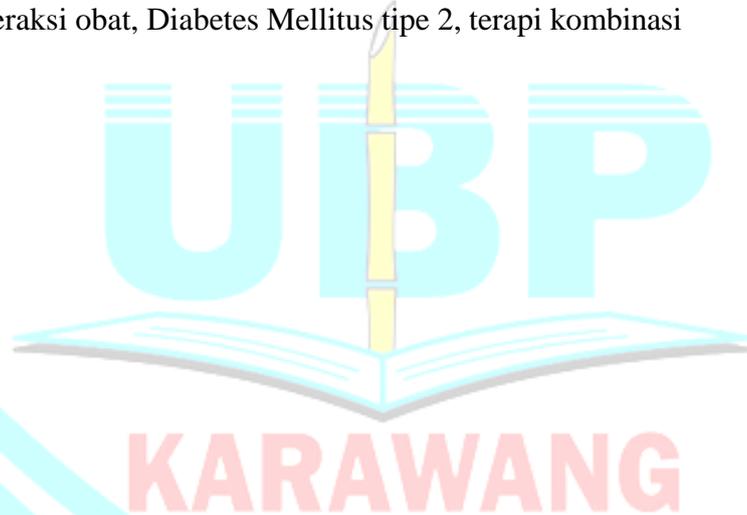# ABSTRAK

Pendahuluan: Diabetes Mellitus tipe 2 memerlukan terapi jangka panjang dengan kombinasi beberapa obat, yang meningkatkan risiko interaksi obat. Tujuan: Penelitian ini bertujuan mengelompokkan potensi interaksi obat berdasarkan tingkat keparahan, menghitung persentase kejadian, dan mengidentifikasi golongan obat yang paling sering terlibat. Metode: Penelitian dilakukan secara prospektif pada 150 pasien di instalasi rawat jalan Rumah Sakit Karya Husada. Data interaksi dianalisis menggunakan *Drugs.com* dan *Stockley's Drug Interactions*.Ditemukan 246 kombinasi obat, dengan 216 interaksi moderat (87,80%), 25 minor (10,16%), dan 5 mayor (2,03%). Hasil: Sebanyak 78,67% pasien mengalami gejala klinis seperti pusing, lemas, hipoglikemia, dan hiperglikemia. Obat yang paling sering terlibat meliputi metformin, glimepirid, lisinopril, bisoprolol, furosemid, natrium diklofenak, dan meloxicam. Kesimpulan: Interaksi obat pada pasien DM tipe 2 cukup tinggi dan perlu pengawasan klinis. Keterlibatan apoteker dan sistem pendukung keputusan sangat penting untuk meningkatkan keamanan terapi.

Kata kunci: Interaksi obat, Diabetes Mellitus tipe 2, terapi kombinasi

ABSTRACT

Introduction: Type 2 Diabetes Mellitus requires long-term therapy, often involving multiple drug combinations, which increases the risk of drug interactions. Objective: This study aimed to classify potential drug interactions based on severity, calculate the percentage of occurrences, and identify the most frequently involved drug classes. Methods: A prospective study was conducted on 150 patients at the outpatient department of Karya Husada Hospital. Drug interactions were analyzed using Drugs.com and Stockley's Drug Interactions. A total of 246 drug combinations were identified, consisting of 216 moderate interactions (87.80%), 25 minor (10.16%), and 5 major (2.03%). Results: About 78.67% of patients experienced clinical symptoms such as dizziness, fatigue, hypoglycemia, and hyperglycemia. The most frequently involved drugs were metformin, glimepiride, lisinopril, bisoprolol, furosemide, sodium diclofenac, and meloxicam. Conclusion: The incidence of drug interactions in type 2 diabetes patients is relatively high and requires close clinical monitoring. The involvement of clinical pharmacists and implementation of decision support systems are essential to enhance medication safety.

Keywords: *Drug interaction, Type 2 Diabetes Mellitus, combination therapy*