

ABSTRAK

Tuberkulosis (TB) masih menjadi salah satu masalah kesehatan utama di Indonesia dengan angka morbiditas dan mortalitas yang tinggi. Peran fasilitas pelayanan kesehatan (faskes) swasta, seperti apotek dan klinik, sangat penting dalam mendukung program eliminasi TB melalui penyediaan obat anti-TB (OAT), edukasi pasien, serta pelaporan kasus. Penelitian ini bertujuan untuk mengetahui profil pelayanan terapi TB oleh faskes swasta di Kabupaten Karawang serta menganalisis tingkat konsumsi OAT dengan metode *Anatomical Therapeutic Chemical/Defined Daily Dose* (ATC/DDD) dan *Drug Utilization 90%* (DU90%). Penelitian menggunakan desain deskriptif kuantitatif dengan pengumpulan data melalui kuesioner yang disebarakan kepada 110 faskes (96 apotek dan 14 klinik) yang memenuhi kriteria inklusi. Data penggunaan OAT dianalisis dengan nilai DDD/1000 kunjungan pasien rawat jalan (KPRJ) dan identifikasi segmen DU90%. Hasil penelitian menunjukkan bahwa hanya 18% faskes yang menyediakan OAT, sebagian besar belum memiliki SOP pelayanan TB, dengan sistem pencatatan terdiri atas 51,04% komputerisasi dan 48,96% manual. Regimen yang masuk dalam segmen DU90% adalah Rifampisin (14,86%), kombinasi Rifampisin, Isoniazid, Pirazinamid, dan Etambutol (68,48%), serta kombinasi Rifampisin 75 mg dan Isoniazid 50 mg (88,67%). Tingkat konsumsi OAT tertinggi adalah Rifampisin (6.400 DDD/1000 KPRJ), diikuti kombinasi Rifampisin 150 mg, Isoniazid 75 mg, Pirazinamid 400 mg, dan Etambutol 275 mg (3.463 DDD/1000 KPRJ). Kesimpulan, peran faskes swasta dalam eradikasi TB masih rendah dan perlu ditingkatkan, terutama melalui distribusi OAT yang merata, peningkatan kepatuhan pelaporan, dan penguatan standar pelayanan TB.

Kata kunci: tuberkulosis, obat anti-TB, ATC/DDD, DU90%, fasilitas kesehatan, resistensi obat.

ABSTRACT

Tuberculosis (TB) remains one of the major public health problems in Indonesia, with high morbidity and mortality rates. The role of private healthcare facilities, such as pharmacies and clinics, is crucial in supporting TB elimination programs through the provision of anti-TB drugs (ATD), patient education, and case reporting. This study aimed to describe the profile of TB therapy services in private healthcare facilities in Karawang Regency and to analyze the level of ATD consumption using the Anatomical Therapeutic Chemical/Defined Daily Dose (ATC/DDD) and Drug Utilization 90% (DU90%) methods. A descriptive quantitative design was employed, and data were collected through questionnaires distributed to 110 healthcare facilities (96 pharmacies and 14 clinics) that met the inclusion criteria. ATD consumption was analyzed using DDD/1000 outpatient visits (KPRJ), and drugs included in the DU90% segment were identified. The results showed that only 18% of facilities provided ATD, with most lacking TB service SOPs; record-keeping systems consisted of 51.04% computerized and 48.96% manual. Regimens included in the DU90% segment were Rifampicin (14.86%), a fixed-dose combination of Rifampicin, Isoniazid, Pyrazinamide, and Ethambutol (68.48%), and a combination of Rifampicin 75 mg and Isoniazid 50 mg (88.67%). The highest consumption was recorded for Rifampicin (6,400 DDD/1000 KPRJ), followed by Rifampicin 150 mg, Isoniazid 75 mg, Pyrazinamide 400 mg, and Ethambutol 275 mg (3,463 DDD/1000 KPRJ). In conclusion, the role of private healthcare facilities in TB eradication remains limited and needs to be strengthened through improved ATD distribution, adherence to reporting, and standardized TB service implementation.

Keywords: tuberculosis, anti-TB drugs, ATC/DDD, DU90%, healthcare facilities, drug resistance.