

**SKRIPSI**

**PENGARUH FAKTOR PERTUMBUHAN PLATELET  
TERHADAP KADAR ALPHA-SMA PADA TIKUS  
PUTIH MODEL OSTEOARTHRITIS**



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**PROGRAM STUDI PENDIDIKAN DOKTER  
FAKULTAS KEDOKTERAN  
UNIVERSITAS SRIWIJAYA  
2023**

# **SKRIPSI**

## **PENGARUH FAKTOR PERTUMBUHAN PLATELET TERHADAP KADAR ALPHA-SMA PADA TIKUS PUTIH MODEL OSTEOARTHRITIS**

Diajukan untuk memenuhi salah satu syarat memperoleh gelar

Sarjana Kedokteran (S. Ked)



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2023**

**HALAMAN PENGESAHAN**

**PENGARUH *ACTIVATED GROWTH FACTOR* (AGF)  
DARI PLATELET TERHADAP KADAR  
ALPHA-SMA PADA TIKUS PUTIH  
MODEL OSTEOARTHRITIS**

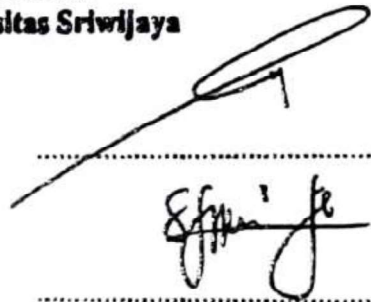
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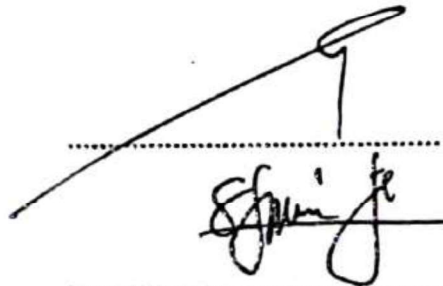
## HALAMAN PERSETUJUAN

Karya Tulis Ilmiah berupa Laporan Akhir Skripsi ini dengan Judul "Pengaruh *Activated Growth Factor* (AGF) dari Platelet Terhadap Kadar Alpha-SMA pada Tikus Putih Model Osteoarthritis" telah dipertahankan di hadapan Tim Penguji Karya Tulis Ilmiah Program Studi Pendidikan Dokter Fakultas Kedokteran Universitas Sriwijaya pada 11 Desember 2022

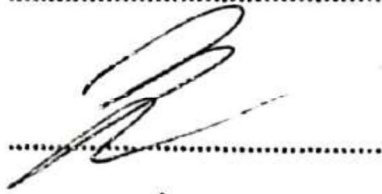
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Menyatakan bahwa Skripsi saya merupakan hasil karya sendiri didampingi tim pembimbing dan bukan hasil penjiplakan/plagiat. Apabila ditemukan unsur penjiplakan/plagiat dalam Skripsi ini, maka saya bersedia menerima sanksi akademik dari Universitas Sriwijaya sesuai aturan yang berlaku.

Demikian, pernyataan ini saya buat dalam keadaan sadar dan tanpa ada paksaan dari siapapun.



Palembang, 11 Desember 2023



Sarah

**ABSTRAK**

**PENGARUH FAKTOR PERTUMBUHAN PLATELET  
TERHADAP KADAR ALPHA-SMA PADA TIKUS  
PUTIH MODEL OSTEOARTHRITIS**

(Sarah, Desember 2023)

Fakultas Kedokteran Universitas Sriwijaya

**Latar Belakang:** Osteoarthritis (OA) adalah gangguan sendi yang paling umum dan merupakan penyebab utama disabilitas dengan dampak sosial ekonomi yang besar dan terjadi akibat ketidakseimbangan mediator proinflamasi dan antiinflamasi atau aktivitas anabolik dan katabolik. Penelitian ini bertujuan untuk mengetahui pengaruh Faktor Pertumbuhan Platelet (FPP) terhadap kadar Alpha-SMA.

**Metode:** Penelitian ini merupakan studi eksperimental *in vivo post-test only control group* di *Eureka Research Laboratory*. Tiga puluh ekor tikus putih wistar Jantan dibagi ke dalam lima kelompok perlakuan berupa kelompok kontrol normal, kelompok kontrol negatif, kelompok FPP I (TGF- $\beta$  100 pg/mL), kelompok FPP II (TGF- $\beta$  1000 pg/mL), dan kelompok FPP III (TGF- $\beta$  10000 pg/mL). FPP didapatkan dari darah intravena tikus dan disentrifugasi dengan kecepatan yang sudah ditentukan. Aktivasi GF dilakukan dengan menambahkan 10% CaCl<sub>2</sub> lalu diukur kadarnya. Pada seluruh kelompok tikus dilakukan aklimatisasi selama 7 hari dan setelahnya dilakukan induksi osteoarthritis dengan injeksi monoiodoasetat (MIA) intraartikular 4,8 mg/60 $\mu$ L pada seluruh kelompok tikus kecuali pada kelompok kontrol normal. Selanjutnya, tikus diberikan perlakuan sesuai kelompok selama 21 hari. Pada hari ke-21, dilakukan euthanasia pada tikus dan kadar Alpha-SMA pada tikus dengan menggunakan ELISA kit metode *sandwich*.

**Hasil:** Secara berurutan, rerata kadar Alpha-SMA tiap kelompok dalam pg/mL adalah: 91,495  $\pm$  2,36; 10,682  $\pm$  1,09; 30,502  $\pm$  2,00; 52,892  $\pm$  1,29; dan 76,180  $\pm$  2,65. Pada kelompok FPP, terjadi peningkatan Alpha-SMA yang berbanding lurus dengan dosis TGF- $\beta$  yang diinjeksikan.

**Kesimpulan:** FPP berpengaruh dalam meningkatkan kadar Alpha-SMA sendi tikus putih model osteoarthritis.

**Kata Kunci:** *Faktor Pertumbuhan Platelet, Osteoarthritis, Alpha-SMA, TGF- $\beta$ .*

**ABSTRACT**  
**THE EFFECT OF ACTIVATED GROWTH FACTOR (AGF)**  
**FROM PLATELETS ON ALPHA-SMA LEVELS IN**  
**OSTEOARTHRITIS-INDUCED**  
**OSTEOARTHRITIS**  
**ALBINO RAT**

(Sarah, December 2023)  
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**Background:** Osteoarthritis (OA) is the most common joint disorder and a major cause of disability, resulting in a significant socio-economic impact. It occurs due to an imbalance of pro-inflammatory and anti-inflammatory mediators, influencing anabolic and catabolic activities. This study aims to determine the effect of activated growth factor (AGF) on Alpha-SMA levels.

**Method:** This research is an in vivo post-test-only control group experimental study conducted at the Eureka Research Laboratory. Thirty male Wistar white rats were divided into five treatment groups: normal control group, negative control group, AGF I group (TGF- $\beta$  100 pg/mL), AGF II group (TGF- $\beta$  1000 pg/mL), and AGF III group (TGF- $\beta$  10,000 pg/mL). Growth factor activation was performed by adding 10% CaCl<sub>2</sub>, and then TGF- $\beta$  levels were measured. All groups of mice were acclimatized for 7 days. After that, osteoarthritis was induced with intra-articular injection of monoiodoacetate (MIA) 4.8 mg/60 $\mu$ L in all groups of mice except the normal control group. Next, mice were given treatment according to the group for 21 days. On the 21st day, mice were euthanized, and Alpha-SMA levels were measured using the sandwich method ELISA kit.

**Results:** Sequentially, the mean Alpha-SMA levels for each group in pg/mL were:  $91.495 \pm 2.36$ ;  $10.682 \pm 1.09$ ;  $30.502 \pm 2.00$ ;  $52.892 \pm 1.29$ ; and  $76.180 \pm 2.65$ . In the AGF group, there was an increase in Alpha-SMA levels directly proportional to the dose of TGF- $\beta$  injected.

**Conclusion:** AGF has an effect on increasing Alpha-SMA levels in the joints of white mice with a model of osteoarthritis.

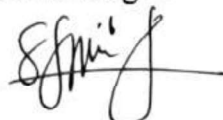
**Keywords:** *Activated Growth Factor, Osteoarthritis, Alpha-SMA, TGF- $\beta$ .*

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## RINGKASAN

### PENGARUH FAKTOR PERTUMBUHAN PLATELET TERHADAP KADAR ALPHA-SMA PADA TIKUS PUTIH MODEL OSTEOARTHRITIS

Karya tulis ilmiah berupa Skripsi, 11 Desember 2023

Sarah; Dibimbing oleh dr. Rachmat Hidayat, M.Sc. dan Septi Purnamasari, S.ST, M.Bmd

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xix + 109 halaman, 14 tabel, 24 gambar, 6 lampiran.

Osteoarthritis (OA) adalah gangguan sendi yang paling umum dan merupakan penyebab utama disabilitas dengan dampak sosial ekonomi yang besar dan terjadi akibat ketidakseimbangan mediator proinflamasi dan antiinflamasi atau aktivitas anabolik dan katabolik. Penelitian ini bertujuan untuk mengetahui pengaruh Faktor Pertumbuhan Platelet terhadap kadar Alpha-SMA.

Penelitian ini merupakan studi eksperimental *in vivo post-test only control group* di *Eureka Research Laboratory*. Tiga puluh ekor tikus putih wistar Jantan dibagi ke dalam lima kelompok perlakuan berupa kelompok kontrol normal, kelompok kontrol negatif, kelompok Faktor Pertumbuhan Platelet (FPP) I (TGF- $\beta$  100 pg/mL), kelompok FPP II (TGF- $\beta$  1000 pg/mL), dan kelompok FPP III (TGF- $\beta$  10000 pg/mL). FPP didapatkan dari darah intravena tikus dan disentrifugasi dengan kecepatan yang sudah ditentukan. Aktivasi GF dilakukan dengan menambahkan 10% CaCl<sub>2</sub> lalu kadar TGF- $\beta$  dihitung dalam satuan pg/mL. Sebelum perlakuan, dilakukan aklimatisasi pada seluruh kelompok tikus selama 7 hari dan setelahnya dilakukan induksi osteoarthritis dengan injeksi monoiodoasetat (MIA) intraartikular 4,8 mg/60 $\mu$ L pada seluruh kelompok tikus kecuali pada kelompok kontrol normal. Selanjutnya, tikus diberikan perlakuan sesuai kelompok perlakuan selama 21 hari. Pada hari ke-21, dilakukan euthanasia pada tikus dan kadar Alpha-SMA pada tikus diukur dengan menggunakan ELISA kit metode *sandwich*.

Pada penelitian ini, didapatkan hasil rerata kadar Alpha-SMA tiap kelompok dalam pg/mL adalah: 91,495  $\pm$  2,36 untuk kelompok normal; 10,682  $\pm$  1,09 untuk kelompok negatif; 30,502  $\pm$  2,00 untuk kelompok FPP I (konsentrasi TGF- $\beta$  100 pg/mL); 52,892  $\pm$  1,29 untuk kelompok FPP II (konsentrasi TGF- $\beta$  1000 pg/mL); dan 76,180  $\pm$  2,65 untuk kelompok FPP III (konsentrasi TGF- $\beta$  10000 pg/mL).

**Kata Kunci:** *Faktor Pertumbuhan Platelet, Osteoarthritis, Alpha-SMA, TGF- $\beta$ .*



## SUMMARY

### THE EFFECT OF ACTIVATED GROWTH FACTOR (AGF) FROM PLATELETS ON ALPHA-SMA LEVELS IN OSTEOARTHRITIS-INDUCED OSTEOARTHRITIS ALBINO RAT

Scientific Paper in the form of Skripsi, December 11, 2023

Sarah; Supervised by dr. Rachmat Hidayat, M.Sc. and Septi Purnamasari, S.ST, M.Bmd

Medical Science Department, Faculty of Medicine, Sriwijaya University  
xix+ 109 pages, 14 tables, 24 pictures, 6 attachments

Osteoarthritis (OA), the prevailing joint pathology, stands as a prominent contributor to disability, wielding substantial socio-economic ramifications. This condition arises from an intricate dysregulation of pro-inflammatory and anti-inflammatory mediators, ultimately impacting anabolic and catabolic processes. This study seeks to discern the modulatory influence of activated growth factor (AGF) on Alpha-SMA levels, thereby advancing our comprehension of the molecular intricacies underlying osteoarthritic pathogenesis.

This investigation adopts an *in vivo* post-test-only control group experimental design, conducted at the Eureka Research Laboratory. Thirty male Wistar white rats are categorized into five distinct treatment cohorts: the normal control group, negative control group, AGF I group (TGF- $\beta$  100 pg/mL), AGF II group (TGF- $\beta$  1000 pg/mL), and AGF III group (TGF- $\beta$  10,000 pg/mL). AGF is procured from rat blood via intravenous extraction and subsequent centrifugation at a predetermined velocity. Growth factor activation ensues with the introduction of 10% CaCl<sub>2</sub>, culminating in the quantification of TGF- $\beta$  levels. Following a 7-day acclimatization period, osteoarthritis is induced via intra-articular injection of monoiodoacetate (MIA) at 4.8 mg/60 $\mu$ L across all experimental groups, excluding the normal control group. Subsequently, a 21-day treatment regimen tailored to each group is implemented. After the 21st day, mice are ethically euthanized, and Alpha-SMA levels are meticulously assayed utilizing the sandwich method ELISA kit.

Sequentially, the mean Alpha-SMA levels across the experimental cohorts in pg/mL are discerned as follows:  $91.495 \pm 2.36$ ;  $10.682 \pm 1.09$ ;  $30.502 \pm 2.00$ ;  $52.892 \pm 1.29$ ; and  $76.180 \pm 2.65$ . Within the AGF group, a discernible elevation in Alpha-SMA levels is observed, exhibiting a direct proportionality to the administered dose of TGF- $\beta$ .

The results highlight that AGF has a noticeable effect on increasing Alpha-SMA levels in the joints of white mice. This gives us a better understanding of its potential as a therapy for osteoarthritis.

**Keywords:** *Activated Growth Factor, Osteoarthritis, Alpha-SMA, TGF- $\beta$ .*

## KATA PENGANTAR

Puji syukur penulis panjatkan kehadiran Allah SWT atas berkah, rahmat, dan karunia-Nya sehingga saya dapat menyelesaikan proposal skripsi yang berjudul **“Pengaruh Faktor Pertumbuhan Platelet Terhadap Kadar Alpha-SMA pada Tikus Putih Model Osteoarthritis.”** Karya tulis ini dibuat sebagai salah satu syarat untuk memperoleh gelar sarjana kedokteran (S.Ked) pada Program Studi Pendidikan Dokter Umum, Fakultas Kedokteran Universitas Sriwijaya. Dalam pengerjaan proposal skripsi ini tak jauh dari bimbingan, dukungan, motivasi serta segala bentuk bantuan lain yang ditujukan kepada saya. Dengan itu, saya mengucapkan terima kasih yang mendalam dan sebesar-besarnya kepada:

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## DAFTAR ISI

HALAMAN PENGESAHAN.....	iii
HALAMAN PERSETUJUAN.....	iv
HALAMAN PERNYATAAN INTEGRITAS .....	v
ABSTRAK .....	vi
ABSTRACT.....	vii
RINGKASAN .....	viii
SUMMARY .....	ix
KATA PENGANTAR.....	x
DAFTAR ISI .....	xi
DAFTAR TABEL.....	xiv
DAFTAR GAMBAR .....	xv
DAFTAR LAMPIRAN .....	xvi
DAFTAR SINGKATAN .....	xvii
BAB 1 .....	1
1.1 Latar Belakang .....	1
1.2 Rumusan Masalah .....	4
1.3 Tujuan Penelitian.....	4
1.3.1 Tujuan Umum .....	4
1.3.2 Tujuan Khusus.....	4
1.4 Hipotesis.....	4
1.5 Manfaat Penelitian.....	4
1.5.1 Manfaat Teoritis .....	4
1.5.2 Manfaat Praktis .....	5
1.5.3 Manfaat Masyarakat.....	5
BAB 2 .....	6
2.1 Osteoarthritis .....	6
2.1.1 Definisi.....	6
2.1.2 Prevalensi dan Faktor Risiko .....	6
2.1.3 Diagnosis dan Manifestasi Klinis.....	8
2.1.4 Klasifikasi .....	10

2.1.5	Patofisiologi .....	12
2.1.6	Tatalaksana .....	14
2.2	Aspek Biomolekuler Terhadap Osteoarthritis [Interleukin 1 $\beta$ (IL-1 $\beta$ ), <i>Tumor Necrosis Factor</i> -Alpha (TNF- $\alpha$ ), dan Alpha-SMA ( $\alpha$ -SMA)] .....	16
2.2.1	Pensinyalan Sitokin dan Kemokin pada Osteoarthritis .....	16
2.2.2	Struktur dan Fungsi Alpha-SMA .....	24
2.3	Platelet dan <i>Growth-Factor</i> dari Platelet .....	26
2.3.1	Platelet .....	26
2.3.2	Fungsi Platelet .....	29
2.3.3	<i>Faktor pertumbuhan platelet</i> dan Osteoarthritis .....	30
2.3.4	<i>Growth-Factor</i> pada Platelet .....	32
2.3.5	Peran <i>Growth-Factor</i> dari Platelet pada Osteoarthritis .....	33
2.4	Tikus Eksperimen .....	41
2.4.1	Morfoanatomi Tikus Eksperimen .....	42
2.4.2	Klasifikasi Model OA .....	46
2.4.3	Perilaku Tikus Eksperimen pada Penelitian .....	52
2.4.4	Parameter Hematologi dan Biokimia Tikus Eksperimen .....	53
2.5	Metode ELISA ( <i>Enzyme-Linked Immunosorbent Assay</i> ) .....	55
2.5.1	Jenis ELISA .....	56
2.5.2	Prosedur ELISA .....	58
2.6	Kerangka Teori <sup>10,28,103,136,137,138,139,140,141,142</sup> .....	60
2.7	Kerangka Konsep .....	61
BAB 3	.....	62
3.1	Jenis Penelitian .....	62
3.2	Waktu dan Tempat Penelitian .....	62
3.3	Populasi dan Sampel Penelitian .....	62
3.3.1	Subjek Penelitian .....	62
3.3.2	Kriteria Inklusi dan Eksklusi .....	63
3.4	Variabel Penelitian .....	64
3.4.1	Variabel Kontrol (Universal) .....	64
3.4.2	Variabel Bebas (Independen) .....	64
3.4.3	Variabel Terikat (Dependen) .....	64

3.5	Definisi Operasional.....	65
3.6	Cara Pengumpulan Data.....	66
3.6.1	Alat dan Bahan.....	66
3.6.2	Persiapan dan Aklimatisasi Hewan Uji.....	66
3.6.3	Preparasi Faktor Pertumbuhan dari Platelet.....	66
3.6.4	Induksi Osteoarthritis pada Hewan Uji.....	67
3.6.5	Pengumpulan Data.....	67
3.6.6	Pengukuran Alpha-SMA dengan ELISA Kit.....	68
3.7	Teknik Pengolahan dan Analisis Data.....	69
3.8	Alur Penelitian.....	71
BAB 4	.....	72
4.1	Hasil.....	72
4.1.1	Hasil Uji Normalitas dan Homogenitas Rerata Kadar Alpha-SMA	72
4.1.2	Hasil Uji Kesesuaian Konsentrasi <i>Faktor Pertumbuhan Platelet</i> (FPP)	72
4.2	Pembahasan.....	73
4.2.1	Pengaruh Mono-Iodoacetate terhadap Terjadinya Osteoarthritis....	74
4.2.2	Pengaruh Injeksi TGF- $\beta$ ( <i>Transforming Growth Factor-Beta</i> ) terhadap Perbaikan Osteoarthritis.....	78
4.2.3	Keterbatasan Penelitian.....	84
BAB 5	.....	85
5.1	Kesimpulan.....	85
5.2	Saran.....	85
DAFTAR PUSTAKA	.....	87
LAMPIRAN	.....	101
RIWAYAT HIDUP	.....	109

## DAFTAR TABEL

2.1	Diagnosis OA Lutut .....	9
2.2	Klasifikasi OA.....	11
2.3	Rekomendasi Tatalaksana Farmakologis untuk Osteoarthritis Tangan, Lutut, dan Panggul.....	15
2.4	Granula Platelet dan Kontennya.....	27
2.5	Faktor yang Dilepaskan $\alpha$ -Granul .....	28
2.6	GF pada Platelet dan Aplikasinya dalam Regenerasi Muskuloskeletal .....	32
2.7	Taksonomi <i>Rattus norvegicus</i> .....	42
2.8	Parameter Hematologi dan Biokimia Tikus Galur Wistar menurut Chawla et. al. ....	53
2.9	Parameter Hematologi dan Faktor Koagulan Tikus Putih Galur Wistar Jantan Usia 8-16 Minggu Menurut Giknis & Clifford .....	54
2.10	Parameter Hematologi Normal Tikus Putih Galur Wistar Jantan menurut Vigneshwar et. al., 2021 .....	54
3.1	Definisi Operasional.....	65
3.2	Tabel Pengelompokkan Sampel .....	68
4.1	Nilai Kadar serta Hasil Uji Normalitas dan Homogenitas Rerata Kadar $\alpha$ -SMA dalam Sendi Hewan Uji.....	72
4.2	Uji Kesesuaian Faktor Pertumbuhan Platelets terhadap Kadar $\alpha$ -SMA dalam Sendi.....	73

## DAFTAR GAMBAR

2.1 Radiografi Lutut Representatif dari Klasifikasi KL.....	12
2.2 Jalur Pensinyalan dan Perubahan Struktural dalam Perkembangan Osteoarthritis .....	13
2.3 Representasi Skematis Proses Inflamasi pada Patogenesis Osteoarthritis.....	16
2.4 Pensinyalan IL-1 $\beta$ pada Osteoarthritis .....	17
2.5 Keterlibatan Sinovium dalam Patofisiologi OA .....	21
2.6 Model ECM yang Relevan dengan Miofibroblas .....	22
2.7 FGFR1 Memicu Upregulasi Aggrekanase dan MMPs.....	35
2.8 IGF-1 atau Homodimer PDGFB Menghambat I $\kappa$ B Kinase $\alpha$ (IKK $\alpha$ ).....	37
2.9 Peran Hepatocyte Growth Factor Sebagai Anti-inflammatory .....	41
2.10 Terminologi Spesifik pada Tikus.....	43
2.11 Sistem Skeletal pada Tikus Eksperimen.....	44
2.12 Fotografi Lutut Tikus .....	45
2.13 Jarak Anogenital pada Tikus Jantan (kiri) dan Betina (kanan) .....	46
2.14 Klasifikasi Model Osteoarthritis Berdasarkan Etiologi pada Manusia .....	47
2.15 Jenis ELISA berdasarkan Pengikatan Antigen.....	56
2.16 Kerangka Teori.....	60
4.1 Pengukuran Diameter Sendi Tikus dengan Menggunakan Jangka Sorong.....	74
4.2 Glikolisis .....	75
4.3 Representasi skema jalur pensinyalan utama yang diaktifkan oleh sitokin proinflamasi (IL-1 $\beta$ , TNF $\alpha$ dan IL-6) dalam kondrosit .....	77
4.4 Mediator Inflamasi pada Osteoarthritis.....	78
4.5 Diferensiasi miofibroblas oleh ekspresi $\alpha$ -SMA meningkatkan produksi ECM (extracellular matrix).....	80
4.6 Jalur Kanonik Pensinyalan TGF- $\beta$ menyebabkan fosforilasi SMAD2/3 .....	81
4.7 Kanonikal dan non-kanonikal <i>TGF<math>\beta</math>- signalling pathway</i> .....	82
4.8 Interaksi kompleks jalur pensinyalan TGF- $\beta$ yang mengatur ekspresi TIMP-3 pada fibroblas manusia.....	84

## DAFTAR LAMPIRAN

1. Sertifikat Etik .....	101
2. Pertambahan Diameter Pembengkakan Sendi Tikus setelah Injeksi MIA.....	102
3. Hasil Pengukuran Kadar TGF- $\beta$ dari tiap sampel sebelum injeksi FPP intraartikular.....	102
4. Konsentrasi Akhir $\alpha$ -SMA Setelah Perlakuan.....	104
5. Analisis Data SPSS .....	105
6. Dokumentasi Penelitian .....	106



## DAFTAR SINGKATAN

ACLT	: <i>Anterior Cruciate Ligament Transection</i>
ADAMTs	: <i>A Disintegrin and Metalloproteinase with Thrombospondin Motifs</i>
ADSC	: <i>Adipose Derived Stem Cells</i>
BMI	: <i>Body Mass Index</i>
BMSC	: <i>Bone Marrow Stem Cell</i>
Col	: <i>Collagen</i>
COX	: <i>Siklooksigenase</i>
DMM	: <i>Destabilization of The Medial Meniscus</i>
DNA	: <i>Deoxyribonucleic Acid</i>
ECM	: <i>Extracellular Matrix</i>
EGF	: <i>Epidermal Growth Factor</i>
ELISA	: <i>Enzyme-linked Immunosorbent Assay</i>
EMT	: <i>Epithel to Mesenchymal Transition</i>
ERK	: <i>Extracellular Signal-Regulated Kinase</i>
FADD	: <i>Fas-associated death domain protein</i>
FGF	: <i>Fibroblast Growth Factor</i>
GF	: <i>Growth Factor</i>
HGF	: <i>Hepatocyte Growth Factor</i>
HIF-1	: <i>Hypoxia-inducible factor-1</i>
IFN	: <i>Interferon</i>
IGF-1	: <i>Insulin-like Growth Factor-1</i>
IKK $\alpha$	: <i>I<math>\kappa</math>B Kinase <math>\alpha</math></i>
IL	: <i>Interleukin</i>
IKB $\alpha$	: <i>Kappa-light Polypeptide Gene Enhancer in B-cells Inhibitor Alpha</i>
JNK	: <i>c-Jun N-Terminal Kinase</i>

KL	: Kellgren-Lawrence
KOGS	: <i>Knee Osteoarthritis Grading System</i>
LED	: Laju Endap Darah
MAPK	: <i>Mitogen-Activated Protein Kinase</i>
MIA	: Monoiodoacetate
MMP	: <i>Matrix Metalloproteinase</i>
MSC	: <i>Mesenchymal Stem Cell</i>
NF- $\kappa$ B	: <i>Nuclear Factor Kappa-B</i>
NO	: Nitrat Oksida
NSAID	: <i>Nonsteroidal Anti-inflammatory Drugs</i>
OA	: Osteoarthritis
OD	: <i>Optical Density</i>
PDGF	: <i>Platelet-derived Growth Factor</i>
PGE2	: <i>Prostaglandin E2</i>
PI3K/AKT	: Fosfatidylinositol-3-kinase
POA	: Osteoarthritis Primer
PRP	: <i>Platelet-rich Plasma</i>
PTOA	: <i>Post-traumatic OA</i>
RANKL	: <i>Receptor activator of nuclear factor kappa-B ligand</i>
RANTES	: <i>Regulated Upon Activation, Normal T Cell Expressed and Presumably Secreted</i>
RF	: <i>Rheumatoid Factor</i>
RIP-1	: <i>Receptor Interacting Protein-1</i>
SBP	: <i>Subchondral Bone Plate</i>
SZ	: <i>Superficial Zone</i>
TGF	: <i>Transforming Growth Factor</i>
TGFBR	: <i>Transforming Growth Factor Beta Receptor</i>
TIMP	: <i>Tissue Inhibitor of Metalloproteinase</i>

TNF-  $\alpha$  : *Tumor Necrosis Factor-Alpha*  
TNRF : *Tumor Necrosis Factor Receptor*  
TRADD : *TNFR-1 associated death domain protein*  
TRAF-2 : *TNF receptor-associated factor-2*  
VEGF : *Vascular Endothelial Growth Factor*  
 $\alpha$ -SMA : *Alpha-Smooth Muscle Actin*

# BAB 1

## PENDAHULUAN

### 1.1 Latar Belakang

Osteoarthritis (OA) adalah gangguan sendi yang paling umum dan merupakan penyebab utama disabilitas dengan dampak sosial ekonomi yang besar.<sup>1,2,3</sup> Osteoarthritis merupakan penyakit endemik di seluruh dunia dan diperkirakan 300 juta orang di seluruh dunia hidup dengan mengalami OA.<sup>2</sup> OA berdampak pada lebih dari setengah populasi di atas 65 tahun, dengan tingkat kecacatan yang lebih tinggi pada wanita daripada pria. Di Indonesia, osteoarthritis terjadi pada 65% penduduk usia 61 tahun dengan prevalensi osteoarthritis lutut yang cukup tinggi yaitu 15,5% pada pria dan 12,7% pada wanita dari total penduduk Indonesia yang berjumlah 255 juta jiwa.<sup>4,5,6</sup> Osteoarthritis menyebabkan rasa nyeri, kehilangan fungsi, dan penurunan kualitas hidup (*Quality of Life/QoL*). Pada skala masyarakat, OA diperkirakan memakan biaya \$303 miliar dolar per tahun untuk biaya medis.<sup>2</sup>

Kejadian osteoarthritis meningkat pada populasi tua, obesitas, pola makan yang tidak sehat, aktivitas fisik yang tidak aktif, mikrotrauma, dan stres kronis. Pada OA, terjadi kerusakan kartilago artikular sendi dan peradangan karena kelebihan beban kronis dan gangguan biomekanik pada sendi yang selanjutnya menyebabkan kekakuan, pembengkakan, dan kehilangan mobilitas pada sendi karena itu OA menjadi perhatian besar.<sup>6,7,8,9</sup> Patogenesis OA sangat ditentukan oleh ketidakseimbangan mediator proinflamasi dan antiinflamasi atau aktivitas anabolik dan katabolik. Peningkatan faktor katabolik dipertahankan oleh sejumlah sitokin proinflamasi hingga terjadi degradasi tulang rawan, remodeling tulang, proliferasi synovial, dan pembentukan osteofit yang mengarah ke gejala umum dan tanda klinis OA.<sup>3,10,11</sup>

Sampai saat ini, belum ada perawatan medis yang mampu mengurangi degradasi tulang rawan, peradangan, dan perkembangan penyakit pada OA. Semua perawatan osteoarthritis saat ini bersifat paliatif.<sup>12,13</sup> Obat yang digunakan dalam

penanganan OA saat ini adalah obat anti-inflamasi nonsteroid (OAINS) yang memiliki efikasi yang sedikit lebih baik dibandingkan dengan parasetamol. Namun, OAINS menimbulkan risiko mortalitas dan morbiditas yang lebih tinggi akibat perforasi saluran pencernaan dan ulserasi, termasuk insufisiensi ginjal, gagal jantung koroner kongestif, hipertensi, infark miokard, stroke, dan asma yang diinduksi aspirin.<sup>14</sup> Perlu dilakukan eksplorasi mengenai tatalaksana OA yang lebih aman dan mampu mengurangi degradasi tulang rawan misalnya dengan memanfaatkan *growth-factor* yang merupakan salah satu komponen platelet.

Platelet adalah fragmen sitoplasma megakariosit berdiameter sekitar 2  $\mu\text{m}$  dan mengandung lebih dari 30 protein bioaktif yang memiliki peran mendasar dalam hemostasis atau penyembuhan jaringan.<sup>15</sup> Platelet mengandung tiga jenis granula utama yang melepaskan isinya begitu platelet diaktifkan. Setiap granul mengandung molekul berbeda yang terlibat dalam aktivasi trombosit, modulasi proses inflamasi, dan imunitas.<sup>16</sup> *Growth-factor* (GF) dan protein dikeluarkan oleh  $\alpha$ -granul dari platelet dan penting untuk kaskade koagulasi yang setelah aktivasi, dapat membantu regenerasi jaringan.<sup>17</sup>

*Growth-factor* atau faktor pertumbuhan adalah molekul aktif biologis yang disekresikan untuk mempromosikan atau menghambat mitosis atau mempengaruhi diferensiasi sel.<sup>18</sup> *Growth-factor* dilepaskan oleh  $\alpha$ -granul dari platelet,<sup>19</sup> sehingga baru-baru ini ditemukan strategi baru untuk mempromosikan kaskade penyembuhan luka dengan memanfaatkan GF, yaitu dengan menyiapkan konsentrat platelet autologus yang tersuspensi dalam plasma, yang mengandung faktor pertumbuhan dan menyalurkannya ke tempat luka.<sup>20</sup>

Penelitian oleh Moussa et. al. pada tahun 2017 melaporkan bahwa platelet memiliki efek anabolik pada tulang rawan. Platelet telah dieksplorasi secara ekstensif sebagai pengobatan kondroprotektif untuk OA lutut.<sup>12</sup> Aktivasi platelet adalah langkah penting yang mempengaruhi ketersediaan molekul bioaktif yang akan membantu penyembuhan jaringan. *Growth-factor* akan dilepaskan oleh butiran  $\alpha$ -granul dari degranulasi platelet.<sup>21</sup> Alpha-granul mengandung faktor pertumbuhan dan protein penting untuk kaskade koagulasi yang setelah aktivasi, dapat membantu regenerasi jaringan.<sup>17</sup>

Platelet melalui aktivasi granula alfa dan degranulasi proteinnya seperti PDGF, TGF- $\beta$ , CTGF, dan FGF akan berikatan dengan reseptornya masing-masing pada kolagen, osteoklas, dan kondrosit untuk merangsang sintesis matriks tulang rawan dan regenerasi jaringan sehingga menginduksi kondroproteksi.<sup>12</sup> Salah satu efek anti-inflamasi GF dari platelet adalah hasil dari TGF- $\beta$  yang berikatan dengan reseptornya. Jalur TGF- $\beta$  kanonik melibatkan fosforilasi SMAD2/3 yang dimediasi oleh TGFBR1, menyebabkan pensinyalan SMAD4 dan translokasi inti untuk aktivasi transkripsi dari program gen fibrotik dan ekspresi  $\alpha$ -SMA ( *$\alpha$ -smooth muscle actin*).<sup>22</sup>

*Alpha-smooth muscle actin* ( $\alpha$ -SMA) yang dikodekan oleh gen ACTA2<sup>23</sup> adalah isoform aktin yang berperan penting dalam fibrogenesis dan dapat ditemukan di sel otot polos, miofibroblas, dan pembuluh darah.<sup>24,25</sup> Sel  $\alpha$ -SMA-positif ditemukan pada jaringan kolagen padat, area perivaskular, dan sel-sel pelapis dalam selubung sinovial.<sup>26</sup> Ekspresi dari  $\alpha$ -SMA sangat dipengaruhi oleh kehadiran TGF- $\beta$  yang akan memfosforilasi SMAD2/3. Hal ini menjadi salah satu keunggulan  $\alpha$ -SMA untuk diamati pada OA dengan intervensi GF karena sitokin anti inflamasi lain yang berperan pada kejadian OA, tidak dipengaruhi oleh kehadiran TGF- $\beta$ .<sup>27</sup>

Pada OA, jaringan berada dalam proses penyembuhan dan fibroblas cenderung berproliferasi cepat untuk memperbaiki matriks yang rusak dan memungkinkan menghasilkan lebih banyak kolagen, komponen utama matriks ekstraseluler dalam ligamen.<sup>28</sup> Fibroblas juga membutuhkan fenotipe kontraktile, ditandai dengan pembentukan bundel mikrofilamen, dan dengan ekspresi de novo dari  *$\alpha$ -smooth muscle actin* ( $\alpha$ -SMA). Sel-sel aktif ini, disebut "miofibroblas" dan berpartisipasi dalam respon reparatif, dengan mengeluarkan sejumlah besar protein matriks ekstraseluler.<sup>24,28</sup> Sel ini akan menghasilkan kolagen dengan aktivitas yang lebih tinggi dibandingkan dengan fibroblas normal.<sup>29</sup> Dengan melihat potensi GF dalam mengatasi OA, penelitian ini dilakukan agar dapat menguji efikasi *Faktor Pertumbuhan Platelet* terhadap kadar  $\alpha$ -SMA pada tikus putih galur wistar model osteoarthritis.

## **1.2 Rumusan Masalah**

Bagaimana pengaruh faktor pertumbuhan platelet dari platelet terhadap kadar Alpha-SMA tikus putih model osteoarthritis?

## **1.3 Tujuan Penelitian**

### **1.3.1 Tujuan Umum**

Mengetahui adanya pengaruh faktor pertumbuhan platelet dari platelet terhadap kadar Alpha-SMA tikus putih model osteoarthritis.

### **1.3.2 Tujuan Khusus**

1. Mengetahui rerata kadar Alpha-SMA pada setiap kelompok perlakuan hewan uji setelah diberikan faktor pertumbuhan platelet, yang dinilai menggunakan metode sandwich ELISA (*enzyme-linked immunosorbent assay*).
2. Mengetahui signifikansi injeksi faktor pertumbuhan platelet terhadap kadar alpha-SMA tikus putih model osteoarthritis.

## **1.4 Hipotesis**

H<sub>0</sub> : Tidak terdapat pengaruh faktor pertumbuhan platelet terhadap Alpha-SMA tikus putih model osteoarthritis.

H<sub>1</sub> : Terdapat pengaruh faktor pertumbuhan platelet terhadap kadar Alpha-SMA tikus putih model osteoarthritis.

## **1.5 Manfaat Penelitian**

### **1.5.1 Manfaat Teoritis**

1. Diharapkan penelitian ini dapat menjadi sumber referensi bagi mahasiswa, peneliti, dan sejawat terkait penemuan pengobatan alternatif untuk osteoarthritis.

2. Diharapkan penelitian ini dapat menjadi kajian teoritis mengenai pengaruh faktor pertumbuhan platelet terhadap kadar Alpha-SMA tikus putih model osteoarthritis sebagai obat alternatif di masa depan.

### **1.5.2 Manfaat Praktis**

1. Diharapkan faktor pertumbuhan platelet dapat diwujudkan sebagai terapi alternatif osteoarthritis jika memiliki efektivitas yang signifikan melalui uji klinis.
2. Melalui uji klinis, menjadi referensi uji klinis terkait faktor pertumbuhan platelet terhadap kadar Alpha-SMA pada tikus model osteoarthritis.

### **1.5.3 Manfaat Masyarakat**

Pada penelitian ini, diharapkan masyarakat mendapatkan alternatif pengobatan osteoarthritis yang dapat mengurangi perkembangan osteoarthritis, bukan hanya mengurangi gejala yang dihasilkan oleh osteoarthritis.



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