiency. More case reports and case series are needed to increase knowledge about MOCA procedures.

**Keywords:** mechanochemical venous ablation, surgery, limb injury, management.

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**Epidural hematoma and COVID-19: a case report**

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**Introduction:** An epidural hematoma (EDH) is an extra-axial accumulation of blood between the dura mater and the inner table of the skull. It requires immediate intervention as it is a life-threatening condition. A craniotomy is a surgical treatment that can evacuate the accumulation of blood in EDH. However, since the emergence of COVID-19, procedures like craniotomy have been speculated to spread the disease through aerosol generation potentially. No evidence have yet found an association between EDH and COVID-19. In this case report we will discuss a patient with right temporal base EDH and COVID-19 with mild symptoms.

**Case Description:** We report a 31-year-old woman with a loss of consciousness due to a traffic accident, two days before admitted to the emergency unit. Loss of consciousness was caused by a traffic accident in Simeulue and he was referred to Regional Public Hospital Zainoel Abidin Banda Aceh. PCR test for COVID-19 showed a positive SARS-CoV-2 result with mild symptoms. Imaging workup included a non-contrast computed tomography (CT) of the head, which demonstrated an epidural hematoma (EDH) at the right temporal lobe and an intracranial hemorrhage (ICH) at the left frontal lobe. Craniotomy was done to evacuate the EDH and the patient was monitored in the respiratory intensive care unit. Two days after craniotomy, the patient felt pain on the surgical wound, indicating a possible infection. Therefore, the previous wound suture was replaced with a new suture to prevent further infections.

**Conclusion:** Epidural hematomas are life-threatening conditions that require immediate intervention. Craniotomy has been speculated to spread COVID-19 through aerosol generation, but associations between EDH and COVID-19 have not been fully understood.

**Keywords:** epidural hematoma, craniotomy, COVID-19.

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**Profile of osteomyelitis patients at Dr. Zainoel Abidin General Hospital, Banda Aceh, Indonesia**

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**Introduction:** Musculoskeletal disorders are a contributor to the highest morbidity rates, especially in developing countries. One of the musculoskeletal diseases is osteomyelitis. This disease’s incidence rate is not known with certainty because it is not a disease that is routinely reported even though bone infection is a relatively a common case.

**Method:** Descriptive study with a cross-sectional design using medical records of osteomyelitis patients with total sample method and evaluate prevalence, age, sex, location of osteomyelitis, source of infection, classification based on duration of disease and management.

**Results:** A total of 221 patients diagnosed with osteomyelitis from January 2018 to December 2019 were included in this study. The prevalence of osteomyelitis cases in Dr. Zainoel Abidin Banda Aceh in 2018 and 2019 was 23/100,000 and 24/100,000 population respectively. The three main age groups; 45-64 years were 91 (41.2%), 25-44 years were 46 (20.8%) and 15-24 were years 33 (14.9%). Based on gender, male 157 (71%) and female 64 (29.0%). The three main locations for osteomyelitis; femoral bone was 106 (48%), tibia-fibular bone were 58 (26.2%) and tarsal-metatarsal bone were 25 (11.3%). Based on the source of infection, contiguous focus was 90 (40.7%). Based on the duration of the disease, chronic osteomyelitis was 171 (77.4%) and acute osteomyelitis was 50 (22.6%) and the dominant treatment was antibiotics with surgery with 159 (71.9%) sample.
Conclusion: Profiles of osteomyelitis patient in Dr. Zainoel Abidin Banda Aceh in 2018 and 2019 was dominated by the age group of 45-64 years, male, femoral bone as a location of osteomyelitis, contiguous focus as source of infection, chronic osteomyelitis and treatment of antibiotics with surgery.

Keywords: profile, prevalence, osteomyelitis.

Foreign body in penile urethra

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Introduction: Self-insertion of a foreign body into the penile urethra is a rare clinical situation but a genitourelogic important issue. The practice manifested primarily during states of pathological masturbation. Eroticism and sexual experimentation fantasies appear to be the main desires of those patients. Patients frequently feel embarrassed and tend to ignore seeking immediate medical advice if there was no progressive pain.

Case description: An 18-year-old male presents to the Urology Department, Harapan Bunda Hospital with chief complaints of progressive pain and swelling over the penile after repeatedly inserting beads into the penile urethra and stuck off inside. He was medically stable. There was no formal history of psychiatric disorders. On physical genitalia examination revealed grossly edematous penile. The beads were not visible, but palpable within the penile urethra. The patient has no complaint for urination, so he was scheduled to the hospital for doing the follow-up and opening the catheter. The patient voided well and did not complain of any pain.

Conclusion: Foreign body in penile urethra is rare, but the case highlights several important management principles. Its shape and position guide foreign body extraction. Complications following the case are rare but can include urethral strictures as 5% incidence is the most common delayed complication.

Keywords: Foreign body, penile urethra, sexual gratification, autoerotism.

Tongue tumor: a case report

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Introduction: Oral and oropharyngeal tumors are the sixth most common tumor found worldwide and occur most frequently in men. The average cases of tongue tumors occurred at a young age (<40 years). Squamous cell carcinoma (SCC) of the tongue is the most common tumor with 90-95% of oral malignancies. This case report discusses a case of tongue tumor that occurred in a patient aged 14 years.

Case description: Male, 14 years old, came to the emergency room (ER) with a sore on his tongue. Initially, small canker sores appear about the size of a sesame seed since 5 months ago. Then the wound expanded. Complaints accompanied by pain. Whitish sores. Complaints of pain getting worse since 3 weeks. Complaints of not being able to swallow were denied. He goes to an orphanage and brushes his teeth twice a day. Loses weight two kilograms in five months. He was an active smoker since 1 year ago. He was diagnosed with a tongue tumor, then an incisional biopsy was performed to be sent to the anatomical pathology laboratory. The results of the anatomical pathology examination showed a keratinizing SCC. He is planned to undergo chemotheraphy.

Conclusion: Squamous cell carcinoma (SCC) is defined as a malignant epithelial neoplasm of excess squamous differentiation characterized by keratin formation and/or presence of intercellular bridges (intercellular bridges). The main risk factor for SCC is exposure to tobacco cigarettes. Tongue tumor management can be a problem, so a combination of surgery and radiation therapy can make the prognosis better. The prognosis of cancer at this location is not very good. A factor that can affect the prognosis of tongue tumors is whether or not cervical metastases are present.

Keywords: Cigarettes, Management, Squamous cell carcinoma, Tongue tumor.

Acute cholangitis: a case report

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Introduction: bile duct in most of the cases. The diagnosis is established by the characteristic clinical symptoms and signs of infection, abnormal laboratory studies suggestive of infection and biliary obstruction, and abnormal imaging studies suggestive of biliary obstruction. The treatment modalities include administration of intravenous fluid, antibiotics, and drainage of the bile duct. The outcome is good if the treatment is started early.

Case descriptions: A case report of 37 years old male presented with abdominal pain, colicky, fever, and vomiting. The Patient came to ER of Zainoel Abidin Hospital with abdominal pain as chief complaint. Initially, the patient felt abdominal pain for two days and is suspected of peritonitis due to perforation of hollow organ. Upon laparotomy and exploring common bile duct (CBD), eight stones were found and gallbladder enlarge. The patient had severe sepsis with Leukosites more than 19.100 and was treated with fosfomycin 1gram per 12 hours. On the fifth day, the patient’s condition improved and out of ward after seven days of hospitality.

Conclusion: We present a case of acute cholangitis suspected as appendicitis. The outcome of patient was good after performed laparotomy exploration and drainage bile duct. On the seventh day after laparotomy, the patient underwent a cholangiography examination that showed no stone left in biliary system.

Keywords: cholangitis, laparotomy, biliary obstruction.

A case report: chondrosarcoma humerus with limb-sparing surgery

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Conclusion: Profiles of osteomyelitis patient in Dr. Zainoel Abidin Banda Aceh in 2018 and 2019 was dominated by the age group of 45-64 years, male, femoral bone as a location of osteomyelitis, contiguous focus as source of infection, chronic osteomyelitis and treatment of antibiotics with surgery.

Keywords: profile, prevalence, osteomyelitis.
**ABSTRACT**

**Introduction:** Chondrosarcoma incidence 3.5-9% of primary bone tumors and 30% of primary bone malignancies. Chondrosarcoma often occurs in the 4th to 7th decades, slightly more frequently in men. The locations most often are the pelvic, ribs, proximal femur and proximal humerus. Chondrosarcomas constitute a heterogeneous group of neoplasms that share the common feature of producing the cartilage matrix. Generally, chondrosarcoma is intramedullary, and the fundamental tumor tissue is the new cartilage tissue, sometimes with ossification, calcification and mucoid degeneration. The tumor always has a primary origin, but a few secondary cases have also been reported. The main symptoms are pain and swelling. As radiology and chemotherapy are usually ineffective, the treatment most often used is surgical resection. If a complete surgical resection is not performed, the tumors reappear in the lesions and, rarely, lead to metastasis to distant sites. The prognosis depends largely on the original lesion’s location, obtaining negative sections and the histological degree of the tumor.

**Case description:** Chondrosarcoma does not usually develop in the osteoid tissue. It usually occurs in cartilage of the pelvis, femur, tibia and humerus. Humerus chondrosarcoma is rare, accounting for about 5 to 7% of all reported cases of chondrosarcoma. Until the 1970s, amputation was the preferred treatment for severe cases of malignant tumors around the humerus. Since then, an increasing number of patients have adopted limb salvage treatment as the first choice, and in most cases, the outcomes have been good. Although there have been many reports of the use of limb salvage treatment, the tumor was not large and there was no damage to the soft tissue, nerves and blood vessels around the tumor in most studies. Also, the relevant risks and the efficacy of such therapy for treating large tumors are unknown.

**Conclusion:** In this study, we present a case of chondrosarcoma in the humerus. Based on the preoperative evaluation of the surrounding soft tissue and the reconstruction design, the patient was treated with limb-salvage surgery. No complications were reported postoperatively and the patient retained limb function.

**Keywords:** chondrosarcoma, humerus, limb salvage.

**Late-onset adult diaphragmatic hernia, an uncommon cause of dyspepsia: a case report**

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**Introduction:** Adult-onset diaphragmatic hernia is a rare condition with variable clinical manifestations. It is extremely rare and accounts for about 5% of diaphragmatic hernias. The majority of adult-onset diaphragmatic hernia is associated with trauma. Blunt thoracic and abdominal trauma associated with a 5% to 7% incidence of diaphragmatic injury. A congenital diaphragmatic hernia occurs in 1 out of every 2000-3000 live births. A majority of the patients will be diagnosed either antenatally or will present with respiratory distress in the first few hours of life. Patients, who present with late diaphragmatic hernias, complain of a wide variety of symptoms and diagnosis can be difficult. Herein, we report a case of adult-onset diaphragmatic hernia presented with dyspepsia.

**Case Description:** Female, 51 years old, came to the emergency room (ER) of Pidie Jaya Hospital with chief complaint of epigastric discomfort associated with nausea and vomiting. The chief complaint was experienced about 4 hours before hospital admission. The initial chest radiograph on admission showed a large air-fluid level in the left thoracic cavity. The patient was referred to surgeon and performed a laparotomy procedure. Post-operative, the complaint was a relief and abdominal discomfort disappeared. In our case, the chest radiograph with air-fluid level in the left thoracic cavity alerted us to the suspicion of Diaphragmatic Hernia. The diaphragmatic defect of our patient was located at the dome of the left diaphragm. This case was likely a delayed manifestation of occult diaphragmatic injury. The majority of adult-onset Diaphragmatic Hernia is associated with trauma. The incidence of diaphragmatic injury occurs in 5% in those who suffer blunt abdominal/thoracic trauma. Other causes of adult DH include delayed presentation of congenital DH; iatrogenic injury during abdominal or thoracic surgery; as a consequence of persistent infection (pneumonia, empyema); and also stress on the diaphragm from straining/coughing have been reported. These patients may present with a spectrum of symptoms and signs, ranging from minor chest/epigastric discomfort as in our case to major respiratory distress and intestinal obstruction from strangulation of the herniated contents.

**Conclusion:** Adult-onset Diaphragmatic Hernia should be promptly diagnosed and managed operatively.

**Keywords:** diaphragmatic hernia, late-onset, presentation.

**A rare case of Fournier’s gangrene caused by perforation of acute appendicitis**

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**Introduction:** Fournier’s gangrene is a progressive necrotizing fasciitis of the genital, perianal and perineal areas. Fournier’s gangrene is a potentially fatal disease with a high mortality rate and is included in cases of surgical and urological emergencies. This is a urological emergency because the disease’s onset is sudden, progresses rapidly, and becomes widespread and causes septicemia.

**Case description:** A 53 years old male patient came to the hospital with complaint of pain and swelling in the scrotum. Seven days before admission, patient complained of fever and pain in the umbilical region. Four days before admission, patient complained of pain and swelling in the scrotum, radiating to the lower right abdomen. On the abdomen’s physical examination, there were erythema and tenderness in the right inguinal and suprapubic regions with scrotal edema. The patient was diagnosed with Fournier’s gangrene and the suspected cause was acute appendicitis perforation. Exploratory laparotomy, appendectomy, debridement of the right inguinal and scrotal region were performed.

**Conclusion:** Fournier’s gangrene is a condition that requires emergency action. Although these cases are rare, this condition is life-threatening and therefore precise diagnosis is required to achieve good results. Early surgical debridement, together with fluid resuscitation, monitoring of hemodynamic status, nutrition and administration of broad-spectrum antibiotics are essential treatments to reduce mortality.

**Keywords:** Fournier’s gangrene, appendicitis, debridement.
Management of supracondylar humerus fracture in children with osteogenesis imperfecta

Irsan Abubakar, Panji Anugrah

Introduction: Osteogenesis imperfecta is a genetic disorder of connective tissue with the clinical trademark of bone fragility. Supracondylar fractures of the humerus are the most common type of fracture in children account for 50% to 70% of all elbow fractures. The goal of orthopedic treatment is to maximize the affected patient’s function, prevent deformity and disability resulting from fractures, correct deformities that have developed, and monitor for potential complicating conditions associated with osteogenesis imperfecta.

Case description: A 9 years old boy was presented to our hospital emergency ward with left elbow pain since 6 days ago due to accident, fall with his left elbow landed in an outstretched position. The patient was already diagnosed with osteogenesis imperfecta since he was 5 years old, Routinely controlled in outpatient clinic and got bisphosphonate therapy every 6 months. Radiographs of the left elbow showed a supracondylar fractures with distal fragments displaced posteriorly. The Baumann angle increased to 29 degrees. Patient suffers supracondylar humerus fracture, extension type, Gartlan III with displaced posteriorly. The Baumann angle increased to 29 degrees. Patient already diagnosed achalasia and underwent Heller’s myotomy and fundoplication. After being treated for twelve days in our ward, patient showed significant improvement and was discharged from hospital without any complication.

Keywords: achalasia, esophageal tumor, Heller’s myotomy.

Functional outcome in C2/C3 fracture-dislocation managed with combined surgical decompression and posterior stabilization: a case report

Teuku Nanta Aulia, Muhammad Iqbal

Introduction: Spinal cord injury is one of the leading causes of paralysis and permanent immobility. Cervical spine injury potentially fatal due to multiple component damage including discoligamentous, vascular insult and spinal cord injury. Fracture dislocation of the second and third cervical spine is rare and generally involves single or double vertebra. The good functional outcome for cervical spine injury rarely happens, most deaths are caused by instantaneous death or secondary trauma.

Case description: A 17 years old male was referred to the emergency room with sustained injury to the cervical spine and developed quadriplegia. The patient was tackled from the side while playing with friends, lost his balance and landed his neck on the corner of the table resulting in burst fracture dislocation of C2/C3 and spinal cord compression with immediate onset of complete quadriplegia. The patient underwent C2/C3 spinal cord surgical decompression and fusing cervical spine C1-C4 posterior stabilization with pedicle screw procedure. First post-operation day (POD), patient has minimal movement from both arms and legs with 2/2/2/2 motoric assessment and required physiotherapy. Two weeks POD, the motoric function improved with 4/4/4/4. Three weeks POD, patient was able to write again but further follow up is required.

Conclusion: Fracture dislocation in this patient causing compression of the spinal cord. A retropulsion fracture fragment can displaced into the spinal canal, and it potentially causing spinal cord injury. It is continued to the anterior horn and impacted motor dysfunction. Fracture dislocation in C2/C3 level blocks neurotransmitters impulse resulting total paralysis of four limbs without sensory dysfunction. This patient required temporary external stabilization for the neck area while waiting for surgery. The principle of treatment for dislocated cervical spine fractures is by decompressing an affected spinal cord and placing the internal fixation such as pedicle screw to make the fracture more stable.

Keywords: fracture-dislocation, spinal cord injury, functional outcome.

Endovascular coiling in post open nephrolithotomy with hematuria: a case report

Fachrul Junaidi, Atika Lestari

Introduction: A 7 years old boy was presented to our hospital emergency ward with left elbow pain since 6 days ago due to accident, fall with his left elbow landed in an outstretched position. The patient was already diagnosed with osteogenesis imperfecta since he was 5 years old, Routinely controlled in outpatient clinic and got bisphosphonate therapy every 6 months. Radiographs of the left elbow showed a supracondylar fractures with distal fragments displaced posteriorly. The Baumann angle increased to 29 degrees. Patient suffers supracondylar humerus fracture, extension type, Gartlan III with osteogenesis imperfecta type I. Surgical treatment was done by open reduction and internal fixation using K-wire. Problem in reduction and fixation occurs due to the brittle of the bone and fracture position. Gentle reduction and Alternative fixation on elbow extension under intra osseus done.

Conclusion: Cautios and alternate reduction techniques should done to overcome brittleness. Routine medical management with bisphosphonate, while not a cure, has allowed improved operative treatment and function for fracture in children with osteogenesis imperfecta.

Keywords: supracondylar humerus fracture, osteogenesis imperfect, child.
**ABSTRACT**

**Introduction:** Kidney stones are a disease experienced by the people of Indonesia. There are several surgical techniques for removing kidney stones such as PCNL and Open Nephrolithotomy. Open Nephrolithotomy can be performed to remove large and complex stones that commonly form in the kidneys and ureters. Patients who have staghorn calculi kidney stones can also undergo open surgery, because they usually need a lot of medication to clear all the stones in the urinary tract. Open nephrolithotomy can lead to several complications in the form of infection, kidney atrophy, and bleeding. Hematuria itself is a complication that is quite common in open nephrolithotomy.

**Case description:** A female patient came to the Zainoel Abidin General Hospital in Banda Aceh with reddish urination complaints since December 2019, no signs of hypovolemic shock were found, routine blood results found Hb 5% and other vital signs were within normal limits. Initially in November 2019 the patient complained of left back pain, sand came out during urination. The patient was diagnosed with a left kidney stone and open nephrolithotomy was performed at the Meubiah Hospital. A month later the patient complained of reddish discoloration of urine. Because it did not improve in January 2020 the patient was referred to Zainoel Abidin Hospital. The patient underwent surgery using the Endovascular Coiling technique. After undergoing surgery the patient was declared cured.

**Conclusion:** Open nephrolithotomy can result in kidney injury or kidney trauma, hydronephrosis, chronic pyelonephritis, hypertension and arteriovenous fistulas. Clinical symptoms of the complications that arise can be characterized by hematuria. The modality of endovascular coiling technique can be the right choice of treatment in cases of kidney trauma.

**Keywords:** open nephrolithotomy, endovascular coiling, surgery, management.

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**Fourteen years old boy with epispadias: a case report**

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**Introduction:** Epispadias is one of the congenital abnormalities where the urethral tissue is in the back of the penis which is included in the most frequent cases in boys with 1:300.000 incidence and 1:565.000 women. In patients with epispadias, psychosocial disorders will cause a difficulty in interacting with their environment.

**Case description:** 14 Years old boy, came to the Pediatric Surgery Outpatient Clinic at Dr. Zainoel Abidin General Hospital with complaints of urinary pit located on the back of the penis that he experienced from birth. Patients also complain of not being able to resist urination that causes psychosocial problems. The urethra is located on the back of the penis and not up to the vesica from physical examination. The patient was diagnosed with Epispadias Penile Type and decided to take operative action with Modified Cantwell - Ransley Repair technique so that the urethra will be in the most functional and normal position.

**Conclusion:** Epispadias is a very rare and most common case in men. Epispadias is classified into 3 types, Balanica, Penile and Penophobica. Epispadias cases are often associated with Extropy Vesica. The ultimate goal of surgical management is the reconstruction of the penis to repair the dorsal chordee and the urethral meatus is in the most functional and normal position. Surgery is better to perform as soon as possible, but patients often come at school age after experiencing psychosocial disorders.

**Keyword:** epispadias, modified Cantwell - Ransley repair technique, reconstruction, psychosocial disorders.

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**Pressure ulcer: an evidence-based review**

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A pressure ulcer is a condition where the anatomical structure and normal skin function are damaged due to continuous external pressure on the bony prominence. Many factors play a role in the formation of pressure ulcers, including external factors, such as pressure, shear force, skin surface friction, moisture, and internal factors consisting of motor disturbance, sensory disturbance, malnutrition, and dehydration and trophic disorders. Decubitus ulcer manifestations may vary started from reddish area not blanched by fingertip pressure with intact skin conditions (grade 1) to area with necrosis of muscles, bones, tendons or joint capsules (grade 4). Prevention efforts include reducing friction, pressure, pull, and making position changes regularly and optimal nutritional support. Pressure ulcer therapy can be performed either by surgical or non-surgical method using mechanical, autolytic, biological, or enzymatic techniques. Hopefully, by knowing the pressure ulcer comprehensively, the incidence of pressure ulcers can be reduced, and appropriate therapy can be done for the patient’s benefit.

**Keywords:** pressure ulcer, management, diagnosis.

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**Acute description of abdomen with ovarium carcinoma in puberty girls**

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**Introduction:** Acute Abdomen is pain that is felt between the chest and inguinal region. Abdominal pain is not a diagnosis but a symptom of an illness. Acute abdominal pain is defined as attacks of severe and persistent abdominal pain that occur suddenly and require surgery to resolve the cause. Organic abnormalities as a differential diagnosis of recurrent acute abdominal causes have been reported, but only in 5-15.6% of cases. In general, organic disorders as a cause of recurrent acute abdomen can be divided according to intra-abdominal and extra-abdominal causes. Ovarian cancer is the leading cause of death in gynecological malignancies. In 2007 ovarian cancer was the fifth leading cause of death for women in the United States after lung, colorectal, breast, and pancreatic cancer. The tumor enlarges and spreads to the surrounding organs without complaint, so that ovarian cancer is generally found at an advanced stage. This is why these tumors are known as a silent killer disease.

**Case description:** A 15-year-old girl came to the Zainoel Abiding Public Hospital with complaints of enlarged stomach and pain, the patient has experienced this since one month ago, abdominal pain has disappeared, the condition has worsened since the last ten days. Abdominal pain is felt throughout the stomach, the stomach appears to be distended, the patient also claims to have fever, nausea and vomiting. Initially, the patient admitted that he had gone to a private hospital to see a pediatrician, but the complaints did not decrease, the stomach was getting sicker and getting bigger.

**Conclusion:** The appearance of acute abdomen in certain conditions can
provide conclusions that lead to misdiagnosis and handling, the approach of history taking and physical examination must be maximized so that it is appropriate to take action decisions.

**Keywords:** Acute Abdomen, ovarian carcinoma, intra-abdominal tumors.

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## ABSTRACT

A 35-year-old woman with breast cancer received a chemotherapy regimen of Docetaxel, Doxorubicin, and Cyclophosphamide for 6 cycles and had no menstrual bleeding (amenorrhoea) after chemotherapy finished. Physical examination, gynecology, and ultrasound showed no abnormalities. However, the Anti-Mullerian Hormone (AMH) immunoserology test showed very low results.

**Conclusion:** The gonadotoxicity effects of chemotherapy on breast cancer can cause a premature ovarian failure which can manifest as oligomenorrhea, amenorrhea, or known as chemotherapy-induced amenorrhea (CIA), which can lead to induction of premature menopause or chemotherapy-induced menopause (CIM).

**Keywords:** chemotherapy-induced amenorrhea, chemotherapy-induced menopause, breast cancer.

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## General surgeon response in natural disaster

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Natural disasters in Indonesia take turns, disaster management to ease the burden on survivors is always carried out by volunteers and especially volunteers for the medical team. Volunteers from a medical team who specialize in general surgery are at the forefront of the need to be present in every earthquake natural disaster. Indonesia becomes the emerald of the equator, which is behind its natural beauty, as well as the risks of the disaster. Most cases in natural earthquake disasters are blunt trauma and fractures. Record the response activities of general surgeons who go to the earthquake disaster area. General surgeons are the doctors most needed during an earthquake. General surgeons play the main role and most play a role in every natural disaster, especially in the acute phase.

**Keywords:** disaster, relief, general surgeon, reconstruction, earthquake, mobilization, triage.

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## Complications of the herniotomy procedure in infants with an indirect hernia: a case report

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**Introduction:** Indirect Hernia is one of the most common emergencies in surgery. Although the diagnosis is usually made by physical examination, the condition of the hernia sac and the following operation procedure may vary. Therefore, the need for a special skill of surgery is higher.

**Case:** The authors report a 3-months-old infant with bulging of the inguinal area and weight gain difficulties. The patient presented with a lump in the scrotum and was diagnosed as incarcerated Indirect Hernia. The Patient underwent Herniotomy procedure at the regional general hospital Bener Meriah. Seven days after the herniotomy was performed, the scrotum was enlarged and darkened. The patient was suspected of having a strangulated indirect hernia and was given a 100cm long ileal resection laparotomy procedure and end-to-end anastomosis. Nevertheless, the patient showed the manifestation of peritonitis three days after. The authors ultimately followed up with an explorative laparotomy and colostomy preparation procedure.

**Conclusion:** Indirect hernia in infants is a clinical condition where the intestine

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## Clinical manifestations, vital signs, and bowel viability in pediatric intussusception

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**Introduction:** Intussusception is a condition in which part of the intestine slides into an adjacent part of the intestine. Intussusception is an important cause of an acute abdomen and the second most common cause of bowel obstruction in children. The classic triad of intussusception, including vomiting, abdominal colic pain, and bloody stool. However, the triad has only been reported in <50% of cases. This study is aimed to evaluate the clinical manifestation, vital signs, and bowel viability in pediatric intussusception

**Methods:** This is an observational retrospective study with total sampling.

**Results:** Based on clinical characteristics, 44.4% of subjects had manifestations for 2-3 days. Ileocolic was the most common location (77.78%). The majority of the subjects did not have the classic triad (66.67%), had red currant jelly stool (62.96%), did not have abdominal mass (59.26%), and complained of abdominal pain (70.37%), did not have abdominal distention (74.07%), did not vomit (55.5%), was lethargic (59.26%), and had viable bowel (62.96%).

**Conclusion:** This study found that the most common manifestations of intussusception in children were abdominal pain, red currant jelly stool, and lethargy, with viable bowel and located at ileocolic.

**Keywords:** intussusception, characteristics, triad, viability.
enters a cavity where it does not belong. Emergencies that occur in these cases require prompt and precise treatment. A surgeon who is experienced in dealing with cases in infants will be solemnly needed.

**Keywords:** strangulated indirect hernia, incarcerated indirect hernia, herniotomy, resection.

Breast cancer with incidental manifestation of horner’s syndrome and esophageal metastasis in a young woman after a period of a loss to follow-up: a case report

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**Introduction:** Breast cancer with metastases to esophagus is very rare, accounts for less than 0.5% distant metastases. Although very rare, Horner’s syndrome can occur as an additional manifestation. Breast cancer among young women is more aggressive with relatively poor prognosis. Lost to follow-up is related to increased risk in distant metastases, treatment resistance, and poor outcomes. This study’s purpose was to present a rare case of esophageal metastasis and Horner’s syndrome manifestation due to breast cancer distant metastasis.

**Case description:** This is an observational study, reporting descriptively a case of breast cancer in a young woman age 36 years, with metastasis to esophagus and Horner’s syndrome. This patient had a medical history of unfinished breast cancer treatment four years ago. The patient underwent thorough medical examination, including endoscopy, laryngoscopy, cervical X-ray, and computed tomography (CT)-scan. The patient experienced dysphagia, hoarseness, and frequent hiccups. Prior to admission the patient had a tingling feeling in the neck and shoulder area. Also, there was an abnormal drop of the left eyelid. Previously, the patient was diagnosed and treated for tuberculoid laryngitis. The X-ray result showed burst fractures of the cervical vertebrae and slight pleural effusion. The endoscopy examination revealed esophageal metastases.

**Conclusion:** This report presents a very rare case of breast cancer in young women with co-occurrence of esophageal metastases and Horner’s syndrome. Our knowledge has not been reported elsewhere. Physicians should be aware of a thorough examination in breast cancer patients with neurological symptoms of the face and hoarseness for further diagnosis and treatment.

**Keywords:** esophageal metastasis, horner’s syndrome, breast cancer, diagnosis.
Profile of random blood sugar levels in moderate brain injury at Dr. Zainoel Abidin Hospital, Banda Aceh, Indonesia

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Introduction: The acute stage of head injury is generally characterized by a systemic stress response accompanied by secondary clinical conditions such as impaired blood sugar levels. Studies have mentioned that intensive glycemic control is essential after head injury for better clinical outcomes. The study aims to assess the profile of random blood sugar levels in patients with head injuries.

Methods: This is a descriptive study with a cross-sectional approach using secondary data. The variable assessed was blood sugar levels in moderate head injury patients.

Results: In this study, there were 92 samples met all the inclusion criteria. Sex variables were more common in men, 51 (44.43%) samples, while the mean age of all samples was 37.99±15.69 years. Epidural hemorrhage is more frequent in this study, 42 (45.65%) samples. The mean blood sugar level of moderate head injury patients in this study was 310.66±123.15 mg/dl.

Conclusion: Head injury in this study is more likely diagnosed in males, and the mean age was 37.99±15.69 years. The most common diagnosis is epidural hemorrhage and the glycermic index is in the hyperglycemia state.

Keywords: profile, blood sugar level, head injury, moderate traumatic brain injury

Well water consumption affects on the incidence of urolithiasis at Dr. Zainoel Abidin Banda Aceh, Indonesia

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Introduction: Urolithiasis is a health problem whose incidence ranks third highest in the field of urology. One of the causes that have most role in the formation of urolithiasis is calcium which binds to oxalate, phosphate, and even uric acid. Well water generally contains a high mineral composition, especially calcium, consuming well water continuously for a long time can be one factor in urolithiasis. This study aims to determine the effect of well water consumption on the incidence of urolithiasis in Dr. Zainoel Abidin Hospital, Banda Aceh, Indonesia.

Method: This study uses the case-control design by selecting respondents in quota sampling with a total of 60 people. The data obtained were then analyzed by the Chi-Square test, while to assess the size of exposure associations (risk factors) and disease events were calculated indirectly by finding the value of Odds Ratio (OR).

Result: The results of data analysis show that the p-value = 0.038 (p<0.05), and OR = 3.5 CI 95% (1.201-10.196). The results of this study indicate that the consumption of well water has an effect of 3.5-fold greater on the occurrence of urolithiasis in Dr. Zainoel Abidin Hospital, Banda Aceh, Indonesia.

Conclusion: Well water consumption affects the incidence of urinary tract stones in RSUD dr. Zainoel Abidin Banda Aceh and it has a 3.5 times greater risk of developing urinary tract stones.

Keywords: well water, calcium, urolithiasis.

Challenges of pediatric surgery during the COVID-19 pandemic: focus on Hirschsprung’s disease

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Introduction: Hirschspring’s disease (HD) is a rare but important congenital pediatric disease of the colon, and its incidence varies widely between ethnic groups. The COVID-19 pandemic had a significant impact on pediatric surgery, either directly or indirectly. The study aims to evaluate the characteristic of HD patients during the COVID-19 pandemic era.

Methods: This was a retrospective study of HD patients’ surgery during the COVID-19 pandemic era in 2020. The evaluation includes the pre-operative, peri-operative, and post-operative conditions of each subject. Clinical data collected includes age, gender, symptoms, type of procedure, duration of surgery, and length of stay (LOS).

Results: There were 27 HD patients (15 male;12 Female) who underwent surgical procedures during COVID-19 pandemic era in 2020. All patients were tested negative using both Rapid Test and RT-PCR examination. The majority of patients experience common HD symptoms like abdominal distention, bilious vomiting, constipation, soiling and delayed meconium passage. The surgery with transanal endorectal pull-through (TEPT) like Soave, became the most common procedure with average incision start from 0.65 cm of dentate line. The mean duration of surgery was 67 minutes. The mean of LOS was 4 days, various from 3 to 7 days.
Conclusion: The decision-making process for defining each HD patients' priority during the COVID-19 pandemic era should be personalized considering HAE risk factors, patient fragility, and accompanying social environment, especially during pandemic era.

Keywords: Hirschsprung's disease, epidemiology, COVID-19 pandemic.

Minimal invasive surgery, laparoscopy diagnostic primary amenorrhea, agenesis Mullerian: case series

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Introduction: Agenesis Mullerian, Mayer-Rokitansky-Küster-Hauser (MRKH) syndrome occurs in 1:4.500-5.000 women. MRKH syndrome is characterized by the absence of the upper 2/3 of the vagina, cervix and uterus. Clinical examination, laboratory, radiology and diagnostic laparoscopy for diagnosis. Radiological examination an important in detecting this syndrome. The final diagnosis is confirmed by results of the karyotype finding 46XX phenotype. Laparoscopic diagnostic examination findings of case series in primary amenorrhea, Mullerian agenesis, Mayer-Rokitansky-Küster-Hauser syndrome

Case description: Three women of reproductive age with complaints they never had menstruation until now, dysmenorrhea was denied, and abdominal enlarged was denied. Phenotypically, patient's posture looks like a woman of normal stature. Breast growth and distribution of axillary and pubic hair develop normally, accompanied by fat growth on the buttocks and thighs. On physical examination within normal limits. Blood laboratory results within normal limits. There were no abnormalities, according to MRKH type I syndrome.

Conclusion: MRKH syndrome is a congenital disorder of the Mullerian duct. From the cases, the laparoscopic diagnostic examination showed agenesis or hypoplasia of the uterus with normal both tubes and ovaries. The laparoscopic finding can confirm the diagnosis of a Mullerian disorder (Mayer-Rokitansky-Küster-Hauser syndrome) to support further management to be pursued.

Keywords: laparoscopy, MRKH syndrome, Mullerian agenesis, primary amenorrhea, vaginal agenesis.

Primary amenorrhea caused by turner syndrome: a rare case series from Dr. Zainoel Abidin Hospital, Banda Aceh, Indonesia

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Introduction: Amenorrhea is a condition where girls do not experience the menstruation or the cessation of menstrual cycles at reproductive age. Amenorrhea is divided into primary and secondary.

Case description: The most common cause of primary amenorrhea is that discussed is gonadal dysgenesis including turner syndrome (43%) followed by mullerian agenesis (15%) and puberty delay (14%). Turner syndrome is characterized by the presence of monosomy X (45, X) which is found in almost 45% of the number of live births. Turner syndrome have the clinical appearance of patients with low height, webbed neck, cubitus valgus, pterygium colli, low hair line, edema of the hands and feet, shield chest, Hyperconvex and/or deep nails, gonadal dysgenesis and differences in defects in the cardiovascular.

Conclusion: In this paper, we discuss variations in both clinical appearance and supporting examination data from 4 cases collected at the Department of Obstetrics and Gynecology in the Fertility, Endocrine and Reproductive Division of Dr. Zainoel Abidin General Hospital, Banda Aceh, Indonesia.

Keywords: turner syndrome, primary amenorrhea, gonad dysgenesis.

Sinonasal inverted papilloma extirpation by endoscopic approach

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Introduction: Inverted papilloma is a benign tumor that generally arises from the nasal cavity's lateral wall and mostly grows on the middle meatus. These tumors' incidence is rarely found in the ear, throat, nose, throat, head and neck, which is around 0.5% -4% of all nasal and paranasal sinus tumors. The etiology of inverted papilloma is still unknown. Inverted papilloma's clinical symptoms are unilateral nasal obstruction, rhinorrhea, epistaxis, anosmia, tinnitus, and some other symptoms. The diagnostic examination is histopathological examination, CT scans and MRI. Histopathology is the gold standard in the diagnosis of inverted papilloma. Management of inverted papilloma is carried out with a surgical approach, which can be performed with lateral rhinotomy, maxillectomy, degrading and non-invasive surgery through endoscopy.

Case description: We reported a 44-year-old female patient diagnosed with inverted papilloma. The patient complained of nasal obstruction of the right nasal cavity that appeared 2 years ago, which turned total obstruction in the last 6 months, accompanied by rhinorrhea. A biopsy was done with the results of inverted papilloma. CT scan image of the paranasal sinuses showed a mass filling the right nasal cavity, right maxillary sinus and right ethmoid sinus. The patient was treated with sinonasal inverted papilloma extirpation by an endoscopic approach.

Conclusion: Inverted papilloma is a benign tumor disease of the nose and paranasal sinuses, in which biopsy is the gold standard examination and the main treatment is surgical treatment.

Keywords: inverted papilloma, benign mass, endoscopic surgery.
Impacted bullet in the ethmoid sinus: a case report

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Introduction: Foreign bodies in the ethmoid sinus are rare and quite challenging due to their complex anatomy and important structures' proximity. With the advent of CT scans, the assessment has improved considerably.

Case report: A 17-year-old young male with history of bullet injury. X-ray and CT scan of paranasal sinuses revealed a metallic foreign body in the left ethmoid anterior sinus. A bullet was removed by functional endoscopic sinus surgery procedure.

Conclusion: Removal of a foreign body safely from the paranasal sinus with an endoscopic approach gives good outcome. Size of the foreign body and location of impaction would help decide the approach to be taken for its removal.

Keywords: foreign body, bullet, ethmoid sinus, functional endoscopic sinus surgery.

Potential of ethanol leaves extract of sea bidara (Ziziphus mauritiana lam) as antiadhesion and inhibit the biofilm formation of Streptococcus pyogenes isolates in chronic tonsillitis

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Introduction: Tonsillitis is a major health problem because of its frequency, recurrence and affected worldwide socio-economic. The failure of antibiotics to penetrate into the tonsillar parenchyma or inadequate antibiotic therapy in acute and recurrent tonsillitis causing chronic tonsillitis. The most common bacteria that found is in tonsils Streptococcus pyogenes which has adhesion properties and the ability to form biofilms. The impact of resistance disrupts economics so globally that current phytotherapy is a world concern. The leaves of sea bidara (Ziziphus mauritiana) contain saponins, tannins, alkaloids, flavonoids, and phenols that act as antibacterials. Knowing the potential of ethanol leaves extract of Ziziphus mauritiana is a phyto material for antiadhesion and inhibition the formation of biofilm Streptococcus pyogenes isolates chronic tonsillitis.

Methods: An experimental laboratory study with a post-test only control group.

Result: The ethanol leaves extract of Ziziphus mauritiana can be an anti-adhesion and inhibit Streptococcus pyogenes biofilm. Independent t-test analysis (p<0.05; 0.01) and (p<0.05; 0.045) proved that incubation time affected adhesion activity and biofilm ordering. Kruskal-Wallis analysis (p>0.05; 0.957) and (p>0.05; 0.873) showed that there is no evidence between concentration of bidara leaves as an anti-adhesion and inhibition due to detection of Streptococcus pyogenes biofilm.

Conclusion: The ethanol leaves extract of Ziziphus mauritiana has the potential as an antiadhesion and inhibition the formation of biofilm Streptococcus pyogenes isolates of chronic tonsillitis.

Keywords: Chronic tonsillitis, Streptococcus pyogenes, adhesion, biofilm, Ziziphus mauritiana.

Comparison of angle, length, and diameter of eustachian tube of benign and malignant chronic suppurative otitis media based on CT-scan in Dr. Zainoel Abidin General Hospital Banda Aceh, Indonesia

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Introduction: Damages in middle ear structures are correlated with tubal dysfunction and impaired drainage, thus it’s associated with changes in angle, length, and tubal diameter. The study aims to determine ratio of angle, length, and diameter of Eustachian tube with safe and unsafe types of chronic suppurative otitis media (CSOM).

Methods: Cross sectional analytical retrospective design, CT-Scan assessment for angle, length, the diameter of the tube on safe and unsafe type CSOM from January to December 2019 Angle is assessed using Reid’s line, tube length by a tympanic orifice to pharyngeal orifice line, Tube diameter is measured from anteroposterior pretympanic line diameter.

Results: From 61 CSOM patients, 70.5% benign type, 29.5% malignant type. Benign type tube angle mean is 29.12°, malignant type 29.95°, normal ear 28.23°. There was no significant difference observed in tube angle between the three groups. A significant difference in the tube length (p=0.00) was observed between normal ear is 35.39 mm, smaller on benign type 33.58 mm, and malignant type 29.53 mm. A significant difference in tubal diameter ratio (p=0.00), normal diameter 2.19 mm, on benign type is 2.02 mm smaller, malignant type 1.86 mm.

Conclusion: The smaller length and diameter of the Eustachian tube, it will lead to malignant type CSOM.

Keywords: chronic otitis media, Reid's, eustachian tube dysfunction

The role of knowledge, attitudes, and health workers behaviors in towards COVID-19 pandemic at Aceh Pidie Jaya District, Indonesia

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Introduction: Health workers are at high risk of contracting the disease because they are at the forefront of assisting COVID-19 patients. Furthermore,
inadequate personal protective equipment (PPE) and lack of knowledge of the disease are the causes of less responsiveness to disasters. Globally, Indonesia has the worst death toll of health workers. More than 200 persons were confirmed positive for this disease in Aceh. This study aims to assess the role of knowledge, attitudes, and health workers’ preparedness during the COVID-19 pandemic in Aceh Pidie Jaya District.

Method: A cross-sectional study and the data were collected by distributing online questionnaires about knowledge, attitudes, behavior, and preparedness related to the COVID-19 pandemic at 12 Pidie Jaya District health centers. The knowledge, behavior, and preparedness parameters used Guttman and Likert scales to measure the workers' attitudes. A chi-squared test was used to evaluate the relationship between knowledge, attitudes, behavior, and preparedness.

Result: In this study, 377 health workers were selected and it was indicated that 197 (52.5%) had good knowledge about COVID-19, 177 (49%) had good behavior, and 173 (51, 3%) were with good preparedness. Furthermore, good knowledge, positive attitude, and good behavior significantly correlated with good preparedness during the COVID-19 pandemic (p<0.05).

Conclusion: Most health workers in Aceh Pidie Jaya have good knowledge, positive attitudes, and good behavior that create adequate preparedness during the pandemic. Certainly, this highly supports national policies. Therefore all health workers are always responsive to disasters.

Keywords: COVID-19, knowledge, attitude, behavior, preparedness, health workers.

Clinical neurological characteristics of hospitalized patients with Coronavirus Disease 2019 in Dr. Zainoel Abidin Public Hospital, Banda Aceh, Indonesia

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Introduction: Coronavirus Disease 19 (COVID-19) has quickly spread to more than 214 countries as a global health pandemic. The outbreak of the COVID-19 infection in Wuhan China has brought its clinicians to investigate different manifestations, including neurological characteristic manifestations of this infection.

Methods: Retrospective cross-sectional study design from all neurology patients hospitalized at the dr. Zainoel Abidin public hospital from March to September 2020 confirmed that COVID-19 met the inclusion and exclusion criteria.

Results: We collected 36 cases, consisting of 19 males (53%) and 17 females (47%) with a mean age of >60 years 47%. Patients with comorbidities are had a history of smoking 53%, 47% hypertension, 8% diabetes mellitus, 8% stroke, and 8% malignancy. Clinical neurological characteristics include limb weakness and cranial nerve paresis (55%), decreased consciousness (39%), and headache (22%). At admission, there was stroke (47%), cephalgia (14%), metabolic encephalopathy (8%), and vertigo (5%). As an outcome, 16 patients died.

Conclusion: Patients with COVID-19 commonly have clinical neurological characteristics such as limb weakness, cranial nerve paresis, decreased consciousness, headache, and vertigo.

Keywords: neurological characteristics, COVID-19, hospitalized.
Abstract

Intraoperative monitoring: overview in Dr. Zainoel Abidin General Hospital, Banda Aceh, Indonesia

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Intraoperative monitoring (IOM) is electrophysiological techniques as a surrogate test and evaluation of nervous function while a patient is under general anesthesia. This paper describes what IOM is and the benefit of IOM to prevent neurological impairment during surgery. IOM used neuromonitoring techniques for surgery on the central and peripheral nervous system will highlight the technical, surgical and anesthesia factors required to optimize outcomes. IOM can be used in spine surgery, neurosurgery, such as scoliosis, spinal tumor resection, and cerebral ischemia evaluation. IOM using SSEPs (somatosensory evoked potentials) and transcranial motor evoked potentials (tMEPs) can be established as an effective means of predicting an increased risk of adverse outcomes, such as paraparesis paraplegia and quadriplegia. IOM approach that combines SSEPs, MEPs, and sEMG with tEMG and D waves, as appropriate, sensitivity and specificity can be maximized to diagnose reversible insults to the spinal cord, nerve roots, and peripheral nerves. IOM has been used as a new method since two months ago to monitoring during spinal surgery in Zainoel Abidin General Hospital Banda Aceh. Intraoperative monitoring (IOM) has been selected as new methods to prevent neurological impairment during surgery.

Keywords: intraoperative monitoring, surgery, spinal cord.

Neurofil lymphocyte ratio and Sardjito score as a predictor of COVID-19

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Introduction: Coronavirus Disease (COVID-19) is a pathological process due to infection by the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) which primarily attacks the human respiratory system. The incidence of COVID-19 in Indonesia is quite high. Aceh Province, reported its first case on March 26, 2020. Neutrophil Lymphocyte Ratio (NLR) is a haematological parameter marker of acute inflammation. In COVID-19 infection, a severe inflammatory response occurs which leads to a decrease in the adaptive immune response, resulting in an imbalance in the immune response to infection. In COVID-19, NLR can be used as a predictor of disease severity in the early stages of the disease course. Screening at Dr. Zaionoel Abidin General Hospital (RSUZA) was carried out using Sardjito's Score from the COVID-19 screening dr. Sardjito, which consists of 4 components, namely: history, physical examination, laboratory and radiology. The purpose of this study was to determine the sensitivity and specificity of NLR and SS as predictors of COVID-19.

Methods: The study was observational analytic study using a cross sectional design. The study population was all patients who entered the emergency room at RSUZA and was treated by the Neurology Department. When the research was conducted from April 2020 to January 2021. The method of selecting subjects was carried out by total sampling, which met the inclusion and exclusion criteria.

Result: A study was carried out on 304 patients who had Polymerase Chain Reaction (PCR) COVID-19 swabs, with 36 positive results, 268 negative patients. Neutrophil Lymphocyte Ratio >5 indicated better sensitivity than SS and...
COVID-19 rapid antibody in predicting positive PCR swab results. Sardjito scores > 12 had a sensitivity of 50% to predict a positive PCR swab result. Sardjito score < 12 had a specificity of > 70% (73.8%) to predict negative PCR swab results. 
Conclusion: NLR and SS can be used as screening tools for COVID-19 patients. If NLR > 5 and SS > 12 PCR swabs should be performed even if the rapid antibody results are negative.
Keywords: COVID-19, NLR, sardjito score.

A rare case of lymphangioma (combined microcystic and macrocystic lymphatic malformation) in a 12-year-old girl treated by carbon dioxide laser

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Introduction: Lymphangioma is a lymphatic malformation. The disease involves the lymphatic vessels of the superficial dermis. This is a rare type of lymphatic vessel disorder.

Case description: We reported a case of a 12-year-old girl with the chief complaint was multiple small blisters on her left thigh and left groin in the past 11 years ago. The blisters were not painful or itchy with slight swelling on the left groin under the lesion. Physical examination revealed groups of lobulated mass on abdomen. Histopathology examination results were hyperkeratosis where tense vesicles, purplish macule & reddish brown crusts. The hypertrophic scar proliferation found in spaces that were lined with endothelium. The lumen was filled with eosinophilic amorphous mass. There were sebaceous glands, sudoriforous glands and hair follicles. The diagnosis was lymphangioma (combined microcystic and macrocystic lymphatic malformation) on abdomen, followed by soft tissue tumor on left thigh and buttock. The patient was decided to undergo carbon dioxide (CO2) laser for lymphangioma and surgical excision for soft tissue tumor.

Conclusion: Lymphangioma is a typical of rare lymphatic vessel disorder that is manifested on skin, commonly found in children. Combination treatment is required for cases of superficial lymphangioma and deep lesions.
Keywords: lymphangioma circumscription, frogspawn vesicle, soft tissue tumor, CO2 laser.

The relationship between neoadjuvant chemotherapy response to mass tumor operability in inoperable breast cancer patients at Dr. Hasan Sadikin Bandung between January 2017 - December 2019

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Introduction: Breast cancer is a malignancy which is a major problem in women in the world. Inoperable breast cancer is advanced local breast cancer stage IIB and III, inoperable breast cancer in Indonesia is still quite large, which is as much as 43.3%. Handling of breast cancer is currently carried out in a multidisciplinary manner including surgery, chemotherapy, and radiotherapy. Neoadjuvant chemotherapy has become an effective standard in the treatment of advanced local breast cancer and inoperable breast cancer before surgery.

Method: This research aims to determine the relationship between the response of neoadjuvant chemotherapy to the operability of tumor mass in advanced local breast cancer patients at Dr. Hasan Sadikin Bandung between January 2017 - December 2019.

Relationship red distribution width to platelet ratio with fibrosis degrees based on transient elastography in chronic hepatitis B patients

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Introduction: Chronic hepatitis B virus infection is a major health problem in developing countries like Indonesia. Chronic HBV infection, about 40% will progress to liver fibrosis and hepatocellular carcinoma. Liver biopsy examination is the gold standard in the diagnosis of liver fibrosis, but this examination is an invasive examination and has many complications. Transient elastography has been validated to assess fibrosis in several liver diseases including HBV infection, however, not all hospitals have temporary elastography facilities so that cheaper and more affordable examinations are needed. The purpose of this study is to investigate the relationship between Red cell Distribution Width to Platelet Ratio with the degree of liver fibrosis based on transient elastography in chronic hepatitis B patients.

Method: This study was a cross-sectional study of 58 chronic hepatitis B patients who were undergoing outpatient care from September to November 2020 at dr. Zainoel Abidin Banda Aceh. Routine blood tests were performed using the Sysmex XT 1800i. The Red cell Distribution Width to Platelet Ratio value is calculated by dividing the Red Distribution Width value by the platelets. The degree of liver fibrosis was assessed using TE (Fibroscan® 502 Echosens).

Result: In the 58 patients, the mean Red cell Distribution Width to Platelet Ratio values for various degrees of liver fibrosis F0-1, F2, F3 and F4 were 0.051; 0.050; 0.077 and 0.108, respectively. Where it was found that Red cell Distribution Width to Platelet Ratio levels also increase according to the increase in the degree of liver fibrosis and was statistically significant with a p-value of 0.002. Analysis of the relationship between Red cell Distribution Width to Platelet Ratio with the degree of liver fibrosis using ordinal regression method, while the Red cell Distribution Width to Platelet Ratio level variable has a fairly large estimate value that is 31.098 with a p-value of 0.003. The test p-value which is smaller than 0.05 proves that the Red cell Distribution Width to Platelet Ratio level has an effect and has a relationship with the degree of liver fibrosis.

Conclusion: Red cell Distribution Width to Platelet Ratio has a relationship with the degree of liver fibrosis in patients with chronic hepatitis B.
Keywords: red cell distribution width to platelet ratio, liver fibrosis, transient elastography, chronic hepatitis B.

Result:

The degree of liver fibrosis was assessed using TE (Fibroscan® 502 Echosens). The mean Red cell Distribution Width to Platelet Ratio for various degrees of liver fibrosis F0-1, F2, F3 and F4 were 0.051; 0.050; 0.077 and 0.108, respectively. Where it was found that Red cell Distribution Width to Platelet Ratio levels also increase according to the increase in the degree of liver fibrosis and was statistically significant with a p-value of 0.002. Analysis of the relationship between Red cell Distribution Width to Platelet Ratio with the degree of liver fibrosis using ordinal regression method, while the Red cell Distribution Width to Platelet Ratio level variable has a fairly large estimate value that is 31.098 with a p-value of 0.003. The test p-value which is smaller than 0.05 proves that the Red cell Distribution Width to Platelet Ratio level has an effect and has a relationship with the degree of liver fibrosis.

Conclusion: Red cell Distribution Width to Platelet Ratio has a relationship with the degree of liver fibrosis in patients with chronic hepatitis B.

Keywords: red cell distribution width to platelet ratio, liver fibrosis, transient elastography, chronic hepatitis B.

Relationship red distribution width to platelet ratio with fibrosis degrees based on transient elastography in chronic hepatitis B patients

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inoperable breast cancer patients at Dr. Hasan Sadikin Bandung period January 2017 - December 2019. This research method uses a descriptive design. The research subject was the medical records of breast cancer patients in the period January 2017 - December 2019.

Result: Results of this study, the number of inoperable breast cancer patients was 295 cases (64.37%), the largest distribution of stage IIB was 139 cases (47.1%) and the least stage IIIIC breast cancer was 18 (6.1%). The type of neoadjuvant chemotherapy drug in inoperable breast cancer patients was the taxan group, namely 185 patients (62.8%) and 110 patients (37.2%) used the anthracycline class of neoadjuvant drugs. The responsiveness of neoadjuvant chemotherapy to the operability of tumor mass in inoperable breast cancer patients showed that 83 patients (75.4%) responded to anthracyclines while 27 patients (24.6%) were unresponsive and 143 patients (77.3%) responded to the taxan group while 42 patients (22.7%) were not responsive.

Conclusion: The relationship of neoadjuvant chemotherapy response to the operability of tumor mass in inoperable breast cancer patients in the Surgical Oncology section of Dr. Hasan Sadikin Bandung as many as 295 patients (64.3%). The highest stage at stage IIB 139 cases (47.1%), the most types of neoadjuvant chemotherapy drugs in inoperable breast cancer patients are the taxan group, namely 185 patients (62.8%), and the responsiveness of neoadjuvant chemotherapy to tumor mass operability in cancer patients inoperable breast in the anthracycline group, 83 patients (75.4%) and 143 patients (77.3%) responded to the taxan group.

Keywords: breast cancer, neoadjuvant chemotherapy, management.

Pectoralis major myocutaneous flap on the reconstruction of head and neck cancer: a case report

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Introduction: Pectoralis major myocutaneous flap (PMMF) was first introduced by Steven Ariyan in 1979. Treatment of head and neck cancer is generally treated with a wide excision that leaves a large defect that often cannot be closed primarily. Reconstruction with free flap microsurgery is currently the standard procedure to obtain better aesthetic and functional results. However, it is often hampered by the lack of professionals in microsurgery, high costs, and patient conditions that do not allow long operations. Therefore, PMMF is a reliable, safe and effective flap for surgery with defects in the head and neck. In Indonesia, cancer of the head and neck is the fourth most common cancer. The flap aims to provide extensive tissue with good vascularity, cosmetic repair, to cover the carotid artery and cover the reconstruction plate. PMMF complications range from 13% - 65%. The PMMF flap vascularity originates from the thoracodorsal artery and the lateral thoracic artery.

Case description: We report three patients who underwent myocutaneous pectoralis major flap reconstruction surgery. The first was a 63-year-old male patient with right parotid adenocarcinoma T4N2M0, we did an extended total parotidectomy (D) + RND (D) + PMMF, the second patient was a 64-year-old woman with basal cell carcinoma at zygoma right T2N0M0, which was performed extensive excision + Borderline VC + reconstruction with PMMF and forehead flap, the third patient is a 68-year-old woman with a buccal squamous cell carcinoma, performed a wide excision + borderline vries coupe + marginal mandibulectomy + tracheostomy + reconstruction with PMMF.

Conclusions: PMMF is a reliable, safe and effective flap for closure of cancer surgery defects in the head and neck. PMMF surgery can be combined with other flaps.

Keywords: surgical defect for head and neck cancer, flap myocutaneous pectoralis major, wide excision, basal cell carcinoma, adeno carcinoma parotid, squamous cell carcinoma.

Characteristics of patient with adhesion post-operative at Hasan Sadikin Hospital, Bandung, Indonesia between January 2016 - June 2020

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Introduction: Small bowel obstruction is a common emergency in digestive surgery, accounting for 60-70% of all acute abdominal cases at Hasan Sadikin Hospital such as appendicitis, hollow viscus organ perforation, acute pancreatitis, cholecystitis, incarcerated hernia, ectopic pregnancy and so on. The most common cause of small bowel obstruction is adhesions, whereas it is known that digestive surgery and gynecologic, obstetric surgery are increasingly being performed because of the support of diagnostic advances in abdominal disorders. Small bowel obstruction consists of partial or complete obstruction of the intestinal lumen that intestinal contents cannot pass through the lumen. This can be caused by a variety of conditions including adhesions, hernias, or tumors. Small bowel obstructive can produce stomach cramps, abdominal pain, bloating, nausea, vomiting, and intestinal death. Adhesion is a scar tissue that often causes internal organs and other connective tissue to stick after surgery. Adhesions can entangle and pull organs from their place and cause intestinal obstruction, infertility, and chronic pelvic pain.

Methods: This study aims to determine the epidemiological picture of post-operative adhesion patients at rshs in 2016-2020 who were treated at Hasan Sadikin Hospital Bandung’s Digestive Surgery Division for the period 01 January 2016 - 30 June 2020. The research design used in this study was retrospective descriptive. The data were collected from the medical records of post-operative adhesion patients in the digestive surgery division of Hasan Sadikin Hospital Bandung for the period 01 January 2016 - 30 June 2020.

Result: there were 140 cases of post-operative adhesions treated at Digestive Surgery Division of Hasan Sadikin Hospital for the period January 1, 2016 to June 30, 2020 with the youngest being 1 year and the oldest being 76 years (average 36 years), 14 of them died during the treatment period. A total of 140 cases, 57 cases occurred in men (40.7%) and 83 in women (59.3%). In the age range of 0-20 years there were 30 patients (21.5%), 21-50 years there were 68 patients (48.5%) while at the age of more than 50 years there were 42 patients (30%). From all cases, 94 patients had a stoma made (67.2%), the rest did not have a stoma (32.8%). The length of stay for patients ranged from 2 days to 90 days, with a mean length of stay was 13.6 days with both treatments, conservative and operative.

Conclusion: Small bowel obstruction caused by postoperative adhesions can occur in all age ranges, but it is more common in adulthood, which is around the 4th decade. This case is more common in women than men. Most patients...
were treated operatively than conservatively, with most of them ending with stoma creation.

**Keywords**: obstructive ileus, postoperative adhesions, characteristics.

**Characteristics of Jabalpur and Boey scores in gastric perforated patients at Hasan Sadikin Hospital, Bandung, Indonesia between February 2020 - January 2021**

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**Introduction**: Gastric perforation is still a common disease in tropical countries and causes abdominal sepsis. Variations in clinical presentation as well as delays in diagnosis and treatment on admission have the potential to cause worsening of clinical symptoms and conditions. Currently, the American Society of Anesthesiologist (ASA) score and the Boey score are the most frequently used scores to assess the prognosis of gastric perforated patients, but the ASA score is a surgical score that is not specific for gastric perforated patients. Meanwhile, the Boey score only assessed the perforation-operation interval of more or less 24 hours, the presence or absence of perioperative shock and comorbid diseases. The Jabalpur score is another new scoring technique that is still being evaluated for its characteristics. Therefore, this study aims to compare the sensitivity and specificity between the Jabalpur scoring system and the Boey scoring in predicting patient mortality in gastric perforated patients.

**Methods**: This study is a descriptive retrospective study on 28 gastric perforated patients with inclusion criteria, namely patients treated from February 2020 to January 2021, exploratory laparotomy and omental patches were performed to cover defects, and postoperatively treated in the general intensive care unit. Patients diagnosed with septic shock and gastric perforation due to malignancy were excluded from the study.

**Results**: In this study, the researchers found that the Jabalpur score had a sensitivity of 77.8% and a specificity of 75% with a cut-off point of 9. While the AUC value was 0.845 which was almost the same as the AUC value of the Boey score (0.85) and below the AUC value of ASA score (0.91). Although the level of accuracy of the Jabalpur score and Boey score is almost the same, the Jabalpur score has more detailed assessment criteria and is still easy to obtain in hospitals in developing countries.

**Conclusion**: The Jabalpur scoring system has a sensitivity of 77.8% and a specificity of 75% as well as a good accuracy for predicting mortality of gastric perforation cases (AUC = 0.845). This system is very simple and easy to apply because it only uses six routinely checked factors.

**Keywords**: boey score, gastric perforation, jabalpur score.

**Risk factors for intestinal anastomoses leakage amongst patients which intestinal anastomosis have been performed at Dr. Hasan Sadikin General Hospital Bandung, Indonesia**

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**Introduction**: Intestinal anastomosis is one the most common procedures done on patients with intestinal discontinuity. The method on this procedure is individual depending on the condition of the patients. The consideration of such factors as systemic condition, local intraoperative findings, comorbid, and importantly anastomosis technique cannot be separated from consideration whether anastomosis should be performed or not. Surgeon concern is always is leakage on anastomosis site, and of course that situation will increase the risk of morbidity there including mortality. Thus it’s important to know the conditions that may pose a risk for anastomosis leakage to avoid further complications.

**Method**: The study is a descriptive-analytic study from 352 patients’ medical records that underwent intestinal anastomosis at Dr. Hasan Sadikin Hospital from 1st January 2016 – 31st December 2020. The data variables were sex, age, and outcome of the operation.

**Result**: From the study of 352 cases of intestinal anastomosis procedure, with specification 31 cases (8.2%) of anastomosis leakage (15 males, 16 females) and 321 cases (91.8%) non-leakage anastomosis (173 males, 148 females). The average age for leakage group was 44.09 (SD = 17.312, median 40 (16-74), and for non-leakage group was 47.75 (SD =15.438, median 49 (15-77). There wasn’t a significant result of correlation between anastomosis leakage and age (p= 0.128) and sex (p=0.808).

**Conclusion**: age and sex weren’t conditions that contribute to intestinal anastomosis leakage. We can thus consider not to perform this procedure if such condition occurs.

**Keywords**: intestinal anastomosis, hemodynamic, sepsis, contamination, anastomosis technique.

**Characteristic of incarcerated inguinal hernia patients at Dr Hasan Sadikin Hospital, Bandung Indonesia between January 2017 – December 2019**

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**Introduction**: Until now there have been many studies on the characteristics of incarcerated hernia, but studies in the Asian region still lack racial differences that can affect the characteristics of incarcerated hernias. Therefore, this study aims to determine the characteristics of the incarceration of inguinal hernia in Asian populations, especially Indonesia, using a patient population in Dr. Hasan Sadikin Hospital Bandung.
Methods: This was a descriptive retrospective study of all incarcerated inguinal hernia patients admitted to the emergency department (ED) of Hasan Sadikin Hospital, between January 2017 and December 2019. Patients diagnosed with femoral hernia and reducible inguinal hernia were excluded. The data is taken from the patient’s medical record data, then entered in Microsoft Excel and analyzed.

Results: This study includes 305 patients with incarcerated inguinal hernia were recorded. Based on the distribution of gender all patients are Male. The average age was 47 years old at range 15-85 years old. From the study, about 258 patients (84.7%) came into the emergency room complaining of lump without pain. The most risk factor of developing incarcerated inguinal hernia (96.1%). We found that 255 hernia sac contains of ileum, the anatomical of ileum explains it.

Conclusion: Right side inguinal is the most predisposition location of incarcerated hernia, and ileum entrapment is the most intraoperative finding. Most of the indication of bowel resection in operative finding is necrosis of ileum. Tension-free herniorrhaphy is the gold standard technique to close the defect from the hernia.

Keywords: inguinal hernia, hernia incarcerated, characteristics.

Comparative diagnostic accuracy: C-reactive protein and abdominal ultrasound for assessing complicated and uncomplicated appendicitis in pediatric patients

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Introduction: Diagnosis of uncomplicated and complicated appendicitis remains a challenge, especially in pediatric patients. A more sensitive and specific diagnostic tools are needed to determine immediate management.

Method: Using a cross-sectional design study, we analyzed patients under 18 years age at the Airlangga University Hospital, with diagnosis of appendicitis and underwent appendectomy from 2017 until 2019. Ultrasound and preoperative c-reactive protein (CRP) values were performed in 25 patients, and the results were correlated with patient’s operating findings. Cross tabulation was used to analyze sensitivity, specificity, diagnostic accuracy of the ultrasound. ROC curve was used to analyze cut-off point, sensitivity, specificity, and CRP value’s diagnostic accuracy.

Results: Samples were 18 (72%) boys and 7 (28%) girls, aged 5-15 years (10.28 ± 2.7). The uncomplicated appendicitis group was 9 boys and 3 girls aged 10.6 ± 1.9 years. The complicated appendicitis group was 9 boys dan 4 girls aged 9.9 ± 3.4 years. Based on the cut-off value of ≥ 39.49 mg/dL for CRP level (AUC = 0.904), diagnostic parameters were as follow: sensitivity 100%, specificity 75%, and diagnostic accuracy 84%. We found strong evidence of an association between CRP and complicated appendicitis (p-value 0.001). The sensitivity, specificity, diagnostic accuracy of ultrasound in these patients were 46.1%, 75% and 60%, respectively.

Conclusion: CRP level with a cut-off value of 39.49 mg/dL has a higher sensitivity and diagnostic accuracy than ultrasound to differentiate complicated and uncomplicated appendicitis in pediatric patients.

Keywords: CRP, ultrasound, appendicitis, pediatric, diagnostic.

Neonatal gastro-intestinal perforation characteristics in a tertiary hospital

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Introduction: Neonatal gastro-intestinal perforation (NGIP) presents important challenges in pediatric surgical practice and the mortality still be high despite improvement in anesthesia and neonatal intensive care over the past decade. This study aimed to shed on the recent experience with GIP in neonates in a developing country, mainly tertiary referral hospital.

Methods: Single-center retrospective study was conducted between 2016 and 2020. Medical records on all neonates with NGIP were reviewed (n=40). The data including age at presentation, sex, gestational age, birth weight, site of perforations, types of procedures and mortality were presented descriptively.

Results: This study included 40 patients diagnosed with NGIP during 2017-2020, of whom 22 were boys and 18 were girls, and their ages ranged from 0-20 days. The average age at presentation was (4.43  4.9 SD) days. Seventeen neonates were premature and eighteen neonates had low birth weight. The site of perforations was stomach (15 cases), colon (14 cases), ileum (10 cases) and jejunum (1 case). All patients underwent exploratory laparotomy. Three patients underwent initial peritoneal drainage. The overall mortality rate was still high, around 57.5% (23 cases) with the cause of mortality were sepsis and respiratory failure.

Conclusion: Neonatal gastro-intestinal perforation remains a surgical emergency and outcomes are still associated with high mortality rates in our institutions. Other important causes unrelated to necrotizing enterocolitis, leading to gastro-intestinal perforations need to be identified.

Keywords: neonates, premature, intestine, perforation.

The popliteal vascular injury resulted from penetrating glass fragments in COVID-19 pandemic: a case report

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Introduction: Penetrating injury resulting from glass fragments may clinically appear as a small wound but may result in serious injury. Deciding techniques for vascular repair sometimes may be dilemmatic. In COVID-19 pandemic care must be taken to carefully screen patients for many are asymptomatic.

Case description: Fifty-one-year-old male presented bleeding from right leg after colliding to glass door two hours earlier. He had previous hypovolemic shock which responded to resuscitation. Physical exam showed 2 cm wound on the lateral side of proximal third right leg. Rapid COVID-19 serological test was found to be reactive. Surgical exploration with level three PPE (personal
ABSTRACT

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Method: Histopathological factors have been studied to influence the risk of breast cancer recurrence. Based on the Dr. Soetomo Hospital data in 2015, 46.49% of all breast cancers in locally advanced breast cancer patients in Dr. Soetomo Hospital, Surabaya, Indonesia

Conclusion: In cases where potentially severed artery, attempt to patch injured segment may be avoided since frayed tissue make it difficult to repair. Surgical bypass may be considered for the management of such injuries. In pandemic era, careful screening and appropriate PPE are mandatory to ensure patient safety and health care.

Keywords: penetrating vascular injury, popliteal artery, peripheral artery bypass, vascular trauma, COVID-19.

Correlation of recurrence level with breast cancer molecular subtype in post-operating locally advanced breast cancer patients in Dr. Soetomo Hospital, Surabaya, Indonesia

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Introduction: Breast Cancer is a malignancy with the highest prevalence. Based on the Dr. Soetomo Hospital data in 2015, 46.49% of all breast cancers were found at a locally advanced stage. In a previous study, reported 40% of breast cancer patients experienced postoperative recurrence. Clinical and histopathological factors have been studied to influence the risk of breast cancer recurrence.

Method: A retrospective cohort observational study by using medical record data to evaluate the correlation of tumor subtypes and recurrence in patients with advanced local breast cancer after mastectomy and who have received additional therapy (neoadjuvant or hormonal chemotherapy) according to standard procedures at Dr. Soetomo Hospital.

Results: Seventy-seven samples were obtained in this study, 29 luminal subtype A and 48 luminal subtype B. The most recurrences in luminal A subtype were distant recurrences, 25 samples and 4 local recurrences. The most recurrences of luminal B subtype were distant recurrences, 39 samples, 3 regional recurrences and 6 local recurrences. The fastest recurrence rate in luminal A and luminal B subtypes was 1 month and 3 months, respectively. Chi-square analysis showed a significant relationship between the recurrence rate and subtype of breast cancer (p = 0.035).

Conclusion: The luminal B subtype has higher recurrence than luminal A subtype in locally advanced breast cancer patients after surgery at Dr. Soetomo Hospital.

Keyword: locally advanced breast cancer, recurrence, subtype, breast cancer.

The effect of radiation exposure on left ventricle performance in advanced local breast cancer patients

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Introduction: Breast cancer is the leading cause of death in women and is the second leading cause of death of all cancer cases. Management of patients with breast cancer includes locoregional and systemic management. Locoregional treatment includes surgery and radiation, while systemic management includes chemotherapy, targeted therapy and hormonal therapy. Radiation therapy is indicated, among others, in conditions of locally advanced breast cancer. However, several studies have shown that this radiation therapy has a cardiotoxicity effect characterized by a decrease in left ventricular performance both with and/or without a decrease in left ventricular ejection fraction (LVEF) is related to the radiation dose received by the patient.

Methods: Patients with locally advanced breast cancer who met the inclusion and exclusion criteria of the study, recorded the general data of the subjects such as name, age, gender, diagnosis, radiation dose, and disease outcome in the patient. Patients were subjected to echocardiography before and after radiation therapy was given. The change in the ejection fraction is then recorded and analyzed.

Results: Total research subjects were 36 women with locally advanced breast cancer, with 18 subjects (50%) suffering from left breast cancer and 18 subjects (50%) suffering from right breast cancer. From the results of statistical tests, it was found that there were significant differences in the ejection fractions in the two groups before and after radiation therapy (p = 0.03).

Conclusion: Radiation exposure in patients with locally advanced stage left breast cancer has a cardiotoxic effect in the form of decreased ventricular ejection fraction compared to radiation exposure to the right breast.

Keywords: breast cancer, radiation therapy, ventricular function, cardiotoxicity.

Comparison of recurrence incidence in locally advanced breast cancer patient post-mastectomy with steroid and non-steroid aromatase inhibitor treatment

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Introduction: Breast cancer is a malignancy with the highest prevalence. Based on the Dr. Soetomo Hospital data in 2015, 46.49% of all breast cancers were found at a locally advanced stage. In a previous study, reported 40% of breast cancer patients experienced postoperative recurrence. Clinical and histopathological factors have been studied to influence the risk of breast cancer recurrence.

Method: A retrospective cohort observational study by using medical record data to evaluate the correlation of tumor subtypes and recurrence in patients with advanced local breast cancer after mastectomy and who have received additional therapy (neoadjuvant or hormonal chemotherapy) according to standard procedures at Dr. Soetomo Hospital.

Results: Seventy-seven samples were obtained in this study, 29 luminal subtype A and 48 luminal subtype B. The most recurrences in luminal A subtype were distant recurrences, 25 samples and 4 local recurrences. The most recurrences of luminal B subtype were distant recurrences, 39 samples, 3 regional recurrences and 6 local recurrences. The fastest recurrence rate in luminal A and luminal B subtypes was 1 month and 3 months, respectively. Chi-square analysis showed a significant relationship between the recurrence rate and subtype of breast cancer (p = 0.035).

Conclusion: The luminal B subtype has higher recurrence than luminal A subtype in locally advanced breast cancer patients after surgery at Dr. Soetomo Hospital.

Keyword: locally advanced breast cancer, recurrence, subtype, breast cancer.
Introduction: Breast cancer has the greatest prevalence in women, with an average death rate of 17 per 100,000. It is also common in post-menopausal women. Locally Advanced Breast Cancer (LABC) accounts for 10-20% of newly diagnosed breast cancers. Aromatase inhibitors are hormonal therapies used as adjuvant or neoadjuvant therapy in postmenopausal breast cancer with positive ER and/or PR positive. Much research has not shown consistent results on the benefits of steroid and nonsteroidal aromatase inhibitor therapy as adjuvant hormonal therapy.

Methods: A retrospective cross-sectional study to compare the recurrence rate in LABC cases after undergoing mastectomy and receiving steroid and non-steroidal aromatase inhibitor therapy at Dr. Soetomo Hospital Surabaya 2018-2020.

Results: Sixty-four subjects in this study were divided into 2 groups: patients who received steroid aromatase inhibitor and non-steroid aromatase inhibitor (32 subjects in each group), 6 patients (18.7%) experienced recurrence in the steroid group, and 26 patients (59%) had no recurrence. In the non-steroidal aromatase inhibitor group, 14 patients (43.7%) experienced recurrence and 18 patients (41%) had no recurrences. Statistical analysis showed a significant relationship between giving aromatase inhibitors and the incidence of recurrence (p=0.031).

Conclusion: There is a difference between recurrence incidence in postmenopausal women with locally advanced breast cancer after mastectomy who received steroid aromatase inhibitors and nonsteroidal aromatase inhibitors.

Keywords: aromatase inhibitor, recurrence, breast cancer, mastectomy

Comparison of luminal A and B towards 5-years survival rate in women with early breast cancer post-mastectomy in Dr. Soetomo Surabaya General Hospital, Bali-Indonesia

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Introduction: Breast cancer is the leading cause of cancer death in women worldwide. Approximately 25% of all cancer cases in the world are breast cancer, and 15% of cancer deaths in women are due to breast cancer. The incidence of cancer in Indonesia according to Riskesdas in 2018 was 42.1 per 100,000 population. Luminal A subtype accounts for about 40% of all breast carcinoma subtypes with a low proliferation index and a longer survival rate than the other subtypes. Luminal B Subtypes Approximately 20% of all breast cancer subtypes are found and often occur in young age patients. The survival rate in breast cancer decreases with increasing stages.

Methods: The design of this study was a retrospective cohort study using medical records of patients with early breast cancer who underwent modified radical mastectomy (MRM) surgery at Dr. Soetomo Hospital Surabaya in 2010-2015.

Results: From a total of 38 samples, with 19 samples for luminal A and luminal B respectively, obtained 19 samples with a survival rate of more than 5 years and the rest less than 5 years. The p-value between the subtype and the survival rate is 0.023. Its mean the subtype can be used as prognostic factor.

Conclusion: There is a significant correlation between luminal A and Luminal B subtypes and prognostic factors to determine 5-year survival rate.

Keywords: subtype, breast cancer, the survival rate.

Comparison of Boey’s score predictability strength and mortality in gastric perforation patients with Boey score 1 and Boey score 2 at Dr Soetomo Hospital, Surabaya, Indonesia

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Introduction: Tracheal stenosis is a rare but serious complication in patients with prolonged intubation and tracheostomy. Otorhinolaryngologists or interventional pulmonologists often give the Treatment, but the symptoms may not appear for weeks or months after extubation, primary care physicians find out this complication firstly. In its clinical presentation, tracheal stenosis may be mistaken for asthma with dyspnea and stridor.

Case description: The case is a 16-year-old man with post-intubation tracheal stenosis and underwent a series of surgical procedures to repair his airway. For many years, open surgery with resection and anastomosis was considered the standard for every patient with tracheal stenosis and the only way to avoid recurring problems. For these cases, endoscopic procedures are the appropriate treatment options for the patients.

Conclusion: Patients with a history of prolonged intubation or tracheostomy who present with stridor, dyspnea, coughing, or wheezing should be evaluated for post-intubation tracheal stenosis. Patients with longer and more complex stenosis (cartilage loss or recurrent complications) will require end-to-end resection and anastomosis for definitive treatment.

Keywords: tracheal stenosis, stridor, dyspnea.
The correlation between low density lipoprotein cholesterol level and hormonal status in breast cancer patients at Dr. Soetomo Hospital, Surabaya, Indonesia

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Introduction: Immunohistochemical testing is important in determining clinical diagnosis and therapy, and is useful as a prognostic and predictive factor, but it is not easy to do and is not always available in all health care centres. High low density lipoprotein cholesterol (LDL-c) receptors are found on the surface of breast cancer cells, where cancer cells will take up cholesterol in serum, and a metabolite of 27-hydroxycholesterol cholesterol will affect α-oestrogen receptors.

Methods: Analytical observational study by cross sectional, during July 2020 – November 2020, at Oncology Clinic Dr. Soetomo Hospital Surabaya with a total sample size of 42. The data obtained were analysed with the SPSS version 23.0 program, which then a regression test and Pearson Chi-Square correlation test were performed.

Results: The mean value of LDL-c was 117.88 ± 33.89 mg/dL. The results showed that there was a significant correlation between cholesterol levels and hormonal status of breast cancer patients with p-value=0.029. The ROC analysis obtained a cut-off point of LDL-c level at 132 mg/dL, with p value = 0.024. LDL-c levels ≥ 132 mg/dL tends to lead to positive hormonal status of breast cancer patients with a cut-off point of 132 mg/dL.

Conclusion: There is a significant correlation between cholesterol levels and hormonal status of breast cancer patients, with a cut-off point of 132 mg/dL.

Keywords: LDL-c, hormonal status, immunohistochemistry, breast cancer.

Correlation between hyperbilirubinemia and prevalence of perforation on appendicitis patients

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Introduction: Appendicitis is one of the most common case in Emergency Room, with perforation as one of the complications. Determining perforation preoperatively is important to decide the incision plan on appendicitis case for a surgeon. Besides the difficulty of diagnosing perforated appendicitis accurately, additional examinations sometimes cause surgery to be delayed, increasing the morbidity and length of stay for the patients. Bilirubin levels are known to increase in appendicitis due to direct bacterial infection or translocation to the liver via the vena cava system, thereby interfering with conjugation and excretion of bilirubin into the gall bladder. Bilirubin testing is cheap, easy, and can also assess the severity of appendicitis. We evaluated the cut-off point of bilirubin associated with the diagnosis of perforated appendicitis in this study.

Methods: Prospective cross-sectional study to assess the correlation between prevalence of perforation in patients who diagnosed with appendicitis preoperatively with hyperbilirubinemia and underwent operation. This study was held at Dr. Soetomo Hospital, Surabaya between October 2020 until January 2021.

Results: From total of 47 patients who fulfilled inclusion criteria, 44.7% (21 patients) had acute appendicitis and 55.3% (26 patients) had perforated appendicitis. Most of patients with acute appendicitis had normal total bilirubin (66.7%), while most of perforated patients had hyperbilirubinemia (65.4%). Chi-square analysis showed significant association between hyperbilirubinemia with prevalence of perforated appendicitis (p=0.029). Further analysis showed that higher total bilirubin increase risk of perforated in appendicitis (OR: 3.7; 95% CI: 1.1-12.7; p=0.029)

Conclusion: There was a significant correlation between hyperbilirubinemia and prevalence of perforated appendicitis. The higher total bilirubin > 1 mg/dL, the higher the perforated risk in patients with appendicitis.

Keywords: acute appendicitis, perforated appendicitis, bilirubin, hyperbilirubinemia.

Correlation between mortality with candidiasis in gastric perforation

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Introduction: Gastric perforation is one of the most common causes of mortality in clinical practice. Candidiasis is a fungal infection of the stomach, commonly seen in patients with an immunocompromised state. This study aimed to determine the association between candidiasis in gastric perforation and mortality.

Methods: Prospective study performed at Dr. Soetomo Hospital, Surabaya between January 2020 until January 2021. The study included patients with gastric perforation and candidiasis. The main outcome was mortality. The chi-square test was used to determine the association between candidiasis and mortality.

Results: Clinical characteristics showed a significant association between candidiasis and mortality (OR: 2.7; 95% CI: 1.1-6.1; p=0.029). The mortality rate was significantly higher in patients with candidiasis (p=0.016). The preoperative shock component was not significant in the incidence of mortality in patients with (p=0.100). The preoperative shock component has a greater role in predicting the incidence of mortality in gastric perforated patients than onset (0.593 vs. 0.438).

Conclusion: There is a significant correlation between hyperbilirubinemia and prevalence of perforation on appendicitis patients.
Introduction: Peptic ulcer perforation is a common surgical emergency with a prevalence of about 5% and is associated with up to 30% mortality. The mortality rate for gastric perforation patients with a Boey score of 2 at Dr. Soetomo Hospital, Surabaya in 2019 was reported to be 53%. The prevalence of candidiasis in gastric perforation patients at Dr. Soetomo Surabaya in 2019 was 45%. Death in patients with peritonitis accompanied by infection with candida sp. was reported to be between 20%-75%. There are still no consensus guidelines for the use of antifungal agents in gastric perforation patients with candidiasis. Therefore these patients could be considered for additional early antifungal therapy, which is expected to minimize overall morbidity and mortality. This study was conducted to identify the correlation between mortality with candidiasis in gastric perforation patients.

Methods: this research is a cross-sectional study with retrospective data collection from gastric perforation patient’s medical records hospitalized in January 2019 until December 2020. Subjects were selected based on Boey score, etiologic pathogens, and outcome were recorded. The archive of candidiasis patients took from the medical record in the microbiology department at Dr. Soetomo Hospital Surabaya.

Result: there was a statistically significant relationship between patients with candidiasis and the mortality of patients with gastric perforation p-value: 0.019 (p<0.05). The estimated mortality risk in gastric perforation patients with candidiasis was 4.5 times (95% CI 1.2-16.35) more than those without candidiasis.

Conclusion: there is a positive correlation between mortality with candidiasis in gastric perforation patients. Therefore these patients could be considered for additional early antifungal therapy, which is expected to minimize overall morbidity and mortality.

Keywords: candidiasis, gastric perforation, prevalence.

Squeeze maneuver, reduce the local effect of contrast media extravasation during endovascular intervention: a case report

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Introduction: Extravasation of contrast media usually occur after power injection for computerized tomography (CT) or false route during endovascular interventions. Most extravasations are limited to the immediately adjacent soft tissues, typically the skin and subcutaneous tissues, when extravasations of relatively only small volumes. However, it also has observed severe injury is compartment syndrome, more likely occur after extravasation of larger volume especially when this occurs in less capacious area. The acute tissue injury, producing acute local inflammatory response such as pain, swelling, depends on extravasated fluid volumes. Several treatments are developed to avoid severe tissue injury.

Case description: A male, 63 years old, with diagnosis of chronic kidney disease stage V, he was routine hemodialysis for last three years through left radio-cephalic arteriovenous fistula. During last two months there was reduce access flow and ineffective hemodialysis, fistulography and venoplasty were arranged. Puncture site on left brachial artery was performed for intervention access. After five-milliliter contrast media injection for fistulography, patient complain of burning pain, stinging sensation, on physical examination there was swelling at the site of puncture site. The angiogram showed extravasation of contrast media. Squeeze maneuver was done immediately, followed by sheath removal. After performing squeeze maneuver for 15 minutes, swelling, and pain were decrease, and then endovascular intervention can be continued.

Conclusion: Contrast media extravasation on brachial area, which area is relatively loose, squeeze maneuver was easy way and effective to reduce local effect of contrast media extravasation during endovascular intervention.

Keywords: contras media, extravasation, complications, management.

Comparison of stitch effect using polyglecaprone 25 and nylon with large stitch continuous technique to collagen type I and III ratios on skin incision line of albian rats Wistar strain (Rattus norvegicus)

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Introduction: The type of surgery thread can increase the risk of wound dehiscence due to its capacity to maintain the skin layer in a good position. The determination of the good thread is needed to reduce wound dehiscence rate and improve the quality of patient’s life. The study aims to compare the effect of polyglecaprone-25 (PG-25) and nylon thread on the type 1 and 3 collagen ratios on the abdominal skin incision line of Wistar albino rat strain (Rattus Norvegicus) with large stitch technique.

Methods: Forty rats were divided into four groups equally. Groups 1 and 3 got sutured with PG-25 thread. Groups 2 and 4 got sutured with Nylon thread. The first two groups were decapitated on day 4th, while the others were decapitated on day 7th. Collagen type 1, collagen type 3 and collagen type 1 and 3 ratios were measured. The differences on collagen expression on the two groups were statistically analyzed.

Results: There were no significant differences between the mean of collagen type 1, collagen type 3, and ratio collagen type 1 and type 3 in rat’s skin which got sutured with PG-25 and nylon, on the day 4 (1.03±0.26) vs (1.04±0.68) (p=0.450) and day 7 (1.49±0.52) vs (1.87±1.3) p=0.762.

Conclusion: Collagen type 1 and type 3 ratio of PG-25 group is not significantly different from nylon group on the 4th and 7th day.

Keywords: polyglecaprone 25, nylon, collagen ratio, continuous large stitch.

Comorbidities as consideration of laparotomy or laparoscopic cholecystectomy in patients with cholelithiasis in Dr. Sardjito Hospital, Yogyakarta, Indonesia

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**Introduction:** Cholecystectomy is the only effective symptomatic gallstone management. However, laparoscopy's intraoperative conversion to laparotomy was still in the range of 4.9% - 20%. Over 65 years, acute cholecystitis, obesity, and comorbid preoperative factors can be predictors of conversion to laparoscopic cholecystectomy. When the likelihood of conversion is high, proceeding to a cholecystectomy laparotomy will help prevent the initial laparoscopic approach associated with the risk of prolonged and dangerous surgery and higher costs. To know the relationship between age, acute cholecystitis, body mass index, and comorbidities cholelithiasis patients as a consideration for a laparoscopic procedure cholecystectomy laparotomy at Dr. Sardjito Hospital, Yogyakarta, Indonesia.

**Methods:** A case-control quantitative analytic study were enrolled, subject were patients undergoing cholecystectomy at Dr. Sardjito Hospital. Assessment of comorbidities using the Age-Adjusted Charlson Comorbidity Index (ACCI). Data taken from patient medical records. The normality test was carried out followed by bivariate and multivariate analysis.

**Result:** There was statistical significance for comorbid and acute cholecystitis when compared to cases and controls. Comorbid with ACCI ≥ 4 has an odd ratio of 6.3 (CI 95% 1.22-30.77) with a p-value of 0.028, while acute cholecystitis has an odd ratio of 2.71 (CI 95% 1.12-6.55) with a p-value 0.027.

**Conclusion:** There is a relationship between comorbid and acute cholecystitis in cholelithiasis patients as a consideration for a laparoscopic procedure or a cholecystectomy laparotomy in Dr. Sardjito

**Keywords:** comorbid, ACCI, laparotomy, laparoscopy, cholecystectomy.

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**Differences in expression of insulin-like growth factor 1 receptor according to subtypes of breast cancer in very young women in Haji Adam Malik General Hospital, Medan, Indonesia**

**Introduction:** Background: Breast cancer is the most common cancer in women (24.2%) and the second most common cancer in the world (11.6%). Approximately 2.089 million new cases of breast cancer were identified in 2018. Expression of IGF-1R correlates with ER expression and predicts a favorable phenotype. Several studies have confirmed further cross-talk between ER and IGF-1R in breast cancer.

**Case description:** In this study, the median age of patients in luminal A breast cancer subtype was 33 years, while the age of the youngest patient was 23 years and the age of the oldest patient was 35 years. It was found that 33 patients (63.5%) had low IGF1R expression and 19 patients (36.5%) and 20 patients (38.5%) with an advanced local stage and only 1 patient (1.9%) with an early stage. In the test of significant differences in IGF1R expression according to breast cancer subtypes in very young women at Haji Adam Malik Hospital Medan with a p-value of 0.031 (p <0.05).

**Conclusion:** There is a significant difference in IGF1R expression according to breast cancer subtype in very young women at Haji Adam Malik Hospital Medan, where higher expression was found in luminal A than luminal B triple-negative breast cancer (TNBC).

**Keywords:** IGF1R, subtype, breast cancer.

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**Effects of topical vitamin C on collagen deposition in mid dermal burns in Wistar rats**

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Burns is a global public health problem caused by the high burn mortality rate and morbidity. Based on the medical records of Haji Adam Malik Hospital Medan, there were 353 cases of burns in 2011-2014, the most common cause was flame burn injury. The optimal concentration of topical vitamin C which has a biologically significant effect with a concentration greater than 8% and a concentration greater than 20% does not have a significant biological effect. This study is an experimental study. This study's research design is a simple experimental design (Post Test Only Control Group Design). Fourty samples were analyzed on the 14th day after burns induction consisting of 2 groups, namely 20 samples from the control group and 20 samples from the experimental group (vitamin C). Vitamin C is effective in the healing process of burns. Topical use of vitamin C can be an option for patients who have large burn areas.

**Keywords:** Vitamin C, collagen, burns, experimental.

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**Post-operative outcomes difference between on-pump and off-pump coronary-artery bypass grafting surgery over 60 years old patients at Haji Adam Malik General Hospital Medan, Indonesia**

**Introduction:** The high incidence of coronary heart disease led to an increase in the number of Coronary-Artery Bypass Grafting (CABG) surgeries, recorded over 340,000 CABG actions performed in the U.S. with 82.4% using on-pump techniques and 17.6% using off-pump techniques. Patients with contraindications to on-pump CABG, such as patients with calcified aorta, advanced age, and significant comorbidity, may be candidates for off-pump CABG. This study aims to see outcomes difference between patients that performed off-pump CABG technique compared to on-pump CABG technique at Haji Adam Malik General Hospital Medan period 2015-2019.

**Methods:** This research is analytical research with retrospective case-control...
design conducted in coronary heart disease patients aged 60 years and above with indications of CABG in 2017 to 2019 who underwent surgery in the Division of Cardio-Thoracic Surgery, Surgery Department of The Faculty of Medicine, Universitas Sumatera Utara – H. Adam Malik General Hospital Medan. Samples in this study will be taken consecutively of 88 subjects.

**Results:** Based on the study subjects, the average age of patients who underwent on-pump CABG was 64.55 (± 3.61) years old, while the average age of patients who underwent off-pump CABG was 64.82 (± 4.70) years. From length of stay inward or ICU, length of ventilator use, inotropic use, incidence of surgical wound infection, incidence of kidney failure, incidence of stroke, myocardial infarction, PRC and FFP transfusion needs, as well as mortality in patients, found there is no significant difference with p-value > 0.05 in two groups.

**Conclusion:** There is no post-operative outcomes difference between on-pump and off-pump CABG Surgery

**Keywords:** coronary heart disease, CABG, on-pump, off-pump

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**Comparison of postoperative morbidity and mortality between patients with or without metabolic syndrome who underwent coronary artery bypass grafting at Haji Adam Malik General Hospital Medan, Indonesia**

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**Introduction:** Diabetes Mellitus and obesity are increasing in the population undergoing coronary artery bypass graft, and these conditions are major factors in the development of Metabolic Syndrome. A metabolic syndrome is a group of factors that associated with an increased cardiovascular risk. The purpose of this study was to determine postoperative morbidity and mortality in patients with metabolic syndrome compared to patients with metabolic syndrome who underwent Coronary Artery Bypass Grafting (CABG) surgery at H. Adam Malik General Hospital Medan.

**Methods:** This study is an analytical study with a cross-sectional design, by taking secondary data from the medical records of patients who underwent CABG at Haji Adam Malik General Hospital Medan, with total of 74 patients. Analysis of the data was using the Chi-Square test, which must be obtained p < 0.05, the difference is statistically significant.

**Results:** From 74 patients, we found statistically significant difference (p < 0.05) in duration of intubation and post-CABG surgery wound infection, there were longer postoperative CABG stay and intubation in the patient group with the metabolic syndrome and a higher number of patient with post-surgery wound infection in the group of patients with the metabolic syndrome compared to the group without the metabolic syndrome.

**Conclusion:** Duration of stay, duration of intubation, and minimalizing of surgical wound infection, especially in patients with metabolic syndrome contributed in postoperative morbidity of CABG surgery.

**Keywords:** postoperative morbidity, metabolic syndrome, coronary artery bypass grafting.

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**Comparison of scald burn patients’ outcomes based on body mass index**

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**Introduction:** Burns is one of the most common types of wounds. Severe burns can cause morbidity and a relatively high degree of disability. The impact of obesity on the burn population has produced mixed results in several studies. Obese patients also have an increased risk of increasing the length of hospital stay. Aim: This study was to determine the comparison of scald burn patient outcomes based on body mass index.
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Method: This research is a comparative-analytic study with a retrospective cohort study design, using secondary data from the medical records of burn patients at RSUP Haji Adam Malik Hospital from 2016 to 2018. The total sample obtained was 81 people. The mean comparison test was carried out for more than two groups and the data distribution was normal so that the One Way Anova test was carried out.

Result: Patients with normal BMI the results were 12.7 ± 2.0, while the results in patients with overweight categories were 19.0 ± 1.9, in the obese 1 category group the results were 22.5 ± 1.8, in the obese 2 groups the results were 27.6 ± 1.8, and in the category group Obese 3 results obtained 34.3 ± 1.6, the significance of the One Way Anova test is p-value <0.001 While the BMI analysis of mortality rates was carried out by using the chi-square test, with 0% results in the normal BMI category, 0% in the overweight category group, while in the obese 1 category group 13.3%, 23.0% results in the patient group. Obese category 2, and 66.7% of patients in the obese category 3 groups with a significant p-value of <0.001 in the chi-square test of this study

Conclusion: The higher the body mass index group level, the higher the length of hospital stay and the mortality rate for patient
Keywords: burns, outcomes, body mass index.

Acute subdural hemorrhage accompanied with rupture of the inferior vena cava

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Introduction: Traumatic brain injury (TBI) is one of the leading causes of mortality and morbidity with physical and mental disability and a huge socioeconomic burden worldwide. Road traffic accidents are categorically the most common and important cause of TBI, which contribute to about 60% cases.1,2 Acute subdural hemorrhage (ASHD) is a major clinical entity in TBI. Blunt abdominal trauma associated with TBI accounts for 14% of cases.3 Inferior vena cava (IVC) injury is the most commonly injured abdominal vessel in blunt (0.6-1%) and penetrating abdominal trauma (0.5-5%),4 and its injury carries a very high rate of mortality.

Case description: Male patient, 15 years old, presented to emergency department 30 minutes after a traffic accident with decreased of consciousness with the Glasgow Coma Score(GCS) of 11. His chest was clear, abrasions were found on the left hypochondrium. Head CT scan represented acute subdural hemorrhage in the left frontotemporoparietal region was accompanied by midline shift more than 0.5cm. Hemicraniectomy decompression was performed. After decompression was done, patient was unstable, blood pressure down to 70/50 mmHg and weak peripheral pulses at the rate of 140 per minute. Fluid and blood resuscitation have been performed but not responding. The patient remained hemodynamically unstable with minimal urine output. Physical examination reveals a tense abdomen. Diagnostic peritoneal lavage(DPL) was performed, blood was obtained. Exploration laparotomy was undertaken via midline incision and IVC injury was found. The blood was removed then packing on IVC with gauze, observation, no blood comes out, the packing was opened, the patient stable, the operation was complete.

Conclusion: Case of severe head injury with acute SDH, then a craniectomy was performed, in the abdomen had a ruptured inferior vena cava, an exploratory laparotomy was done. Currently, the patient has recovered well without deficits.
Keywords: traumatic brain injury, acute subdural hemorrhage, inferior vena cava injury.

Adherence to face mask and social distancing among residents in Medan during the COVID-19 pandemics

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Introduction: Face mask is mandatory during the Covid-19 Pandemics as a personal protection as well as to limit the virus transmission in community. The government of Indonesia has issued regulations regarding the use of face masks and social distancing in community. Therefore, it is essential to explore the adherence to face masks and social distancing. To assess communities’ adherence to face mask and social distancing and the associated factors contributed to it in Medan.

Methods: A cross-sectional study was conducted in Medan, northwest Indonesia, in November 2020. A total of 572 residents were enrolled using a multistage sampling method from five public spaces (university, traditional market, city park, mall, and health clinic). Data were collected using direct observation.

Results: Most subjects were women (55.1%) from adults’ age group (61.9%). Only 34.3% of the subjects wore face masks properly and only 10.6% of the maintained social distancing. The most common face mask used was cloth mask (25.8%). We also found 1.7% of subjects used face shields. The prevalence of face mask use is significantly higher with strict regulation and control (p=0.0001). We also found the correlation between the type of face mask and adherence (p=0.0001).

Conclusions: We found that the adherence to face masks and social distancing was low in Medan. Therefore, it is very important to apply strict regulation and control regarding the use of face masks and social distancing in community.
Keywords: COVID-19, public adherence, face mask, social distancing.

The difference in oncology surgery service activities during coronavirus-19 pandemic: a population-based study in single-center hospital Indonesia

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Introduction: Dr. Moewardi Hospital is one of the government-appointed hospitals for coronavirus-19 disease referral. Coronavirus-19 pandemic has
ABSTRACT

We present a rare case of a 14-year-old male with brachiobasilica.

Keywords: year.

Conclusion: two BVT access survived in three months.

In first month after access placement due to hemodialysis complication and left access and 25% survive for a year. Meanwhile, 1 of 3 patients died in BVT group months and 29.4 % after 12 months. 50% survived in first six months on BC Vein Transposition (BVT) 3 (5.2%).

RC access survival rate of 70.5 % after six surgery to create AVF. Data collected from medical records. Patients were followed up to first access dysfunction or any intervention by phone. The surgeons. We aim to describe the primary patency of RC and BC AVF in the elderly.

Conclusion: There was a decline in surgical oncology service activities: the significant decrease of surgical oncology patients in Surgical Care Unit and patient’s visits in the surgical oncology outpatient department of Moewardi hospital during coronavirus-19 pandemic.

Keywords: oncology surgery, pandemic, coronavirus-19, single-center hospital.

Primary patency of native arteriovenous fistula in elderly

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Introduction: The arteriovenous fistula (AVF) is preferred to be selected by the patient and clinician because is used due to long term survival and fewer complications than other vascular access. Radiocephalic (RC) fistula is the first choice for dialysis access and should be performed in elderly renal failure patients. Several authors have advocated that brachiocephalic (BC) or brachiobasilic (BB) fistula should be considered as the first option by the surgeons. We aim to describe the primary patency of RC and BC AVF in the elderly.

Method: From June 2018 to March 2020, 58 elderly patients who underwent surgery to create AVF. Data collected from medical records. Patients were followed up to first access dysfunction or any intervention by phone. The survival data were analyzed using Kaplan-Meier method.

Result: There were 58 elderly patients with RC 51 (87.9 %), BC 4 (6.9 %), Basilic Vein Transposition (BVT) 3 (5.2%). RC access survival rate of 70.5 % after six months and 29.4 % after 12 months. 50% survived in first six months on BC access and 25% survive for a year. Meanwhile, 1 of 3 patients died in BVT group in first month after access placement due to hemodialysis complication and left two BVT access survived in three months.

Conclusion: RC has patency rate of 70.5% in six months and 29.4% in a year. Choosing the right type and site of the anastomosis is important as life expectancy increased in the elderly, to preserve the veins for future access site.

Keywords: arteriovenous fistula, primary patency, radiocephalica, brachiobasilica.

Colorectal cancer in pediatric with obstructive symptoms: a rare case report

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Introduction: Colorectal cancer (CRC) is rare in adolescents younger than 20 years old. Diagnosing CRC in children is often delayed until it reaches the advanced stage due to the nonspecific symptoms mimicking other gastrointestinal disorders. Most CRC in children is poorly differentiated mucinous adenocarcinoma, in contrast to CRC in adults, mostly moderately or well-differentiated adenocarcinoma. The delay in diagnosing CRC in children leads to an abysmal prognosis compared to adults.

Case presentation: We present a rare case of a 14-year-old male with abdominal distention since a month before presented to the emergency department. He also complained of bilious vomiting and have not to pass stool for three days, and there was a decrease of body weight about 15 kilograms for the last year, and no family history of malignancy. There were a distended abdomen, arm contour, and metallic sound. The full blood count showed no significant results. We found dilated prominent bowel filled with air in the entire abdomen from plain abdominal radiography that led us to suspect total bowel obstruction. We decided to do an emergency exploratory laparotomy. Intraoperatively, we found multiple masses look like polyposis in the intraluminal of descending colon, ranging about 10 centimeters long. The histopathological finding showed adenocarcinoma well-differentiated colon.
Prevalence of neonates with congenital anomalies at the Dr. Ir. Soekarno Hospital from 2017 to 2020: a hospital-based study

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Introduction: Congenital anomalies (CAS) are structural, functional, or metabolic anomalies that originate during intrauterine life and can interfere with the body functions. CAS can be identified before, during, or after birth. The incidence of each country was different and in Indonesia is around 5 in 1000 birth (5%). The study aimed to determine the prevalence of neonates with congenital anomalies at Dr. Ir. Soekarno Hospital from 2017 to 2020.

Methods: This type of study is descriptive observational. All neonatal data taken from medical records for the years 2017-2020 were diagnosed with congenital anomalies by pediatrics of the hospital were included in this study. All neonates with congenital anomalies were classified based on the primary abnormality as defined under ICD-10.

Results: There was a total of 449 neonates from 2017 to 2020 at Dr. Ir. Soekarno Hospital, of which 67 neonates (14.92%) had diagnosis of at least one congenital anomalies. CAS of the circulatory/cardiovascular system was commonly affected (35.94%), followed by nervous system (17.19%), and musculoskeletal (14.84%). The distribution CAS babies based on sex commonly in male (67.2%) and female (32.8%). Most of the CAS patients had normal birth weight (62.7%) and the rest had low birth weight (37.3%).

Conclusion: Congenital malformations of the circulatory, nervous, and musculoskeletal systems were most common types of CAS. CAS of the circulatory/cardiovascular system was commonly affected (35.94%), followed by nervous system (17.19%), and musculoskeletal (14.84%). The distribution CAS babies based on sex commonly in male (67.2%) and female (32.8%).

Keywords: congenital anomalies, prevalence, neonates.

The demographic profile of lower extremity fractures in Bhayangkara Hospital Kupang, East Nusa Tenggara, Indonesia

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Introduction: To our knowledge, there is limited data about the epidemiology of lower extremity fractures in Indonesia especially in Kupang, Indonesia.

According to Ministry of Health Republic of Indonesia in 2013, 8 million fractures incidence were estimated in Indonesia which 65.2% was lower extremity fracture. A more detailed description and characterization of lower extremity fractures would give evidence-based information about the demographic profile.

Methods: We conducted a retrospective descriptive studies. All data were obtained from medical record Bhayangkara Hospital Kupang, situated in the center of Kupang city. The data was taken between 1 January 2018 and 1 January 2020, including the age, sex, occupational profile, etiology, anatomical site, type of fractures, and the distribution of lower extremity fracture over the year. The lower extremity regions included are pelvis, femur, patella, tibia, fibula, ankle and foot.

Result: A total of 215 patients were diagnosed with lower extremity fractures between 1 January 2018 and 1 January 2020. Male dominance in the productive age group with a ratio of 2.2:1. In contrast, late adulthood group shows female dominance with the ratio of 3:1. The occupational profile of the city makes work-related fractures are common (n=76, 35.4%). By the etiology, road traffic accident (n=132, 61.4%) is the most common determinant with femur (n=64, 29.8%) and closed fracture (n=162, 75.3%) is the most frequent anatomical site and type of fracture. The distribution was almost the same over the months but significantly increase during festive season in May and June and end year holiday (n=25, 11.6%).

Conclusion: This study shows the demographic profile of lower extremity fracture in adults most likely occurs in males within 17-55 year-old during festive season and end-year holidays. Transportation and road traffic accident are the most frequent etiology. Femoral fracture and closed fracture is the most common location and type of fracture.

Keywords: lower extremity, fracture, demographic.

Characteristics of urology patients treated by stichting samenwerking vlissingen-ambon in Haulussy Hospital 2017-2018

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Introduction: Benign prostatic hyperplasia (BPH), urolithiasis and urinary tract infection (UTI) are often urology cases found in Indonesia. There is no epidemiological data about urology patients in Maluku Province. Some patients in the province were handled either by referral to other cities or relying on charity programs because there was no Urologist available yet. The study aims to understand the characteristics of urology patients treated by SSVA in Maluku Province, including age, gender, and diagnosis.

Method: This descriptive study used retrospective data from the medical records of patients treated by the stichting samenwerking vlissingen-ambon (SVVA) in Haulussy Hospital from 2017-2018.

Result: From 281 (100%) urology patients, there were 173 (61.65%) BPH cases, 52 (18.50%) nephrolithiasis cases, 20 (7.11%) UTI cases, 13 (4.62%) hydrocele cases, 9 (3.2%) vescicourethral cases, and 5 (1.77%) varicocele cases, 3 (1.06%) hypospadias cases. The largest number of BPH patients was from 60-69 years old age group with a total of 71 (41.04%) patients, followed by 70-79 years old age group 45 (26.01%) patients. From 52 nephrolithiasis patients, there were 28 (53.8%) male patients and 24 (46.15%) female patients and according to patient age, the largest number was from the 40-59 years old age.
ABSTRACT

Handling of diabetic foot in type 2 diabetes mellitus patients based on a vascular approach: a literature review

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Introduction: Diabetes mellitus (DM) is a metabolic disease characterized by hyperglycemia that occurs due to insulin disorders, insulin action, or a combination of both. Based on data from the 2014 IDF, Indonesia ranks 5th in the world of patients with DM. Diabetic foot is one of the chronic complications of DM that is often encountered. This study aims to provide understanding and education to medical staff in managing diabetic foot based on a vascular approach.

Method: The research method used is a literature review by gathering various sources from certain books and journals. The analysis technique used is a descriptive analysis of content analysis intended to describe a message or a certain text in detail. Early vascular assessment in the legs of a diabetic patient is recommended to reduce mortality and morbidity.

Results: In this article, the vascular assessment of the lower extremities should be carefully assessed. The vascular examination begins with capillary refill, palpation of the lower extremity arteries, and further assessment of the ankle-brachial index (ABI). The vascular examination begins with a capillary refill examination, palpation of the lower extremity arteries, and further ankle-brachial index assessment. Diabetic foot care is based on the classification recommended by the International Working Group On Diabetic Foot. Management of diabetic foot involves a variety of multidisciplinary, one of them with a vascular approach.

Conclusion: The vascular approach aims to assess the vascularization of the diabetic foot is still good or has experienced occlusion or obstruction due to inadequate blood vessels. The vascular approach also aims to determine the appropriate therapy for diabetic foot.

Keywords: diabetic foot, vascular, diabetes mellitus, microvascular, macrovascular.

Skin surgery in benign skin tumors: retrospective study at Jeulila Clinic Banda Aceh 2018-2020

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Introduction: Skin tumors may arise from keratinocytes, melanocytes and skin adnexal cells. Benign skin tumors are local cell proliferation with normal cell growth and differentiation. This study aims to determine the profile of skin surgery in benign skin tumors cases at Jeulila Clinic Banda Aceh from 2018 – 2020.

Method: A retrospective study with a descriptive design based on medical records data.

Results: Seborrheic keratosis, syringoma, skin tag and xanthelasma are the four most common causes of benign skin tumors that have undergone skin surgery with a total of 113 cases from 2018 - 2020 at Jeulila Clinic Banda Aceh. It consists of seborrheic keratoses in 68 cases (60.2%), syringoma in 19 cases (16.8%), skin tag in 14 cases (12.4%) and xanthelasma in 12 cases (10.6%). Female 94.7% and male 5.3%. Seborrheic keratoses, syringoma and skin tags were more commonly found in the age group 25 - 45 years, while xanthelasma was commonly found in 45 - 65 years. Electrocautery was performed to all patients with seborrheic keratoses, syringoma and skin tag. While, xanthelasma was treated with electrocautery, excision or combination of both procedures.

Conclusion: Benign skin tumors are common skin diseases. Accurate diagnosis and therapy will prevent complications that may occur. Skin surgery procedures such as electrocautery or excision can be a therapeutic option for the management of patients with benign skin tumors.

Keywords: COVID-19, elective cases, general surgery practice.

General surgery practice in Aceh rural hospital during the COVID-19 pandemic: a descriptive cross-sectional study

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Introduction: COVID-19 pandemic is one of the biggest issues that we have faced and has had a significant impact on healthcare practice worldwide. Increasing COVID-19 cases requires the surgical department to reorganize all the patient treatment to prevent infection. This study aims to find out the pattern of general surgery care during the COVID-19 pandemic compared to the non-COVID-19 period and to know better to prepare for surgical patients’ treatment in the future.

Method: This is a descriptive cross-sectional study. We studied the important points of a complete range of the patient at the department of surgery outpatient, inpatient, and operation theatre in Datu Beru Hospital from 1 March 2020 to 31 December 2020 for the COVID period and 1 March 2019 to 31 December 2019 for the non-COVID period.

Result: There were 2822 outpatient visits during the non-COVID period and 1949 patients during the COVID period. The total decrease in outpatient visits was 30.93% during the pandemic. Female outpatient visits are 51.25% during COVID period. There is 36.49% reduction in total operation during pandemic. Total elective cases were 78.68% decrease over the pandemic period from 591 to 126 cases. There were 45% reduction inpatient admissions during pandemic.

Conclusion: There is reduction in number of general surgery cases during COVID-19. Some elective surgeries can still be performed with triage according to the guideline. All actions are following protocol and Personal Protection Equipment so that surgeons, staff, and patients’ safety is maintained.

Keywords: COVID-19, elective cases, general surgery practice.
Published by Bali Medical Journal |
We reported a 40-day-old baby boy presented with myoclonic limb jerks that occur primarily during sleep in the newborn. It is characterized by self-limiting “lightning-like” myoclonic limb jerks affecting all four limbs since 10-day-old. The jerky body movements appeared six until nine times a day with approximately an hour interval between movements. The patient did not have any neurologic deficits, pathologic reflexes and vital signs abnormalities. Electroencephalogram (EEG) revealed normal results. We diagnosed the patient with BNSM. Its significance lies in the differential diagnosis of infant seizures with epileptic, particularly myoclonic seizures.

Conclusion: For neonatal seizures or even neonatal status epilepticus, BNSM can be misinterpreted recognizing childhood benign sleep myoclonus is essential to avoid unnecessary diagnostic studies and treatments.

Keywords: benign neonatal sleep myoclonus, neonatal seizure, abnormal jerky movements, electroencephalogram.

A 10-day-old baby with “lightning-like” myoclonic limb jerks during sleep: a case report

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Introduction: Benign neonatal sleep myoclonus (BNSM) is a condition commonly mistaken for seizures. It is characterized by self-limiting “lightning-like” myoclonic limb jerks that occur primarily during sleep in the newborn phase but not associated with epilepsy that suddenly stops when the infant is agitated. This condition is potentially resolved between the ages of 2 and 6 months. The incidence of BNSM per 1,000 births is 0.8 to 3 cases.

Case description: We reported a 40-day-old baby boy presented with multiple episodes of abnormal jerks affecting all four limbs since 10-day-old only during sleep. The jerky body movements appeared six until nine times a day with approximately an hour interval between movements. The patient did not have any neurologic deficits, pathologic reflexes and vital signs abnormalities. Electroencephalogram (EEG) revealed normal results. We diagnosed the patient with BNSM. Its significance lies in the differential diagnosis of infant seizures with epileptic, particularly myoclonic seizures.

Conclusion: For neonatal seizures or even neonatal status epilepticus, BNSM can be misinterpreted recognizing childhood benign sleep myoclonus is essential to avoid unnecessary diagnostic studies and treatments.

Keywords: benign neonatal sleep myoclonus, neonatal seizure, abnormal jerky movements, electroencephalogram.

Characteristics of patients with acute cholangitis at Hasan Sadikin General Hospital Bandung period of January 1st 2020 to December 31st 2020

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Introduction: Acute cholangitis occurs as a result of biliary tract obstruction and bacterial growth in the bile. The most common cause of biliary obstruction is choledocholithiasis. Acute cholangitis needs to be watched out because the incidence of gallstones in Southeast Asia is quite high, and it tends to occur in elderly patients, who usually have other comorbidities that can worsen the condition and complicate therapy.

Methods: This study aims to describe the characteristics of acute cholangitis patients based on age, sex, main complaints, additional complaints, and complications in the ER at Dr. Hasan Sadikin Bandung, the period of January 2020 to December 2020. This study is a descriptive study with a cross-sectional approach and uses secondary data in inpatient medical records.

Result: Of a total of 99 acute cholangitis patients, 63 (63.6%) were female and 36 (36.4%) male with a ratio (female to male ratio) of 1.75:1. Most patients were in the 45-60 years age group. The most common complaint was upper right abdominal pain accompanied by fever and jaundice. The most common complication was peritonitis, followed by liver abscess.

Conclusion: Acute cholangitis patients were more in women and the 50-60 years age group. The most common complication is right upper quadrant pain. The most additional complaints are nausea and vomiting. Most complications are liver abscesses.

Keywords: acute cholangitis, epidemiology, complications.
Characteristics of patients with acute abdomen at Hasan Sadikin General Hospital Bandung period of January 1st 2020 to December 31st 2020

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Introduction: Acute abdomen is a term that indicates an emergency in the abdomen that can end in death if not treated with surgery. This study’s main purpose is to add references in knowing and assessing the characteristics of acute abdomen patients who go to the emergency room at Hasan Sadikin General Hospital Bandung, Indonesia.

Methods: The study is descriptive retrospectively from 190 acute abdomen patient's medical records at Hasan Sadikin Hospital from 1st January 2020 – 31st December 2020. The data collected was the distribution of acute abdominal patients based on 5 cases with the most causes of acute abdomen in the emergency room.

Result: The number of acute abdomen patients in this study who met the inclusion criteria was 190 people. The data studied were distributed based on the 5 most cases of acute abdomen causes in the emergency room, those are 48 cases of acute appendicitis, 45 cases of diffuse peritonitis, 62 cases of obstruction ileus, and 35 cases of gastric perforations.

Conclusion: The number of acute abdominal patients in this study was 190 people. In This Study, The Most Common Cause Of Acute Abdominal Patients Was Ileus Obstruction Was Influenced By Various Reasons, Such An Unhealthy Lifestyle.

Keywords: acute abdomen, acute appendicitis, diffuse peritonitis, ileus obstruction, gastric perforation.

A minimally invasive technique for the abscess drainage in lumbosacral tuberculosis using arthroscopy sheath

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Introduction: Spinal tuberculosis usually affects the thoracolumbar spine, with only 2-3% involving the lumbosacral region. Lumbosacral tuberculosis can lead to the formation of presacral abscess. For drainage of spinal abscess, presacral region is one of the difficult regions to perform. Minimally invasive surgery (MIS) is an important clinical technique for the spinal abscess's debridement to decrease the morbidity acquired by the patient. We presented a case of lumbosacral tuberculosis treated with abscess evacuation using MIS technique.

Case description: A 28 years old male came with the chief complaint of back pain and lump in right groin area since 4 months before admission. Physical examination showed lump and bilateral positive straight leg raising. Preoperative Oswestry Disability Score (ODI) and Japanese Orthopaedic Association (JOA) scores showed moderate disability and normal function, respectively. Radiologic examinations showed signs of lumbosacral tuberculosis. The patient underwent abscess evacuation using MIS of presacral. After 7 days postoperative examination the back pain was immediately relieved (visual analog scale 1). Physical examination showed that the size of inguinal lump was decreased. Postoperative ODI scores showed minimal disability. Radiologic examination showed that the size of the abscess was markedly diminished.

Conclusion: A presacral approach, as we performed, is a simple approach that can reach the location of the abscess by using fluoroscopic guidance. The presence of clear fluid confirmed abscess evacuation after the abscess and its caseous material had been removed thoroughly and also as the clear fluid was no more noticed. The success of this approach depends on the time of surgery. When surgery is delayed, the granulation tissue has been formed, making minimally invasive techniques for surgical evacuation much more difficult.

Keywords: lumbosacral tuberculosis, minimally invasive surgery, arthroscopy, debridement, abscess evacuation.

Decrease of traumatic brain injury cases through emergency department during COVID-19 pandemic era in Haji Adam Malik General Hospital Medan, Indonesia

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Introduction: Coronavirus disease 2019 (COVID-19), per 2020, has been infecting nearly 800,000 individuals of all ages on 31 March 2020. Based on Harvard Medical school experience, almost over 80% of patients have switched to telemedicine services, and actual visits reserved for selected patients. In Indonesia, until the completion of this study, there are almost 1.22 million cases with recovery of 1 million cases and the death of 33,183 cases. In North Sumatra, the COVID-19 cases occurred in 22,999 cases and the recovery of 62 cases of death with 786 cases. Here, we report the trend of traumatic brain injury (TBI) cases in our institution's pandemic in Haji Adam Malik General Hospital, Medan, North Sumatera.

Method: We reported 343 TBI cases from January 2020 to December 2020 with a retrospective observational study, with the January 2020 to March 2020 regarded as pre-pandemic and April 2020 to December 2020 as the pandemic era.

Results: There is a significant decrease of traumatic brain injury patients from the pre-pandemic to the pandemic era (from March 2020 to April 2020). It was 61% decrease in patients admitted to our emergency department (ED). Demographically, male patients in the productive age group and mild TBI has the most common presentation to our ED. There is significant decrease of patients with TBI in our institution admitted into ED, which can be seen in January with 55 patients, declining from April with 21 patients. This also occurred concurrently with the start of social distancing in Indonesia in April 2020 and the civilian suggested staying at home during this period.

Conclusion: The number of COVID-19 is increasing, with the increase of TBI patients with COVID-19. Neurosurgeons and Neurosurgery Residents have to be cautious in assessing the TBI patients to limit the spread of COVID-19 in ED.

Keywords: traumatic brain injury, COVID-19, new normal, epidemiology.
Relationship between history of hormonal contraception with hormonal receptor on breast cancer patient in Mohammad Hoesin Hospital, Palembang, Indonesia

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Introduction: Cancers with estrogen receptor-negative (ER-) have a worse prognostic than estrogen receptor-positive (ER+). The study aims to evaluate relationship between history of oral contraceptive use with estrogen and progesterone receptor expression in patients with breast cancer.

Method: This study investigated breast cancer patients who went to dr. Moh Hoesin Palembang. This study involved 200 respondents with data obtained using patient immunohistochemical data and interviews using a questionnaire. This study uses a cross sectional analysis method. Data were obtained from the history of use of hormonal contraception, the type of hormonal contraception, and the status of hormonal receptors (Esterogen Receptors (ER)) and Progesterone receptors (PR). Prevalence Ratio (PRR) and chi-square test were used to obtain a relationship between the history of hormonal contraception estrogen receptor in women with breast cancer.

Result: The chi-square analysis results showed no significant relationship between the history of the use of hormonal contraception and negative receptor expression with the prevalence ratio of hormonal contraceptives and ER (-) 1.48 times and PR (-) 1.43 times. There was no significant relationship between type of contraception and negative ER PR. The highest relative risk is in implant contraception with 1.54 times for ER (-) and 1.8 times for PR (-).

Conclusion: There was no relationship between the history of hormonal contraception and negative hormonal receptors.

Keywords: hormonal contraception, hormone receptors, estrogen receptors, progesterone receptors.

Anxiety to COVID-19 pandemic amongst university students is related with gastrointestinal symptoms

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Introduction: The COVID-19 pandemic has spread throughout the world, caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) that affects respiratory system. The emergence and spread of the COVID-19 pandemic have caused confusion, anxiety and fear among the community including university students. Anxiety to the COVID-19 pandemic causes various psychological manifestations, including fear of disease transmission, loss of loved ones, and decline in future socio-economic aspects. Anxiety can also lead to physical responses like gastrointestinal symptoms. This study aimed to determine the relationship between anxiety to COVID-19 pandemic and gastrointestinal symptoms complained by university students.

Methods: This observational analytic study using cross-sectional approaches involved 311 university students of Universitas Syiah Kuala, Banda Aceh, Indonesia. Anxiety to COVID-19 pandemic was measured using the Depression, Anxiety, and Stress Scale questionnaire, while gastrointestinal symptoms were measured using the Gastrointestinal Symptom Rating Scale questionnaire.

Results: From total 311 respondents, 157 (50.5%) of them felt anxiety to COVID-19 pandemic, with 28 (9%) and 13 (4.2%) students experienced severe and very severe anxiety respectively. Also, 264 (84.9%) university students complained gastrointestinal symptoms, both upper and lower gastrointestinal tracts. There was a significant relationship between level of anxiety to COVID-19 pandemic and gastrointestinal symptoms.

Conclusion: Anxiety to COVID-19 pandemic can cause gastrointestinal symptoms amongst university students. Therefore psychological assistance is needed in order to reduce psychological and physical disorders during the pandemic.

Keywords: Pandemic COVID-19, anxiety, gastrointestinal symptoms.

Rehabilitation-related knowledge relates to visit compliance in post-ischemic stroke patients in an outpatient rehabilitation clinic

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Introduction: Stroke is a serious disease that can affect anyone so it requires special attention. Treatment for stroke patients is very dependent on the knowledge and compliance of patients undergoing rehabilitation. Patient's knowledge about medical rehabilitation will determine the level of compliance of ischemic stroke patients undergoing medical rehabilitation.

Methods: This type of research is observational analytic research with the cross-sectional approach in the Rehabilitation Clinic of Dr. Zainoel Abidin Hospital. It was conducted from October to November 2019 which included 74 patients.

Results: Compliance assessment was calculated using the questionnaire “Picture of Family Behavior towards Stroke Patients in Rehabilitation Efforts” and the questionnaire “Relationship of Family Support with Stroke Patient Rehabilitation Compliance”. Respondents who have less knowledge and are compliant with (9.5%), respondents with sufficient knowledge and obedient (45.9%), and respondents with good knowledge and obedient (23.0%). Analysis of the data using the Chi-Square statistical test showed a significant relationship between the level of patient knowledge of medical rehabilitation and the level of patient compliance is undergoing medical rehabilitation at the Exclusive Medical Rehabilitation Clinic of Banda Aceh Hospital.

Conclusion: Increasing the patient’s knowledge of undergoing medical rehabilitation is crucial to improving patient compliance is undergoing rehabilitation.

Keywords: Ischemic stroke, knowledge level, patient compliance level, medic rehabilitation.
Prevalence and characteristics of surgical site infection in pediatric surgery department of Dr. Zainoel Abidin Hospital, Banda Aceh, Indonesia 2018

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Background: Surgical Site Infection (SSI) is the most frequent case in low- to middle-income countries. The incidence ranges from 1.2%–23.6% in developed countries while developing countries range from 1.2%–5.2%. SSI is one of many complications that occur after abdominal surgery and nosocomial infections in postoperative patients. This study is conducted to determine the prevalence and characteristics of surgical wound infections based on age, gender, nutritional status, type of surgery performed, types of surgical site infection either performed in pediatric surgery department of Zainoel Abidin Hospital or first time to received treatment in Dr. Zainoel Abidin Hospital in 2018, and to determine the relationship of SSI with several risk factors.

Methods: Research data obtained from Zainoel Abidin Hospital medical records in 2018, pediatric patient who visited the Zainoel Abidin Hospital at the pediatric surgery department with a sample size of 166 subjects, the study analysis using univariate data analysis. Analysis on two variables is presented in the cross-tabulation table and uses SPSS version 23.

Result: Prevalence and characteristics of SSI in pediatric surgery patients for 1 year greatly increased with a sample size of 166 subjects in getting about 28 subjects with surgical wound infection, it was found that there was a relationship between surgical wound infection with several characteristics, both nutritional status, length of stay, prophylaxis, type of action and type of surgical wound with a p-value < 0.05.

Conclusion: The prevalence of SSI in abdominal surgery at Dr. Zainoel Abidin Hospital is quite high. In this research, nutritional status is the leading cause of SSI, which can be used as the benchmark in the next prospective study with greater sample size.

Keywords: surgical, infection, risk.

Blood transfusion in open spinal surgery: analysis of need and factors that affecting it in Dr. Zainoel Abidin General Hospital, Banda Aceh, Indonesia (January 2016 – December 2018)

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Introduction: Blood loss in spinal surgery has a significant impact on patient morbidity. The concentration of hemoglobin of patients before surgery, surgical methods, the number of levels of spinal surgery, a history of lung disease and decreased the amount of autologous blood is available, is another significant factor that affects the intraoperative blood loss, operating time, blood transfusions and duration of treatment. This study aimed to determine the factors that influence the need for blood transfusions in open spine surgery.

Methods: This type of research is descriptive-analytic with a sample size of 362 patients who underwent spinal surgery with variables assessed as age, gender, body mass index, surgery duration, number of fusion levels, and blood transfusion requirements. Analysis of bivariate data and continued with multivariate analysis of logistic regression discrimination was carried out using the SPSS application with a degree of confidence (α<0.05%).

Results: A total sample of 362 patients who underwent spinal surgery, found 57 patients received blood transfusions and 305 patients did not receive blood transfusions, with data analysis for gender (p>0.05), age (p<0.05), body mass index, (p<0.05), duration of operation (p>0.05), and total fusion levels at each level of 0.05. Multivariate analysis, logistic regression discrimination with a confidence index of 95% showed the discriminatory quality of age, body mass index, and total fusion levels on the need for blood transfusion in patients undergoing open spinal surgery of 60.7% (62.1-77.3) and statistically significant with p-value <0.001.

Conclusion: Age, body mass index, and total fusion level influence the need for blood transfusion in open spinal surgery.

Keywords: fatigue, operation results, COVID-19 pandemic.

Profile of breast cancer patients undergoing chemotherapy at regional general hospital Dr. Zainoel Abidin, Banda Aceh, Indonesia

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Introduction: Breast cancer is most common cause of cancer death among women in developing countries and the second leading cause in developed countries after lung cancer. It is estimated that there are 100 new cancer patients for every 100,000 population per year in Indonesia.

Methods: This study is descriptive. The population used was medical record data of breast cancer patients who underwent chemotherapy at Oncology Department of Dr. Zainoel Abidin Hospital, Indonesia from January to March 2018 using total sampling technique.

Results: A total of 100 samples, it was shown that most patients were 36–45 years of age (42%). The most common histopathological feature was invasive ductal carcinoma (IDC) (57%). Most patients were from Bireun regency (16%).

Conclusion: The higher the patient’s age, the greater the risk of developing breast cancer, IDC has worse prognosis, it is necessary to increase role of health workers in regions on prevention and early detection and convince public to search health facilities if have complaints about breast cancer.

Keywords: breast cancer, epidemiology, ductal carcinoma.

Duration of the use of tamoxifen on endometriosis events in breast cancer patients

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Introduction: Tamoxifen (selective estrogen receptor) is the standard hormonal therapy in women with breast cancer with positive estrogen receptors. This regimen's use proved to reduce the incidence of relapse at local, collateral, or distant body area and decrease breast cancer mortality. One of the effects of tamoxifen is to induce endometrial proliferation, thus may cause various abnormalities in endometrial tissue.

Method: This study is an unpaired categorical comparative analytic study with a single retrospective cohort (internal comparison group) design. All breast cancer patients at dr. Zainoel Abidin Banda Aceh from 2017 - 2019 was involved in this research. Evaluation of endometriosis incidence was carried out based on the duration of tamoxifen using the Mann-Whitney U test. This study is an unpaired categorical comparative analytic study with a single retrospective cohort (internal comparison group) design. All breast cancer patients at dr. Zainoel Abidin Banda Aceh from 2017 - 2019 was involved in this research. Evaluation of endometriosis incidence was carried out based on the duration of tamoxifen using the Mann-Whitney U test.

Result: A total of 114 patients (46.15%) out of a total of 247 breast cancer patients using tamoxifen reported experiencing endometriosis with a mean age of 49 years old. Most of the patients diagnosed with stage IIIB breast cancer of ductal cell carcinoma. A total of 111 people (97.37%) experienced endometriosis after taking tamoxifen for 30-36 months and the remaining 3 (2.63%) after 24-29 months. The mean duration of tamoxifen use associated with endometriosis was 34 months (p<0.001).

Conclusion: Long-term use of tamoxifen in breast cancer patients increases the risk of endometriosis

Keywords: endometriosis, tamoxifen, breast cancer.

The relationship between fatigue level of general surgery residents and surgical outcomes in Dr. Zainoel Abidin General Hospital during the COVID-19 pandemic

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Introduction: Fatigue is a physiological phenomenon, a process in which a state of decreased tolerance to physical work occurs. For a health worker the effect of fatigue will have an impact on patients who are given care due to less than optimal performance. The relationship between sleep deprivation and fatigue and circadian rhythm disturbances that lead to poor performance is not clear. However, fatigue and long surgical work hours can lead to poor performance in surgery, thus affecting the outcome of surgery.

Methods: The type of research is an analytic observational study to assess the correlation between fatigue level of general surgery residents and surgical outcomes in Zainoel Abidin general hospital during the Covid-19 pandemic. The study design was a prospective cohort design. Because the analysis test used is a categorical scale for the independent variable and categorical for the dependent variable, the bivariate analysis uses the Spearman Test. The bivariate analysis will be carried out using the SPSS application with a degree of confidence (α<0.05%).

Results: It was found that the surgical operators in this study were the majority of men, namely 29 people (87.9%) while 4 women (12.1%). The most FSS category was the moderate FSS category, namely 31 people (93.9%), followed by the mild category, namely 2 people (6.1%). The majority of the surgery results obtained were good surgery results, namely 31 people (93.9%), while those who needed repeat surgery were 2 people (6.1%).

Conclusion: In this study, there was a positive correlation between the fatigue severity scale and the surgery result, but it was not significant (p=0.721).

Keywords: fatigue, operation results, surgery, outcome.

Stages modified Charles procedure on stage III lymphedema of lower limb, still safe and effective

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Introduction: Stage III lymphedema of lower limb, is physical and mental burdens to the patient. There are two types of surgical management such as physiological and excisional operations. Physiological procedures attempt to improve lymphatic drainage by microvascular techniques, local flaps, or distant pedicled tissue. Whereas excisional operations, Charles's procedure consists of radical excision of the affected tissue, followed by coverage with skin grafts.

Case description: A Male, 43 years old, complained enlargement of the left leg since eight years ago, getting bigger with intermittent pain, until currently the patient is difficult walking. History of fever, trauma, previous surgery, diabetes mellitus, tuberculosis, and travel to filarial endemic areas is denied. There was lymphostatic elephantiasis, non pitting edema with skin changes (acanthosis, increase in thickness, fat deposition, and fibrosis) on physical examination. According to the International Society of Lymphology staging system, patient was diagnosed with lymphedema stage III. Modified Charles procedure was performed in stages operation (surgical excision in two consecutive days). Skin graft three weeks later after tissue granulation was adequate. On next two week evaluation obtained 95% of skin graft take.

Conclusions: Stage III lymphedema of lower limb is challenge for surgeons. Two consecutive days surgical excision (Stages) of modified Charles procedure was still safe and effective as treatment.

Keywords: lymphedema, lower extremity, charles procedure, surgery.
Neutrophil-lymphocytes ratio diagnostic test in acute appendicitis at Dr. Zainoel Abidin General Hospital, Banda Aceh, Indonesia

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Introduction: Acute appendicitis is an inflammation that occurs in the vermiform appendix. The inflammatory response to acute appendicitis is characterized by the activation of cellular and molecular effectors, including recruitment and activation of neutrophils. The neutrophil lymphocytes ratio (NLR) compares neutrophil counts with lymphocytes used as a simple benchmark.

Methods: We analyzed with observational diagnostic test analytical design of retrospective cross-sectional studies. The study subjects were acute appendicitis patients at Zainoel Abidin Hospital in 2018-2019. Subjects upon arrival performed a blood test, and then calculated NLR, the result of NLR count compared to post-appendectomy anatomical pathology examination. The data is analyzed with descriptive statistical analysis, ROC curve analysis and diagnostic tests.

Result: There were 176 samples came to emergency room with diagnosed appendicitis, the most age was 17−25 years (31.2%), 81 male (46%), 95 female (54%). From pathological anatomy results were 129 acute appendicitis and 47 chronic appendicitis. From the AUC ROC 0.96 obtained cut off point NLR > 3.209 in acute appendicitis. Diagnostic tests obtained sensitivity 83.72% specificity 82.98%, positive guess value 97.71% and negative guess value 65.00% with 83.52% accuracy.

Conclusion: We concluded NLR may predict diagnosis of acute appendicitis with NLR > 3.209, sensitivity scores of 83.72% specificity 82.98%.

Keywords: acute appendicitis, cut off point, sensitivity, specificity, neutrophil-lymphocyte ratio

Wide excision and reconstruction surgery using NVFG for giant cell tumor of the right proximal radius Campanacci 3

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Introduction: Giant Cell tumors (GCT) are benign tumors with potential for aggressive behavior and metastasize capacity. Although considered to be benign tumors of bone, GCT has a relatively high recurrence rate. The tumor often extends to the articular subchondral bone or even abuts the cartilage. GCT was classified by Campanacci based on radiographic appearance. Surgical resection is the universal standard of care for treatment of GCT of bone. The key to ensuring an adequate surgical treatment is with adequate removal of the tumor.

Case description: We reported a case series from three patients with GCT of the proximal radius. Two of the patients have GCT of the left proximal radius, and the other on the right proximal radius. The patient mostly presented with chief complaint pain in the elbow and forearm region. Radiographic examination showed a primary bone tumor of the proximal radius. Magnetic resonance imaging (MRI) provided excellent depiction in suggesting the diagnosis of cutaneous GCT campanacci 3, which was later affirmed by biopsy. All Patients underwent successful wide excision and non-vascularized fibular graft reconstruction. The limb salvage procedure consists of elbow joint excision and NVFG reconstruction. During one month post-operative period, no major event was observed with diminished pain sensation and normal ROM in all three patients. At one year follow-up, all the patients didn't complain any pain and instability with normal ROM at the physical examination which enabled them to do normal daily activity.

Conclusion: We present a case series of a GCT at the elbow regions. The biopsy and MRI provided excellent depictions in suggesting the diagnosis of GCT. We performed wide excision and reconstruction with a non-vascularized fibular graft. The procedure provided excellent local control and good aesthetic and functional outcomes.

Keywords: giant cell, campanacci 3, wide excision, non-vascularized fibular graft.

Correlation of prostate-specific antigen and Gleason grade group to quality of life in patients with prostate cancer

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Introduction: Prostate cancer is the fourth most malignant man neoplasm in the world. Prostate-specific antigen (PSA) is tumor marker used for prostate cancer detection, staging, and evaluation. The Gleason score is a classification used in histological assessment of prostate cancer and acts as a prognosis predictor. The poor prognosis affects the patient’s quality of life. The World Health Organization Quality of Life (WHOQOL)-BREF questionnaire assesses quality of life-related to medical conditions that a person is experiencing. There is group stratification in PSA and Gleason scores to determine quality of life of prostate cancer patients. However, the use of stratification in Indonesia, especially Aceh has never been done.

Methods: This research’s type is observational analytic with cross sectional design. The subject was medical record data of prostate cancer patients in the Surgical Ward of Regional General Hospital dr. Zainoel Abidin Banda Aceh from January 2017 to December 2018. The data taken were patient identity, PSA levels, Gleason score and anamnesis to obtain WHOQOL-BREF.

Results: The study showed the mean age of patients was 66.29 ± 10.14 years, mean PSA level was 418.55 ± 750.38 ng/ml. Analysis using Pearson’s and Spearman test showed strong correlation between PSA and WHOQOL-BREF (p<0.000), also between Gleason grade group and WHOQOL-BREF (p<0.000).

Conclusion: The greater PSA levels and Gleason grade group, the lower the patient’s quality of life.

Keywords: prostate cancer, antigen, gleason score.
Use of indocyanine green fluorescent during laparoscopic cholecystectomy: a systematic review

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Introduction: Laparoscopic cholecystectomy (LC) is a standard surgical approach in cholelithiasis treatment. The safety of LC requires proper identification of relevant anatomy. Bile duct injury (BDI) is the most common and feared complication because of insufficient identification. Indocyanine green fluorescent (ICG) is used to overcome this risk, but there is no definitive evidence to support the routine use of ICG to prevent BDI. This study aimed to review the effectiveness and safety use of indocyanine green fluorescent in LC.

Methods: Literature searching was conducted by using Pubmed and Proquest databases. We performed a systematic review using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. The literature search was limited to studies with a control group and written in English.

Results: Four articles with a combined total of 862 patients were found eligible for this review. Evidence in this review revealed that the use of intraoperative ICG fluorescence could significantly reduce operation time and produced better surgical outcomes than conventional laparoscopic cholecystectomy. No major adverse effects were recorded.

Conclusions: Performing laparoscopic cholecystectomy can increase the safety of laparoscopic cholecystectomy. Further high-quality studies are required to verify the findings of this study.

Keywords: laparoscopic, surgery, management, outcome.

Analysis factors affect the successful management of degloving cases at Dr. Soetomo General Hospital, Banda Aceh, Indonesia

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Introduction: Degloving is an injury characterized by detachment of the skin and soft tissue underneath, caused by sudden shearing force. Degloving is a traumatic case, can occur in any part of the body, complications from skin necrosis, infection, to death. Early diagnosis and adequate treatment have been determinants of successful outcomes of degloving management. This study aims to assess the factors affect the successful management of degloving cases at Dr. Soetomo General Hospital.

Methods: Medical records data of 35 degloving patients already treated from January 2018 to October 2020 at Dr. Soetomo General Hospital. There were 9 variables studied: mechanism of injury (MOI), body area affected, degloved body surface, characteristics of degloving, type of degloving, comorbid injuries, timing operation, length of stay (LOS), and total of treatments. Analyzes performed univariate, bivariate and multivariate statistical with the SPSS 21 program.

Results: The result is being run over by car or bus (truck) tires as the most cause of injury (MOI). There were 4 factors that were significant (p<0.05) on the outcome of reduction treatment. Multivariate logistic regression test performed, result is the assessment of soft tissue injury as the most effect on degloving management.

Conclusion: Assessment of soft tissue injury as the most effect on the outcome of degloving cases management, treated by the Department of
Plastic, Reconstructive and Aesthetic Surgery at Dr. Soetomo General Hospital. Further researches are needed such as prospective study can be applied for the management of degloving case.

**Keywords:** injury, degloving, outcome, assessment

### Comparison incidence of pneumonia after early and late tracheostomy in patients with ventilator

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**Introduction:** The incidence of pneumonia in hospitalized patients reached 8.1% and 18% with the ventilator. Mortality reaches 20% and 5.8%-10.6% related to ventilator. Tracheostomy performs to maintain the airway patients with prolong ventilator. The mortality rate for early tracheostomy was 17.1% and 36.1% for late. It is necessary to prove whether early tracheostomy in patients with ventilators will positively affect pneumonia incidence.

**Methods:** An observational analytic study with a retrospective cohort design, with sample all patients with tracheostomy et causa prolong ventilator in 2015-2019 at Dr. Soetomo Hospital. The sample size is 178.

**Results:** Founded 127 males and 47 females. In the pneumonia group, 38 had early tracheostomy and 104 patients with no-pneumonia 91 had early tracheostomy. In the mortality group, 87 had early tracheostomy. In the no-mortality group, 42 were in early tracheostomy. In concomitant trauma, 50 patients experienced limb trauma, 47 patients with abdominal trauma, 38 patients had thoracic trauma. In patients who underwent surgery, 63 had late tracheostomy. What was not done operative action, 66 out of 90 at early tracheostomy. Patients who did not use antibiotics, 69 at early tracheostomy and 60 patients using antibiotics at early tracheostomy. On the ventilator bundle 69 at early tracheostomy and those not on the ventilator bundle, 60 at early tracheostomy. Correlation between tracheostomy time and pneumonia, in the early 91 patients there was no mortality, in the late tracheostomy, 13 patients had no morbidity from 49 patients. Correlation between tracheostomy time and mortality, 87 patients experienced mortality in the early and 28 in the late group. The association between pneumonia and mortality, in patients with pneumonia 48 there was a mortality of 74 and as many as 67 patients without pneumonia experienced mortality.

**Conclusion:** Early tracheostomy reduces the risk of developing pneumonia and hospital stay length in patients with the prolonged ventilator.

**Keywords:** male breast cancer, delayed care-seeking, mastectomy, immunohistochemistry biomarker.

### Correlation between fracture healing and traumatic brain injury in long bone fracture evaluation with RUST score

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**Introduction:** Fracture healing occurs through indirect or direct healing. Indirect healing is through a series of processes in which callus formation occurs. Healing occurs immediately without the formation of callus formations. Traumatic Brain Injury (TBI) is defined as a disturbance in the normal functioning of the brain that can be caused by a bump, blow, or jerk to the head or penetrating head injury. Until now, the relationship between TBI and fracture healing is not fully understood. To determine the relationship between the ability of callus formation in patients with long bone fracture of the upper extremity with TBI.

**Methods:** This study was an analytic observational study with a prospective cohort approach. This study was conducted at the Moeewardi Doctor’s General Hospital from January 2019 to March 2020. The samples of this study were upper limb long bone fracture patients with brain injury and upper limb long bone fracture patients without brain injury. The sampling technique was using consecutive sampling. Data analysis is presented in the form of univariate
analysis, bivariate analysis, and multivariate analysis.

Results: The total sample obtained was 34 subjects. Univariate analysis showed that the RUST score for the first 3 months in the non-TBI group obtained a mean value of 10.18 ± 0.64 and the TBI group of 11.35 ± 0.70. The age variable was normally distributed, while the RUST scores for the first month and the first 3 months were not normally distributed. The bivariate analysis showed that the RUST score for the first month with the non-TBI group and the TBI group had a p value = 0.193, which means there was no significant difference, while for the first 3 months RUST score had a value of p=0.000, this indicates that there is a significant difference. The significant variable in the multivariate analysis was the TRUST score for the first 3 months (p=0.003).

Conclusion: There is a correlation between bone healing rate and TBI in patients with long bone fractures of the upper limb.

Keywords: fracture healing; long bone fracture; rust score; traumatic brain injury.

Risk assessment for surgeries during coronavirus disease 2019 pandemic in Aceh main referral hospital, Indonesia

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Backgrounds: Surgeries are potential procedures for Coronavirus Disease 2019 (COVID-19) transmission due to the presence of a multidisciplinary team and high-risk activities such as airway assessment and intubation. This study was carried out to assess risk of surgeries conducted at the main referral hospital in Aceh province, Indonesia during COVID-19 pandemic.

Methods: A Medical necessary, Time-Sensitive (MeNTS) score was used to assess risk of emergency and elective surgeries conducted at Aceh main referral hospital, Dr. Zainoel Abidin, from July to August 2020.

Results: In total, 463 surgeries were screened, consisted of 126 emergency surgeries and 337 elective procedures. Orthopedic department contributed the most with 129 patients (27.9%), while ENT department contributed the least with only 16 patients (3.4%). Orthopedic surgeries had the lowest MeNTS score (36.23), while neurosurgeries had the highest MeNTS score (46.91). Most of the surgeries were elective (72.8%), and the MeNTS score for elective surgeries was higher than emergency procedures (41.0 to 39.6).

Conclusion: Neurosurgeries were the highest risk procedures conducted in Aceh main referral hospital, Indonesia, followed by ENT, thoracic-vascular, and digestive surgeries. MeNTS scoring can be used as an additional screening tool in the Department of Surgery, Dr. Zainoel Abidin Hospital, Banda Aceh, Indonesia to minimize the risk of COVID-19 transmission during surgical procedures.

Keywords: risk assessment, surgery, COVID-19 pandemic, necessary medical time-sensitive.

Characteristics of pepticum ulcer perforation patients in Hasan Sadikin Hospital Bandung between 1 January 2017-31 December 2019

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Introduction: Peptic ulcer disease is one of the most common diseases of the digestive tract. The most common complications of peptic ulcers include bleeding, perforation, and gastric outlet obstruction. Perforation is a serious complication of peptic ulcer disease. Patients with perforated peptic ulcers often present to health facilities with peritonitis symptoms, namely acute abdominal pain followed by septicemia. Peptic ulcer perforation was also associated with short-term mortality in 30% of patients and morbidity as high as 50%, making peptic ulcer perforation a surgical emergency. The characteristic pattern of patients with peptic ulcer perforation has been reported to vary across geographic areas due to differences in sociodemographic and environmental factors. The characteristic pattern of peptic ulcer perforation patients can also influence morbidity and mortality. This study aims to determine patients’ characteristics with peptic ulcer perforation in Hasan Sadikin Hospital Bandung for the period of 1 January 2017-31 December 2019.

Methods: The research design used in this study was retrospective descriptive. Data were collected by total sampling from patients' medical records with peptic ulcer perforation at Hasan Sadikin Hospital Bandung from 1 January 2017-31 December 2019.

Result: Characteristics of patients with peptic ulcer perforation in Hasan Sadikin Hospital Bandung for the period of 1 January 2017-31 December 2019, data was obtained that there were 118 patients with male gender (76.6%), 65 patients aged 61-75 years (42.4%), 125 patients with ulcer perforation. Pepticum in prepyloric gastric (81.1%), 124 patients with complaint onset >24 hours (80.5%), 120 patients had risk factors for taking NSAIDs (77.9%), 5 patients had comorbid hypertension (3.24 %), 108 patients had preoperative shock (70.1%).

Conclusion: Peptic ulcer perforation patients are more common in men than women and more often occur in old adults and the elderly. The location of the most peptic ulcer perforation in prepyloric gastric. Patients with perforated peptic ulcers have an onset of complaints >24 hours. The most risk factor for peptic ulcer perforation is the consumption of NSAIDs. Patients with peptic ulcer perforation have the most comorbid diseases, namely hypertension. Patients with perforated peptic ulcer are more likely to present in a state of preoperative shock.

Keywords: Peptic ulcer perforation, peritonitis, sepsis, characteristics