

DAFTAR PUSTAKA

- American Academy of Ophthalmology Staff, editors. (2020). *Fundamentals and Principles of Ophthalmology*, Section 10. San Fransisco: American Academy of Ophthalmology.
- Aldarrab A, Al Qurashi M, Al Thiabi S, et al. (2019). Functional visual ability and quality of life in children with glaucoma. *Am J Ophthalmol*;200:95–9.
- Ayele A fisseha, Zzeraye B (2017). The impact Of Glaucoma on quality of Life in Ethiopia. *BMC Ophthalmology* 17:248
- Baskaran M. (2015). The Prevalence and Types of Glaucoma in an Urban Chinese Population. *JAMA Ophthalmol*;133(8):874-880
- Barton J, Benatar M. (2003). *Field of Vision Manual Atlas of Perimetry*. New Jersey First Edition. Humania Press Totowa.
- Bengtsson B, Heijl A, The Glaucoma Intensive Treatment Study (GITS): A Randomized Controlled Trial Comparing Intensive and Standard Treatment on 5 Years Visual Field Development
- Burgoyne, C. F. (2011). A biomechanical paradigm for axonal insult within the optic nerve head in aging and glaucoma. *Experimental Eye Research*, 93(2), 120–a 132. PubMed.
- Centers for Disease Control and Prevention: Vision and Eye Health Surveillance System (VEHSS0) . (2018). Accessed: November 23, 2020.
- Cantor LB, Rapuano CJ, McCannel CA. (2019). Basic and Clinical Science Course Section 3 : Clinical Optics. American Academy of Ophthalmology: San Fransisco:167- 73.
- Dahlmann-Noor A, Tailor V, Bunce C, et al. (2017). Quality of life and functional vision in children with glaucoma. *Ophthalmology*;124:1048–55.
- echtner, R. D., & Weinreb, R. N. (1994). Mechanisms of optic nerve damage in primary open angle glaucoma. *Survey of Ophthalmology*, 39(1), 23–42. [https://doi.org/10.1016/S0039-6257\(05\)80042-6](https://doi.org/10.1016/S0039-6257(05)80042-6)
- Feldman RM, Cioffi GA, Liebmann JM, Weinreb RN. (2020). Current knowledge and attitudes concerning cost- effectiveness in glaucoma pharmacotherapy: a glaucoma specialists focus group study. *Clin Ophthalmol*.14:729-739.
- Fea AM, Hengerer F, Lavia C, Au L. (2017). Glaucoma quality of life. *J Ophthalmol*. Finger RP, Fenwick, 2011. The Impact of Vision Impairment on Vision-

Specific Quality of Life in Germany

- Firdous, A. and Sarfraz, A. (2016). Comparative Reliability of Pelli-Robson and Lea Number Chart for Contrast Sensitivity Measurement. *Ophthalmology Pakistan*, 6(1), pp.29-32.
- Goukon H, Hirasawa K, Kasahara M, Matsumura K, Shoji N. (2019). Comparison of Humphrey Field Analyzer and imo visual field test results in patients with glaucoma and pseudo-fixation loss. *Ophthalmology*.
- Gothwal VK, Sharma S, Mandal AK. (2020). Beyond intraocular pressure: visual
Gupta, S., Agarwal, P., Saxena, R., Agrawal, S., & Agarwal, R. (2009). Current concepts in the pathophysiology of glaucoma. *Indian Journal of Ophthalmology*, 57(4), 257. <https://doi.org/10.4103/0301-4738.53049>
- Hashemi H, Mohammadi M, Zandvakil N, Khabazkhoob M, Emamian MH, Shariati M, Fotouhi A. . (2018). Prevalence and risk factors of glaucoma in an adult population from Shahrud, Iran. *J Curr Ophthalmol*.
- Janz NK, 2001. The glaucoma quality of life study. *Journal of glaucoma* 139- 146
- Johnson AC, Wall M. (2011). Chapter 35: the visual field in adlers physiology of the eye expert consult. Elsevier.
- Kahook MD, Malik Y, Robert J, Noecker MD. (2007). Interpreta 24-2 Humphrey Visual Field Printout (internet). *Glaucoma Today*. Available from:<http://glaucoma today.com>.
- Khadka J, McAlinden C, Craig JE, et al. (2015). Identifying content for the glaucoma- specific item bank to measure quality-of-life parameters. *J Glaucoma*.
- Kemenkes RI. Situasi dan Analisis. Jakarta: Pusdatin Kemenkes RI; 2015.
- Lee JWY, Chan CWS, Chan JCH, Li Q, Lai JSM. The association between clinical parameters and glaucoma-specific quality of life in Chinese primary open-angle glaucoma patients. *Hong Kong Med J*. (2014) 20:274–8 10.12809
- Louis B, Cantor MD, Christopher J, Rapuano MD, Colin A, McCannel. (2019). American academy of ophthalmology sec 10 Glaucoma. Chapter 3 Clinical Evaluation.
- Lutaka, Natalia AMD, Rubens A, Grochowski MD, Niro KMD. (2017). Correlation between visual field index and other functional and structural measures in

glaucoma patients and suspects. Journal of ophthalmic and Vision research;Vol.1.

Maïouak, M., El Ouazzani Taybi, H., Chakri, I., Omari, M., Berraho, M., Abdellaoui, M., Tachfouti, N., Andaloussi, I.B. and El Fakir, S. (2023) Assessment of Quality of Life among Moroccan Patients with Glaucoma. *Open Access Library Journal*, **10**, 1-12

McMonnies CW. Glaucoma History and Risk Factors. *J Optom.* 2017;10(2):71-78.

McGinley P, Ansari E, Sandhu H, Dixon T. (2020). The cost burden of falls in people with glaucoma in National Health Service Hospital Trusts in the UK. *J Med Econ.* 23:106-112.

Munish D, Hans T, Sandhu P, et al. (2019). Evaluation of Vision-related Quality of Life in Patients with Glaucoma: A Hospital-based Study. *Journal of Current Glaucoma Practice.*

Nathalie et al. (2024). Psychological stress and intraocular pressure in glaucoma

Nelson P et al. (2003). Quality of life in glaucoma its relationship with visual function. *Journal of glaucoma*, 139-150.

Leatest.com. 2021. LEA Contrast Sensitivity. [online] Available at: [Accessed 5 March 2021].

Quaranta L, Riva I, Gerardi C, Oddone F, Floriani I, Konstas AG. (2016). Quality of life in glaucoma: a review of the literature. *Adv Ther*, 33:959-981.

Quigley HA, Broman AT. The number of people with glaucoma worldwide in 2010 and 2020. *Br J Ophthalmol.* 2006;90(3):262-267.

Rakasiwi LS, Kautsar achmad. *Kajian Ekonomi dan Keuangan.* 2021. Fiskal Kemenkeu.

Ramdas WD, Roger C.W, Lifestyle and Risk of Developing Open angle Glaucoma *Arch Ophthalmol.* 2011;129(6):767-772

Rao A. (2014). Comparison of relation between visual function index and retinal nerve fiber layer structure by optical coherence tomography among primary open angle glaucoma and primary angle closure glaucoma eyes. *Oman Journal of Ophthalmology.*

Restrepo NA, Cooke Bailey JN. 2017. Primary open-angle glaucoma genetics in African Americans . *Curr Genet Med Rep*, 5:167-174.

Rossi M, Milano G (2023) Correlation Between Visual Field Index and Quality of Life in Gla. *Front. Med.* 10:1214007. Glaucoma Patient : a new Tool to

screen Quality Of Life Perception

- Richman J, Lorenana L ,(2010) Importance of visual aquity and Contrast Sensitivity in Patients with Glaucoma. *Arch Ophthalmol*.128(12):1576-1582
- Sulatha V, Kusumgar P, Lavanya B, et al. (2020). Assessment of quality of life in glaucoma patients using the Glaucoma Quality of Life-15 questionnaire Department of Ophthalmology, Kasturba Medical College Manipal, Manipal Academy of Higher Education, Manipal, India.
- Tarek T, Aboulnasr, Ahmed M, et al. (2021). Glaucoma Quality of Life-15 Questionnaire to Assess the Functional Disability in Egyptian Glaucomatous Patients. Department of Ophthalmology, Benha faculty of medicine, Benha University, Egypt.
- Thomas SM, Jeyaraman MM, Hodge WG, Hutnik C, Costella J, Malvankar-Mehta MS. (2014). The effectiveness of teleglaucoma versus in-patient examination for glaucoma screening: a systematic review and meta-analysis. *PloS One*.
- Traynis I, De Moraes CG, Raza AS, et al. Prevalence and nature of early glaucomatous defects in the central 10° of the visual field. *JAMA Ophthalmol* 2014; 132: 291–297.
- Wang W, He M, Li Z, Huang W. (2019). Epidemiological variations and trends in health burden of glaucoma worldwide. *Acta Ophthalmol*, 97:e349-e355
- Weinreb RN, Leung CK, Crowston JG, Medeiros FA, Friedman DS, Wiggs JL, Martin KR. (2016). Primary open-angle glaucoma. *Nat Rev Dis Primers*.
- World Health Organization. International classification of diseases for mortality and morbidity statistics (11th revision). vision impairment including blindness.
- Wong TY, Quigley HA, Aung T, Cheng CY. Global Prevalence of Glaucoma and Projections of Glaucoma Burden Through 2040: A Systematic Review and Meta-Analysis. *Ophthalmology*. 2014;121(11): 2081–90
- Yamanoto T, Iwase A, Araie M, Prevalence of primary angle closure and secondary glaucoma in a japanese population
- Zhang Q, Zhou W, Song D, et al. Vision-related quality of life in patients with glaucoma ; the role of illness perceptions. 2022.
- Zhou C, Dian S, Wu P, Qiu C, Quality of life of glaucoma patients in china, sosiodemographic, clinical and psychological correlates a cross sectoral study quality of life research 2014 Apr ; 23((3):999-10008

Lampiran 1

Lembar Persetujuan Etik



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN, RISET DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN FAKULTAS KEDOKTERAN
KOMITE ETIK PENELITIAN UNIVERSITAS HASANUDDIN
RSPTN UNIVERSITAS HASANUDDIN
RSUP Dr. WAHIDIN SUDIROHUSODO MAKASSAR
Sekretariat : Lantai 2 Gedung Laboratorium Terpadu
JL. PERINTIS KEMERDEKAAN KAMPUS TAMALANREA KM.10 MAKASSAR 90245.
Contact Person: dr. Agusalmi Bukhari, MMed, PhD, SpGK TELP. 081241850858, 0411 5780103, Fax : 0411-581431



REKOMENDASI PERSETUJUAN ETIK

Nomor : 139/UN4.6.4.5.31/ PP36/ 2024

Tanggal: 29 Februari 2024

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

No Protokol	UH24010090	No Sponsor	
Peneliti Utama	dr. Ni Luh Ayu Darmayanti	Sponsor	
Judul Peneliti	HUBUNGAN ANTARA VISUAL FIELD INDEX DAN SENSITIVITAS KONTRAS TERHADAP KUALITAS HIDUP PASIEN GLAUKOMA DI KOTA MAKASSAR		
No Versi Protokol	1	Tanggal Versi	14 Februari 2024
No Versi PSP	1	Tanggal Versi	14 Februari 2024
Tempat Penelitian	RS Universitas Hasanuddin , RS Tadjuddin Chalid dan Klinik Mata JEC Orbita Makassar		
Jenis Review	☐ Exempted ☒ Expedited ☐ Fullboard Tanggal	Masa Berlaku 29 Februari 2024 sampai 29 Februari 2025	Frekuensi review lanjutan
Ketua KEP Universitas Hasanuddin	Prof. dr. Muh Nasrum Massi, PhD, SpMK, Subsp. Bakt(K)	Tanda tangan	
Sekretaris KEP Universitas Hasanuddin	dr. Firdaus Hamid, PhD, SpMK(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 Laporan 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 protokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

Lampiran 2

Formulir Persetujuan Sampel

SURAT PERNYATAAN

Informed Consent

Yang bertanda tangan dibawah ini :

Nama :

Usia :

Jenis kelamin :

Agama :

Pekerjaan :

Pendidikan :

Alamat :

Dengan ini menyatakan saya telah mendapatkan penjelasan mengenai maksud dari pengumpulan data untuk penelitian tentang **“Hubungan antara visual field indeks dan sensitivitas kontras dengan kualitas hidup pada pasien glaukoma di kota makassar”**. Untuk itu secara sukarela saya menyatakan bersedia menjadi responden subjek penelitian tersebut. Demikianlah pernyataan ini saya buat dengan sebenarnya dan dengan penuh kesadaran tanpa paksaan.

Makassar,
Responden,
()

Lampiran 3
Formulir Pemeriksaan Pasien

FORMULIR PASIEN
PENELITIAN HUBUNGAN ANTARA VISUAL FIELD INDEX DAN
SENSITIVITAS KONTRAS TERHADAP KUALITAS HIDUP PASIEN
GLAUKOMA DI KOTA MAKASSAR

Nama pasien: _____ No Rekam Medis : _____

Tanggal lahir : ____/____/____

Jenis kelamin : Laki-laki ☐ Perempuan ☐

Alamat tinggal asal :

Pasien dari rumah sakit :

a. RS PENDIDIKAN UNHAS : []

b. RS TAJUDDIN CHALID : []

c. KLINIK JEC @ORBITA : []

Pasien rujukan , asal rumah sakit :

Pendidikan

a. SD :

b. SLTP :

c. SMA :

d. DI/DII :

e. DIII :

f. Strata I :

g. Strata II :

h. Strata III :

Pekerjaan :

1. Tidak Bekerja

2. Sekolah/Mahasiswa

3. Buruh

4. Pegawai

5. Wiraswasta

6. POLRI/TNI

7. Profesional

8. Lainnya

Pendapatan :

Tingkat Pendapatan

1. Rendah < Rp 1.500.000,-
2. Sedang Rp 1.500.000,- s/d Rp 2.500.000,-
3. Tinggi Rp 2.500.000,- s/d Rp 3.500.000,-
4. Sangat tinggi > Rp 3.500.000

PEMERIKSAAN OFTALMOLOGI

Anamnesis :

Keluhan :

Penglihatan buram :

Mata Merah ;

Nyeri Mata

Mual/muntah :

Riwayat penyakit sistemik : Ya / Tidak

Riwayat keluarga : Ya / Tidak

Visus Oculus dextra :

Visus Oculus sinistra

Tekanan Intra Okular :

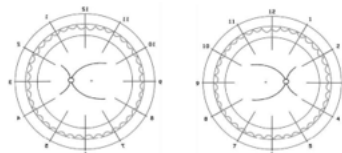
Lama Sakit

PEMERIKSAAN SLITLAMP

OD	SLIT LAMP	OS
Hiperemis () Edema ()	PALPEBRA	Hiperemis () Edema ()
Injeksi konjungtiva () Injeksi siliar () Sekret Mukoid () Perdarahan subkonjungtiva () Jahitan Tunnel ()	KONJUNGTTIVA / SKLERA	Injeksi konjungtiva () Injeksi siliar () Sekret Mukoid () Perdarahan subkonjungtiva () Jahitan Tunnel ()

Jernih () Keruh () Melting () Jahitan Insisi : Ya / Tidak Jumlah jahitan :	KORNEA	Jernih () Keruh () Melting () Jahitan Insisi : Ya / Tidak Jumlah jahitan :
Von Herrick : 1 / 2 / 3 / 4 Sel : +1 / +2 / +3 / +4 Sel sulit di evaluasi : Flare +1 / +2 / +3 / +4 Flare sulit di evaluasi : Fibrin : + / - Hipopion : 1-2mm , ¼ BMD , 1/3 BMD , ½ BMD , 2/3 BMD , Full Vitreus : + / -	BMD	Von Herrick : 1 / 2 / 3 / 4 Sel : +1 / +2 / +3 / +4 Sel sulit di evaluasi : Flare +1 / +2 / +3 / +4 Flare sulit di evaluasi : Fibrin : + / - Hipopion : 1-2mm , ¼ BMD , 1/3 BMD , ½ BMD , 2/3 BMD , Full Vitreus : + / -
Coklat Iridodialisis + / - , ekstensi pukulhingga pukul Sinekia + / -	IRIS	Coklat Iridodialisis + / - , ekstensi pukulhingga pukul Sinekia + / -
Bulat Unround : + / - Vitreus : + / - Refleks cahaya : + / -	PUPIL	Bulat Unround : + / - Vitreus : + / - Refleks cahaya : + / -
IOL : + / - PCR : + / - / Sulit di evaluasi ☾ ○	LENSA	IOL : + / - PCR : + / - / Sulit di evaluasi ☾ ○
Terang : + / - Redup : + / -	RED REFLEX	Terang : + / - Redup : + / -

PEMERIKSAAN SEGMENT POSTERIOR



OD		OS
+ / -	Refleks Fundus	+ / -
Bulat batas terang	Papil N. Optik	Bulat batas terang
	CDR	
+ / -	Makula : Refleks Fovea	+ / -
Dalam batas normal	Retina perifer	Dalam batas normal
Grade : 0 / 1 / 2 / 3 / 4	Vitreus Hazy	Grade : 0 / 1 / 2 / 3 / 4
SL/TM/SS/CBB	Gonioskopi	SL/TM/SS/CBB

Humphrey Visual Field :
Sensitivitas kontras :
Diagnosis kerja :

Tata Laksana :

Topikal /oral

- 1.
- 2.
- 3.
- 4.
- 5.

Formulir 4

Kuisiener Quality of Life 15 (GQL-15)

KODE RESPONDEN:

KUESIONER GLAUCOMA QUALITY of LIFE 15 (GQL-15)

Petunjuk Pengisian:

Petunjuk Pengisian: Pemberian skor pada setiap skor mulai dari 0-5, dengan kriteria 0= Jangan diisi untuk alasan yang tidak terkait pandangan mata, 1= tidak ada kesulitan, 2= sedikit kesulitan, 3= kadang-kadang, 4= kesulitan yang agak parah, 5= kesulitan yang parah.

No	Pertanyaan	1	2	3	4	5	0
1.	Membaca Koran						
2.	Berjalan di kegelapan						
3.	Melihat di malam hari						
4.	Berjalan di jalan yang tidak rata						
5.	Menyesuaikan dengan cahaya terang						
6.	Menyesuaikan dengan lampu yang redup						
7.	Pindah dari kamar yang terang ke kamar yang gelap atau sebaliknya						
8.	Tersandung benda – benda						
9.	Melihat benda – benda yang datang dari samping						
10.	Menyebrang jalan						
11.	Berjalan di tangga / anak tangga						
12.	Menabarak benda – benda						
13.	Menepatkan jarak kaki di anak tangga atau tepi jalan						
14.	Mencari benda yang jauh						
15.	Mengenali wajah						

Data Induk

NO	JK	Pendidikan	Pekerjaan	Jenjang	Tempat	GGIL	U15	Diagnosa	Visus	OC	Visus_OS	VFLD_OS	VFLD_OS	CS_OD	CS_OS	sma	Saki
1,00	Laki-laki	PT	Pegawai	Tinggi	Jurang Bai	75,00	POAG	Sedang	Buruk	70,00	0,00	zdc	zdc	3,00	3,00		
2,00	Laki-laki	PT	dirawat	Tinggi	Baik	68,00	POAG	Baik	Baik	36,00	43,00	0,1000	0,1000	5,00	5,00		
3,00	perempuan	SMA	idak beker	Tidak ada	Buruk	52,00	PACG	Sedang	Buruk	77,00	0,00	0,0500	zdc	4,00	4,00		
4,00	Laki-laki	SMA	dirawat	Tinggi	Baik	66,00	SOAG	Baik	Baik	37,00	33,00	0,0500	0,0500	8,00	8,00		
5,00	perempuan	SMA	Pegawai	Tinggi	Baik	42,00	PACG	Baik	Baik	66,00	100,00	0,0125	0,0125	5,00	5,00		
6,00	Laki-laki	SMA	Pegawai	Tinggi	Baik	53,00	SACG	Buruk	Baik	0,00	72,00	0,0250	0,0125	3,00	3,00		
7,00	Laki-laki	PT	dirawat	Tinggi	Jurang Bai	73,00	POAG	Buruk	Buruk	30,00	22,00	zdc	zdc	10,00	10,00		
8,00	perempuan	SMA	dirawat	Tinggi	Baik	71,00	POAG	Baik	Baik	38,00	33,00	0,0500	0,1000	4,00	4,00		
9,00	perempuan	SMA	idak beker	Tinggi	Baik	65,00	SACG	Baik	Baik	87,00	83,00	0,0500	0,0250	8,00	8,00		
10,00	Laki-laki	SMA	dirawat	Tinggi	Baik	68,00	SOAG	Baik	Baik	37,00	30,00	0,0500	0,0500	5,00	5,00		
11,00	Laki-laki	SMA	dirawat	Tinggi	Baik	41,00	POAG	Baik	Baik	80,00	91,00	0,0500	0,0250	3,00	3,00		
12,00	Laki-laki	PT	dirawat	Sedang	Baik	41,00	POAG	Sedang	Buruk	87,00	83,00	0,0250	0,0250	4,00	4,00		
13,00	perempuan	PT	idak beker	Tidak ada	Baik	44,00	PACG	Sedang	Buruk	80,00	0,00	0,0500	zdc	4,00	4,00		
14,00	perempuan	PT	idak beker	Tidak ada	Baik	61,00	POAG	Baik	Baik	71,00	83,00	0,0500	0,0500	8,00	8,00		
15,00	Laki-laki	SMA	dirawat	Tinggi	Baik	41,00	SOAG	Baik	Baik	78,00	38,00	0,1000	0,0250	5,00	5,00		
16,00	Laki-laki	SMA	dirawat	Tinggi	Baik	41,00	POAG	Sedang	Sedang	31,00	79,00	0,0250	0,0250	3,00	3,00		
17,00	perempuan	SMP	lah/Maha	Tidak ada	Baik	41,00	SACG	Baik	Sedang	40,00	10,00	0,0500	0,2500	5,00	5,00		
18,00	perempuan	SMA	dirawat	Sedang	Baik	41,00	POAG	Sedang	Baik	30,00	83,00	0,0250	0,0500	4,00	4,00		
19,00	Laki-laki	SMA	dirawat	Sedang	Baik	58,00	POAG	Sedang	Sedang	83,00	33,00	0,0500	0,0500	8,00	8,00		
20,00	Laki-laki	SMA	idak beker	Tidak ada	Buruk	41,00	POAG	Buruk	Buruk	0,00	0,00	zdc	zdc	5,00	5,00		
21,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	75,00	POAG	Sedang	Buruk	80,00	0,00	0,0500	zdc	5,00	5,00		
22,00	Laki-laki	PT	idak beker	Tidak ada	Buruk	41,00	SOAG	Buruk	Buruk	22,00	0,00	0,2500	zdc	3,00	3,00		
23,00	perempuan	SMA	idak beker	Tidak ada	Jurang Bai	44,00	SOAG	Sedang	Buruk	79,00	0,00	0,2500	zdc	5,00	5,00		
24,00	perempuan	SMA	Pegawai	Sedang	Jurang Bai	41,00	SACG	Baik	Buruk	36,00	0,00	0,0500	zdc	4,00	4,00		
25,00	Laki-laki	SMA	dirawat	Sedang	Jurang Bai	63,00	POAG	Buruk	Buruk	0,00	0,00	zdc	zdc	8,00	8,00		
26,00	Laki-laki	SMA	dirawat	Sedang	Jurang Bai	72,00	PACG	Buruk	Baik	0,00	71,00	zdc	0,0500	5,00	5,00		
27,00	perempuan	SMA	dirawat	Sedang	Jurang Bai	56,00	SACG	Buruk	Baik	0,00	77,00	zdc	0,0500	3,00	3,00		
28,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	56,00	POAG	Buruk	Buruk	0,00	30,00	zdc	0,0500	5,00	5,00		
29,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	72,00	PACG	Buruk	Buruk	35,00	35,00	0,0500	0,0500	4,00	4,00		
30,00	Laki-laki	SMA	dirawat	Sedang	Buruk	43,00	SOAG	Buruk	Sedang	0,00	6,00	zdc	zdc	8,00	8,00		
31,00	perempuan	SMA	dirawat	Sedang	Jurang Bai	61,00	SACG	Buruk	Buruk	39,00	0,00	0,0125	zdc	5,00	5,00		
32,00	Laki-laki	SMA	dirawat	Sedang	Buruk	66,00	POAG	Baik	Buruk	13,00	0,00	0,2500	zdc	3,00	3,00		
33,00	Laki-laki	SMA	dirawat	Sedang	Jurang Bai	41,00	SACG	Buruk	Buruk	8,00	14,00	0,2500	0,2500	5,00	5,00		
34,00	perempuan	PT	dirawat	Sedang	Buruk	45,00	SACG	Sedang	Buruk	6,00	0,00	0,2500	zdc	4,00	4,00		
35,00	Laki-laki	SMA	dirawat	Sedang	Buruk	75,00	PACG	Buruk	Buruk	0,00	0,00	zdc	zdc	8,00	8,00		
36,00	Laki-laki	SMA	dirawat	Sedang	Jurang Bai	41,00	SACG	Baik	Baik	7,00	23,00	0,0500	0,0250	5,00	5,00		
37,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	78,00	POAG	Sedang	Baik	68,00	70,00	0,0500	0,0250	5,00	5,00		
38,00	perempuan	SD	dirawat	Tidak ada	Jurang Bai	57,00	POAG	Buruk	Buruk	0,00	0,00	zdc	zdc	3,00	3,00		
39,00	Laki-laki	PT	dirawat	Sedang	Buruk	41,00	SACG	Buruk	Buruk	0,00	0,00	zdc	zdc	5,00	5,00		
40,00	perempuan	PT	dirawat	Sedang	Jurang Bai	55,00	SACG	Baik	Buruk	39,00	7,00	0,0125	zdc	4,00	4,00		
41,00	perempuan	PT	dirawat	Sedang	Jurang Bai	55,00	SACG	Baik	Buruk	30,00	0,00	0,0125	zdc	8,00	8,00		
42,00	Laki-laki	PT	dirawat	Sedang	Buruk	41,00	SACG	Baik	Buruk	30,00	0,00	0,0125	zdc	5,00	5,00		
43,00	perempuan	SMA	dirawat	Tidak ada	Buruk	64,00	SACG	Buruk	Buruk	90,00	0,00	0,2500	zdc	3,00	3,00		
44,00	Laki-laki	PT	dirawat	Sedang	Buruk	41,00	SACG	Buruk	Buruk	0,00	0,00	0,0500	0,0500	4,00	4,00		
45,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	76,00	PACG	Buruk	Buruk	0,00	0,00	zdc	zdc	4,00	4,00		
46,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	63,00	SOAG	Baik	Buruk	30,00	0,00	0,0125	zdc	8,00	8,00		
47,00	Laki-laki	SMA	dirawat	Sedang	Jurang Bai	53,00	POAG	Buruk	Buruk	33,00	35,00	0,0500	0,0500	5,00	5,00		
48,00	Laki-laki	PT	dirawat	Sedang	Jurang Bai	53,00	SOAG	Buruk	Sedang	0,00	70,00	zdc	0,0500	3,00	3,00		
49,00	perempuan	SMA	dirawat	Sedang	Jurang Bai	41,00	SOAG	Buruk	Buruk	6,00	30,00	zdc	0,0125	3,00	3,00		
50,00	Laki-laki	SMA	dirawat	Sedang	Jurang Bai	54,00	SOAG	Baik	Buruk	66,00	30,00	0,0250	0,0125	3,00	3,00		

[illegible]

Lampiran 5

Output data SPSS

Tabel 4.1

Frequencies

Notes		
Output Created		18-JAN-2025 09:21:40
Comments		
Input	Data	D:\Office\Statistics\Data dr Ayu Darmayanti.sav
	Active Dataset	DataSet22
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	50
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics are based on all cases with valid data.
Syntax		FREQUENCIES VARIABLES=JK Pendidikan Pekerjaan Pendapatan Diagnosa Visus_OD Visus_OS /ORDER=ANALYSIS.
Resources	Processor Time	00:00:00.00
	Elapsed Time	00:00:00.00

Statistics								
N		JK	Pendidikan	Pekerjaan	Pendapatan	Diagnosa	Visus_OD	Visus_OS
	Valid	50	50	50	50	50	50	50
	Missing	0	0	0	0	0	0	0

Frequency Table

		JK			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Laki-laki	32	64.0	64.0	64.0
	Perempuan	18	36.0	36.0	100.0
	Total	50	100.0	100.0	

		Pendidikan			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	SD	1	2.0	2.0	2.0
	SMP	1	2.0	2.0	4.0
	SMA	28	56.0	56.0	60.0
	PT	20	40.0	40.0	100.0
	Total	50	100.0	100.0	

		Pekerjaan			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak bekerja	7	14.0	14.0	14.0
	Sekolah/Mahasiswa	1	2.0	2.0	16.0
	Pegawai	4	8.0	8.0	24.0
	Wiraswasta	38	76.0	76.0	100.0
	Total	50	100.0	100.0	

		Pendapatan			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak ada	9	18.0	18.0	18.0
	Sedang	29	58.0	58.0	76.0
	Tinggi	12	24.0	24.0	100.0
	Total	50	100.0	100.0	

		Diagnosa			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	PACG	6	12.0	12.0	12.0
	POAG	18	36.0	36.0	48.0
	SACG	15	30.0	30.0	78.0
	SOAG	11	22.0	22.0	100.0
	Total	50	100.0	100.0	

		Visus_OD			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Baik	21	42.0	42.0	42.0
	Sedang	10	20.0	20.0	62.0
	Buruk	19	38.0	38.0	100.0
	Total	50	100.0	100.0	

		Visus_OS			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Baik	18	36.0	36.0	36.0
	Sedang	5	10.0	10.0	46.0
	Buruk	27	54.0	54.0	100.0
	Total	50	100.0	100.0	

MEANS TABLES=Usia Lama_Sakit TIO.OD TIO.OS
 /CELLS=MEAN STDDEV MEDIAN MIN MAX.

Means

Notes

Output Created		18-JAN-2025 09:22:13
Comments		
Input	Data	D:\Office\Statistics\Data dr Ayu Darmayanti.sav
	Active Dataset	DataSet22
	Filter	<none>
	Weight	<none>
	Split File	<none>
Missing Value Handling	N of Rows in Working Data File	50
	Definition of Missing	For each dependent variable in a table, user-defined missing values for the dependent and all grouping variables are treated as missing.
	Cases Used	Cases used for each table have no missing values in any independent variable, and not all dependent variables have missing values.
Syntax		MEANS TABLES=Usia Lama_Sakit TIO.OD TIO.OS /CELLS=MEAN STDDEV MEDIAN MIN MAX.
Resources	Processor Time	00:00:00.00
	Elapsed Time	00:00:00.00

Case Processing Summary

	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
Usia	50	100.0%	0	0.0%	50	100.0%
Lama_Sakit	50	100.0%	0	0.0%	50	100.0%
TIO.OD	50	100.0%	0	0.0%	50	100.0%
TIO.OS	50	100.0%	0	0.0%	50	100.0%

Report				
	Usia	Lama_Sakit	TIO.OD	TIO.OS
Mean	55.5400	4.8800	22.0600	26.7200
Std. Deviation	12.84636	1.67381	12.45139	14.72751
Median	55.5000	5.0000	17.5000	22.0000
Minimum	41.00	3.00	8.00	6.00
Maximum	78.00	8.00	71.00	71.00

Tabel 4.2

Kat_2_GQL					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Baik	3	6.0	6.0	6.0
	Kurang Baik	16	32.0	32.0	38.0
	Buruk	23	46.0	46.0	84.0
	Sangat Buruk	8	16.0	16.0	100.0
	Total	50	100.0	100.0	

Tabel 4.3

CS_OD					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak bisa baca kontras	13	26.0	26.0	26.0
	.0125	7	14.0	14.0	40.0
	.0250	5	10.0	10.0	50.0
	.0500	17	34.0	34.0	84.0
	.1000	2	4.0	4.0	88.0
	.2500	6	12.0	12.0	100.0
	Total	50	100.0	100.0	

		CS_OS			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak bisa baca kontras	23	46.0	46.0	46.0
	.0125	4	8.0	8.0	54.0
	.0250	7	14.0	14.0	68.0
	.0500	11	22.0	22.0	90.0
	.1000	3	6.0	6.0	96.0
	.2500	2	4.0	4.0	100.0
	Total	50	100.0	100.0	

Tabel 4.4

Report		
	VFI_OD	VFI_OS
Mean	53.3600	38.9400
Std. Deviation	40.39083	41.86782
Median	73.0000	18.0000
Minimum	.00	.00
Maximum	99.00	100.00

Tabel 4.5

Correlations			CS_OD	CS_OS	Total_GQL
Spearman's rho	CS_OD	Correlation Coefficient	1.000	.218	.366**
		Sig. (2-tailed)	.	.128	.009
		N	50	50	50
	CS_OS	Correlation Coefficient	.218	1.000	.585**
		Sig. (2-tailed)	.128	.	.000
		N	50	50	50
	Total_GQL	Correlation Coefficient	.366**	.585**	1.000
		Sig. (2-tailed)	.009	.000	.
		N	50	50	50

** . Correlation is significant at the 0.01 level (2-tailed).

Tabel 4.6

Correlations

			VFI_OD	VFI_OS	Total_GQL
Spearman's rho	VFI_OD	Correlation Coefficient	1.000	.220	-.424**
		Sig. (2-tailed)	.	.125	.002
		N	50	50	50
	VFI_OS	Correlation Coefficient	.220	1.000	-.703**
		Sig. (2-tailed)	.125	.	.000
		N	50	50	50
	Total_GQL	Correlation Coefficient	-.424**	-.703**	1.000
		Sig. (2-tailed)	.002	.000	.
		N	50	50	50

** . Correlation is significant at the 0.01 level (2-tailed).

Regression**Notes**

Output Created		18-JAN-2025 09:20:52
Comments		
Input	Data	D:\Office\Statistics\Data dr Ayu Darmayanti.sav
	Active Dataset	DataSet22
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	50
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics are based on cases with no missing values for any variable used.

Syntax		REGRESSION /MISSING LISTWISE /STATISTICS COEFF OUTS R ANOVA /CRITERIA=PIN(.05) POUT(.10) /NOORIGIN /DEPENDENT Total_GQL /METHOD=ENTER VFI_OD VFI_OS CS_OD CS_OS.
Resources	Processor Time	00:00:00.00
	Elapsed Time	00:00:00.00
	Memory Required	6000 bytes
	Additional Memory Required for Residual Plots	0 bytes

Variables Entered/Removed^a

Model	Variables Entered	Variables Removed	Method
1	CS_OS, VFI_OD, CS_OD, VFI_OS ^b		. Enter

a. Dependent Variable: Total_GQL

b. All requested variables entered.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.783 ^a	.614	.579	11.11592

a. Predictors: (Constant), CS_OS, VFI_OD, CS_OD, VFI_OS

ANOVA^a

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	8831.957	4	2207.989	17.869	.000 ^b
	Residual	5560.363	45	123.564		
	Total	14392.320	49			

a. Dependent Variable: Total_GQL

b. Predictors: (Constant), CS_OS, VFI_OD, CS_OD, VFI_OS

		Coefficients ^a				
		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	47.068	5.798		8.118	.000
	VFI_OD	-.206	.061	-.486	-3.355	.002
	VFI_OS	-.084	.084	-.205	-1.004	.321
	CS_OD	-.036	.053	-.092	-.682	.499
	CS_OS	.147	.069	.427	2.117	.040

a. Dependent Variable: Total_GQL

Tabel 4.7

Crosstabs

Notes

Output Created		13-MAR-2025 14:50:15
Comments		
Input	Data	D:\Office\Statistics\Data dr Ayu Darmayanti.sav
	Active Dataset	DataSet2
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	50
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics for each table are based on all the cases with valid data in the specified range(s) for all variables in each table.
Syntax		CROSSTABS /TABLES=JK Pendidikan Pekerjaan Pendapatan Diagnosa BY Kat_2_GQL /FORMAT=AVALUE TABLES /STATISTICS=CHISQ /CELLS=COUNT COLUMN /COUNT ROUND CELL.

Resources	Processor Time	00:00:00.02
	Elapsed Time	00:00:00.02
	Dimensions Requested	2
	Cells Available	524245

Case Processing Summary

	Cases Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
JK * Kat_2_GQL	50	100.0%	0	0.0%	50	100.0%
Pendidikan * Kat_2_GQL	50	100.0%	0	0.0%	50	100.0%
Pekerjaan * Kat_2_GQL	50	100.0%	0	0.0%	50	100.0%
Pendapatan * Kat_2_GQL	50	100.0%	0	0.0%	50	100.0%
Diagnosa * Kat_2_GQL	50	100.0%	0	0.0%	50	100.0%

JK * Kat_2_GQL

Crosstab

		Kat_2_GQL				Total
		Baik	Kurang Baik	Buruk	Sangat Buruk	
Laki-laki	Count		1	10	16	5
	% within Kat_2_GQL		33.3%	62.5%	69.6%	62.5%
Perempuan	Count		2	6	7	3
	% within Kat_2_GQL		66.7%	37.5%	30.4%	37.5%
Count		3	16	23	8	50
% within Kat_2_GQL		100.0%	100.0%	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	1.557 ^a	3	.669
Likelihood Ratio	1.501	3	.682
Linear-by-Linear Association	.509	1	.475
N of Valid Cases	50		

a. 3 cells (37.5%) have expected count less than 5. The minimum expected count is 1.08.

Pendidikan * Kat_2_GQL

Crosstab

		Kat_2_GQL				
		Baik	Kurang Baik	Buruk	Sangat Buruk	Total
SD	Count	0	0	1	0	1
	% within Kat_2_GQL	0.0%	0.0%	4.3%	0.0%	2.0%
SMP	Count	0	1	0	0	1
	% within Kat_2_GQL	0.0%	6.3%	0.0%	0.0%	2.0%
SMA	Count	3	10	9	6	28
	% within Kat_2_GQL	100.0%	62.5%	39.1%	75.0%	56.0%
PT	Count	0	5	13	2	20
	% within Kat_2_GQL	0.0%	31.3%	56.5%	25.0%	40.0%
Total	Count	3	16	23	8	50
	% within Kat_2_GQL	100.0%	100.0%	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	9.667 ^a	9	.378
Likelihood Ratio	11.201	9	.262
Linear-by-Linear Association	.605	1	.437
N of Valid Cases	50		

a. 12 cells (75.0%) have expected count less than 5. The minimum expected count is .06.

Pekerjaan * Kat_2_GQL

Crosstab

		Kat_2_GQL				Total
		Baik	Kurang Baik	Buruk	Sangat Buruk	
Tidak bekerja	Count	0	4	1	3	8
	% within Kat_2_GQL	0.0%	25.0%	4.3%	37.5%	16.0%
Pegawai	Count	1	3	0	0	4
	% within Kat_2_GQL	33.3%	18.8%	0.0%	0.0%	8.0%
Wiraswasta	Count	2	9	22	5	38
	% within Kat_2_GQL	66.7%	56.3%	95.7%	62.5%	76.0%
Total	Count	3	16	23	8	50
	% within Kat_2_GQL	100.0%	100.0%	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	14.967 ^a	6	.021
Likelihood Ratio	16.263	6	.012
Linear-by-Linear Association	.017	1	.897
N of Valid Cases	50		

a. 9 cells (75.0%) have expected count less than 5. The minimum expected count is .24.

Pendapatan * Kat_2_GQL

Crosstab

		Kat_2_GQL				Total
		Baik	Kurang Baik	Buruk	Sangat Buruk	
Tidak ada	Count	0	3	2	4	9
	% within Kat_2_GQL	0.0%	18.8%	8.7%	50.0%	18.0%
Sedang	Count	0	5	20	4	29
	% within Kat_2_GQL	0.0%	31.3%	87.0%	50.0%	58.0%
Tinggi	Count	3	8	1	0	12
	% within Kat_2_GQL	100.0%	50.0%	4.3%	0.0%	24.0%

Total	Count	3	16	23	8	50
	% within Kat_2_GQL	100.0%	100.0%	100.0%	100.0%	100.0%

hi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	30.677 ^a	6	.000
Likelihood Ratio	31.224	6	.000
Linear-by-Linear Association	10.098	1	.001
N of Valid Cases	50		

a. 9 cells (75.0%) have expected count less than 5. The minimum expected count is .54.

Crosstab

Crosstab

			Kat_2_GQL				
			Baik	Kurang Baik	Buruk	Sangat Buruk	Total
Diagnosa	PACG	Count	1	1	2	2	6
		% within Kat_2_GQL	33.3%	6.3%	8.7%	25.0%	12.0%
	POAG	Count	1	8	7	2	18
		% within Kat_2_GQL	33.3%	50.0%	30.4%	25.0%	36.0%
	SACG	Count	0	4	9	2	15
		% within Kat_2_GQL	0.0%	25.0%	39.1%	25.0%	30.0%
	SOAG	Count	1	3	5	2	11
		% within Kat_2_GQL	33.3%	18.8%	21.7%	25.0%	22.0%
Total	Count	3	16	23	8	50	
	% within Kat_2_GQL	100.0%	100.0%	100.0%	100.0%	100.0%	

Diagnosa * Kat_2_GQL

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	6.283 ^a	9	.711
Likelihood Ratio	6.537	9	.685
Linear-by-Linear Association	.056	1	.813
N of Valid Cases	50		

a. 12 cells (75.0%) have expected count less than 5. The minimum expected count is .36.