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LAMPIRAN 1

THE POSITIVE AND NEGATIVE SYNDROME SCALE (PANSS)

Nama :

Umur :

Gejala Positif (P)

| Gejala | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-----------------------------|---|---|---|---|---|---|---|
| P1. Waham | | | | | | | |
| P2. Kekacauan proses pikir | | | | | | | |
| P3. Halusinasi | | | | | | | |
| P4. Gaduh gelisah | | | | | | | |
| P5. Waham kebesaran | | | | | | | |
| P6. Kecurigaan atau kejaran | | | | | | | |
| P7. Permusuhan | | | | | | | |

Gejala Negatif (N)

| Gejala | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------------------------------------|---|---|---|---|---|---|---|
| N1. Afek tumpul | | | | | | | |
| N2. Penarikan emosi | | | | | | | |
| N3. Kemiskinan rapport | | | | | | | |
| N4. Penarikan diri | | | | | | | |
| N5. Pemikiran abstrak | | | | | | | |
| N6. Spontanitas dan arus percakapan | | | | | | | |
| N7. Pemikiran stereotipik | | | | | | | |

Skala Psikopatologi Umum (G)

| Gejala | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---------------------------------------|---|---|---|---|---|---|---|
| G1. Kekhawatiran somatic | | | | | | | |
| G2. Anxietas | | | | | | | |
| G3. Rasa bersalah | | | | | | | |
| G4. Ketegangan | | | | | | | |
| G5. Manerisme dan sikap tubuh | | | | | | | |
| G6. Depresi | | | | | | | |
| G7. Retardasi motoric | | | | | | | |
| G8. Ketidakkooperatifan | | | | | | | |
| G9. Isi pikiran yang tidak biasa | | | | | | | |
| G10. Disorientasi | | | | | | | |
| G11. Perhatian buruk | | | | | | | |
| G12. Kurangnya daya nilai dan tilikan | | | | | | | |
| G13. Gangguan dorongan kehendak | | | | | | | |
| G14. Pengendalian impuls yg buruk | | | | | | | |
| G15. Preokupasi | | | | | | | |
| G16. Penghindaran sosial secara aktif | | | | | | | |

LAMPIRAN 2



REKOMENDASI PERSETUJUAN ETIK

Nomor : 442/UN4.6.4.5.31/ PP36/ 2021

Tanggal: 9 Juli 2021

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

| | | | |
|--|--|---|---------------------------|
| No Protokol | UH21060384 | No Sponsor Protokol | |
| Peneliti Utama | dr. Novianti Hajai | Sponsor | |
| Judul Peneliti | Perbandingan Kadar Serum Interleukin 2 dengan Skor PANSS pasien Skizofrenia yang mendapat Haloperidol dan Risperidone | | |
| No Versi Protokol | 1 | Tanggal Versi | 17 Juni 2021 |
| No Versi PSP | 1 | Tanggal Versi | 17 Juni 2021 |
| Tempat Penelitian | RS Universitas Hasanuddin dan RS Jejaring di Makassar | | |
| Jenis Review | <input type="checkbox"/> Exempted <input checked="" type="checkbox"/> Expedited <input type="checkbox"/> Fullboard Tanggal | Masa Berlaku 9 Juli 2021 sampai 9 Juli 2022 | Frekuensi review lanjutan |
| Ketua Komisi Etik Penelitian Kesehatan FKUH | Nama Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K) | | |
| Sekretaris Komisi Etik Penelitian Kesehatan FKUH | Nama dr. Agussalim Bukhari, M.Med.,Ph.D.,Sp.GK (K) | | |

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 protokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

LAMPIRAN 3



Nomor : 16148/S.01/PTSP/2021
Lampiran :
Perihal : Izin Penelitian

Kepada Yth.
Direktur Rumah Sakit Khusus Daerah
Prov. Sulsel

di-
Tempat

Berdasarkan surat Dekan Fak. Kedokteran UNHAS Makassar Nomor : 12164/UN4.6.8/PT.01.04/2020 tanggal 14 Juni 2021 perihal tersebut diatas, mahasiswa/peneliti dibawah ini:

N a m a : **DR. NOVIANTI HAJAI**
Nomor Pokok : C065171004
Program Studi : Ilmu Kedokteran Jiwa
Pekerjaan/Lembaga : Mahasiswa(S2)
Alamat : Jl. P. Kemerdekaan Km. 10, Makassar

Bermaksud untuk melakukan penelitian di daerah/kantor saudara dalam rangka penyusunan Tesis, dengan judul
" PERBANDINGAN KADAR SERUM INTERLEUKIN 2 DENGAN SKOR PANSS PASIEN SKIZOFRENIA YANG MENDAPAT TERAPI HALOPERIDOL DAN RISPERIDON "

Sehubungan dengan hal tersebut diatas," pada prinsipnya kami menyatakan kegiatan dimaksud dengan ketentuan yang tertera di belakang surat izin penelitian.
Dokumen ini ditandatangani secara elektronik dan Surat ini dapat dibuktikan keaslinya dengan menggunakan barcode,
Demikian surat Izin penelitian ini diberikan agar dipergunakan sebagaimana mestinya.

Diterbitkan di Makassar
Pada tanggal : 15 Juni 2021

A.n. GUBERNUR SULAWESI SELATAN
KEPALA DINAS PENANAMAN MODAL DAN PELAYANAN TERPADU
SATU PINTU PROVINSI SULAWESI SELATAN
Selaku Administrator Pelayanan Perizinan Terpadu



Dr. JAYADI NAS, S.Sos., M.Si
Pangkat : Pembina Tk.I
Nip : 19710501 199803 1 004

Tembusan Yth:
1. Dekan Fak. Kedokteran UNHAS Makassar di Makassar;
2. Peringgu;

Surat Izin Penelitian

Jl.Bougenville No.5 Telp. (0411) 441077 Fax. (0411) 448936
Website : <http://simpan.sulselprov.go.id> Email : pspp@sulselprov.go.id
Makassar 90231



LAMPIRAN 4

| SURAT IZIN PENELITIAN | | |
|---|--|--------------|
|  RUMAH SAKIT UNHAS FORMULIR 2 BIDANG PENELITIAN DAN INOVASI | Nomor: | Tanggal |
| | 7487/UN4.24.1.2/PT.01.04/2021 | 23 Juli 2021 |
| | Kepada Yth Kepala Ruang Laboratorium Penelitian | |
| <p>Dengan hormat,</p> <p>Dengan ini menerangkan bahwa peneliti/ mahasiswa berikut ini:</p> <p>Nama : dr. Novianti Hajai NIM / NIP : C065171004 Institusi : Departemen Ilmu Kedokteran Jiwa, Kedokteran, Universitas Hasanuddin Makassar Nama Pembimbing : 1. Prof. dr. Andi Jayalangkara Tantra, Ph.D, Sp.KJ(K) 2. dr. Kristian Liaury, Ph.D, M.Kes, Sp.KJ 3. dr. Andi Alfian Zainuddin, MD, MPH, Ph.D Kode penelitian : 210723_1</p> <p>Akan melakukan pengambilan data/ analisa bahan hayati:</p> <p>Terhitung : 23 Juli 2021 s/d 23 September 2021 Jumlah Subjek/Sample : 36 Jenis Data : Data Primer : Elisa</p> <p>Untuk penelitian dengan judul:</p> <p>"Perbandingan Kadar Serum Interleukin-2 dengan Skor PANSS pasien Skizofrenia yang mendapat terapi Haloperidol dan Risperidone"</p> <p>Harap diberikan pembimbingan dan pendampingan seperlunya.</p> <p> Dr. Muh. Firdaus Kasim, M.Sc NIP. 197412012018073001</p> <p>Catatan: Lembaran ini diarsipkan oleh Bidang Penelitian dan Inovasi</p> | | |

LAMPIRAN 5

| Peneliti | Judul | Hasil Penelitian |
|----------------------|---|---|
| 1. Azizi et al, 2019 | Alteration of Serum Levels of Cytokines in Schizophrenic Patients before and after Treatment with Risperidone | IFN-γ dan tingkat IL-2 secara signifikan lebih rendah pada peserta setelah pengobatan dibandingkan dengan sebelumnya perlakuan dan kontrol yang sehat. Kadar IL-2 setelah terapi (30.70 ± 10.65 pg/mL) dibandingkan sebelum terapi ($IL-2 = 40.91 \pm 14.94$ pg/mL) |
| 2. Kim et al.,2000 | Relationships between interleukins, neurotransmitters and psychopathology in drug-free male schizophrenics | Tingkat plasma IL-2 dan HVA secara signifikan lebih tinggi pada pasien dibandingkan dengan kontrol. Pada pasien skizofrenia, ada korelasi yang signifikan antara IL-2 dan HVA, IL-2 dan SAPS, dan HVA dan SAPS selama keadaan penyakit akut. Pada pasien skizofrenia, kadar plasma IL-2 dan HVA secara signifikan diturunkan setelah pengobatan dengan haloperidol. |

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| 3. Tan et al., 2015 | Increased IL-2 serum levels were associated with psychopathological symptoms and cognitive deficits in treatment-resistant schizophrenia | Kadar IL-2 secara signifikan lebih tinggi pada pasien kronis dengan skizofrenia dibandingkan dengan subjek kontrol yang sehat. Analisis korelasi mengungkapkan hubungan negatif yang signifikan antara tingkat IL-2 dan subskala kognitif dan positif PANSS |
| 4. Zhang XY et al., 2004 | Changes in Serum IL-2, -6 and -8 Levels Before and During Treatment With Risperidone and Haloperidol: Relationship to Outcome in Schizophrenia | Perbedaan yang signifikan pada konsentrasi serum IL-2 pada kontrol sehat ($3,3 \pm 1,4$ ng/ml) dan pasien skizofrenia sebelum pengobatan ($9,6 \pm 5,2$ ng/ml) dan setelah pengobatan ($6,7 \pm 4,6$ ng/ml) dan juga ditemukan adanya korelasi yang signifikan antara tingkat pengurangan total skor positive and negative syndrome scale (PANSS) dan perubahan konsentrasi IL-2 sebelum dan setelah pengobatan |
| 5. Zhang XY et al., 2002 | Elevated IL-2, interleukin-6 and interleukin-8 serum levels in neuroleptic-free schizophrenia: association with psychopathology | Tingkat serum IL-2, IL-6 dan IL-8 secara signifikan meningkat pada pasien dengan bentuk kronis skizofrenia. Ada hubungan terbalik yang signifikan antara tingkat IL-2 dan subskala positif PANSS |

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| 6. Zang et al., 2009 | Superoxide dismutase and cytokines in chronic patients with schizophrenia: association with psychopathology and response to antipsychotics | <p>Pasien skizofrenia yang bebas obat selama 2 minggu memiliki kadar SOD, IL-2, dan IL-6 yang lebih besar daripada control sehat. Pada baseline, elevasi SOD ini dikaitkan dengan Skor total PANSS dan elevasi IL-2 dengan lebih rendah skor gejala positif PANSS. Tingkat SOD dan IL-2 di Skizofrenia juga berkorelasi positif. Setelah pengobatan, Gejala positif PANSS dan SOD dan IL-2 menunjukkan penurunan yang signifikan, tetapi IL-6 tidak menunjukkan perubahan. Pengurangan SOD dan IL-2 berkorelasi dengan pengurangan skor total PANSS, dan pengurangan SOD juga berkorelasi dengan pengurangan subskor positif.</p> |
| 7. Siagian et al., 2019 | Serum IL-2 (IL-2) Levels in Untreated and Treated in Batak Tribe Patients with Schizophrenia | <p>kadar IL-2 serum pada yang tidak diobati dan yang diobati di Suku Batak penderita skizofrenia dan kontrol sehat dengan rata-rata dan standar nilai deviasi pada masing-masing kelompok yaitu $10,34 \pm 2,24$ ng/ml, $5,53 \pm 1,05$ ng/ml dan $3,48 \pm 0,61$ ng/ml dengan nilai p $<0,001$</p> |

Lampiran 6 skor PANSS Sub Skala Awal dan Pekan ke 4

| | Skizofrenia terapi Haloperidol <i>n = 18</i> | Skizofrenia terapi Risperidon <i>n = 18</i> |
|-------------------------------------|---|--|
| PANSS Awal Total (Mean±SD) | 106,56 ± 8,16 | 108,06 ± 7,65 |
| Sub Skala Positif | 34,61 ± 4,55 | 31,39 ± 4,99 |
| Sub Skala Negatif | 21,56 ± 3,32 | 26,67 ± 7,13 |
| | 50,94 ± 5,97 | 50 ± 5,82 |
| Psikopatologi Umum | | |
| PANSS pekan ke 4 Total (Mean±SD) | 51,22 ± 5,77 | 46,27 ± 4,56 |
| Sub Skala Positif | 12,72 ± 1,74 | 14,61 ± 2,89 |
| Sub Skala Negatif | 14,38 ± 1,71 | 10,72 ± 3,3 |
| | 24,11 ± 5,77 | 22,05± 1,83 |
| Psikopatologi Umum | | |