

ABSTRAK

Latar belakang : *Miastenia gravis* merupakan penyakit autoimun pada neuromuscular junction (NMJ) yang paling sering ditemui. Insiden *miastenia gravis* di dunia mencapai 1,7-30 kasus per 1 juta orang per tahun, dan prevalensi *miastenia gravis* 7-179 kasus per 1 juta populasi. Insiden *miastenia gravis* di Indonesia diperkirakan 1 kasus dari 100.000.11. Penilaian severitas *Miastenia gravis* dapat menggunakan beberapa pemeriksaan seperti Myasthenia Gravis Foundation of America Class (MGFA), Quantitative Myasthenia Gravis Score (QMGS) dan *Myasthenia Gravis- Manual Muscle Testing* (MG-MMT)

Metode : Penelitian ini menggunakan metode studi kasus

Hasil : Pengkajian terhadap Tn. A terhadap diagnosa gangguan ventilasi spontan pasien tampak menggunakan otot bantu napas, RR: 24x/m, SPO2 : 99%, dengan bunyi nafas gurgling, diagnosa gangguan mobilitas fisik. Pasien tidak merasa respon nyeri, pasien tampak banyak bisa menggerakkan tangannya, tekanan darah pasien sebelum dilakukan mobilisasi 119/80 dan setelah dilakukan tekanan darahnya 122/81. Diagnosa resiko perdarahan pasien tampak tidak ada pendarahan, hemoglobin : 13.0 mg/L, tekanan darah 119/80 mmhg.

Kesimpulan/rekomendasi : *miastenia gravis*, etiologi, manifestasi klinis, patofisiologi, komplikasi, pemeriksaan penunjang, penatalaksanaan, pengkajian, diagnosa, intervensi, implementasi, evaluasi.

Kata Kunci : *Miastenia Gravis*, Diagnosa, Mobilitas

ABSTRACT

Background : Myasthenia gravis is the most common autoimmune disease of the neuromuscular junction (NMJ). The incidence of myasthenia gravis in the world reaches 1.7-30 cases per 1 million people per year, and the prevalence of myasthenia gravis is 7-179 cases per 1 million population. The incidence of myasthenia gravis in Indonesia is estimated at 1 case out of 100,000.¹¹. Assessment of the severity of myasthenia gravis can use several tests such as the Myasthenia Gravis Foundation of America Class (MGFA), Quantitative Myasthenia Gravis Score (QMGS) and Myasthenia Gravis-Manual Muscle Testing (MG-MMT).

Methods: This study uses a case study method

Results: Assessment of Mr. A for the diagnosis of spontaneous ventilation disorders, the patient appears to use accessory muscles for breathing, RR: 24x/m, SPO₂: 99%, with gurgling breath sounds, a diagnosis of impaired physical mobility. The patient did not feel a response to pain, the patient seemed able to move his hands a lot, the patient's blood pressure before mobilization was 119/80 and after the blood pressure was 122/81. Diagnostics of the patient's bleeding risk showed no bleeding, hemoglobin: 13.0 mg/L, blood pressure 119/80 mmHg.

Conclusions/recommendations: myasthenia gravis, etiology, clinical manifestations, pathophysiology, complications, investigations, management, assessment, diagnosis, intervention, implementation, evaluation.

Keywords: Myasthenia Gravis, Diagnosis, Mobility