

DAFTAR PUSTAKA

- Alzahrani, H. (2024). Assessment of vitamin b12 efficacy on cognitive memory function and depressive symptoms: a systematic review and meta-analysis. *Cureus*. <https://doi.org/10.7759/cureus.73350>
- Altaf, R. et al. (2021) "Folate as adjunct therapy to SSRI/SNRI for major depressive disorder: Systematic review & meta-analysis," *Complementary Therapies in Medicine*, 61, hal. 102770. doi: 10.1016/j.ctim.2021.102770.
- Arias, H., Targowska-Duda, K., García-Colunga, J., & Ortells, M. (2021). Is the antidepressant activity of selective serotonin reuptake inhibitors mediated by nicotinic acetylcholine receptors?. *Molecules*, 26(8), 2149. <https://doi.org/10.3390/molecules26082149>
- Asbaghi, O., Sadeghian, M., Nazarian, B., Sarreshtedari, M., Mozaffari-Khosravi, H., Maleki, V., ... & Sadeghi, O. (2020). The effect of vitamin e supplementation on selected inflammatory biomarkers in adults: a systematic review and meta-analysis of randomized clinical trials. *Scientific Reports*, 10(1). <https://doi.org/10.1038/s41598-020-73741-6>
- Bargieł, W., Cierpiszewska, K., Maruszczak, K., Pakuła, A., Szwankowska, D., Wrzesińska, A., ... & Formanowicz, D. (2021). Recognized and potentially new biomarkers—their role in diagnosis and prognosis of cardiovascular disease. *Medicina*, 57(7), 701. <https://doi.org/10.3390/medicina57070701>
- Basterzi, A. D. et al. (2005) "IL-6 levels decrease with SSRI treatment in patients with major depression," *Human Psychopharmacology*, 20(7), hal. 473–476. doi: 10.1002/hup.717.
- Bharti, A. et al. (2023) "Are vitamin D, B12, and folate deficiency associated with depressive disorder? A case-control study," *Ind Psychiatry J.*, 32(1), hal. 100–105.
- Boschloo, L. et al. (2023) "The complex clinical response to selective serotonin reuptake inhibitors in depression: a network perspective," *Translational Psychiatry*, 13(1), hal. 1–7. doi: 10.1038/s41398-022-02285-2.
- Carr, A., Bradley, H., Vlasiuk, E., Pierard, H., Beddow, J., & Rucklidge, J. (2023). Inflammation and vitamin c in women with prenatal depression and anxiety: effect of multivitamin supplementation. *Antioxidants*, 12(4), 941. <https://doi.org/10.3390/antiox12040941>
- Chand, S. P. dan Arif, H. (2023) "Depression," *StatPearls* [Internet]. Treasure Island (FL): StatPearls Publishing.
- Chu, A. dan Wadhwa, R. (2023) "Selective Serotonin Reuptake Inhibitors," *StatPearls* [Internet]. Treasure Island (FL): StatPearls Publishing.
- Clevenger, S. S. et al. (2018) "The role of selective serotonin reuptake inhibitors in preventing relapse of major depressive disorder," *Therapeutic Advances in Vaccines*, 9(6), hal. 259–261. doi: 10.1177/https.

- Coppen, A. dan Bolander-Gouaille, C. (2005) "Treatment of depression: Time to consider folic acid and vitamin B 12," *Journal of Psychopharmacology*, 19(1), hal. 59–65. doi: 10.1177/0269881105048899.
- del Barrio, V. (2014) *Diagnostic and Statistical Manual of Mental Disorders, Encyclopedia of Applied Psychology, Three-Volume Set*. doi: 10.1016/B0-12-657410-3/00457-8.
- Du, X., Yang, Y., Zhan, X., Huang, Y., Fu, Y., Zhang, Z., ... & Ma, L. (2020). Vitamin b6 prevents excessive inflammation by reducing accumulation of sphingosine-1-phosphate in a sphingosine-1-phosphate lyase–dependent manner. *Journal of Cellular and Molecular Medicine*, 24(22), 13129-13138. <https://doi.org/10.1111/jcmm.15917>
- Düsedau, H., Steffen, J., Figueiredo, C., Boehme, J., Schultz, K., Erck, C., ... & Dunay, I. (2021). Influenza a virus (h1n1) infection induces microglial activation and temporal dysbalance in glutamatergic synaptic transmission. *Mbio*, 12(5). <https://doi.org/10.1128/mbio.01776-21>
- Edinoff, A. N. et al. (2021) "Selective serotonin reuptake inhibitors and adverse effects: A narrative review," *Neurology International*, 13(3), hal. 387–401. doi: 10.3390/neurolint13030038.
- Elgellaie, A. et al. (2023) "Pro-inflammatory cytokines IL-1 α , IL-6 and TNF- α in major depressive disorder: Sex-specific associations with psychological symptoms," *European Journal of Neuroscience*, 57(11), hal. 1913–1928. doi: 10.1111/ejn.15992.
- Erensoy, H. (2020) "Vitamin B12 and Folic Acid in Depression and Anxiety: A Pilot Study," *The Journal of Neurobehavioral Sciences*, 7(3), hal. 164. doi: 10.4103/jnbs.jnbs_32_20.
- Esnafoğlu, E. (2023). Vitamin b12 and folate deficiencies, elevated homocysteine and their roles in the biochemical basis of neuropsychiatric diseases in children and adolescents: case series, review and recommendations.. <https://doi.org/10.21203/rs.3.rs-3100671/v1>
- Febyan, F., Wijaya, S., Tannika, A., & Hudyono, J. (2020). Peranan sitokin pada keadaan stres sebagai pencetus depresi. *Jurnal Penyakit Dalam Indonesia*, 6(4), 210. <https://doi.org/10.7454/jpdi.v6i4.285>
- Fitrikasari, A. et al. (2020) "The Effect of Selective Serotonin Reuptake Inhibitor Drugs on Serum Interleukin-6 Levels among People with Depression," *International Medical Journal*, 25(12), hal. 3625–3630.
- Gao, S., Khalid, A., Amini-Salehi, E., Radkhah, N., Jamilian, P., Badpeyma, M., ... & Zarezadeh, M. (2024). Folate supplementation as a beneficial add-on treatment in relieving depressive symptoms: a meta-analysis of meta-analyses. *Food Science & Nutrition*, 12(6), 3806-3818. <https://doi.org/10.1002/fsn3.4073>
- Goodwin, R. D. et al. (2022) "Trends in U.S. Depression Prevalence From 2015 to 2020: The Widening Treatment Gap," *American Journal of Preventive Medicine*, 63(5), hal. 726–733. doi: 10.1016/j.amepre.2022.05.014.

- Hakamata, Y. et al. (2023) "Blunted diurnal interleukin-6 rhythm is associated with amygdala emotional hyporeactivity and depression: a modulating role of gene-stressor interactions," *Frontiers in Psychiatry*, 14(May), hal. 1–18. doi: 10.3389/fpsyt.2023.1196235.
- Han, Q., Li, W., Chen, P., Wang, L., Bao, X., Huang, R., ... & Chen, X. (2023). Microglial nlrp3 inflammasome-mediated neuroinflammation and therapeutic strategies in depression. *Neural Regeneration Research*, 19(9), 1890-1898. <https://doi.org/10.4103/1673-5374.390964>
- Hannestad, J., Dellagioia, N. dan Bloch, M. (2011) "The effect of antidepressant medication treatment on serum levels of inflammatory cytokines: A meta-analysis," *Neuropsychopharmacology*, 36(12), hal. 2452–2459. doi: 10.1038/npp.2011.132.
- Haque, T., Taruselli, M., Kee, S., Dailey, J., Pondicherry, N., Gajewski-Kurdziel, P., ... & Ryan, J. (2023). *Fluoxetine* restrains allergic inflammation by targeting an fceri-atp positive feedback loop in mast cells. *Science Signaling*, 16(802). <https://doi.org/10.1126/scisignal.abc9089>
- Hodes, G. E., Ménard, C. dan Russo, S. J. (2016) "Integrating Interleukin-6 into depression diagnosis and treatment," *Neurobiology of Stress*, 4, hal. 15–22. doi: 10.1016/j.ynstr.2016.03.003.
- Huang, F. and Wu, X. (2021). Brain neurotransmitter modulation by gut microbiota in anxiety and depression. *Frontiers in Cell and Developmental Biology*, 9. <https://doi.org/10.3389/fcell.2021.649103>
- Istriana, E. et al. (2013) "Excellent reliability of the Hamilton Depression Rating Scale (HDRS-21) in Indonesia after training," *Asia-Pacific Psychiatry*, 5(3), hal. 141–146. doi: 10.1111/appy.12083.
- Jamil, S., Alhawsawi, K., & Alrefaei, S. (2025). Unraveling the mystery: exploring a case of prolonged fever and hidden genetics: case report. *Journal of Family Medicine and Primary Care*, 14(5), 2065-2069. https://doi.org/10.4103/jfmpc.jfmpc_1839_24
- Janssen, R., Serré, J., Piscaer, I., Zaal, R., Daal, H., Mathyssen, C., ... & Janssens, W. (2020). post hoc analysis of a randomised controlled trial: effect of vitamin d supplementation on circulating levels of desmosine in copd. *Erj Open Research*, 6(4), 00128-2019. <https://doi.org/10.1183/23120541.00128-2019>
- Jatnika, G., Badrujamaludin, A., & Ismafiaty, I. (2023). Efektivitas terapi perilaku kognitif untuk terapi depresi pada mahasiswa keperawatan. *Holistik Jurnal Kesehatan*, 17(5), 439-446. <https://doi.org/10.33024/hjk.v17i5.12059>
- Jazayeri, S. et al. (2008) "Comparison of therapeutic effects of omega-3 fatty acid eicosapentaenoic acid and *fluoxetine*, separately and in combination, in major depressive disorder," *Australian and New Zealand Journal of Psychiatry*, 42(3), hal. 192–198. doi: 10.1080/00048670701827275.
- Jesulola, E., Micalos, P. dan Baguley, I. J. (2018) "Understanding the pathophysiology of

- depression: From monoamines to the neurogenesis hypothesis model - are we there yet?," Behavioural Brain Research, 341, hal. 79–90. doi: 10.1016/j.bbr.2017.12.025.
- Jha, R., Kanyal, D., Devi, R., & Butola, L. (2021). Vitamin b12 deficiency and psychiatric manifestations-a consise review. Indian Journal of Forensic Medicine & Toxicology, 15(3), 2664-2667. <https://doi.org/10.37506/ijfmt.v15i3.15707>
- Jones, S. A. et al. (2018) "Interleukin 6: The biology behind the therapy," Considerations in Medicine, 2(1), hal. 2–6. doi: 10.1136/conmed-2018-000005.
- Karrouri, R. et al. (2021) "Major depressive disorder: Validated treatments and future challenges," World Journal of Clinical Cases, 9(31), hal. 9350–9367. doi: 10.12998/wjcc.v9.i31.9350.
- Kasir, N. R. et al. (2023) "Effect Of Folic Acid and Methylcobalamin Adjuvant Therapy On Improvement Of Clinical Symptoms and BDNF Levels Of In Schizophrenia Patients," Journal of Population Therapeutics & Clinical Pharmacology, 30(17), hal. 1313–1324. doi: 10.53555/jptcp.v30i17.2590.
- Kauffman, K., Dolata, J., Figueroa, M., Gunzler, D., Huml, A., Pencak, J., ... & Sajatovic, M. (2020). Higher dose weekly *fluoxetine* in hemodialysis patients: a case series report. The International Journal of Psychiatry in Medicine, 56(1), 3-13. <https://doi.org/10.1177/0091217420913399>
- Khosravi, M., Sotoudeh, G., Amini, M., Raisi, F., Mansoori, A., & Hosseinzadeh, M. (2020). The relationship between dietary patterns and depression mediated by serum levels of folate and vitamin b12. BMC Psychiatry, 20(1). <https://doi.org/10.1186/s12888-020-2455-2>
- Koole, J., Bours, M., Geijssen, A., Gigic, B., Ulvik, A., Kok, D., ... & Weijenberg, M. (2021). Circulating b-vitamin biomarkers and b-vitamin supplement use in relation to quality of life in patients with colorectal cancer: results from the focus consortium. American Journal of Clinical Nutrition, 113(6), 1468-1481. <https://doi.org/10.1093/ajcn/nqaa422>
- Koubas, A., Dardar, H., Alshwesh, R., & Elfituri, Z. (2024). Impact of serum folate and vitamin b12 on mental health in patient admitted at razi psychiatric hospital. Alq J Med App Sci, 1136-1140. <https://doi.org/10.54361/ajmas.247432>
- Lam, N. S. K. et al. (2022) "The potential use of folate and its derivatives in treating psychiatric disorders: A systematic review," Biomedicine and Pharmacotherapy, 146, hal. 112541. doi: 10.1016/j.biopha.2021.112541.
- Litbang Kementerian Kesehatan RI (2018) Riset Kesehatan Dasar. Jakarta: Kemenkes RI.
- Liu, G. and Kim, W. (2023). The functional roles of methionine and arginine in intestinal and bone health of poultry: review. Animals, 13(18), 2949. <https://doi.org/10.3390/ani13182949>
- Liwinski, T. dan Lang, U. E. (2023) "Folate and Its Significance in Depressive Disorders and Suicidality: A Comprehensive Narrative Review," Nutrients, 15(17). doi: 10.3390/nu15173859.

- Luo, C., Fan, H., Li, S., & Zou, Y. (2021). Therapeutic of candesartan and music therapy in diabetic retinopathy with depression in rats. *Evidence-Based Complementary and Alternative Medicine*, 2021, 1-9. <https://doi.org/10.1155/2021/5570356>
- Ma, H., Huang, H., Li, C., Li, S., Gan, J., Lian, C., ... & Ling, Y. (2024). The antidepressive mechanism of longya lilium combined with *fluoxetine* in mice with depression-like behaviors. *NPJ Systems Biology and Applications*, 10(1). <https://doi.org/10.1038/s41540-024-00329-5>
- Ma, Y. (2024). Exploring the effect of exercise in assisting the treatment of depression. *Communications in Humanities Research*, 40(1), 10-16. <https://doi.org/10.54254/2753-7064/40/20242193>
- Maladkar, M., Awatramani, M. dan Samel, U. D. (2016) "Real-world experience with fixed dose combination of folic acid and methylcobalamin combats B-vitamin deficiency and restores quality of life," *International Journal of Gynecology and Obstetrics-India RESEARCH*, 2(6), hal. 2–5. doi: 10.5005/jp-journals-10040-1125.
- Mao, L. et al. (2022) "Associations between Autoimmunity and Depression: Serum IL-6 and IL-17 Have Directly Impact on the HAMD Scores in Patients with First-Episode Depressive Disorder," *Journal of Immunology Research*, 2022(Mdd). doi: 10.1155/2022/6724881.
- Markun, S., Gravestock, I., Jäger, L., Rosemann, T., Pichierri, G., & Burgstaller, J. (2021). Effects of vitamin b12 supplementation on cognitive function, depressive symptoms, and fatigue: a systematic review, meta-analysis, and meta-regression. *Nutrients*, 13(3), 923. <https://doi.org/10.3390/nu13030923>
- Maslim, R., 2001. *Buku Saku Diagnosis Gangguan Jiwa Rujukan Ringkas dari PPDGJ III. Bagian Ilmu Kedokteran Jiwa*. FK Unika. Jakarta.
- Mei, J., Song, X., Wang, Y., Lyu, H., Wang, G., Chen, C., ... & Liu, Z. (2024). A novel two-hit insomnia and inflammation rodent model of depressive-like behaviors.. <https://doi.org/10.1101/2024.08.01.24311351>
- Mhanna, A., Martini, N., Hmaydoosh, G., Hamwi, G., Jarjanazi, M., Zaifah, G., ... & Alshehabi, Z. (2024). The correlation between gut microbiota and both neurotransmitters and mental disorders: a narrative review. *Medicine*, 103(5), e37114. <https://doi.org/10.1097/md.00000000000037114>
- Moreno-Agostino, D. et al. (2021) "Global trends in the prevalence and incidence of depression: a systematic review and meta-analysis," *Journal of Affective Disorders*, 281(November 2020), hal. 235–243. doi: 10.1016/j.jad.2020.12.035.
- Nugraha, N., Putri, M., & Trusda, S. (2024). Hubungan konsumsi gula dengan derajat depresi. *Bandung Conference Series Medical Science*, 4(1), 804-809. <https://doi.org/10.29313/bcsms.v4i1.12158>
- Nuraeni, A. and Ariani, N. (2022). Peer support group, terapi tawa dan pemberian monyitmadu terhadap depresi lansia. *Jurnal Keperawatan Jiwa*, 10(2), 421. <https://doi.org/10.26714/jkj.10.2.2022.421-430>
- Obeid, S. et al. (2018) "Validation of the Hamilton Depression Rating Scale (HDRS) and

- sociodemographic factors associated with Lebanese depressed patients,” *Encephale*, 44(5), hal. 397–402. doi: 10.1016/j.encep.2017.10.010.
- Pan, S., Zhou, Y., Zuo, N., Jiao, R., Kong, L., & Pan, Y. (2022). *Fluoxetine* increases astrocytic glucose uptake and glycolysis in corticosterone-induced depression through restricting gr-txnip-glut1 pathway. *Frontiers in Pharmacology*, 13. <https://doi.org/10.3389/fphar.2022.872375>
- Park, E., Shin, C., Jeon, S., & Ham, B. (2024). Is there such a thing as post-viral depression?: implications for precision medicine. *Biomolecules & Therapeutics*, 32(6), 659-684. <https://doi.org/10.4062/biomolther.2024.170>
- Petridou, E. T. et al. (2016) “Folate and B12 serum levels in association with depression in the aged: a systematic review and meta-analysis,” *Aging and Mental Health*, 20(9), hal. 965–973. doi: 10.1080/13607863.2015.1049115.
- Rahmawati, P., Suhari, S., & Refansya, R. (2022). Effect of music therapy in reduce the level of depression in the elderly: literature review. *D Nursing and Health Journal (Dnhj)*, 3(2), 55-61. <https://doi.org/10.61595/dnursing.v3i2.421>
- Remes, O., Mendes, J., & Templeton, P. (2021). Biological, psychological, and social determinants of depression: a review of recent literature. *Brain Sciences*, 11(12), 1633. <https://doi.org/10.3390/brainsci11121633>
- Roberts, S. H. et al. (2007) “Folate augmentation of treatment - Evaluation for depression (FolATED): Protocol of a randomised controlled trial,” *BMC Psychiatry*, 7, hal. 1–19. doi: 10.1186/1471-244X-7-65.
- Rondón Bernard, J. E. (2018) “Depression: A Review of its Definition,” *MOJ Addiction Medicine & Therapy*, 5(1), hal. 5–7. doi: 10.15406/mojamt.2018.05.00082.
- Roohi, E., Jaafari, N. dan Hashemian, F. (2021) “On inflammatory hypothesis of depression: what is the role of IL-6 in the middle of the chaos?,” *Journal of Neuroinflammation*, 18(1), hal. 1–15. doi: 10.1186/s12974-021-02100-7.
- Sahni, P. (2021). The screening and treatment of vitamin b12 deficiency. *International Healthcare Research Journal*, 5(4), RV1-RV5. <https://doi.org/10.26440/ihrj/0504.07439>
- Schett, G. (2018) “Physiological effects of modulating the interleukin-6 axis,” *Rheumatology (United Kingdom)*, 57(August 2017), hal. ii43–ii50. doi: 10.1093/rheumatology/kex513.
- Shioi, A., Morioka, T., Shoji, T., & Emoto, M. (2020). The inhibitory roles of vitamin k in progression of vascular calcification. *Nutrients*, 12(2), 583. <https://doi.org/10.3390/nu12020583>
- Shu, X., Sun, Y., Sun, X., Zhou, Y., Bian, Y., Shu, Z., ... & Hu, G. (2019). The effect of *fluoxetine* on astrocyte autophagy flux and injured mitochondria clearance in a mouse model of depression. *Cell Death and Disease*, 10(8). <https://doi.org/10.1038/s41419-019-1813-9>
- Stopińska, K., Radziwoń-Zaleska, M., & Domitrz, I. (2021). The microbiota-gut-brain axis as a key to neuropsychiatric disorders: a mini review. *Journal of Clinical Medicine*,

10(20), 4640. <https://doi.org/10.3390/jcm10204640>

- Sun, J., Wu, D., Xu, G., Chen, F., Ding, X., Xie, L., ... & Jin, X. (2022). Olanzapine add-on treatment promotes neuronal differentiation of neural stem cells compared with *fluoxetine* alone. *Bioscience Reports*, 42(10). <https://doi.org/10.1042/bsr20220804>
- Syed, E. U., Wasay, M. dan Awan, S. (2013) "Vitamin B12 Supplementation in Treating Major Depressive Disorder: A Randomized Controlled Trial," *The Open Neurology Journal*, 7(1), hal. 44–48. doi: 10.2174/1874205x01307010044.
- Tan, Y., Zhou, L., Huang, J., Chen, X., Wu, Y., Song, X., ... & Yang, Q. (2023). Vitamin b12, folate, homocysteine, inflammatory mediators (interleukin-6, tumor necrosis factor- α and c-reactive protein) levels in adolescents with anxiety or depressive symptoms. *Neuropsychiatric Disease and Treatment*, Volume 19, 785-800. <https://doi.org/10.2147/ndt.s399378>
- Tian, H. et al. (2022) "The molecular pathophysiology of depression and the new therapeutics," *MedComm*, 3(3), hal. 1–36. doi: 10.1002/mco2.156.
- Ting, E. Y. C., Yang, A. C. dan Tsai, S. J. (2020) "Role of interleukin-6 in depressive disorder," *International Journal of Molecular Sciences*, 21(6), hal. 1–22. doi: 10.3390/ijms21062194.
- Tobing, D. (2022). Analisis asuhan keperawatan dengan intervensi inovasi terapi reminiscence pada lansia depresi. *Jurnal Keperawatan Widya Gantari Indonesia*, 6(2), 168. <https://doi.org/10.52020/jkwgi.v6i2.4199>
- Vahid-Ansari, F. and Albert, P. (2021). Rewiring of the serotonin system in major depression. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsy.2021.802581>
- Wang, J. et al. (2017) "Prevalence of depression and depressive symptoms among outpatients: A systematic review and meta-analysis," *BMJ Open*, 7(8), hal. 1–14. doi: 10.1136/bmjopen-2017-017173.
- Wang, W., Zhang, C., Fan, Y., Yue, S., Yang, Y., Liu, R., ... & Fu, F. (2021). Dopamine receptor agonist rotigotine-loaded microspheres ameliorates sexual function deteriorated by *fluoxetine* in depression rats. *Asn Neuro*, 13(1). <https://doi.org/10.1177/17590914211052862>
- Wang, X., Wang, R., Ding, Q., Wu, W., Che, F., Li, P., ... & Tang, B. (2022). Hypochlorous acid-activated multifunctional fluorescence platform for depression therapy and antidepressant efficacy evaluation. *Analytical Chemistry*, 94(27), 9811-9818. <https://doi.org/10.1021/acs.analchem.2c01639>
- Wang, Y., Wang, J., Chen, L., Zhang, H., Yu, L., Chi, Y., ... & Cai, Y. (2022). Efficacy of vitamin d supplementation on copd and asthma control: a systematic review and meta-analysis. *Journal of Global Health*, 12. <https://doi.org/10.7189/jogh.12.04100>
- Xiaowen, Y., Zhu, J., Gong, M., Meng, G., Tan, R., Zhang, Y., ... & Chen, Z. (2024). Effect of depression and the antidepressant *fluoxetine* on osseointegration—a pre-clinical in vivo experimental study. *Clinical Oral Implants Research*, 35(10), 1355-

1366. <https://doi.org/10.1111/clr.14323>

- Xie, J., Wang, Y., Zhong, Q., Bai, S., Zhou, C., Tian, T., ... & Chen, J. (2022). Associations between disordered microbial metabolites and changes of neurotransmitters in depressed mice. *Frontiers in Cellular and Infection Microbiology*, 12. <https://doi.org/10.3389/fcimb.2022.906303>
- Yang, J. (2022). The discovery of fluoxetine in depression treatment. *Highlights in Science Engineering and Technology*, 8, 668-674. <https://doi.org/10.54097/hset.v8i.1254>
- Yang, W. C. et al. (2017) "Factors related to the improvement in quality of life for depressed inpatients treated with *fluoxetine*," *BMC Psychiatry*, 17(1), hal. 1–9. doi: 10.1186/s12888-017-1471-3.
- Yang, Z., Li, Z., Guo, Z., Ren, Y., Zhou, T., Xiao, Z., ... & Xu, F. (2021). Antitumor effect of *fluoxetine* on chronic stress-promoted lung cancer growth via suppressing kynurenine pathway and enhancing cellular immunity. *Frontiers in Pharmacology*, 12. <https://doi.org/10.3389/fphar.2021.685898>
- Yassine, E., Sarah, S., Mouloudi, N., Hamid, M., Youssouf, B., & Ahmed, B. (2024). Psychiatric presentation of a severe vitamin b12 deficiency associated with biermer's disease: a case report. *International Journal of Medical and Pharmaceutical Case Reports*, 17(3), 1-4. <https://doi.org/10.9734/ijmpcr/2024/v17i3382>
- Yu, X., Yao, H., Zhang, X., Liu, L., Liu, S., & Dong, Y. (2022). Comparison of lps and ms-induced depressive mouse model: behavior, inflammation and biochemical changes. *BMC Psychiatry*, 22(1). <https://doi.org/10.1186/s12888-022-04233-2>
- Yu, Y. H. et al. (2023) "Epidemiology of Depression and Suicide Ideation in Patients with Psoriasis: A Meta-analysis of Prospective Cohort Studies," *International Journal of Dermatology and Venereology*, 6(2), hal. 78–86. doi: 10.1097/JD9.0000000000000307.
- Zakaria, F. H., Samhani, I. dan Mustafa, M. Z. (2022) "Pathophysiology of Depression: Stingless Bee Honey," *Molecules*, 5091(27), hal. 1–17.
- Zhao, G. et al. (2011) "Use of folic acid and vitamin supplementation among adults with depression and anxiety: A cross-sectional, population-based survey," *Nutrition Journal*, 10(1), hal. 1–10. doi: 10.1186/1475-2891-10-102.
- Zhao, Y., Shang, P., Wang, M., Xie, M., & Liu, J. (2020). Neuroprotective effects of *fluoxetine* against chronic stress-induced neural inflammation and apoptosis: involvement of the p38 activity. *Frontiers in Physiology*, 11. <https://doi.org/10.3389/fphys.2020.00351>
- Zhong, Q., Wu, W., Xie, J., at al (2024). Limosilactobacillus-related 3-omdp as a potential therapeutic target for depression. *Annals of Medicine*, 56(1). <https://doi.org/10.1080/07853890.2024.2417179>
- Zhou, Y., Yu, C., & Liu, H. (2020). Folic acid ameliorates depression-like behaviour in a rat model of chronic unpredictable mild stress. *BMC Neuroscience*, 21(1). <https://doi.org/10.1186/s12868-020-0551-3>

LAMPIRAN

Output Hasil Uji Statistik

Crosstabs

Jenis Kelamin * Kelompok

Crosstab			Kelompok		Total
			Kontrol	Perlakuan	
Jenis Kelamin	Laki-Laki	Count	8	6	14
		% within Jenis Kelamin	57.1%	42.9%	100.0%
		% within Kelompok	36.4%	27.3%	31.8%
		% of Total	18.2%	13.6%	31.8%
	Perempuan	Count	14	16	30
		% within Jenis Kelamin	46.7%	53.3%	100.0%
		% within Kelompok	63.6%	72.7%	68.2%
		% of Total	31.8%	36.4%	68.2%
	Total	Count	22	22	44
		% within Jenis Kelamin	50.0%	50.0%	100.0%
		% within Kelompok	100.0%	100.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.419 ^a	1	.517		
Continuity Correction ^b	.105	1	.746		
Likelihood Ratio	.420	1	.517		
Fisher's Exact Test				.747	.373
Linear-by-Linear Association	.410	1	.522		
N of Valid Cases	44				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 7.00.

b. Computed only for a 2x2 table

Usia * Kelompok

Crosstab			Kelompok		Total
			Kontrol	Perlakuan	
Usia	15 - 24 Tahun	Count	2	4	6
		% within Usia	33.3%	66.7%	100.0%
		% within Kelompok	9.1%	18.2%	13.6%
		% of Total	4.5%	9.1%	13.6%
	25 - 44 Tahun	Count	19	18	37
		% within Usia	51.4%	48.6%	100.0%
		% within Kelompok	86.4%	81.8%	84.1%
		% of Total	43.2%	40.9%	84.1%
	45 - 64 Tahun	Count	1	0	1
		% within Usia	100.0%	0.0%	100.0%
		% within Kelompok	4.5%	0.0%	2.3%
		% of Total	2.3%	0.0%	2.3%
	Total	Count	22	22	44
		% within Usia	50.0%	50.0%	100.0%

% within Kelompok	100.0%	100.0%	100.0%
% of Total	50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	1.694 ^a	2	.429
Likelihood Ratio	2.093	2	.351
Linear-by-Linear Association	1.367	1	.242
N of Valid Cases	44		

a. 4 cells (66.7%) have expected count less than 5. The minimum expected count is .50.

Status Pernikahan * Kelompok

Crosstab

			Kelompok		Total
			Kontrol	Perlakuan	
Status Pernikahan	Menikah	Count	11	10	21
		% within Status Pernikahan	52.4%	47.6%	100.0%
		% within Kelompok	50.0%	45.5%	47.7%
		% of Total	25.0%	22.7%	47.7%
	Belum Menikah	Count	11	12	23
		% within Status Pernikahan	47.8%	52.2%	100.0%
		% within Kelompok	50.0%	54.5%	52.3%
		% of Total	25.0%	27.3%	52.3%
Total	Count		22	22	44
	% within Status Pernikahan		50.0%	50.0%	100.0%
	% within Kelompok		100.0%	100.0%	100.0%
	% of Total		50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.091 ^a	1	.763	1.000	.500
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.091	1	.763		
Fisher's Exact Test					
Linear-by-Linear Association	.089	1	.765		
N of Valid Cases	44				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 10.50.

b. Computed only for a 2x2 table

Pekerjaan * Kelompok

Crosstab

			Kelompok		Total
			Kontrol	Perlakuan	
Pekerjaan	PNS/TNI/Polri	Count	5	3	8
		% within Pekerjaan	62.5%	37.5%	100.0%
		% within Kelompok	22.7%	13.6%	18.2%
		% of Total	11.4%	6.8%	18.2%
	Pegawai Swasta	Count	1	0	1
		% within Pekerjaan	100.0%	0.0%	100.0%
		% within Kelompok	4.5%	0.0%	2.3%
		% of Total			

	% of Total	2.3%	0.0%	2.3%
Wiraswasta	Count	5	5	10
	% within Pekerjaan	50.0%	50.0%	100.0%
	% within Kelompok	22.7%	22.7%	22.7%
	% of Total	11.4%	11.4%	22.7%
Pegawai Honorer	Count	2	4	6
	% within Pekerjaan	33.3%	66.7%	100.0%
	% within Kelompok	9.1%	18.2%	13.6%
	% of Total	4.5%	9.1%	13.6%
IRT	Count	4	2	6
	% within Pekerjaan	66.7%	33.3%	100.0%
	% within Kelompok	18.2%	9.1%	13.6%
	% of Total	9.1%	4.5%	13.6%
Mahasiswa	Count	3	6	9
	% within Pekerjaan	33.3%	66.7%	100.0%
	% within Kelompok	13.6%	27.3%	20.5%
	% of Total	6.8%	13.6%	20.5%
Tidak Bekerja	Count	2	2	4
	% within Pekerjaan	50.0%	50.0%	100.0%
	% within Kelompok	9.1%	9.1%	9.1%
	% of Total	4.5%	4.5%	9.1%
Total	Count	22	22	44
	% within Pekerjaan	50.0%	50.0%	100.0%
	% within Kelompok	100.0%	100.0%	100.0%
	% of Total	50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	3.833 ^a	6	.699
Likelihood Ratio	4.270	6	.640
Linear-by-Linear Association	.858	1	.354
N of Valid Cases	44		

a. 12 cells (85.7%) have expected count less than 5. The minimum expected count is .50.

Pendidikan * Kelompok

Crosstab

			Kelompok		Total
			Kontrol	Perlakuan	
Pendidikan	Menengah	Count	10	8	18
		% within Pendidikan	55.6%	44.4%	100.0%
		% within Kelompok	45.5%	36.4%	40.9%
		% of Total	22.7%	18.2%	40.9%
	Tinggi	Count	12	14	26
		% within Pendidikan	46.2%	53.8%	100.0%
		% within Kelompok	54.5%	63.6%	59.1%
		% of Total	27.3%	31.8%	59.1%
Total		Count	22	22	44
		% within Pendidikan	50.0%	50.0%	100.0%
		% within Kelompok	100.0%	100.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.376 ^a	1	.540		
Continuity Correction ^b	.094	1	.759		
Likelihood Ratio	.377	1	.539		
Fisher's Exact Test				.760	.380
Linear-by-Linear Association	.368	1	.544		
N of Valid Cases	44				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 9.00.

b. Computed only for a 2x2 table

HDRS Total Sebelum * Kelompok

Crosstab

			Kelompok		Total
			Kontrol	Perlakuan	
HDRS Total Sebelum	Depresi Sedang	Count	18	17	35
		% within HDRS Total Sebelum	51.4%	48.6%	100.0%
		% within Kelompok	81.8%	77.3%	79.5%
		% of Total	40.9%	38.6%	79.5%
	Depresi Berat	Count	4	5	9
		% within HDRS Total Sebelum	44.4%	55.6%	100.0%
		% within Kelompok	18.2%	22.7%	20.5%
		% of Total	9.1%	11.4%	20.5%
Total	Count		22	22	44
	% within HDRS Total Sebelum		50.0%	50.0%	100.0%
	% within Kelompok		100.0%	100.0%	100.0%
	% of Total		50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.140 ^a	1	.709		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.140	1	.708		
Fisher's Exact Test				1.000	.500
Linear-by-Linear Association	.137	1	.712		
N of Valid Cases	44				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 4.50.

b. Computed only for a 2x2 table

HDRS Total Sesudah * Kelompok

Crosstab

			Kelompok		Total
			Kontrol	Perlakuan	
HDRS Total Sesudah	Depresi Ringan	Count	6	17	23
		% within HDRS Total Sesudah	26.1%	73.9%	100.0%
		% within Kelompok	27.3%	77.3%	52.3%
		% of Total	13.6%	38.6%	52.3%
	Depresi Sedang	Count	16	5	21
		% within HDRS Total Sesudah			
		% within Kelompok			
		% of Total			

	% within HDRS Total Sesudah	76.2%	23.8%	100.0%
	% within Kelompok	72.7%	22.7%	47.7%
	% of Total	36.4%	11.4%	47.7%
Total	Count	22	22	44
	% within HDRS Total Sesudah	50.0%	50.0%	100.0%
	% within Kelompok	100.0%	100.0%	100.0%
	% of Total	50.0%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	11.023 ^a	1	.001		
Continuity Correction ^b	9.110	1	.003		
Likelihood Ratio	11.542	1	.001		
Fisher's Exact Test				.002	.001
Linear-by-Linear Association	10.772	1	.001		
N of Valid Cases	44				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 10.50.

b. Computed only for a 2x2 table

Explore Kelompok

Descriptives

	Kelompok		Statistic	Std. Error
HDRS Total Sebelum	Kontrol	Mean	22.45	.399
		95% Confidence Interval for Mean	Lower Bound	21.63
			Upper Bound	23.28
		5% Trimmed Mean	22.45	
		Median	23.00	
		Variance	3.498	
		Std. Deviation	1.870	
		Minimum	19	
		Maximum	26	
		Range	7	
		Interquartile Range	2	
		Skewness	.030	.491
		Kurtosis	.142	.953
	Perlakuan	Mean	22.77	.400
		95% Confidence Interval for Mean	Lower Bound	21.94
			Upper Bound	23.60
		5% Trimmed Mean	22.70	
		Median	23.00	
		Variance	3.517	
		Std. Deviation	1.875	
		Minimum	20	
		Maximum	27	
		Range	7	
		Interquartile Range	3	
		Skewness	.600	.491
		Kurtosis	-.095	.953
HDRS Total Sesudah	Kontrol	Mean	17.68	.498
		95% Confidence Interval for Mean	Lower Bound	16.65
			Upper Bound	18.72
		5% Trimmed Mean	17.70	
		Median	17.50	
		Variance	5.465	
		Std. Deviation	2.338	

			Minimum		13	
			Maximum		22	
			Range		9	
			Interquartile Range		3	
			Skewness		-.069	.491
			Kurtosis		-.421	.953
	Perlakuan		Mean		15.82	.435
			95% Confidence Interval for Mean	Lower Bound	14.91	
				Upper Bound	16.72	
			5% Trimmed Mean		15.75	
			Median		16.00	
			Variance		4.156	
			Std. Deviation		2.039	
			Minimum		12	
			Maximum		21	
			Range		9	
			Interquartile Range		2	
			Skewness		.641	.491
			Kurtosis		.932	.953
	IL-6 Sebelum	Kontrol	Mean		161.35679273	8.288774835
			95% Confidence Interval for Mean	Lower Bound	144.11934182	
				Upper Bound	178.59424363	
			5% Trimmed Mean		160.75146313	
			Median		153.43855000	
			Variance		1511.483	
			Std. Deviation		38.877800115	
			Minimum		106.430100	
			Maximum		227.052500	
			Range		120.622400	
			Interquartile Range		74.182450	
			Skewness		.204	.491
			Kurtosis		-1.318	.953
	Perlakuan		Mean		161.48680000	7.350597404
			95% Confidence Interval for Mean	Lower Bound	146.20039587	
				Upper Bound	176.77320413	
			5% Trimmed Mean		161.26057273	
			Median		153.31990000	
			Variance		1188.688	
			Std. Deviation		34.477357908	
			Minimum		110.243800	
			Maximum		216.326100	
			Range		106.082300	
			Interquartile Range		61.841647	
			Skewness		.306	.491
			Kurtosis		-1.304	.953
IL-6 Sesudah	Kontrol		Mean		1.36611365	.061848088
			95% Confidence Interval for Mean	Lower Bound	1.23749351	
				Upper Bound	1.49473379	
			5% Trimmed Mean		1.35535309	
			Median		1.30435000	
			Variance		.084	
			Std. Deviation		.290093246	
			Minimum		.972469	
			Maximum		1.962072	
			Range		.989603	
			Interquartile Range		.516628	
			Skewness		.446	.491
			Kurtosis		-.844	.953
	Perlakuan		Mean		1.21216677	.061410935
			95% Confidence Interval for Mean	Lower Bound	1.08445574	
				Upper Bound	1.33987780	
			5% Trimmed Mean		1.19960425	
			Median		1.15942800	

		Variance		.083	
		Std. Deviation		.288042817	
		Minimum		.837163	
		Maximum		1.815667	
		Range		.978504	
		Interquartile Range		.433593	
		Skewness		.710	.491
		Kurtosis		-.539	.953
HDRS Total Selisih (Post - Pre)	Kontrol	Mean		-4.77	.329
		95% Confidence Interval for Mean	Lower Bound	-5.46	
			Upper Bound	-4.09	
		5% Trimmed Mean		-4.85	
		Median		-5.00	
		Variance		2.374	
		Std. Deviation		1.541	
		Minimum		-7	
		Maximum		-1	
		Range		6	
		Interquartile Range		2	
		Skewness		.784	.491
		Kurtosis		.407	.953
	Perlakuan	Mean		-6.95	.259
		95% Confidence Interval for Mean	Lower Bound	-7.49	
			Upper Bound	-6.42	
		5% Trimmed Mean		-6.95	
		Median		-7.00	
		Variance		1.474	
		Std. Deviation		1.214	
		Minimum		-9	
		Maximum		-5	
		Range		4	
		Interquartile Range		2	
		Skewness		.081	.491
		Kurtosis		-.852	.953
IL6 Selisih	Kontrol	Mean		-159.99067908	8.275877792
		95% Confidence Interval for Mean	Lower Bound	-177.20130911	
			Upper Bound	-142.78004905	
		5% Trimmed Mean		-159.35166598	
		Median		-152.02906600	
		Variance		1506.783	
		Std. Deviation		38.817307620	
		Minimum		-225.968173	
		Maximum		-105.384811	
		Range		120.583362	
		Interquartile Range		73.619187	
		Skewness		-.213	.491
		Kurtosis		-1.306	.953
	Perlakuan	Mean		-160.27463323	7.349021458
		95% Confidence Interval for Mean	Lower Bound	-175.55776000	
			Upper Bound	-144.99150646	
		5% Trimmed Mean		-160.02324996	
		Median		-152.36444950	
		Variance		1188.179	
		Std. Deviation		34.469966068	
		Minimum		-215.411070	
		Maximum		-109.290964	
		Range		106.120106	
		Interquartile Range		61.986480	
		Skewness		-.310	.491
		Kurtosis		-1.310	.953

Tests of Normality

	Kelompok	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
		Statistic	df	Sig.	Statistic	df	Sig.
HDRS Total Sebelum	Kontrol	.203	22	.018	.936	22	.167
	Perlakuan	.225	22	.005	.929	22	.117
HDRS Total Sesudah	Kontrol	.115	22	.200 [*]	.979	22	.905
	Perlakuan	.237	22	.002	.940	22	.202
IL-6 Sebelum	Kontrol	.137	22	.200 [*]	.934	22	.152
	Perlakuan	.167	22	.115	.917	22	.067
IL-6 Sesudah	Kontrol	.132	22	.200 [*]	.943	22	.227
	Perlakuan	.132	22	.200 [*]	.918	22	.070
HDRS Total Selisih (Post - Pre)	Kontrol	.195	22	.029	.925	22	.096
	Perlakuan	.169	22	.102	.922	22	.084
IL6 Selisih	Kontrol	.136	22	.200 [*]	.935	22	.152
	Perlakuan	.173	22	.084	.917	22	.065

*. This is a lower bound of the true significance.

a. Lilliefors Significance Correction

T-Test

Kelompok = Kontrol

Paired Samples Statistics^a

	Mean	N	Std. Deviation	Std. Error Mean
Pair 1 HDRS Total Sesudah	17.68	22	2.338	.498
HDRS Total Sebelum	22.45	22	1.870	.399
Pair 2 IL-6 Sesudah	1.36611365	22	.290093246	.061848088
IL-6 Sebelum	161.35679273	22	38.877800115	8.288774835

a. Kelompok = Kontrol

Paired Samples Correlations^a

	N	Correlation	Sig.
Pair 1 HDRS Total Sesudah & HDRS Total Sebelum	22	.753	.000
Pair 2 IL-6 Sesudah & IL-6 Sebelum	22	.212	.343

a. Kelompok = Kontrol

Paired Samples Test^a

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	HDRS Total Sesudah - HDRS Total Sebelum	-4.773	1.541	.329	-5.456	-4.090	-14.528	21	.000
Pair 2	IL-6 Sesudah - IL-6 Sebelum	-159.990679082	38.817307620	8.275877792	-177.201309114	-142.780049049	-19.332	21	.000

a. Kelompok = Kontrol

Kelompok = Perlakuan

Paired Samples Statistics^a

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	HDRS Total Sesudah	15.82	22	2.039	.435
	HDRS Total Sebelum	22.77	22	1.875	.400
Pair 2	IL-6 Sesudah	1.21216677	22	.288042817	.061410935
	IL-6 Sebelum	161.48680000	22	34.477357908	7.350597404

a. Kelompok = Perlakuan

Paired Samples Correlations^a

		N	Correlation	Sig.
Pair 1	HDRS Total Sesudah & HDRS Total Sebelum	22	.811	.000
Pair 2	IL-6 Sesudah & IL-6 Sebelum	22	.030	.895

a. Kelompok = Perlakuan

Paired Samples Test^a

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	HDRS Total Sesudah - HDRS Total Sebelum	-6.955	1.214	.259	-7.493	-6.416	-26.868	21	.000
Pair 2	IL-6 Sesudah - IL-6 Sebelum	160.274633227	34.469966068	7.349021458	175.557759998	144.991506457	-21.809	21	.000

a. Kelompok = Perlakuan

T-Test

Group Statistics

	Kelompok	N	Mean	Std. Deviation	Std. Error Mean
HDRS Total Sebelum	Kontrol	22	22.45	1.870	.399
	Perlakuan	22	22.77	1.875	.400
IL-6 Sebelum	Kontrol	22	161.35679273	38.877800115	8.288774835
	Perlakuan	22	161.48680000	34.477357908	7.350597404

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
HDRS Total Sebelum	Equal variances assumed	.002	.963	-.563	42	.576	-.318	.565	-1.458	.821

	Equal variances not assumed			-.563	42.000	.576	-.318	.565	-1.458	.821
IL-6 Sebelum	Equal variances assumed	.645	.427	-.012	42	.991	-.130007273	11.078586122	22.487499219	22.227484673
	Equal variances not assumed			-.012	41.408	.991	-.130007273	11.078586122	22.496969201	22.236954655

T-Test

Group Statistics

	Kelompok	N	Mean	Std. Deviation	Std. Error Mean
HDRS Total Sesudah	Kontrol	22	17.68	2.338	.498
	Perlakuan	22	15.82	2.039	.435
HDRS Total Selisih (Post - Pre)	Kontrol	22	-4.77	1.541	.329
	Perlakuan	22	-6.95	1.214	.259
IL-6 Sesudah	Kontrol	22	1.36611365	.290093246	.061848088
	Perlakuan	22	1.21216677	.288042817	.061410935
IL6 Selisih	Kontrol	22	-159.99067908	38.817307620	8.275877792
	Perlakuan	22	-160.27463323	34.469966068	7.349021458

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
HDRS Total Sesudah	Equal variances assumed	.912	.345	2.818	42	.007	1.864	.661	.529	3.198
	Equal variances not assumed			2.818	41.236	.007	1.864	.661	.528	3.199
HDRS Total Selisih (Post - Pre)	Equal variances assumed	.863	.358	5.217	42	.000	2.182	.418	1.338	3.026
	Equal variances not assumed			5.217	39.820	.000	2.182	.418	1.336	3.027
IL-6 Sesudah	Equal variances assumed	.095	.760	1.766	42	.085	.153946873	.087157839	-.021944767	.329838513
	Equal variances not assumed			1.766	41.998	.085	.153946873	.087157839	-.021945030	.329838775
IL6 Selisih	Equal variances assumed	.627	.433	.026	42	.980	.283954145	11.067893640	22.051959497	22.619867788
	Equal variances not assumed			.026	41.421	.980	.283954145	11.067893640	22.061211890	22.629120180

Crosstabs

Kelompok = Kontrol

Case Processing Summary^a

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
HDRS Total Sebelum * HDRS Total Sesudah	22	100.0%	0	0.0%	22	100.0%

a. Kelompok = Kontrol

HDRS Total Sebelum * HDRS Total Sesudah Crosstabulation^a

			HDRS Total Sesudah		Total
			Depresi Ringan	Depresi Sedang	
HDRS Total Sebelum	Depresi Sedang	Count	6	12	18
		% within HDRS Total Sebelum	33.3%	66.7%	100.0%
		% within HDRS Total Sesudah	100.0%	75.0%	81.8%
		% of Total	27.3%	54.5%	81.8%
	Depresi Berat	Count	0	4	4
		% within HDRS Total Sebelum	0.0%	100.0%	100.0%
		% within HDRS Total Sesudah	0.0%	25.0%	18.2%
		% of Total	0.0%	18.2%	18.2%
Total		Count	6	16	22
		% within HDRS Total Sebelum	27.3%	72.7%	100.0%
		% within HDRS Total Sesudah	100.0%	100.0%	100.0%
		% of Total	27.3%	72.7%	100.0%

a. Kelompok = Kontrol

Chi-Square Tests^a

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.833 ^b	1	.176		
Continuity Correction ^c	.538	1	.463		
Likelihood Ratio	2.867	1	.090		
Fisher's Exact Test				.541	.249
Linear-by-Linear Association	1.750	1	.186		
N of Valid Cases	22				

a. Kelompok = Kontrol

b. 3 cells (75.0%) have expected count less than 5. The minimum expected count is 1.09.

c. Computed only for a 2x2 table

Kelompok = Perlakuan

Case Processing Summary^a

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
HDRS Total Sebelum * HDRS Total Sesudah	22	100.0%	0	0.0%	22	100.0%

a. Kelompok = Perlakuan

HDRS Total Sebelum * HDRS Total Sesudah Crosstabulation^a

			HDRS Total Sesudah		Total
			Depresi Ringan	Depresi Sedang	
HDRS Total Sebelum	Depresi Sedang	Count	15	2	17
		% within HDRS Total Sebelum	88.2%	11.8%	100.0%
		% within HDRS Total Sesudah	88.2%	40.0%	77.3%
		% of Total	68.2%	9.1%	77.3%
	Depresi Berat	Count	2	3	5
		% within HDRS Total Sebelum	40.0%	60.0%	100.0%
		% within HDRS Total Sesudah	11.8%	60.0%	22.7%
		% of Total	9.1%	13.6%	22.7%
	Total		Count	17	5
			% within HDRS Total Sebelum	77.3%	22.7%
			% within HDRS Total Sesudah	100.0%	100.0%
			% of Total	77.3%	22.7%

a. Kelompok = Perlakuan

Chi-Square Tests^a

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	5.119 ^b	1	.024	.055	.055
Continuity Correction ^c	2.740	1	.098		
Likelihood Ratio	4.537	1	.033		
Fisher's Exact Test					
Linear-by-Linear Association	4.886	1	.027		
N of Valid Cases	22				

a. Kelompok = Perlakuan

b. 3 cells (75.0%) have expected count less than 5. The minimum expected count is 1.14.

c. Computed only for a 2x2 table

Lampiran surat keterangan 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. Agus salim Bukhari, MMed, PhD, SpGK TELP. 081241850858, 0411 5780103, Fax : 0411-581431



REKOMENDASI PERSETUJUAN ETIK

Nomor : 205/UN4.6.4.5.31/ PP36/ 2025

Tanggal: 24 Maret 2025

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

No Protokol	UH25020143	No Sponsor	
Peneliti Utama	dr. Yudhistira Rizky Ridhallah	Sponsor	
Judul Peneliti	Pengaruh Pemberian Terapi Adjuvan Asam Folat dan Metilkobalamin terhadap Perbaikan Gejala Klinis dan Kadar Interleukin-6 Pasien Depresi yang Mendapat Fluoxetine		
No Versi Protokol	1	Tanggal Versi	26 Februari 2025
No Versi PSP	1	Tanggal Versi	26 Februari 2025
Tempat Penelitian	RSUP dr. Wahidin Sudirohusodo RS Jejaring Makassar		
Jenis Review	☐ Exempted ☒ Expedited ☐ Fullboard Tanggal	Masa Berlaku 24 Maret 2025 sampai 24 Maret 2026	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

