

ABSTRAK

Latar Belakang. Gastritis adalah satu diantara masalah pencernaan yang banyak di derita oleh masyarakat. Gastritis atau lebih dikenal dengan sebutan “maag” merupakan inflamasi pada daerah lambung tepatnya di mukosa, dengan gejala klinik mual, muntah, nyeri, pendarahan, fatigue, dan nafsu makan berkurang. Gastroprotektif merupakan kemampuan faktor endogen (bawaan) suatu senyawa dalam melindungi mukosa lambung dari penyakit ulkus peptic. Rimpang temu putih diketahui mengandung senyawa kimia seperti flavonoid, terpenoid, tannin dan saponin. Senyawa tersebut diduga mampu memberikan aktivitas gastroprotektif terhadap lambung.

Metode. Metode yang digunakan pada penelitian ini bersifat ekperimental menggunakan Rancangan Acak Lengkap (RAL) dengan pendekatan Posttest Control Group Design dengan 6 kelompok perlakuan yaitu Kontrol negatif (Na-CMC 0,5%), kontrol positif (Omeprazole 20 mg/kgBB), dosis infusa rimpang temu putih 5%, 10%, dan 20%. Pengujian efek gastroprotektif secara makroskopis dilakukan dengan menentukan indeks tukak yang diperoleh berdasarkan skor jumlah tukak dan pendarahan tukak. Hasil yang diperoleh dianalisis menggunakan metode One Way Anova kemudian uji lanjut Duncan.

Hasil. Berdasarkan hasil One Way Anova menunjukkan adanya perbedaan bermakna pada setiap kelompok ($p < 0,05$). Dari hasil uji lanjutan Duncan menunjukkan semakin tinggi dosis ekstrak rimpang temu putih maka semakin baik pula efek gastroprotektif yang diberikan.

Kesimpulan. Ekstrak rimpang temu putih memiliki aktivitas gastroprotektif dengan dosis terbaik yaitu pada dosis infusa rimpang temu putih 20%.

Kata Kunci. Gastroprotektif, *Curcuma zedoaria*, tukak lambung, proteksi.

ABSTRACT

Background. Gastritis is one of the digestive problems commonly suffered by the community. Gastritis, or more commonly known as "stomach ulcer" or "heartburn," is an inflammation in the stomach lining, specifically in the mucosa, with clinical symptoms such as nausea, vomiting, pain, bleeding, fatigue, and reduced appetite. Gastroprotective refers to the inherent ability of a compound to protect the gastric mucosa from peptic ulcer disease. White turmeric rhizome is known to contain chemical compounds such as flavonoids, terpenoids, tannins, and saponins. These compounds are believed to provide gastroprotective activity against the stomach.

Method. The method used in this research is experimental, employing a Completely Randomized Design (CRD) approach with a Posttest Control Group Design consisting of 6 treatment groups, namely Negative Control (0.5% Na-CMC), Positive Control (20 mg/kgBW Omeprazole), and three doses of white turmeric rhizome infusion, i.e., 5%, 10%, and 20%. Macroscopic examination of the gastroprotective effect was carried out by determining the ulcer index based on the score of the number of ulcers and ulcer bleeding. The results obtained were analyzed using One-Way ANOVA followed by Duncan's post hoc test.

Result. Based on the One-Way ANOVA results, there was a significant difference in each group ($p < 0.05$). From the Duncan's post hoc test, it was observed that the higher the dose of white turmeric rhizome extract, the better the gastroprotective effect it provided.

Conclusion. White turmeric rhizome extract exhibited gastroprotective activity, with the most effective dose being at a 20% infusion of white turmeric rhizome.

Keywords: Gastroprotective, *Curcuma zedoaria*, Peptic Ulcer, Protection