ABSTRAK

Tuberkulosis Paru ialah suatu infeksi kronik jaringan paru, yang disebabkan oleh bakteri *Mycobacterium Tuberculosis.* Salah satu pemeriksaan Laboratorium yang digunakan adalah pemeriksaan hematologi, diantaranya pemeriksaan jumlah leukosit dan Laju Endap Darah (LED). Tuberkulosis menyebabkan bertambahnya jumlah leukosit yang berkaitan dengan fungsinya sebagai pertahanan tubuh, sehingga pengendapan darah melaju lebih cepat karena bertambah jumlah sel leukosit. LED dibutuhkan karena data ini dapat dipakai sebagai indikator tingkat kestabilan biologi penderita sehingga dapat digunakan untuk menilai respon tubuh terhadap pengobatan. Tujuan dari penelitian ini adalah untuk mengetahui gambaran jumlah leukosit dan LED pada penderita tuberkulosis paru. Metode yang digunakan adalah otomatis dengan alat pemeriksaan leukosit, *Hematology Analizer Cell-Dyn Ruby*, dan alat pemeriksaan LED yaitu *Succeeder SD -1000 Automated ESR Analyzer*. Dari penelitian ini didapatkan hasil jumlah leukosit yaitu dengan leukositosis sebanyak 16 sampel (53.34 %), leukopenia sebanyak 1 sampel (3.33%) dan leukosit normal sebanyak 13 sampel (43.33 %). Pada penelitian LED pada pasien tuberkulosis paru didapatkan LED meningkat sebanyak 17 sampel (56,67%) dan LED normal sebanyak 13 sampel (43,33%). Sedangkan berdasarkan pengobatan pasien tuberkulosis paru, sampel dengan pengobatan $\leq$ 3 bulan sebanyak 21 sampel (70,00%), pengobatan $\geq$ 3 bulan sebanyak 8 sampel (26,67%), dan kasus lalai berobat sebanyak 1 sampel (3,33%).

Kata Kunci : Leukosit, Laju Endap Darah (LED), Tuberkulosis

ABSTRACT

Pulmonary tuberculosis is a chronic infection of lung tissue, caused by the bacterium Mycobacterium Tuberculosis. One of the laboratory tests used is hematological examination, including leukocyte count and Eryhrocyte Sedimentation Rate (ESR). Tuberculosis causes an increase in the number of leukocytes related to its function as a defense of the body, so that blood deposition accelerates due to the increase in the number of leukocyte cells. ESR are needed because this data can be used as an indicator of the patient's biological stability level so that it can be used to assess the body's response to treatment. The purpose of this study was to determine the picture of the number of leukocytes and ESR in patients with pulmonary tuberculosis. The method used is automatic with leukocyte examination tools, Hematology Analizer Cell-Dyn Ruby, and ESR examination tools, namely the Succeeder SD -1000 Automated ESR Analyzer. From this study, the results of the number of leukocytes were obtained with leukocytosis as many as 16 samples (53.34%), leukopenia as many as 1 sample (3.33%) and normal leukocytes as many as 13 samples (43.33%). In the ESR study in pulmonary tuberculosis patients, ESR increased by 17 samples (56.67%) and normal ESR by 13 samples (43.33%). Meanwhile, based on the treatment of pulmonary tuberculosis patients, samples with 3-month < treatment were 21 samples (70.00%), 3-month > treatment were 8 samples (26.67%), and cases of neglect to seek treatment as many as 1 sample (3.33%).

Key words : Leukocytes, Eryhrocyte Sedimentation Rate (ESR), Tuberculosis