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LAMPIRAN-LAMPIRAN

Lampiran 1. Surat Rekomendasi Persetujuan Etik dari Komisi Etik Penelitian

KEMENTERIAN PENDIDIKAN, KEBUDAYAAN, RISET DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN FAKULTAS KEDOKTERAN
KOMITE ETIK PENELITIAN KESEHATAN
RSPTN UNIVERSITAS HASANUDDIN
RSUP Dr. WAHIDIN SUDIROHUSODO MAKASSAR
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REKOMENDASI PERSETUJUAN ETIK

Nomor : 550/UN4.6.4.5.31/ PP36/ 2021

Tanggal: 1 September 2021

Dengan ini Menyatakan bahwa Protokol dan Dokumen yang Berhubungan Dengan Protokol berikut ini telah mendapatkan Persetujuan Etik :

No Protokol	UH21070443	No Sponsor Protokol	
Peneliti Utama	**dr. Yanna Indrayana, SpJP**	Sponsor	
Judul Peneliti	Pengaruh Polimorfisme Gen Oxidized LDL Receptor 1 (OLR-1) 3' UTR terhadap Terjadinya Adverse Remodelling Jantung pada Pasien Paska Infark Miokard Akut Melalui Induksi soluble LOX-1, oxLDL dan MMP-9		
No Versi Protokol	**2**	Tanggal Versi	**30 Agustus 2021**
No Versi PSP	**2**	Tanggal Versi	**30 Agustus 2021**
Tempat Penelitian	RS Dr. Wahidin Sudirohusodo Makassar, RSUD Provinsi NTB, RS Kota Mataram, dan RS Saiful Anwar Malang		
Jenis Review	☐ Exempted ☒ Expedited ☐ Fullboard Tanggal	Masa Berlaku **1 September 2021** sampai **1 September 2022**	Frekuensi review lanjutan
Ketua Komisi Etik Penelitian Kesehatan FKUH	Nama **Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K)**	Tanda tangan	
Sekretaris Komisi Etik Penelitian Kesehatan FKUH	Nama **dr. Agussalim Bukhari, M.Med.,Ph.D.,Sp.GK (K)**	Tanda tangan	

Kewajiban Peneliti Utama:

- Menyerahkan Amandemen Protokol untuk persetujuan sebelum di implementasikan
- Menyerahkan Laporan SAE ke Komisi Etik dalam 24 Jam dan dilengkapi dalam 7 hari dan Lapor SUSAR dalam 72 Jam setelah Peneliti Utama menerima laporan
- Menyerahkan Laporan Kemajuan (progress report) setiap 6 bulan untuk penelitian resiko tinggi dan setiap setahun untuk penelitian resiko rendah
- Menyerahkan laporan akhir setelah Penelitian berakhir
- Melaporkan penyimpangan dari prokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

Lampiran 2. Data Subyek Penelitian

Data Subjek Penelitian

No. Subjek

DATA SUBJEK PENELITIAN

1. Identitas Pasien:

Nama : ……..
Umur : …… tahun
Jenis Kelamin : Laki-laki / Perempuan *
Tingkat Pendidikan : ……..
Alamat : ……..
No. Rekam Medik : ……..
No. Telepon : ……..
Tanggal Pemeriksaan : ……..
Rumah Sakit : ……..
Onset infark : ……..
Killip : ……..

2. Pola Hidup (Life Style):

Merokok : ya / tidak * Stop merokok sejak: ..... tahun
Jika Ya, lama merokok : …… tahun
Berapa batang : …… /hari

3. Riwayat Penyakit:

- Hipertensi : Ya / Tidak *
  Jika Ya,
  - Terapi antihipertensi : Ya / Tidak *
    - Nama obat dan dosis yang diminum : …….
- Diabetes Melitus : Ya / Tidak *
  Jika Ya, nama obat dan dosis yang diminum : …….

4. **Data Antropometri Subjek:**

   Tinggi Badan : …….. cm Berat Badan : …… Kg

   Lingkar Perut/pinggang : …….. cm Lingkar panggul : …… cm

5. **Hemodinamik :**

   Tekanan darah sistolik : .....

   Tekanan darah diastolik : .....

   Detak jantung : .....

6. **Pemeriksaan Elektrokardiografi (EKG) : .....**

   .....

7. **Keterangan Obat-obatan (nama, dosis, dan frekuensi pemberian) yang dikonsumsi saat ini :**

   .....

   .....

   .....

   .....

   .....

8. **Hasil Laboratorium :**

   - Kadar glukosa darah puasa : …….. mg/dL
   - Kadar glukosa darah 2 jam PP : ……. mg/dL
   - Kadar kolesterol total serum : ……. mg/dL
   - Kadar HDL serum : ……. mg/dL
   - Kadar LDL serum : ……. mg/dL
   - Kadar trigliserida serum : ……. mg/dl
   - Kadar Ureum / Creatinine : ……. mg/dl
   - Darah lengkap (Hb/lekosit/Hct/Trombosit : …….....
   - Netrofil : …….
   - Troponin : .....
   - CKMB : .....
   - Lain-lain : …….

9. **Hasil angiografi**

   .....

   .....

   .....

.....

.....

10. Ekokardiografi

	Minggu pertama	Bulan ke-3
LVEF		
LVEDV		
LVESV		
LVEDVi		
LVESVi		
E wave, cm/sec		
A wave, cm/sec		
E/A ratio		
Deceleration time, msec		

11. Kadar sLOX-1 :

.....

12. Kadar MMP-9 : .....

13. Genotype OLR-1 : .....

Catatan :

*) Coret yang tidak perlu

No. Subjek

Lampiran 3. Penjelasan Sebelum Penelitian

Peneliti adalah Mahasiswa Program S3 Fakultas Kedokteran Universitas Hasanuddin yang akan melakukan penelitian dengan judul **"Pengaruh Polimorfisme Gen *Oxidized LDL Receptor* 1 (OLR-1) 3' UTR terhadap Terjadinya *Adverse Remodelling* Jantung pada Pasien Paska Infark Miokard Akut Melalui Induksi *soluble* LOX-1, oxLDL dan MMP-9"**

Latar Belakang

Penyebab kematian utama dari penyakit jantung iskemik adalah infark miokard akut. Walaupun perkembangan terapi infark miokard akut semakin canggih namun infark miokard masih menjadi penyebab utama dari gagal jantung. Angka pasien yang mengalami remodeling jantung post infark masih cukup tinggi yaitu sekitar 12 sampai 44%. MMP-9 merupakan instigator kunci dari proses remodeling jantung paska infark miokard akut. Penelitian menunjukkan aktivasi LOX-1 berkontribusi terhadap progres fibrosis dan disfungsi jantung setelah kondisi iskemik. LOX-1 merupakan reseptor scavenger dari oxLDL. LOX-1 dikode oleh gen *Oxidized LDL Receptor* 1 (OLR-1). Polimorfisme OLR1 berhubungan dengan peningkatan soluble LOX-1. Peningkatan LOX-1 berhubungan dengan peningkatan aktivasi dan sekresi MMP-9. Namun penelitian sejauhnya terbatas pada penelitian pada hewan coba. Belum ada penelitian pengaruh polimorfisme OLR-1 terhadap terjadinya adverse remodelling pada pasien post infark miokard.

Tujuan penelitian

Penelitian ini bertujuan untuk membuktikan bahwa terdapat hubungan antara polimorfisme gen Oxidized LDL Receptor-1 (OLR-1) 3' UTR dengan *adverse remodelling* pada pasien paska infark miokard akut.

Manfaat bagi partisipan

Dengan berpartisipasi dalam penelitian ini, Anda dapat mengetahui apakah Anda memiliki gen OLR-1 3'UTR normal (CC) atau memiliki polimorfisme gen, baik heterozigot (CT) maupun homozigot (TT), dan risiko anda mengalami adverse remodelling dalam 3 bulan setelah serangan infark miokard akut. Dengan demikian, Anda akan mendapatkan rekomendasi tatalaksana dan konseling lebih dini yang sesuai.

Hasil pemeriksaan tersebut memerlukan waktu untuk pengolahan dan interpretasi oleh Peneliti sebelum dapat disampaikan kepada partisipan. **Untuk itu, Anda dimohon memberikan nomor/alamat kontak yang dapat dihubungi**.

Semua pemeriksaan yang dilakukan untuk kepentingan penelitian ini dilakukan secara **cuma-cuma dan tidak dipungut biaya apapun**.

Prosedur pemeriksaan
Pertama akan dilakukan pengisian kuisioner yang berisi informasi mengenai identitas diri, karakteristik klinik, dan data demografik yang Anda miliki. Kemudian akan dilakukan pemeriksaan Ekokardiografi yaitu pemeriksaan USG jantung untuk mengetahui dimensi dan fungsi jantung pada minggu pertama dan 3 bulan setelah infark miokard akut. Selanjutnya akan dilakukan pengambilan sampel darah vena pada hari kelima setelah Anda melakukan puasa selama 12 jam. Pengambilan sampel darah akan dilakukan secara aseptik oleh tenaga laboran yang terlatih.

Risiko
Pemeriksaan Ekokardiografi tidak mengandung risiko karena merupakan pemeriksaan non-invasif. Pengambilan sampel darah memiliki risiko kecil berupa terjadinya infeksi akibat masuknya agen infeksi pada tempat tusukan jarum sewaktu dilakukan pengambilan sampel darah vena. Risiko tersebut akan ditekan seminimal mungkin, dimana pengambilan sampel darah vena dikerjakan oleh tenaga laboran terlatih dan dikerjakan secara aseptik. Apabila di tengah proses pengambilan data kesehatan, Anda merasa tidak nyaman, anda dapat mengundurkan diri dari penelitian ini. Tidak ada konsekuensi apapun secara sosial, legal maupun ekonomi yang akan dikenakan apabila anda memilih untuk mundur.

Kerahasiaan
Hasil pemeriksaan hanya diketahui oleh Peneliti, Tim Peneliti dan Anda sendiri. Identitas dan data lengkap Anda akan dirahasiakan dalam laporan penelitian maupun publikasi.

Masalah dan Keluhan
Jika terjadi masalah, efek samping, atau pertanyaan yang ditimbulkan oleh prosedur penelitian, Anda dapat menghubungi Peneliti, atas nama dr. Yanna Indrayana, Sp.JP (nomer HP. 081234720714). Peneliti akan merespon keluhan dan mencoba mencari solusi atas permasalahan yang disampaikan.

PENELITI

Yanna Indrayana

Lampiran 4.

FORMULIR PERSETUJUAN SETELAH PENJELASAN

Saya yang bertandatangan di bawah ini :
Nama : .....
Umur : .....
Alamat : .....
.....

setelah mendengar/membaca dan mendapatkan informasi mengenai tujuan, manfaat, prosedur, dan risiko penelitian, telah memahami sepenuhnya informasi tersebut dan dengan ini menyatakan kesediaan untuk berpartisipasi dalam penelitian tersebut.

Saya sadar bahwa keikutsertaan saya ini bersifat sukarela tanpa paksaan dan saya berhak untuk menolak ikut atau mengundurkan diri dari partisipasi dalam penelitian ini. Saya berhak bertanya atau meminta penjelasan pada peneliti bila masih ada hal yang belum jelas atau masih ada hal yang ingin saya ketahui tentang penelitian ini.

Saya juga memahami bahwa semua biaya yang dikeluarkan sehubungan dengan penelitian ini akan ditanggung oleh peneliti. Saya percaya bahwa keamanan dan kerahasiaan data penelitian akan terjamin dan saya dengan ini menyetujui semua data saya yang dihasilkan pada penelitian ini untuk disajikan dalam bentuk lisan maupun tulisan.

	Nama	**Tanda tangan**	**Tgl/Bln/Thn**
Responden	……..	……..	……..
Saksi 1	……..	…….....	…….....
Saksi 2	……..	…….....	……..

Penanggung Jawab Penelitian:

Nama : .....
Alamat : .....
Tlp : .....
Tanda tangan : .....

Lampiran 5. Hasil Analisis Statistik

1. Data karakteristik demografi, klinis, polimorfisme OLR-1 3'UTR, kadar sLOX-1, ox-LDL dan MMP-9

	Range	Minimum	Maximum	Mean	Std. Deviation	Variance
Age	42	34	76	55.30	9.276	86.051
SBP	135.00	65.00	200.00	131.4851	30.96986	959.132
DBP	106.00	30.00	136.00	80.3168	19.31058	372.899
IMT	19.55	15.94	35.49	24.9772	3.92971	15.443
DoorToBallon	15	0	15	4.60	3.183	10.132
WSR	.46	.67	1.13	.9458	.06549	.004
Onset	24.00	.00	24.00	9.9238	5.30010	28.091
TIMI_score	11	1	12	3.79	2.203	4.854
RBS	591.00	66.00	657.00	174.6824	105.80465	11194.624
Total_chol	325.00	82.00	407.00	193.7416	51.21224	2622.694
HDL	58.00	12.00	70.00	40.1124	10.60921	112.555
LDL	301.00	43.00	344.00	133.4831	52.41164	2746.980
TG	375.00	15.00	390.00	144.9205	74.63401	5570.235
Ureum	56.70	11.90	68.60	31.1141	13.01761	169.458
Creatinine	2.34	.36	2.70	1.0591	.42879	.184
ClCr	187.81	24.00	211.81	82.5101	37.46232	1403.426
Number_vessel	3	1	4	1.72	.869	.756
sLOX1_1	1018.94	.00	1018.94	219.8126	193.16921	37314.343
MMP9_1	2160.22	83.95	2244.17	822.3276	508.40183	258472.424
oxLDL_1	1.21	.06	1.26	.1946	.18494	.034
sLOX1_2	454.03	38.42	492.45	231.4690	113.22946	12820.911
MMP9_2	2638.58	126.04	2764.62	820.4470	545.01152	297037.553
oxLDL_2	.79	.14	.93	.3107	.18269	.033
Valid N (listwise)						

Frequency Table

Sex

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	87	86.1	86.1	86.1
	Female	14	13.9	13.9	100.0
	Total	101	100.0	100.0	

Smoking

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	67	66.3	66.3	66.3
	No	34	33.7	33.7	100.0
	Total	101	100.0	100.0	

HTN

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	55	54.5	54.5	54.5
	No	46	45.5	45.5	100.0
	Total	101	100.0	100.0	

DM

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	40	39.6	39.6	39.6
	No	61	60.4	60.4	100.0
	Total	101	100.0	100.0	

Dyslipidemia

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	77	76.2	76.2	76.2
	No	24	23.8	23.8	100.0
	Total	101	100.0	100.0	

Cat_IMT

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Obese	74	73.3	73.3	73.3
	Normal	27	26.7	26.7	100.0
	Total	101	100.0	100.0	

CentralObesity

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	54	53.5	53.5	53.5
	No	47	46.5	46.5	100.0
	Total	101	100.0	100.0	

Killip

		Frequency	Percent	Valid Percent	Cumulative Percent

Valid	1.00	74	73.3	73.3	73.3
	2.00	1	1.0	1.0	74.3
	3.00	2	2.0	2.0	76.2
	4.00	24	23.8	23.8	100.0
	Total	101	100.0	100.0	

TIMI_flow

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	1	1.0	1.0	1.0
	2	6	5.9	5.9	6.9
	3	94	93.1	93.1	100.0
	Total	101	100.0	100.0	

ECG

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	anterior	47	46.5	46.5	46.5
	non-anterior	54	53.5	53.5	100.0
	Total	101	100.0	100.0	

2. Perbedaan karakteristik antara pasien yang mengalami remodeling dan tidak remodeling jantung

	Remodelling	Mean	Std. Deviation	Std. Error Mean
Age	Yes	57.34	7.930	1.402
	No	53.38	9.518	1.320
IMT	Yes	24.1298	3.71131	.65607
	No	25.6338	4.23735	.58761
WSR	Yes	.9607	.05751	.01017
	No	.9355	.06526	.00905
SBP	Yes	133.0313	36.10423	6.38239
	No	130.7692	26.89531	3.72971
DBP	Yes	82.5625	21.40687	3.78424
	No	80.3462	19.44816	2.69697
HR	Yes	83.5938	20.38795	3.60411
	No	79.9038	16.43437	2.27904
Hb	Yes	13.8000	1.75187	.30969
	No	13.9549	1.69945	.23797
Leucocyte	Yes	11869.6875	3955.14078	699.17672
	No	12801.9608	3511.87586	491.76098

Hct	Yes	41.5129	5.11558	.91879
	No	40.9686	4.16550	.58329
Plt	Yes	275343.7500	78123.80967	13810.46890
	No	269165.6471	64236.94858	8994.97197
Netrophil	Yes	8818.6044	3525.01749	623.14094
	No	9396.5554	3694.96721	533.32258
Total_chol	Yes	183.7241	46.62456	8.65796
	No	202.8085	50.52965	7.37051
SQRT_slox1	Yes	16.1619	7.09963	1.27513
	No	11.1128	6.08052	.84322
SQRT_mmp91	Yes	30.5067	8.48506	1.52396
	No	24.5281	9.16856	1.27145
Ratio_Sox1	Yes	2688.0315	3079.51944	544.38727
	No	1302.3949	1372.61863	190.34796
LG_MMP92	Yes	2.8984	.35080	.08048
	No	2.7584	.28887	.04883
Ratio_Sox2	Yes	1159.5012	756.29063	173.50497
	No	747.9070	394.31252	66.65098

	Levene's Test for Equality of Variances						
						95% Confidence Interval of the Difference	
	F	Sig.	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Age	2.206	.141	.052	3.959	2.011	-.041	7.960
			.043	3.959	1.925	.123	7.795
IMT	.848	.360	.102	-1.50405	.90917	-3.31268	.30458
			.092	-1.50405	.88075	-3.25964	.25154
WSR	.175	.677	.076	.02524	.01403	-.00267	.05315
			.068	.02524	.01361	-.00190	.05237
SBP	4.102	.046	.744	2.26202	6.89837	-11.46103	15.98507
			.761	2.26202	7.39226	-12.57100	17.09504
DBP	.143	.706	.627	2.21635	4.54099	-6.81712	11.24982
			.635	2.21635	4.64695	-7.07600	11.50869
HR	.885	.350	.365	3.68990	4.05124	-4.36930	11.74911
			.391	3.68990	4.26423	-4.85453	12.23434

Hb	.163	.688	.691	-.15490	.38782	-.92654	.61674
			.693	-.15490	.39056	-.93502	.62522
Leucocyte	.168	.683	.266	-932.27328	831.66534	-2587.02643	722.47986
			.280	-932.27328	854.79644	-2642.04274	777.49617
Hct	2.279	.135	.600	.54428	1.03511	-1.51566	2.60421
			.619	.54428	1.08830	-1.63780	2.72636
Plt	2.854	.095	.696	6178.10294	15758.76049	-25176.88728	37533.09316
			.709	6178.10294	16481.46146	-26830.91387	39187.11975
Netrophil	.006	.937	.487	-577.95104	828.05983	-2226.49153	1070.58944
			.483	-577.95104	820.20583	-2214.33324	1058.43116
Total_chol	.037	.848	.104	-19.08437	11.59150	-42.18093	4.01219
			.098	-19.08437	11.37034	-41.80539	3.63665
SQRT_slox1	.700	.405	.001	5.04908	1.46964	2.12496	7.97319
			.002	5.04908	1.52872	1.98633	8.11182
SQRT_mmp91	.767	.384	.004	5.97869	2.02440	1.95078	10.00660
			.004	5.97869	1.98470	2.01737	9.94000
Ratio_Sox1	12.641	.001	.006	1385.63663	490.03829	410.79437	2360.47889
			.021	1385.63663	576.70603	218.84150	2552.43176
LG_MMP92	1.309	.258	.121	.14001	.08882	-.03823	.31824
			.147	.14001	.09413	-.05187	.33188
Ratio_Sox2	12.840	.001	.011	411.59418	155.98952	98.57830	724.61005
			.037	411.59418	185.86643	27.49402	795.69433

	Onset	DoorToBallon	Killip	TIMI_score	TIMI_flow	Number_vessel
Mann-Whitney U	793.000	711.000	737.500	664.000	785.000	806.500
Wilcoxon W	2171.000	1986.000	2115.500	2042.000	1313.000	2132.500
Z	-.360	-.624	-1.174	-1.573	-1.056	-.100
Asymp. Sig. (2-tailed)	.719	.533	.240	.116	.291	.920

	Eosinophil	Monocyte	RBS	HDL	LDL	TG	Ureum
Mann-Whitney U	691.000	677.000	508.000	593.000	604.500	544.500	714.000
Wilcoxon W	1772.000	1758.000	1411.000	1721.000	1039.500	950.500	1989.000
Z	-.457	-.599	-.480	-.947	-.823	-1.243	-.818
Asymp. Sig. (2-tailed)	.647	.549	.631	.343	.410	.214	.413

	Ureum	Creatinine	ClCr	oxLDL_1	oxLDL_2
Mann-Whitney U	714.000	711.000	647.500	824.500	295.000
Wilcoxon W	1989.000	1936.000	1175.500	2202.500	485.000
Z	-.818	-.706	-1.450	-.069	-.679
Asymp. Sig. (2-tailed)	.413	.480	.147	.945	.497

Remodelling * Sex

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.629[a]	1	.428		
Continuity Correction[b]	.211	1	.646		
Likelihood Ratio	.655	1	.418		
Fisher's Exact Test				.520	.330
Linear-by-Linear Association	.621	1	.431		
N of Valid Cases	84				

a. 1 cells (25.0%) have expected count less than 5. The minimum expected count is 4.19.

b. Computed only for a 2x2 table

Remodelling * Smoking

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.449[a]	1	.503		
Continuity Correction[b]	.190	1	.663		
Likelihood Ratio	.453	1	.501		
Fisher's Exact Test				.640	.333
Linear-by-Linear Association	.443	1	.505		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 11.43.

b. Computed only for a 2x2 table

Remodelling * HTN

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.606[a]	1	.436		
Continuity Correction[b]	.304	1	.581		
Likelihood Ratio	.609	1	.435		
Fisher's Exact Test				.500	.292
Linear-by-Linear Association	.599	1	.439		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 13.71.

b. Computed only for a 2x2 table

Remodelling * DM

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.248[a]	1	.264		
Continuity Correction[b]	.787	1	.375		
Likelihood Ratio	1.242	1	.265		
Fisher's Exact Test				.358	.187
Linear-by-Linear Association	1.233	1	.267		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 12.57.

b. Computed only for a 2x2 table

Remodelling * Dyslipidemia

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.077[a]	1	.299		
Continuity Correction[b]	.606	1	.436		
Likelihood Ratio	1.060	1	.303		
Fisher's Exact Test				.313	.217
Linear-by-Linear Association	1.064	1	.302		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 8.00.

b. Computed only for a 2x2 table

Remodelling * Cat_IMT

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.389[a]	1	.533		
Continuity Correction[b]	.138	1	.710		
Likelihood Ratio	.385	1	.535		
Fisher's Exact Test				.617	.352
Linear-by-Linear Association	.385	1	.535		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 8.76.

b. Computed only for a 2x2 table

Remodelling * CentralObesity

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.899[a]	1	.343		
Continuity Correction[b]	.521	1	.470		
Likelihood Ratio	.905	1	.341		
Fisher's Exact Test				.374	.236
Linear-by-Linear Association	.888	1	.346		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 14.10.

b. Computed only for a 2x2 table

Remodelling * ECG

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.473[a]	1	.492		
Continuity Correction[b]	.214	1	.644		

Likelihood Ratio	.473	1	.492		
Fisher's Exact Test				.508	.322
Linear-by-Linear Association	.468	1	.494		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 14.48.

b. Computed only for a 2x2 table

Remodelling * Genotype

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	3.490[a]	2	.175
Likelihood Ratio	3.380	2	.184
Linear-by-Linear Association	1.816	1	.178
N of Valid Cases	84		

a. 1 cells (16.7%) have expected count less than 5. The minimum expected count is 3.43.

Remodelling * Polymorphism

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.473[a]	1	.492		
Continuity Correction[b]	.214	1	.644		
Likelihood Ratio	.473	1	.492		
Fisher's Exact Test				.508	.322
Linear-by-Linear Association	.468	1	.494		
N of Valid Cases	84				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 14.48.

b. Computed only for a 2x2 table

3. Analisis regresi logistik multivariat untuk remodeling jantung

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I.for EXP(B) Lower	Upper
Step 1[a]	Genotype			4.790	2	.091			

	Genotype(1)	2.018	.926	4.752	1	.029	7.524	1.226	46.176
	Genotype(2)	.268	.578	.215	1	.643	1.307	.421	4.057
	Sex(1)	.837	1.028	.662	1	.416	2.309	.308	17.331
	Age_Cat(1)	.355	.600	.349	1	.555	1.426	.440	4.620
	Smoking(1)	.741	.686	1.167	1	.280	2.098	.547	8.044
	HTN(1)	.829	.552	2.255	1	.133	2.291	.776	6.761
	DM(1)	.987	.608	2.635	1	.105	2.682	.815	8.829
	Dyslipidemia(1)	-.509	.619	.678	1	.410	.601	.179	2.021
	Cat_IMT(1)	-1.109	.616	3.234	1	.072	.330	.099	1.105
	Onset_Cat(1)	-.014	.568	.001	1	.981	.987	.324	3.006
	ECG(1)	.556	.545	1.041	1	.308	1.743	.599	5.069
	sLOX1_Cat(1)	.702	.512	1.878	1	.171	2.018	.739	5.507
	Constant	-2.721	1.419	3.680	1	.055	.066		

a. Variable(s) entered on step 1: Genotype, Sex, Age_Cat, Smoking, HTN, DM, Dyslipidemia, Cat_IMT, Onset_Cat, ECG, sLOX1_Cat.

4. Uji beda kadar sLOX-1, ox-LDL dan MMP-9 Antara genotip TT dan CT

Independent Samples Test

	Levene's Test for Equality of Variances		t-test for Equality of Means						
								95% Confidence Interval of the Difference	
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
LG_MMP92	.106	.748	1.241	20	.229	.15212	.12256	-.10354	.40778
			1.300	16.788	.211	.15212	.11706	-.09509	.39934
SQRT_slox1	.213	.646	2.734	46	.009	6.27856	2.29639	1.65617	10.90094
			2.469	18.064	.024	6.27856	2.54277	.93775	11.61936
SQRT_mmp91	1.436	.237	3.541	46	.001	10.24332	2.89301	4.41999	16.06666
			3.904	26.461	.001	10.24332	2.62384	4.85451	15.63214
sLOX1_2	1.822	.191	2.918	22	.008	101.53913	34.79485	29.37902	173.69924
			2.657	11.197	.022	101.53913	38.21369	17.61197	185.46629

Test Statistics[a]

	oxLDL_1	oxLDL_2
Mann-Whitney U	172.000	32.000
Wilcoxon W	838.000	68.000
Z	-1.404	-1.638
Asymp. Sig. (2-tailed)	.160	.101
Exact Sig. [2*(1-tailed Sig.)]		.110[b]

a. Grouping Variable: Genotype

b. Not corrected for ties.

Antara genotip TT dan CC

Independent Samples Test

	Levene's Test for Equality of Variances		t-test for Equality of Means						
								95% Confidence Interval of the Difference	
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
LG_MMP92	1.306	.260	1.291	40	.204	.16667	.12907	-.09420	.42754
			1.581	14.154	.136	.16667	.10545	-.05927	.39261
SQRT_slox1	1.125	.293	2.350	63	.022	4.72896	2.01250	.70730	8.75062
			1.945	15.339	.070	4.72896	2.43127	-.44321	9.90113
SQRT_mmp9	.915	.342	3.244	63	.002	8.65054	2.66687	3.32123	13.97985
1			3.564	21.007	.002	8.65054	2.42743	3.60252	13.69855
sLOX1_2	.527	.472	.988	41	.329	47.01244	47.56097	-49.03889	143.06376
			1.180	13.299	.259	47.01244	39.83566	-38.85101	132.87588

Test Statistics[a]

	oxLDL_1	oxLDL_2
Mann-Whitney U	215.500	132.500
Wilcoxon W	1593.500	168.500
Z	-2.009	-.112
Asymp. Sig. (2-tailed)	.045	.911
Exact Sig. [2*(1-tailed Sig.)]		.912[b]

a. Grouping Variable: Genotype

b. Not corrected for ties.

Antara genotip CT dan CC

Independent Samples Test

	Levene's Test for Equality of Variances		t-test for Equality of Means						
								95% Confidence Interval of the Difference	
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
LG_MMP92	.957	.333	.139	46	.890	.01455	.10457	-.19593	.22503
			.149	28.478	.882	.01455	.09753	-.18508	.21418
SQRT_slox1	.768	.383	-1.133	85	.260	-1.54960	1.36750	-4.26855	1.16936
			-1.112	68.240	.270	-1.54960	1.39357	-4.33025	1.23106
SQRT_mmp91	.195	.660	-.806	85	.422	-1.59279	1.97537	-5.52034	2.33477
			-.797	70.265	.428	-1.59279	1.99736	-5.57614	2.39056
sLOX1_2	5.247	.026	-1.607	49	.114	-54.52669	33.92152	-122.69454	13.64116
			-1.950	46.225	.057	-54.52669	27.96035	-110.80055	1.74717

Test Statistics[a]

	oxLDL_1	oxLDL_2
Mann-Whitney U	793.500	178.000
Wilcoxon W	2171.500	773.000
Z	-1.209	-1.361
Asymp. Sig. (2-tailed)	.227	.174

a. Grouping Variable: Genotype

5. Uji korelasi Pearson antara kadar sLOX-1, ox-LDL dan MMP-9

		SQRT_mmp91	LG_MMP92	oxLDL_1	oxLDL_2
SQRT_slox1	Pearson Correlation	.714**	.065	.035	-.062
	Sig. (2-tailed)	.000	.638	.727	.653
	N	100	55	100	55
sLOX1_2	Pearson Correlation	-.041	.590**	.006	.194
	Sig. (2-tailed)	.757	.000	.961	.151
	N	58	56	59	56

6. Analisis regresi logistik multivariat untuk faktor- faktor yang mempengaruhi kadar sLOX-1

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I.for EXP(B) Lower	Upper
Step 1[a]	Genotype			4.790	2	.091			
	Genotype(1)	2.018	.926	4.752	1	.029	7.524	1.226	46.176
	Genotype(2)	.268	.578	.215	1	.643	1.307	.421	4.057
	Sex(1)	.837	1.028	.662	1	.416	2.309	.308	17.331
	Age_Cat(1)	.355	.600	.349	1	.555	1.426	.440	4.620
	Smoking(1)	.741	.686	1.167	1	.280	2.098	.547	8.044
	HTN(1)	.829	.552	2.255	1	.133	2.291	.776	6.761
	DM(1)	.987	.608	2.635	1	.105	2.682	.815	8.829
	Dyslipidemia(1)	-.509	.619	.678	1	.410	.601	.179	2.021
	Cat_IMT(1)	-1.109	.616	3.234	1	.072	.330	.099	1.105
	Onset_Cat(1)	-.014	.568	.001	1	.981	.987	.324	3.006
	ECG(1)	.556	.545	1.041	1	.308	1.743	.599	5.069
	sLOX1_Cat(1)	.702	.512	1.878	1	.171	2.018	.739	5.507
	Constant	-2.721	1.419	3.680	1	.055	.066		

a. Variable(s) entered on step 1: Genotype, Sex, Age_Cat, Smoking, HTN, DM, Dyslipidemia, Cat_IMT, Onset_Cat, ECG, sLOX1_Cat.

GLOSSARY

- Pasien dengan infark miokard akut adalah pasien dengan ST elevasi infark miokard yang dibuktikan dengan adanya elevasi segmen ST pada pemeriksaan EKG dan peningkatan enzim jantung
- Terapi reperfusi intervensi perkutaneus koroner primer adalah prosedur angioplasti koroner yang dilakukan untuk membuka sumbatan pada arteri koroner berupa pemasangan stent atau balon angioplasti dengan atau tanpa aspirasi trombus
- Terapi farmakologis sesuai panduan klinis yaitu penggunaan double antiplatelet, ACE-inhibitor/Angiostensin II reseptor bloker, beta bloker dan statin. Mineralokortikoid reseptor bloker diberikan pada pasien dengan fraksi ejeksi ≤40% dan gagal jantung atau diabetes, yang sudah mendapat ACEi/ARB dan beta bloker.
- Pasien dengan riwayat infark miokard akut sebelumnya yaitu pasien dengan riwayat dirawat di RS dengan sindrom koroner akut (serangan jantung) berdasarkan rekam medis atau anamnesa pasien atau riwayat pernah menjalani terapi revaskularisasi atau intervensi koroner perkutan sebelumnya
- Onset infark miokard akut adalah waktu pasien pertama kali mengalami nyeri dada dengan karakteristik nyeri dada tidak stabil yaitu satu dari tiga gejala sebagai berikut : (1) angina saat instirahat dengan karakteristik tipikal dan durasi > 20 menit; (2) angina onset baru (dalam 2 bulan terakhir) dengan derajat angina sedang sampai berat (*Canadian Cardiovascular Society* grade II atau III); (3) angina kresendo yaitu angina yang meningkat secara progresif dari berat dan intensitasnya, pada ambang nyeri yang lebih rendah dengan periode waktu yang pendek.
- Komplikasi mekanik post infark miokard akut yaitu terjadinya komplikasi mekanikal akibat infark miokard akut berupa ruptur *free*

wall, ruptur septum ventrikel dan ruptur otot papilaris berdasarkan hasil ekokardiografi

- Resusitasi jantung paru adalah riwayat prosedur penyelamatan nyawa dengan bantuan pernafasan, kompresi jantung dan/atau defibrilasi pada kondisi henti jantung berdasarkan rekam medis
- Pasien dengan disfungsi ginjal berat yaitu pasien dengan klirens kreatinin yang dihitung menggunakan formula Cockcroft-Gault <30 mL/menit atau pasien yang rutin menjalani hemodialisis