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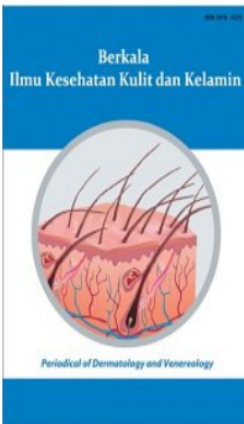
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JOURNAL HISTORY

Berkala Ilmu Kesehatan Kulit dan Kelamin

(BIKKK)

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Nowadays, scientific journals plays a big role in displaying the growth in scientific fields. It functions as a media between researchers and readers, to deliver the outcome of a research.

Berkala Ilmu Kesehatan Kulit dan Kelamin (BIKKK) was first published in August 9th, 1989 by Department/Staf Medik Fungsional Dermatovenereology of the Faculty of Medicine, Airlangga University - Dr. Soetomo Academic General Hospital Surabaya.

For more than 30 years, BIKKK has been consistently releasing issues every 4 months, with articles encompassing a variety of topics in Dermatovenereology. At first, BIKKK serve as a platform for the staff and residents of Department/Staf Medik Fungsional Dermatovenereology of the Faculty of Medicine, Airlangga University - Dr. Soetomo Academic General Hospital Surabaya to publish their internal reports and cases. As time went by, it has transformed and broadened its scope, receiving articles from the external parts, but still focusing on the field of Dermatovenereology.

Since 2014, BIKKK has changed it's title to "BIKKK, Berkala Ilmu Kesehatan Kulit dan Kelamin Periodical of Dermatology and Venereology". This abbreviation is intended for the publication to be more internationally acknowledged, and providing an easier way for researchers to cite the journal.

Having been nationally accredited in 2016 (Nomor: 36a/E/KPT/2016, ISSN 1978-4279) and as Sinta 2 (Nomor: 30/E/KPT/2018) in 2018, both by the Indonesian Ministry of Research, Technology & Higher Education, BIKKK has begun to receive article submissions via its website, <https://e-journal.unair.ac.id/BIKK>. And starting in 2020, BIKKK has been receiving articles exclusively in English.

BIKKK's editorial board consists of colleagues from Indonesian and International board of dermatovenereology. This is done to ensure that we emphasize the quality of the journal and that we are open to suggestions, in order to improve the journal performance.

We welcome your articles — researchers, pre-graduate students, residents, and lecturers can submit their articles (Clinical research, Review articles, Case report) to our website.

Last but not least, as one of Indonesia's leading journals in Dermatovenereology, we hope that our existence can contribute to the development of science, especially in the dermatovenereology field, increasing readers' knowledge, and giving a broad opportunity for researchers to publish their articles.

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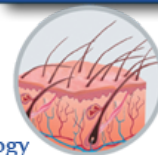
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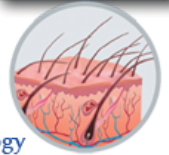
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HUBUNGAN LINGKUNGAN FISIK RUMAH DAN NONFISIK DENGAN KADAR ANTIBODI IGM ANTI PHENOLIC GLICOLIPID –1 (PGL-1) PADA ANAK DARI PASIEN KUSTA

Ratnawati Ratnawati, M. Zen Rahfiludin, Martha Irene Kartasurya

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ABSTRACT

Latar Belakang: Penyakit kusta merupakan masalah di Indonesia yang menempati urutan ke-3 di dunia. Anak dari pasien kusta mempunyai risiko tinggi tertular penyakit kusta. Kadar antibodi IgM anti *Phenolic Glicolipid*-1 (PGL-1) dapat digunakan untuk mendiagnosis kusta subklinis. **Tujuan:** Mengevaluasi hubungan lingkungan fisik dan nonfisik rumah dengan kadar antibodi IgM anti-PGL-1 pada anak dari pasien kusta di perkampungan kusta Jepara. **Metode:** Penelitian observasional analitik potong lintang dengan subjek penelitian 41 anak dari pasien kusta yang berusia 6-14 tahun dan metode *consecutive sampling*. Pengumpulan data menggunakan kuesioner terstruktur untuk menilai intensitas kontak dan lama kontak, mengukur kelembapan, pencahayaan, suhu dan kepadatan rumah, dan pemeriksaan sampel darah untuk diperiksa kadar antibodi IgM anti-PGL-1 secara *Enzyme Linked Immuno Assay* (ELISA). Analisis data menggunakan korelasi *rank Spearman* dan *Fishers's Exact* test. **Hasil:** Terdapat 10 anak (24,4%) yang mengalami kusta subklinis (kadar antibodi IgM anti-PGL-1 $\geq$ 600 m/mL). Terdapat hubungan lingkungan fisik rumah: kelembapan ($r=-0,366$; $p=0,009$) dan suhu rumah ($r=0,342$; $p=0,014$) dengan kadar antibodi IgM anti-PGL-1. Pencahayaan, kepadatan rumah, ventilasi, jenis lantai, dinding rumah, dan lingkungan nonfisik tidak berhubungan dengan kadar antibodi IgM anti-PGL-1. **Simpulan:** Faktor lingkungan fisik rumah suhu dan kelembapan berhubungan dengan kadar antibodi IgM anti-PGL-1, semakin tinggi suhu rumah semakin tinggi kadar antibodi IgM anti-PGL-1 dan semakin rendah kelembapan rumah semakin tinggi kadar antibodi IgM anti-PGL-1.

KEYWORDS

antibodi IgM anti-PGL-1; lepra; lingkungan fisik rumah dan nonfisik;

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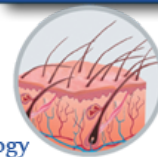


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