Pelatihan Herbal dan Aromaterapi untuk Mahasiswa STIKES ISFI Banjarmasin

Dr. apt. Kintoko, M.Sc

Dosen Farmasi UAD, Ketua Apoteker Praktek Herbal Indonesia

Direktur CV Naturonal & Peneliti Etnomedisin

Pakar Herbal Indonesia

UAD Universitas Ahmad Dahlan

DR. APT. KINTOKO, M.SC

KETUA UMUM APOTEKER PRAKTEK HERBAL INDONESIA (APHI)

EDUCATION

S1 Farmasi
Universitas Gadjah Mada

Pendidikan Apoteker
Universitas Gadjah Mada

S2 Fakulti Biosains
Universiti Kebangsaan Malaysia

S3 Pharmaceutical Collage
Guangxi Medical University, China

WORK EXPERIENCE

- Tim Riset Tanaman Obat dan Jamu (RISTOJA) KEMENKES.
- Tim Studi Kelayakan Bahan Baku Obat, KEMENPERIM.
- Tim Pemetaan Bahan Jamu dan Industri Jamu Nasional, KEMENPERIM.
- Ketua Sentra Pengembangan dan Penerapan Pengobatan Tradisional (SP3T), Dinkes DIY.
- Founder Perkumpulan Griya Sehat Tradisional Indonesia (Pergisti).
- Ketua Bidang Kerjasama & Komersialisasi, Asosiasi Kekayaan Intelektual, Perguruan Tinggi Muhammadiyah.
- Penulis Buku: Bungan Rampai Herbal Indonesia.
- Direktur CV Naturonal Creatama Indonesia.
- Apoteker Praktek Herbal di Poliherbal Rumah Sakit Nur Hidayah.
- Owner Klinik Holistrik Naturonal, Rumah Senat BALAHUSADA.

CONTACT

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Youtube
Doktor Kintoko Official

TRAINING EXPERIANCE

- Pelatihan Inovasi & Bisnis, FHM University, Hannover, Jerman.
- Pelatihan Kekayaan Intelektual, Japan Patent Office, Tokyo, Japan.
- Pelatihan Herbal Industry, Prince Of Songkla University, Thailand.
- Pelatihan Sosio-preneurship, British Council.
- Pelatihan English for Academic, University Of Sain Anthony, Irigia, Filipina.

Naturonal

Natural Organik Herbal

Pondok Pesantripreneur
ABDURRAHMAN-ALI
Inkubator Saudagar Santri

RUMAH SEHAT
BALA HUSADA

SEKOLAH INOVASI JAMU
TRAINING & EMPOWERING

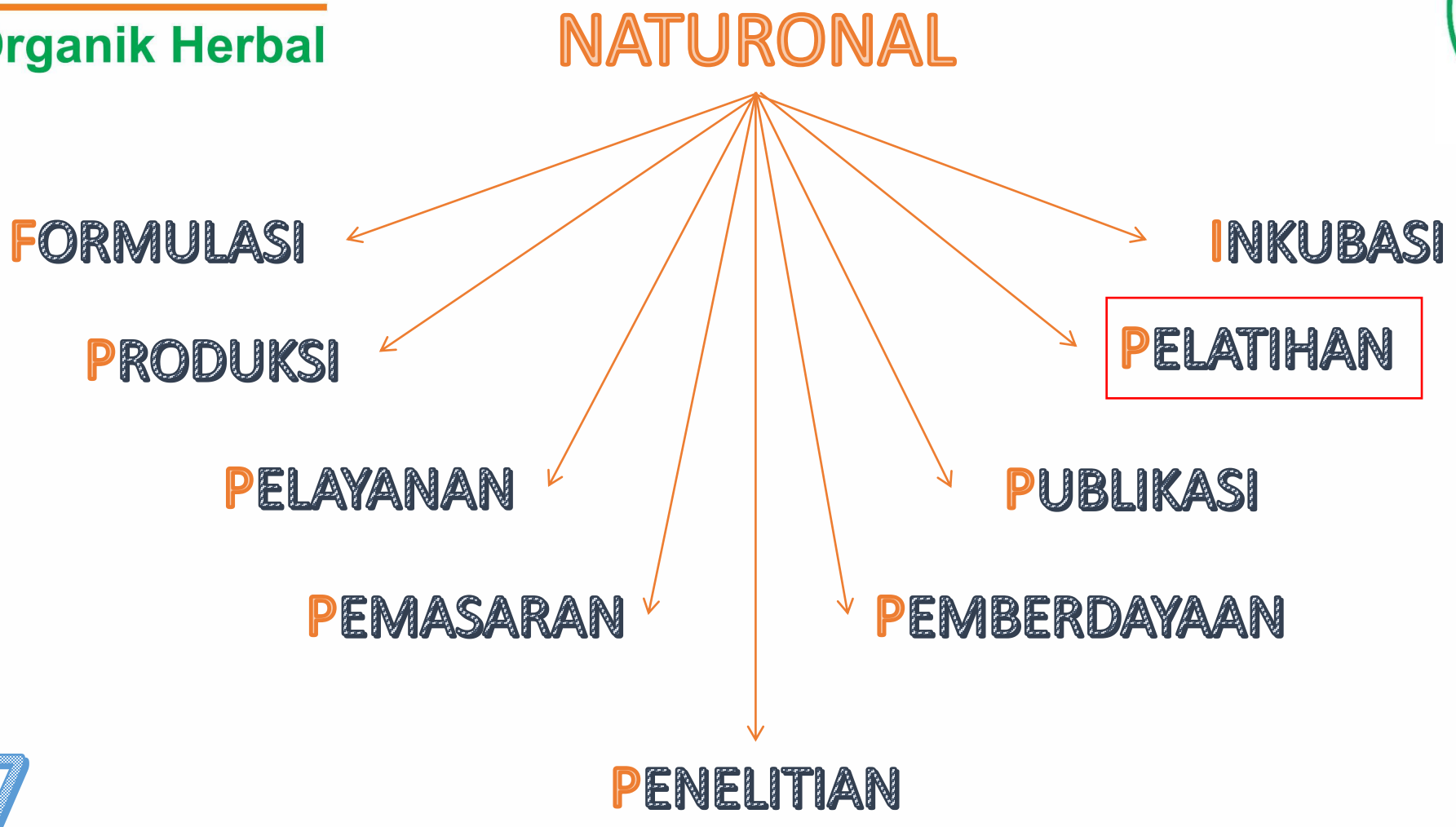
KADER
KESTRAD

LE JAMPEE
Jamu Ala Café

Rumah Bekam Farma
Be The Best & Scientific
Operated by
Nabawi Pharmagreen

UAD Universitas Ahmad Dahlan

Naturonal
Natural Organik Herbal



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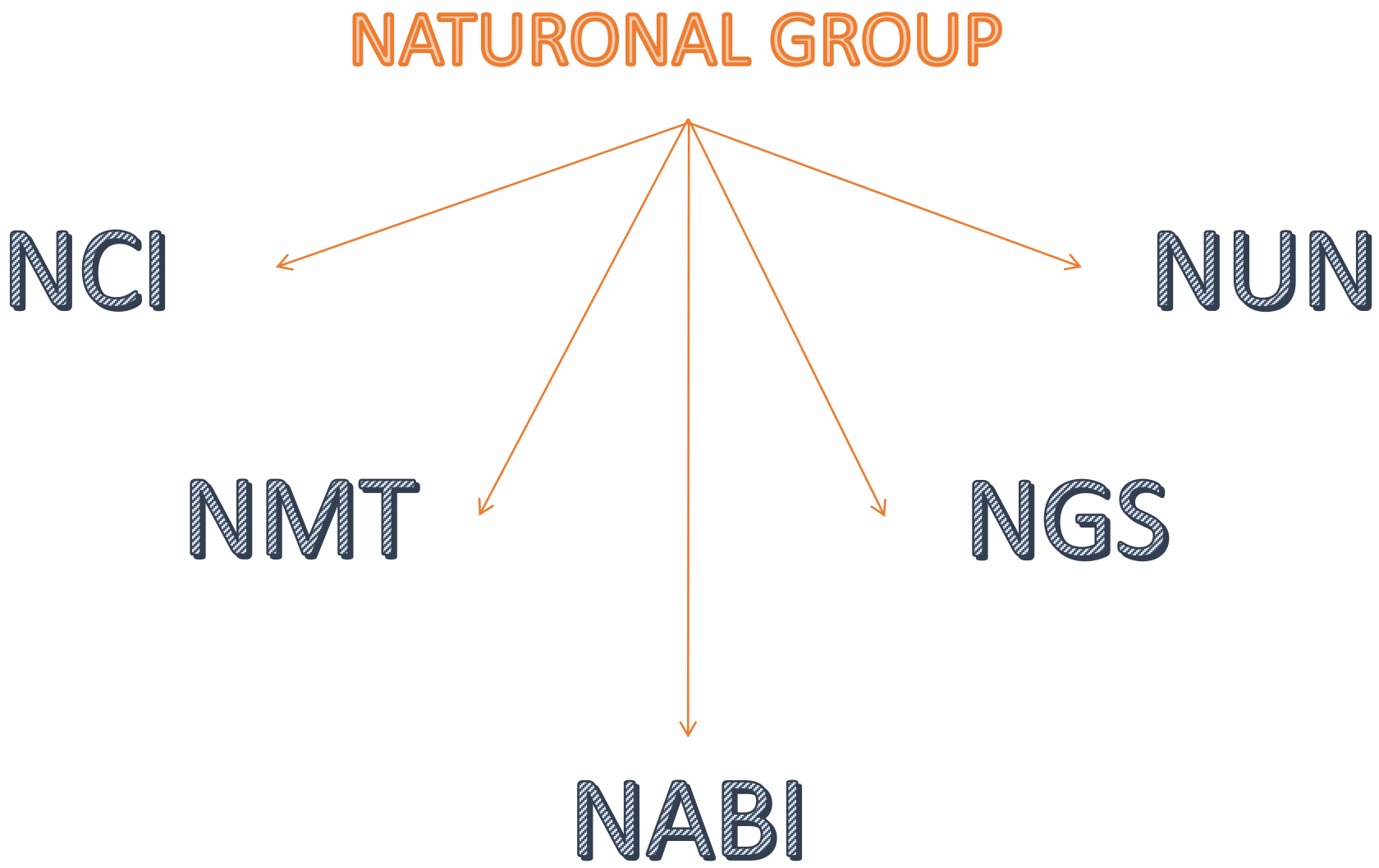
NATURONAL GROUP
NCI
NUN
NMT
NGS
NABI

NATURONAL GROUP

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2. NATURONAL USADA NUSANTARA (NUN)
3. NATURONAL APHI BERDIKARI INDONESIA (NABI)
4. NATURONAL GLOBAL SEJAHTERA (NGS)
5. NATURONAL MEDICA TECHNOLOGY (NMT)

PERTANIAN BIOFARMAKA

IPB

PROPOSAL KEDAIREKA

Mapping Sentral Biofarmaka Riau Berbasis Indeks Organoleptik dalam Meningkatkan Ketersediaan Bahan Baku Obat Bermutu untuk Industri

Pengusul-UNRI

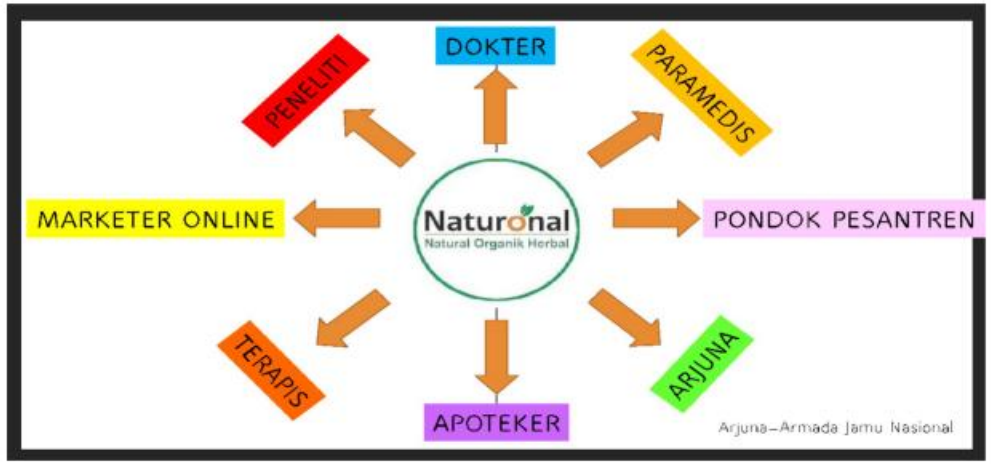
Ketua : Dr. Deviona., S.P., M.P. — Fak.Pertanian- Agroteknologi – Pemuliaan
Anggota : Dr. Irwin Mirza Umami, SP.,M.P — Fak.Agroteknologi – Ilmu Tanah
Dr. Ir. Evy Rossi, M.Sc — Fak.Pertanian-Teknologi Hasil Pertanian
Apt. Yuli Haryani., MSc — FMIPA-Kimia-Biokimia
Chairul., ST., M.T — Fak.Teknik-Teknik Kimia-Bioproses
Sri Yoseva S.P.,M.P — Fak. Pertanian-Agroteknologi-Budidaya
Jum'atri Yusri S.Pt., M.Si — Fak. Pertanian- Agribisnis

Mitra-DuDi

CEO : Dr. Apt. Kintoko., MSc. Alumni GuangXi Medical University- Ketua SP3T

CV. Naturonal Creatama Indonesia-Produksi dan Pemasaran Produk Herbal. (AHU-0028063-AH.01.14 tahun 2022)

Visi: Terwujudnya kelestarian budaya jamu dan sumber daya alam Indonesia yang berdampak pada peningkatan kesehatan, kesejahteraan dan kemandirian bangsa atas landasan kebersamaan



Bahan Baku Basah

Bahan Baku Kering Rajangan

Bahan Baku Kering Bubuk

Bahan Baku Ekstrak

Bahan Baku Minyak Atsiri

FORMULASI DAN PRODUKSI POLIHERBAL SINERGIS

MAKANAN/MINUMAN KESEHATAN

OLAHAN PANGAN

OBAT TRADISIONAL

SUPLEMEN KESEHATAN

AROMATERAPI

KOSMETIK NATURAL

JAMU TERNAK


Angon
Dari Alam untuk Pertumbuhan Lebih Baik
GROWFASTER
Sapi Pedaging | Sapi Perah | Kambing | Domba
JAMU TERNAK
NETTO 500ML


Warung Ternak
"Belanja seru untuk ternakmu"
SIDO LEMU
"Jamunya peternak sukses"
Genkide Naru
Meningkatkan daya tahan tubuh
Menjaga kesehatan pencernaan
Mempercepat proses penyembuhan
Menaikan nafsu makan
Dosis pemakaian :
100%
Herbal


CETA HERBATOP
AYAM
Jamu Ternak
Anti
FLU BURUNG
Komposisi :
Nigella Sativa-Habbatus Sauda
Languatis Rhizoma
Curcuma Rhizoma
Andro Graphidis Herba
Aistoniae Cortex
Zingiberis Rhizoma
Khasiat :
Meningkatkan nafsu makan dan mempercepat pertumbuhan
Meningkatkan daya tahan tubuh dan mencegah stress
Mencegah dan mengobati Flu burung, CRD, Snot, dll
Meningkatkan produksi telur
Mengurangi bau kotoran
Dosis dan cara pemakaian :
Ayam / Bebek / Puyuh : 1 - 2 kg / ton pakan atau
1 - 2 kg / liter air minum
Unggas Sakit : 2X dosis normal
EXCLUSIVE
PREMIUM
PRODUCT
Netto :
100 / 200 gr
Production by :
PT. Cipta Ternak Sehat
Indonesia
SUMBER BERKAT
MANDIRI
SUMBER BERKAT MANDIRI

PRODUK HERBAL UNTUK PERTANIAN

PERBEKALAN KESEHATAN RUMAH TANGGA

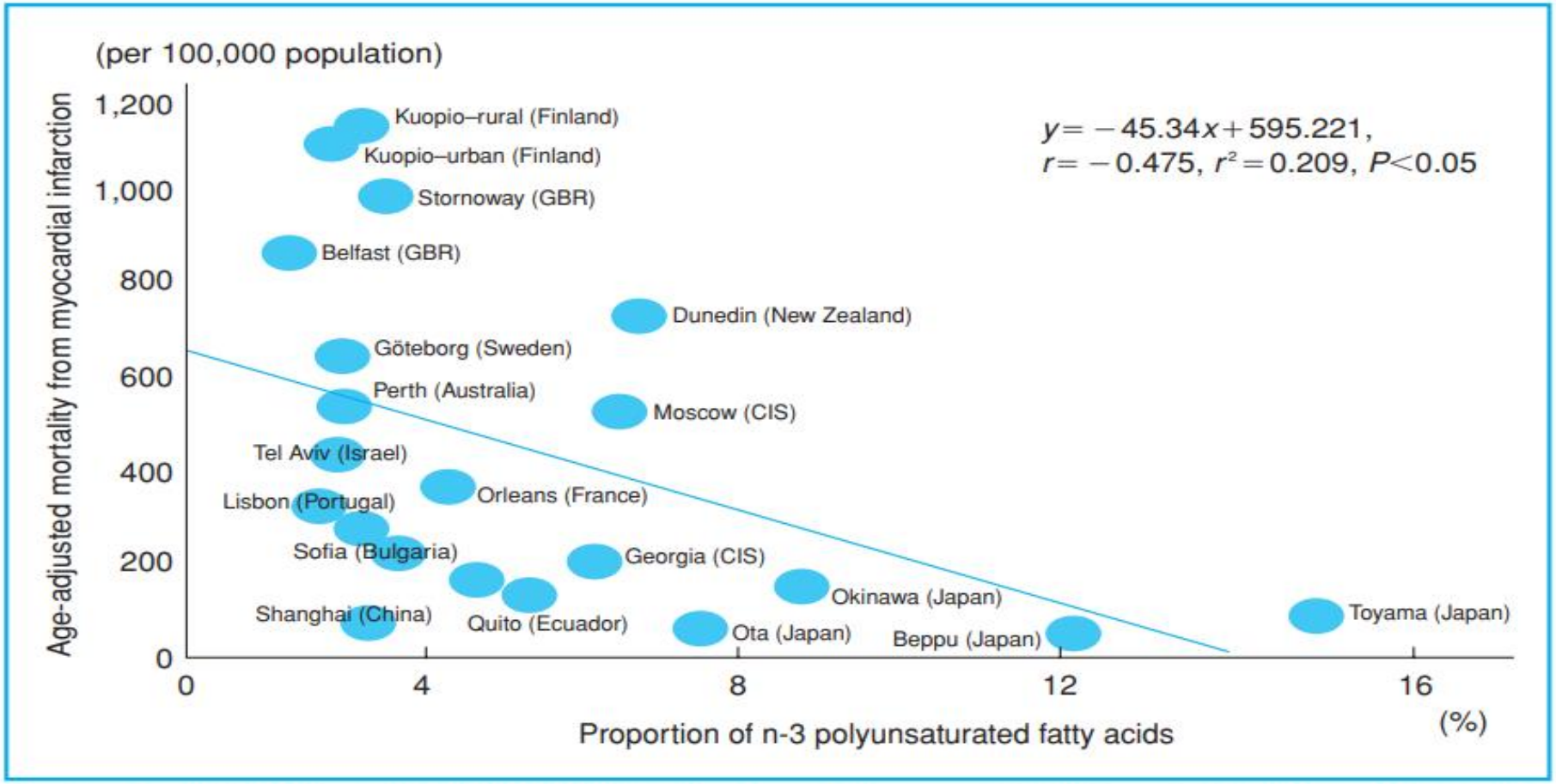


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Fig. 4 N-3 polyunsaturated fatty acid and mortality from myocardial infarction (in men)

Relationship between the mean ratio of n-3 polyunsaturated fatty acids to total fatty acids in plasma phospholipids and the age-adjusted mortality from myocardial infarction in the WHO-CARDIAC Study.

Healthy Food/Beverage

KATEGORI

1. Crops
2. Horticulture
3. Spices
4. Ornamental
5. Wild plant

Familiar

PANCA CITRA

1. Citra Halal → LIFESTYLE (sootheness)
2. Citra Rasa
3. Citra Sehat → WELLNESS (care giver)
4. Citra Unik
5. Citra Estetik → ATTRACTIVENESS (Barista/Bartender)

CHEMICAL REVIEWS

Review

pubs.acs.org/CR

Stabilizing and Modulating Color by Copigmentation: Insights from Theory and Experiment

Patrick Trouillas,[*,†,‡] Juan C. Sancho-García,[§] Victor De Freitas,[∥] Johannes Gierschner,[⊥] Michal Otyepka,[*,‡] and Olivier Dangles[@]

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[‡]Regional Centre of Advanced Technologies and Materials, Department of Physical Chemistry, Faculty of Science, Palacký University Olomouc, tr. 17. listopadu 12, 771 46 Olomouc, Czech Republic

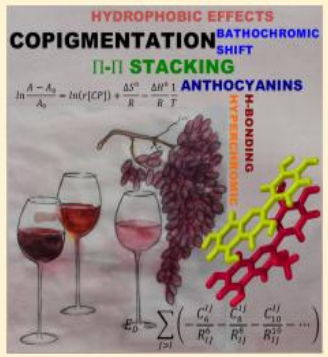
[§]Departamento de Química Física, Universidad de Alicante, Apartado de Correos 99, E-03080 Alicante, Spain

[∥]REQUIMTE/LAQV – Research Unit, Faculty of Science, Porto University, Rua do Campo Alegre, 4169-007 Porto, Portugal

[⊥]Madrid Institute for Advanced Studies - IMDEA Nanoscience, C/Faraday 9, Ciudad Universitaria de Cantoblanco, E-28049 Madrid, Spain

[@]University of Avignon, INRA, UMR408 SQPOV, F-84000 Avignon, France

ABSTRACT: Natural anthocyanin pigments/dyes and phenolic copigments/co-dyes form noncovalent complexes, which stabilize and modulate (in particular blue, violet, and red) colors in flowers, berries, and food products derived from them (including wines, jams, purees, and syrups). This noncovalent association and their electronic and optical implications constitute the copigmentation phenomenon. Over the past decade, experimental and theoretical studies have enabled a molecular understanding of copigmentation. This review revisits this phenomenon to provide a comprehensive description of the nature of binding (the dispersion and electrostatic components of $\pi-\pi$ stacking, the hydrophobic effect, and possible hydrogen-bonding between pigment and copigment) and of spectral modifications occurring in copigmentation complexes, in which charge transfer plays an important role. Particular attention is paid to applications of copigmentation in food chemistry.



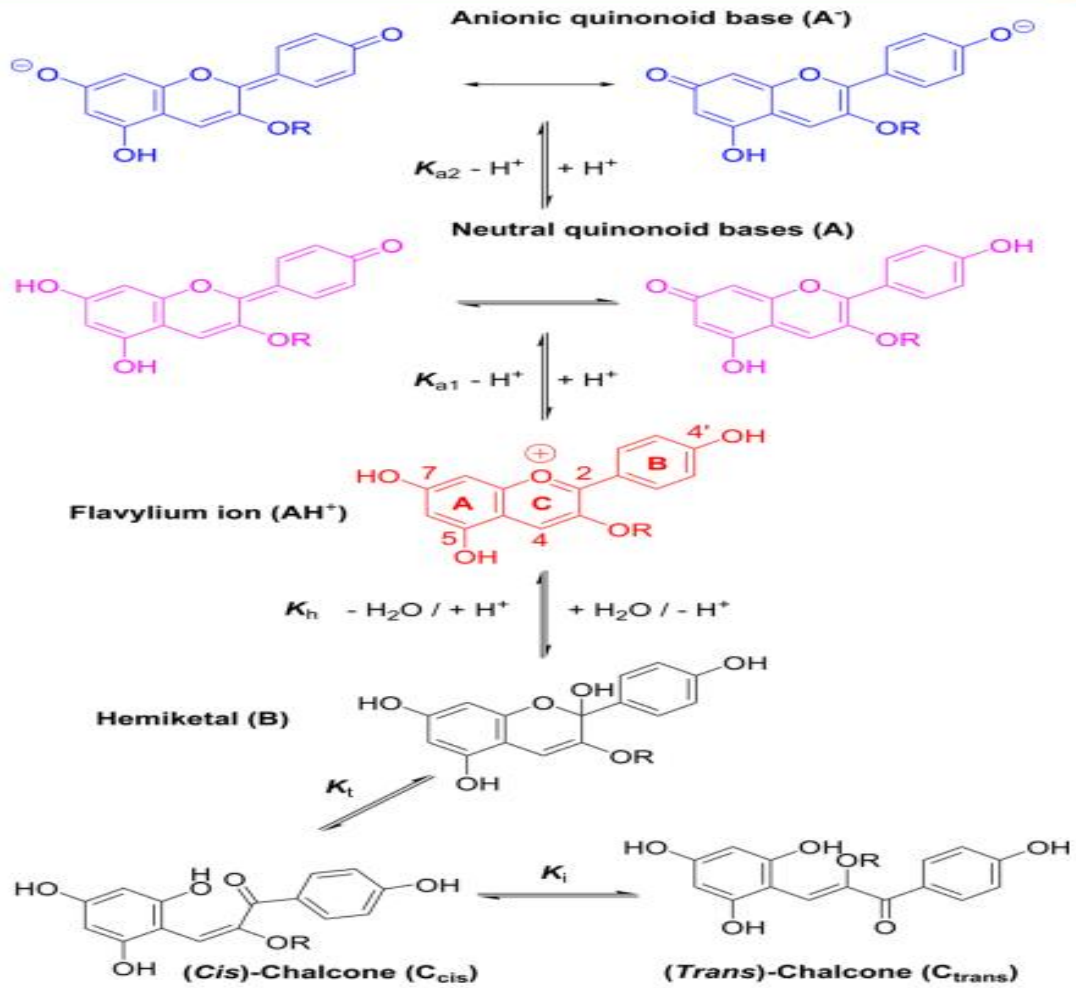
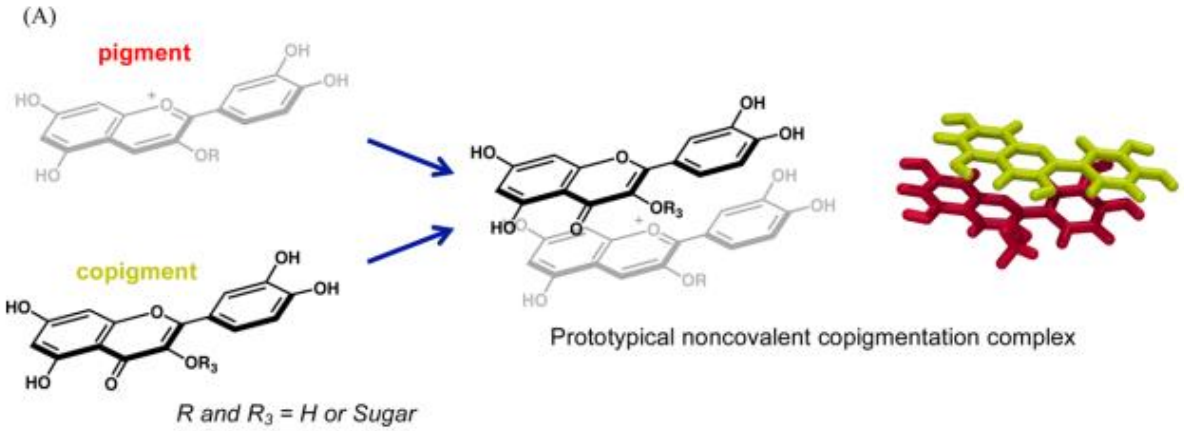


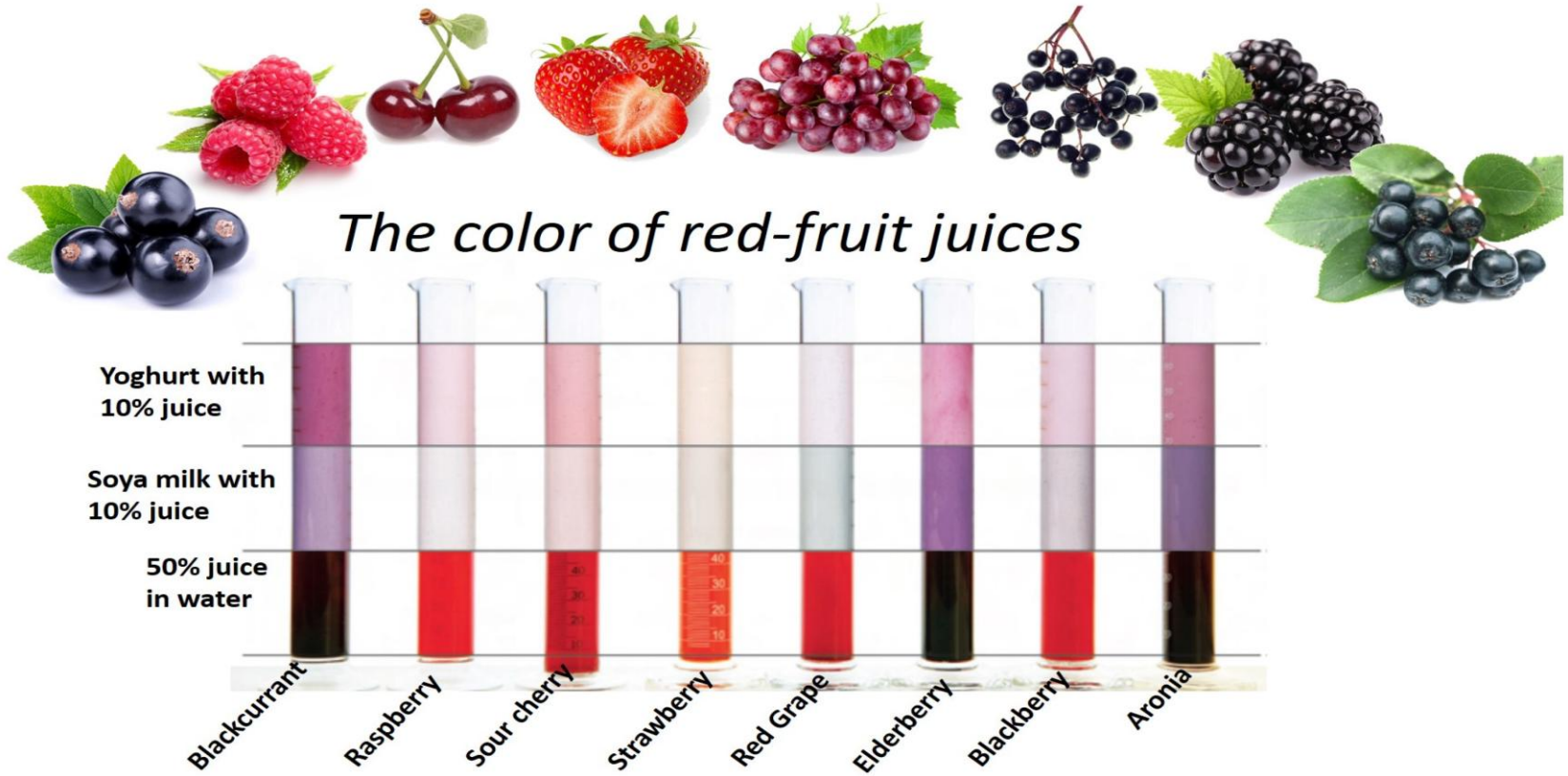
Figure 3. Structural transformations of anthocyanins in acidic to neutral solution. Proton loss from C5-OH omitted for simplicity.

Copigmentation is likely to occur and stabilize coloration in fruit products (juices, purees, jams, and syrups)

Scheme 1. Prototypical Copigmentation Complexes[a]



[a](A) Noncovalent association of a prototypical anthocyanin pigment and a prototypical flavonoid copigment (intermolecular copigmentation). (B) Prototypical acylated derivatives allowing copigmentation between the anthocyanin moiety and two phenolic acids covalently linked (intramolecular copigmentation).


The color of red-fruit juices
Yoghurt with 10% juice
Soya milk with 10% juice
50% juice in water
Blackcurrant
Raspberry
Sour cherry
Strawberry
Red Grape
Elderberry
Blackberry
Aronia

BLACK RICE

healthy heart

anti-oxidants

nutrients

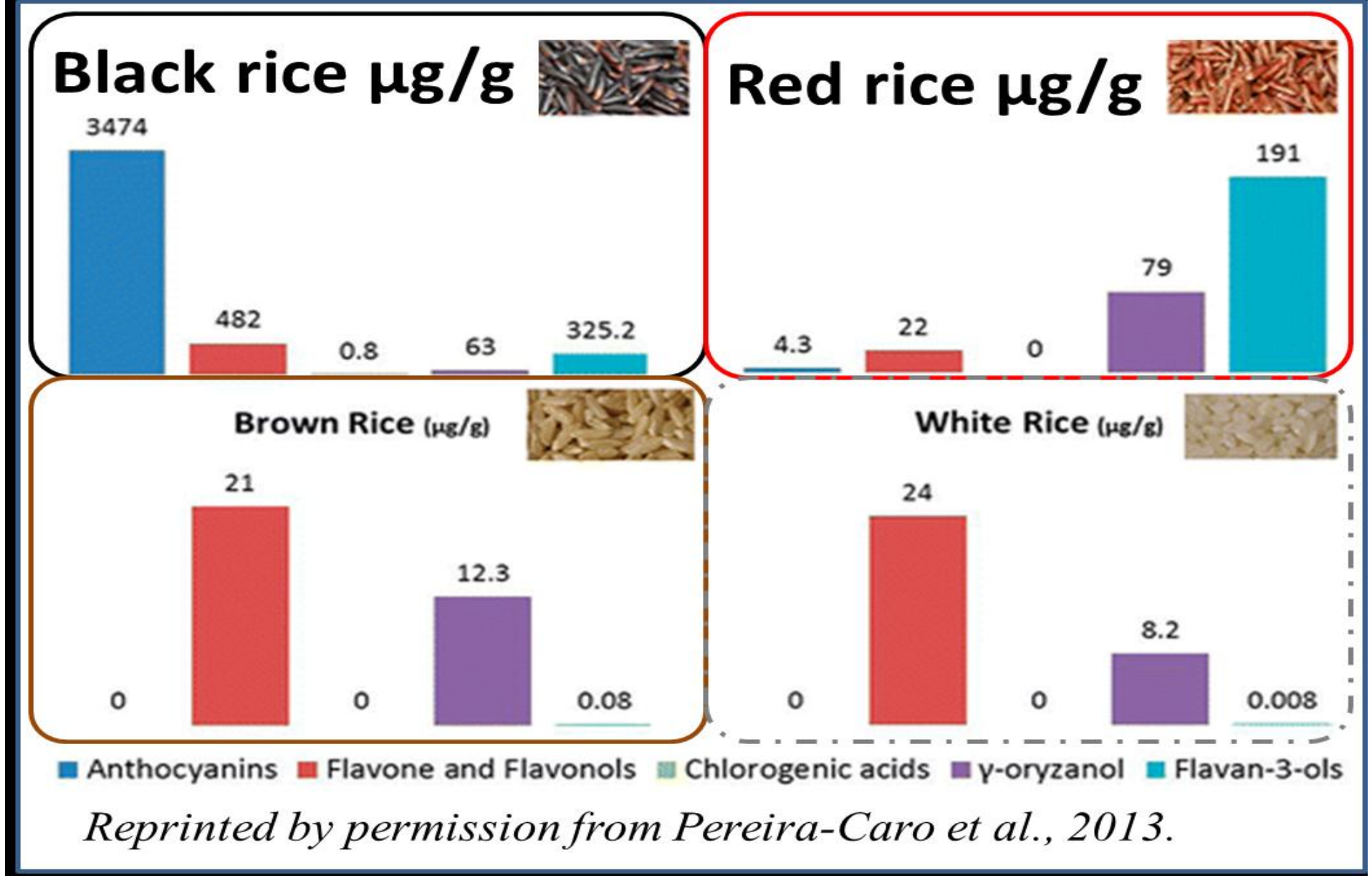
fiber

clear skin

detoxifier

gluten - free

THEINDIANSPOT



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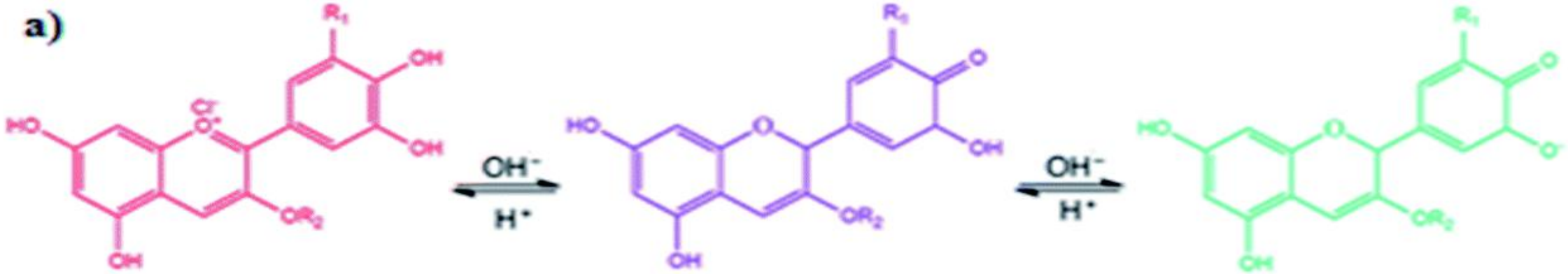
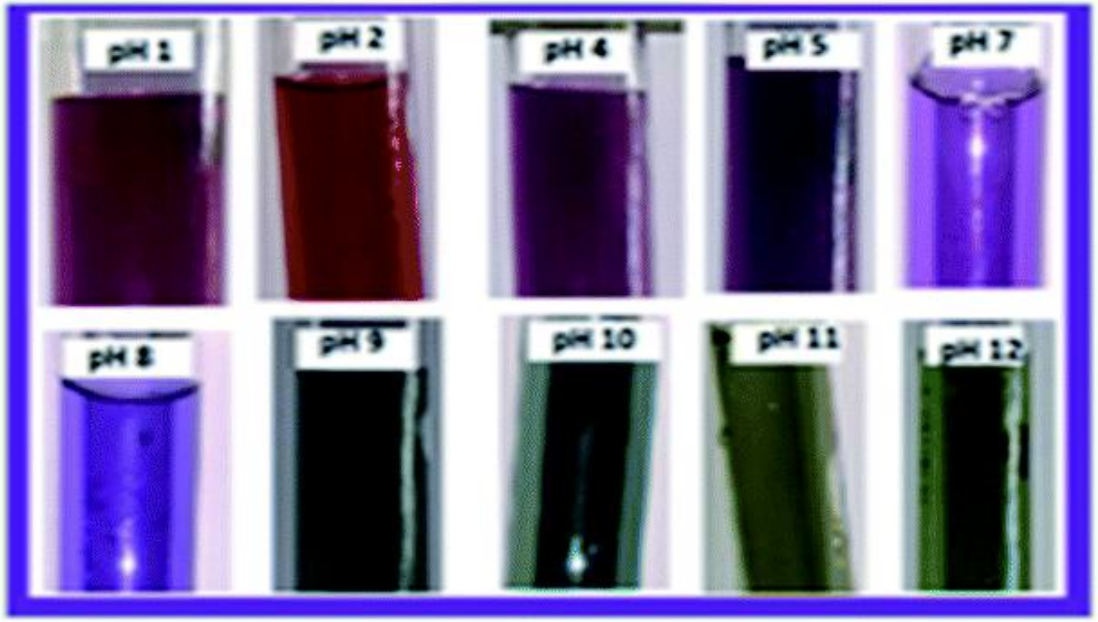
a)

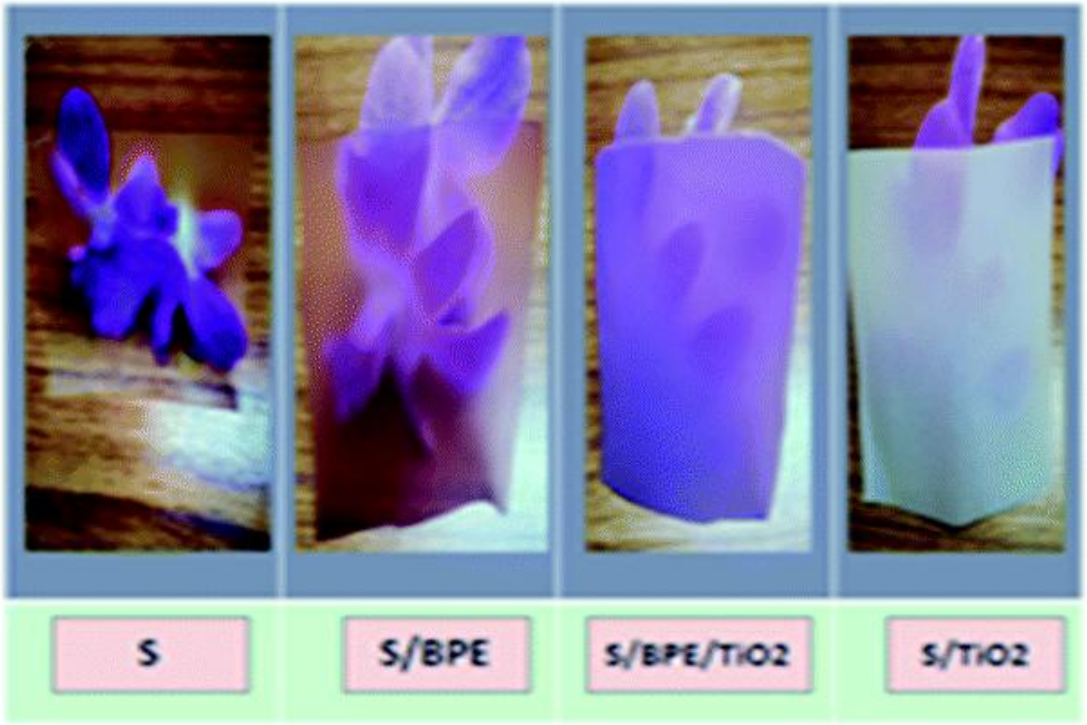


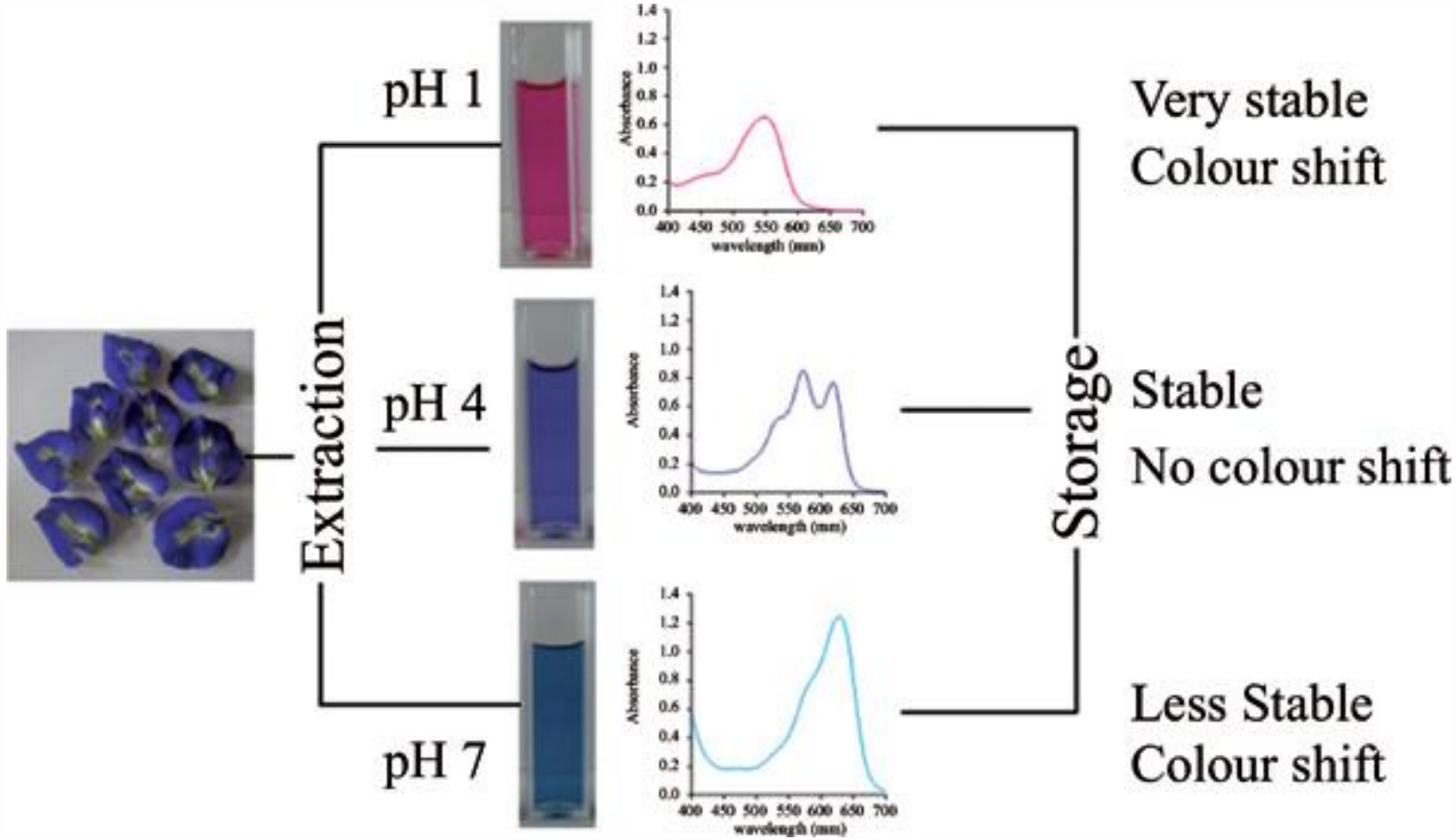
Acidic form Neutral form Basic form

b)



c)




Extraction
pH 1
pH 4
pH 7
Absorbance
wavelength (nm)
Storage
Very stable
Colour shift
Stable
No colour shift
Less Stable
Colour shift

Bluechai Flowers + **Lemon/lime juice** = **Magic!**

Organic blue dye, no chemicals

Slowly changes from blue to pink

Create awesome cocktails & tea

COLOR CHANGING EXPERIMENT

BUTTERFLY PEA FLOWER

Marketing vs Branding

Marketing adalah seperti anda ingin mengajak orang untuk berkencan

Branding adalah alasan mereka mau menikahi anda.

Conten

Konten adalah raja. Jika anda ingin konsumen memperhatikan anda. Maka buatlah konten yang menarik!

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Profile Dr. Apt. Kintoko M.Sc

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Doktor Kintoko Official Adalah channel yang berisi informasi lengkap mengenai herbal beserta manfaatnya langsung dari pakar herbal Dr. Apt. Kintoko, M.Sc yang telah belajar herbal di Universitas herbal tertua di China yaitu Guangxi Medical University.
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PENELITIAN & PENEMUAN OBAT BERBASIS EDRAS

Metformin: historical overview

Clifford J. Bailey[1]

Received: 14 March 2017 / Accepted: 10 May 2017

Abstract Metformin (dimethylbiguanide) has become the preferred first-line oral blood glucose-lowering agent to manage type 2 diabetes. Its history is linked to *Galega officinalis* (also known as goat's rue), a traditional herbal medicine in Europe, found to be rich in guanidine, which, in 1918, was shown to lower blood glucose. Guanidine derivatives, including metformin, were synthesised and some (not metformin) were used to treat diabetes in the 1920s and 1930s but were discontinued due to toxicity and the increased availability of insulin. Metformin was rediscovered in the search for antimalarial agents in the 1940s and, during clinical tests, proved useful to treat influenza when it sometimes lowered blood glucose. This property was pursued by the French physician Jean Sterne, who first reported the use of metformin to treat diabetes in 1957. However, metformin received limited attention as it was less potent than other glucose-lowering biguanides (phenformin and buformin), which were generally Diabetes Study (UKPDS) in 1998, providing a new rationale to adopt metformin as initial therapy to manage hyperglycaemia in type 2 diabetes. Sixty years after its introduction in diabetes treatment, metformin has become the most prescribed glucose-lowering medicine worldwide with the potential for further therapeutic applications.

Keywords Biguanide · Dimethylbiguanide · *Galega officinalis* · Guanidine · History · Jean Sterne · Metformin · Review · Type 2 diabetes

Abbreviations

FDA	Food and Drug Administration
IFG	Impaired fasting glucose
IGT	Impaired glucose tolerance
UKPDS	UK Prospective Diabetes Study

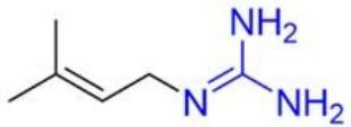
Fig. 1 *Galega officinalis*. *G. officinalis*, the herbal lineage of metformin, is also known as goat's rue, French lilac, Italian fitch, Spanish sainfoin or professor weed. This plant was used as a traditional medicine in medieval Europe; it is now classed as a noxious weed in many states of the USA. Copyright Malcolm Storey, www.bioimages.org.uk (photograph taken in Berkshire, UK, 1 July 2000)

Table 1 Landmark events in the history of metformin for the management of type 2 diabetes

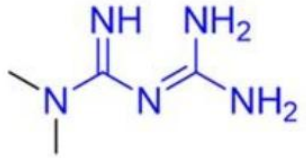
Year	Landmark	Reference
1772	*Galega officinalis* used to treat symptoms of diabetes (Hill)	[3]
1844–1861	Identification and synthesis of guanidine (Strecker)	[6]
1878–1879	Synthesis of biguanide (Rathke)	[6]
1918	Guanidine lowers blood glucose in animals (Watanabe)	[7]
1922	Synthesis of dimethylbiguanide (Werner and Bell)	[17]
1926–1928	Galegine and synthalin lower blood glucose in animals and humans	[8–13]
1929	Metformin and other biguanides lower blood glucose in animals (Hesse and Taubmann; Slotta and Tschesche)	[18, 19]
1930s	Use of guanidine derivatives to treat diabetes initially grows then declines due to toxicity and also availability of insulin	[6]
1944–1947	Guanidine-based antimalarial agent, proguanil (Paludrine), lowers blood glucose in animals	[20, 21]
1949–1950	Dimethylbiguanide (flumamine) tested as potential antimalarial agent and used to treat influenza in Philippines. Also found to potentially lower blood glucose (Garcia)	[22]
1956	Jan Aron encourages Jean Sterne and Denise Duval to study guanidine-based glucose-lowering agents	[6]
1957	Jean Sterne publishes use of metformin to treat diabetes	[24]
1957–1959	Phenformin and buformin reported as treatments for diabetes	[32, 33, 37, 38]
1958	Metformin introduced to treat diabetes in the UK and other European countries	[6]
1958–1964	Sterne and colleagues (especially Azerad) further evaluate metformin in individuals with diabetes	[25–28, 36]
1968	First large prospective comparator trial of metformin (Edinburgh, UK; notably Duncan, Clarke and Campbell)	[42]
1977–1980	Phenformin and buformin withdrawn in most countries because of risk of lactic acidosis	[49]
1980–1994	Substantial new scientific and clinical evidence (e.g. Hermann, Noel, Wiernsperger and Bailey), strategic input by Lipha pharmaceuticals (e.g. Howlett, Meynaud, Daniel, Goodman) and discussions with the FDA (Reaven, DeFronzo, Bailey, Turner, Garber)	[6, 41, 44, 56–62]
1994–1995	Metformin approved (1994) and introduced (1995) in the USA	[6]
1995–1996	Key publications confirm favourable benefit:risk ratio of metformin in management of T2D	[63, 64]
1995–2000	Extensive diabetes education programme by Bristol-Myers Squibb (e.g. Cryer)	[6]
1998	UKPDS reports long-term metabolic effects of metformin and reduced cardiovascular risk with use	[69]
2000–2002	Extended-release formulation and fixed-dose combination drugs with metformin as the primary active ingredient are approved in the USA	[65, 67]
2002	Metformin reduced progression of 'prediabetes' (IGT and/or IFG) to T2D in the DPP	[82]
2005	The IDF recommends metformin as an initial glucose-lowering pharmacotherapy for T2D. Other guidelines adopt metformin as an initial glucose-lowering agent	[75]
2008	UKPDS follow-up: continued reduction of cardiovascular risk with use of metformin (Holman)	[74]
2011	Metformin included in WHO's essential medicines list	[79]

DPP, Diabetes Prevention Program; IDF, International Diabetes Federation; T2D, type 2 diabetes; WHO, World Health Organization

Galega officinalis
(Fabaceae)



Galegine
(Isolated in **1914**)



Metformin
(Synthesized in **1922**)

Galega officinalis (Goat's rue), galegine, and metformin.

Fig. 5 Gallery of people who 'made metformin happen'. Upper row: Jean Sterne, Denise Duval, Jan Aron, Elie Azerad, Leslie Duncan, Basil Clarke, Ian Campbell, Leif Sparre Hermann, Harry Howlett, Michel Noel. Lower row: Andre Meynaud, Nicolas Wiernsperger, Gerard Daniel, Anita Goodman, Gerald Reaven, Ralph DeFronzo, Clifford Bailey, Robert Turner, Alan Garber, Dennis Cryer, Rury Holman. Missing: C. K. Watanabe, Emil Werner and James Bell, Erich Hesse and Gert Taubmann, Karl Slotta and Rudolf Tschesche, Eusebio Garcia. Apologies to the thousands of scientists, healthcare professionals and pharmaceutical personnel listed in reference [56] who have made important contributions to the journey of metformin but who have not been listed here. Copyright for each photograph lies with the respective holders

ETHNOMEDICINE-DRIVEN REVERSAL APPROACH SYSTEM

HEMAT-CEPAT-AKURAT

Quantitative ethnomedicinal study of indigenous medicinal plants used for digestive disorders of Laspur Valley, Chitral, Northern Pakistan

Sher Wali, Hammad Ahmad Jan, Rainer W. Bussmann

Research

Key words: Quantitative ethnomedicinal; indigenous medicinal plants; digestive disorders; Laspur valley; Northern Pakistan

Abstract

Background: The present study was the first one of its own kind conducted in the study area. Throughout the world digestive system diseases and their related

Correspondence

9 PARAMETER ANALISIS KUANTITATIF ETNOMEDISIN

- Rasio kesepakatan informan (RKI)
- Informant consensus factor (ICF)
- Direct matrix ranking test (DMRT)
- Family use value (FUV),
- use value (UV),
- plant part value (PPV),
- fidelity level (FL)
- informant agreement ratio (IAR)
- Relative Frequency of Citation (RFC)

Analisis Data

1. *Use Value Index* (UVI)

$$UVI = \frac{\Sigma U}{Ns}$$

Keterangan:
ΣU = Jumlah kegunaan tumbuhan obat yang disebut oleh responden
Ns = banyaknya responden yang mengetahui atau menggunakan tumbuhan obat (Attah *et al*., 2016)

2. *Fidelity Level* (FL)

$$FL = (Nt/N) \times 100$$

Keterangan:
FL = Nilai *Fidelity Level*
Nt = jumlah informan yang mengutip penggunaan tertentu dari tanaman
N = jumlah total informan yang mengutip tanaman untuk penggunaan apapun

3. *Informant Consensus Factor* (ICF)

$$ICF = \frac{Nuc - Nt}{Nuc - 1}$$

Keterangan:
Nuc = Jumlah kutipan penyakit tertentu
Nt = Jumlah spesies yang digunakan untuk pengobatan penyakit tersebut (Pathy *et al*., 2021)

Seminar Pendadaran Penelitian

STUDI ETNOMEDISIN TANAMAN TERMAS *(Poikilospermum suaveolens* (Blume) Merr.) YANG DIMANFAATKAN OLEH MASYARAKAT DUSUN KLEPU DESA NGLEGI KAPANEWON PATUK KABUPATEN GUNUNGKIDUL

Diajukan oleh
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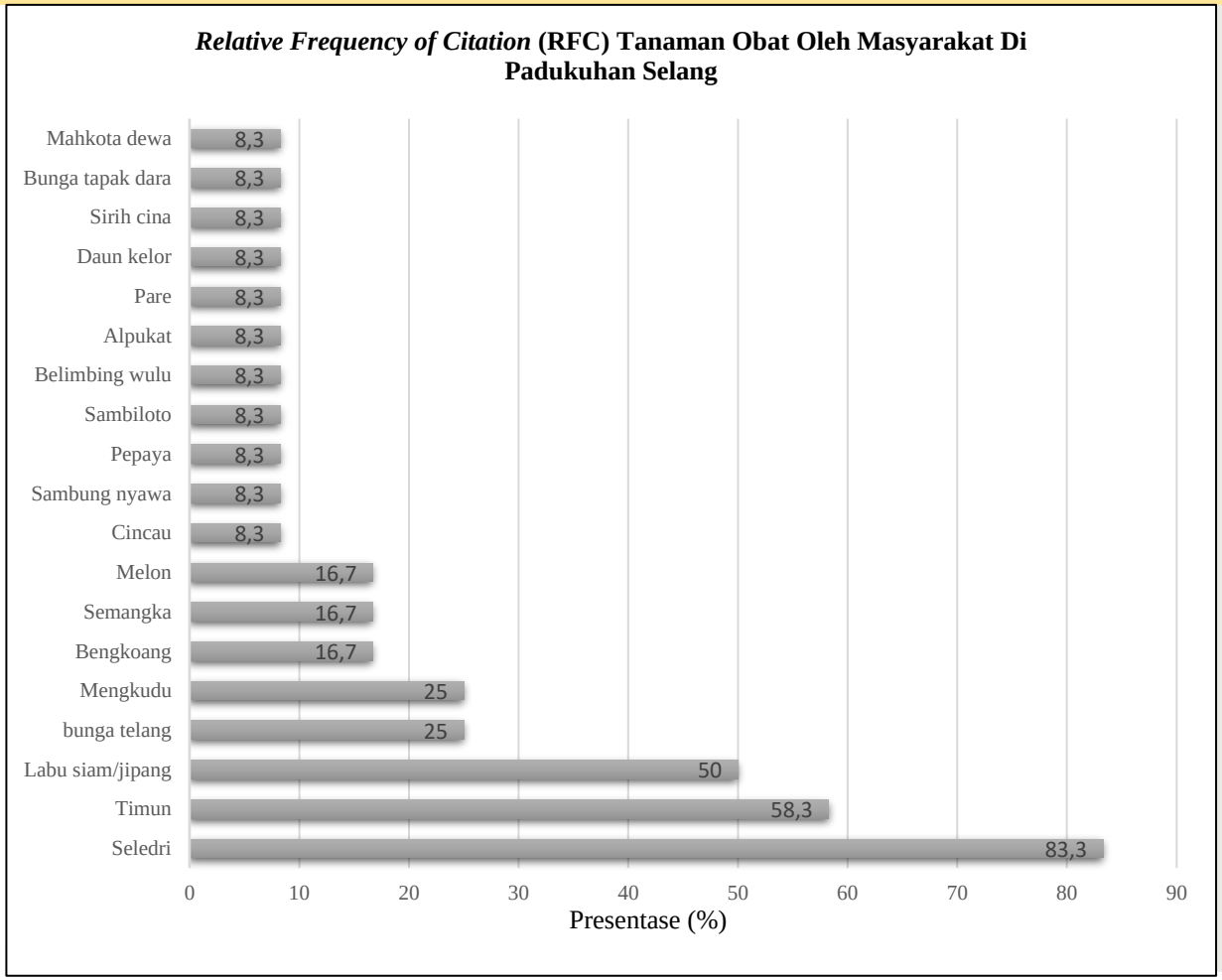
Dosen Pembimbing : Dr. apt. Kintoko, M.Sc

FAKULTAS FARMASI
UNIVERSITAS AHMAD DAHLAN
2022

UAD Universitas Ahmad Dahlan

PARAMETER KUANTITATIF ETNOMEDISIN

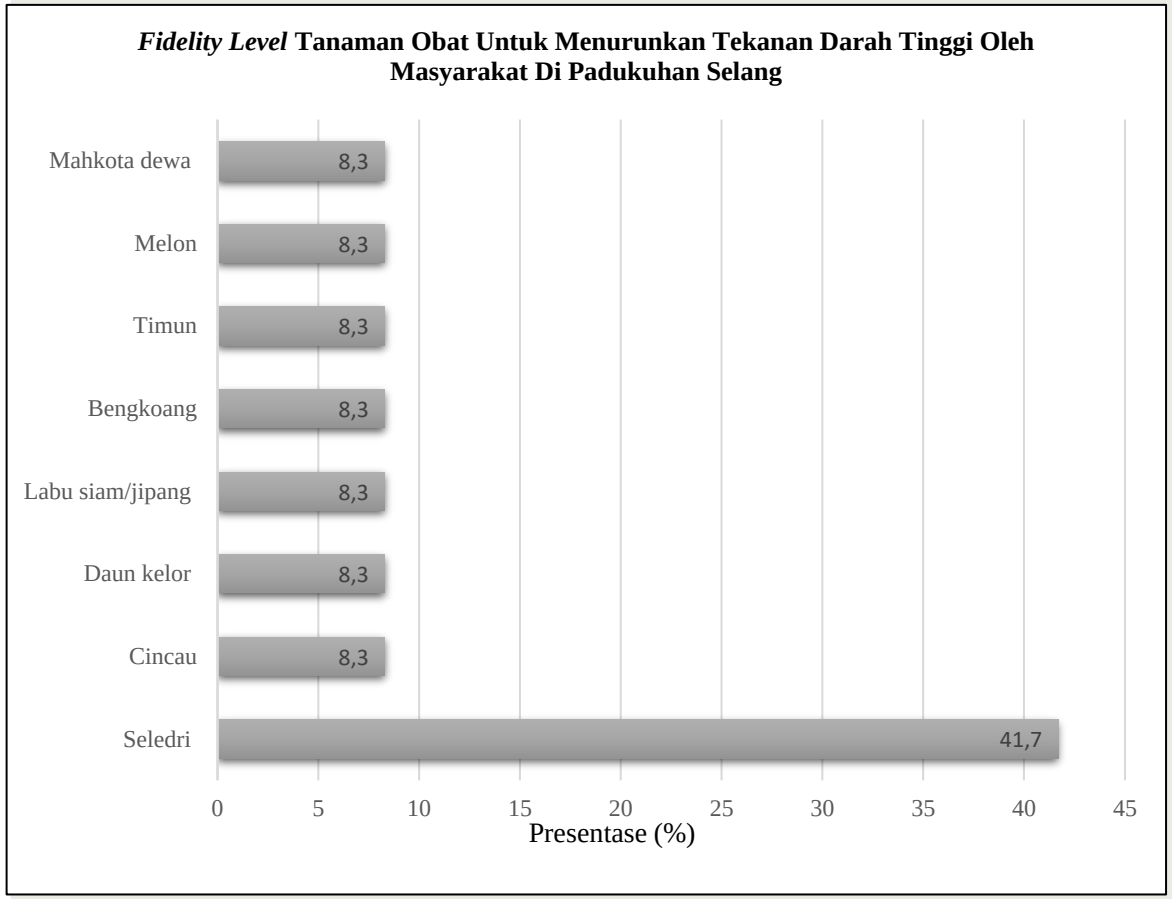
1. *Relative Frequency of Citation* (RFC)



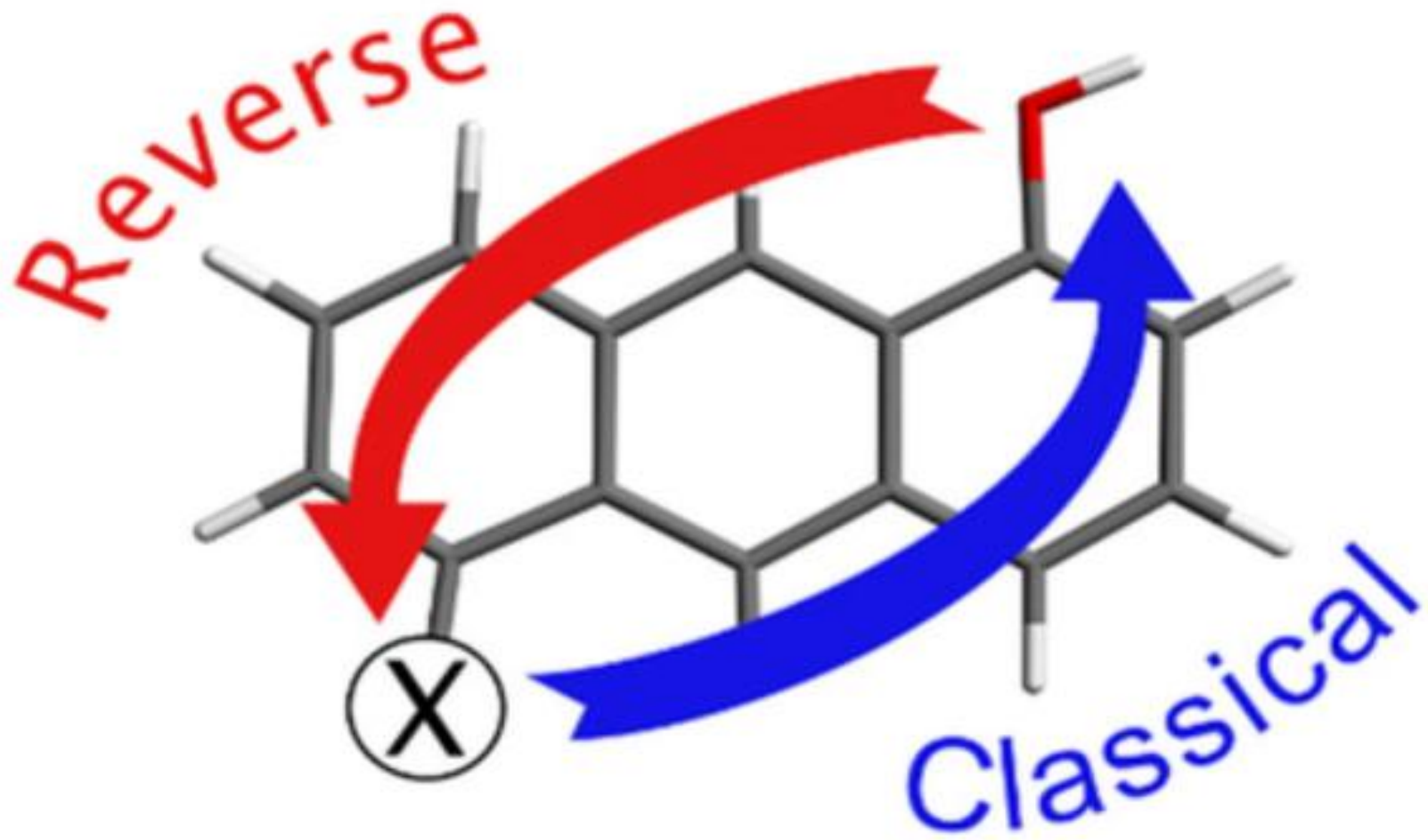
- **Nilai frekuensi sitasi tertinggi** yaitu seledri (83,3%), timun (58,3%) dan labu siam/jipang (50%)
- Tanaman seledri memiliki nilai frekuensi yang tinggi karena tanaman ini sangat umum digunakan dan sering dijumpai masyarakat dalam kehidupan sehari-hari baik untuk bahan obat atau bahan masakan, serta tanaman ini sangat mudah didapatkan dan diolah.

PARAMETER KUANTITATIF ETNOMEDISIN

2. *Fidelity Level* (FL)



- *Fidelity level* (FL) adalah salah satu parameter kuantitatif etnomedisin yang digunakan untuk mengetahui jenis tanaman yang paling dipilih masyarakat untuk mengobati penyakit hipertensi.
- **Nilai FL tertinggi** yaitu tanaman seledri (41,7%)
- Alasan responden memilih tanaman seledri yaitu karena *"seledri mampu menurunkan tekanan darah tinggi lebih cepat dan tanamannya mudah diperoleh"* (Responden 2 menit ke 01.48); "*tanaman seledri memberikan efek nyaman pada tubuh setelah digunakan"* (Responden 7 menit ke 06.29).


Reverse
X
Classical

General Drug Development Process

Classical Pharmacology

Expensive, time consuming, numerous bottlenecks

Economical, time sparing, least bottlenecks

Reverse Pharmacology

TAHAPAN....

1. **Riset etnomedisin berbasis market, manuskrip atau masyarakat**
2. **Analisis kuantitatif etnomedisin**
3. **In silico (docking molecule, networking pharmacology)**
4. **Analisis radar**
5. **Purwarupa (parameter standarisasi spesifik indeks rasa dan KLT sidik jari)**
6. **Uji toksikologi akut**
7. Uji aktivitas farmakologi
8. Uji publik produk inti
9. Uji farmakodinamik
10. Uji observasi klinik
11. Ekuivalensi fitofarmaka

S1

S2

S3

HERBOLOGI DRK VS OBAT SINTETIK

HERBOLOGI DRK VS OBAT MODERN ASLI INDONESIA

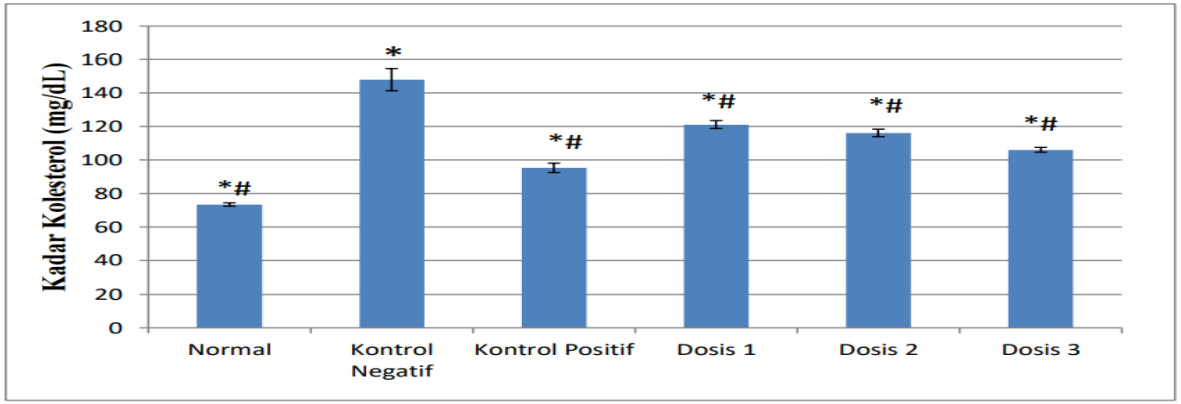
Poliherbal Sinergis----Fraksi Terpurifikasi

Saintifikasi Berbasis Pelayanan

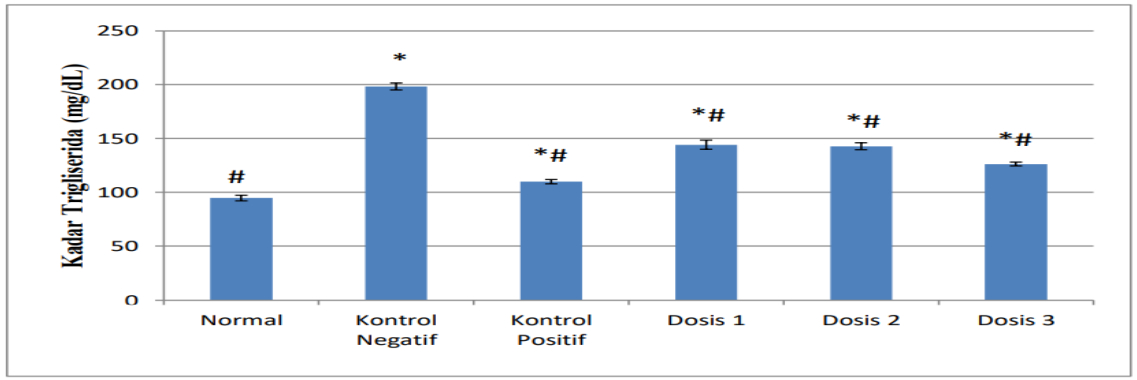
Clinical trial

Ekuivalensi

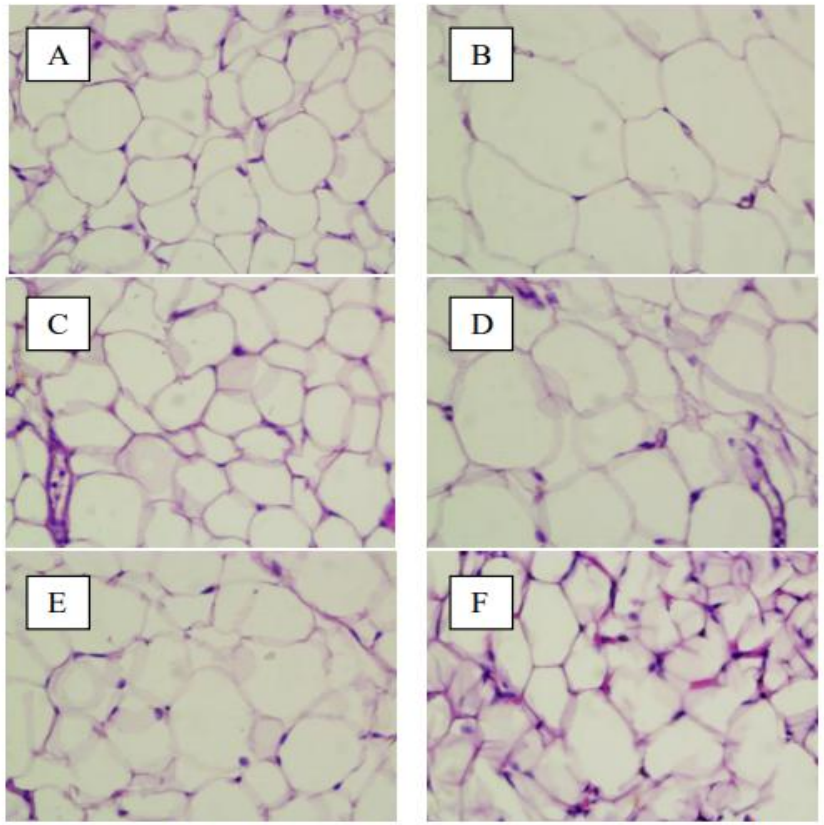
FITOFARMAKA



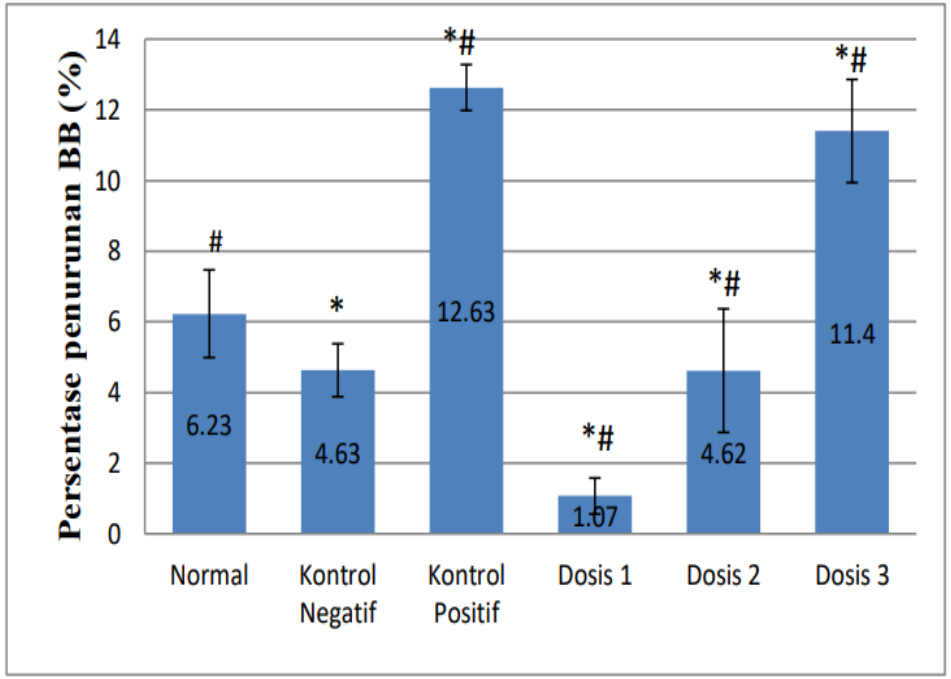
Gambar 24 . Grafik Kadar kolesterol serum darah tikus pada hari ke-36. Keterangan : Kelompok normal : diet normal; Kelompok kontrol negatif : HFD; Kelompok kontrol positif: HFD + Orlistat(Xenical); kelompok Dosis 1 : HFD + trigonella reborn 1gr/grBB; Kelompok dosis 2: HFD + Trigonella reborn 2gr/grBB; Kelompok dosis 3; HFD + 4gr/grBB. *Berbeda signifikan ($p<0,05$) terhadap kelompok normal, #Berbeda Signifikan ($p<0,05$) terhadap kelompok negatif.



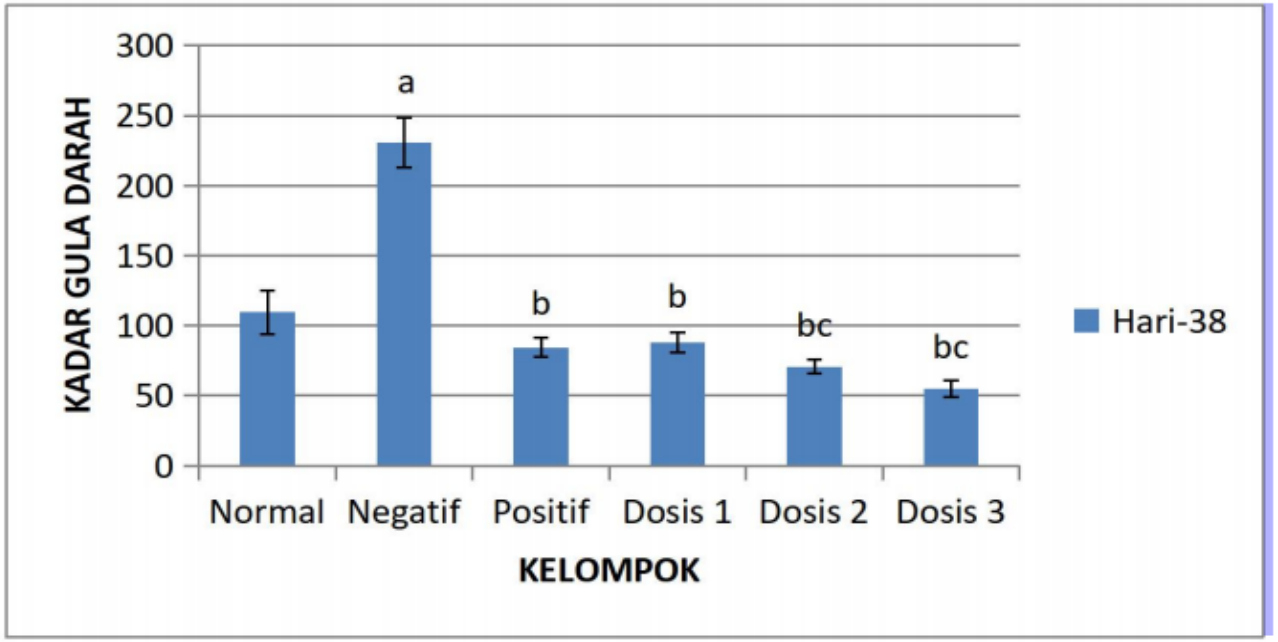
Gambar 25. Grafik kadar trigliserida serum darah tikus pada hari ke-36. Keterangan : Kelompok normal : diet normal; Kelompok kontrol negatif : HFD; Kelompok kontrol positif: HFD + Orlistat(Xenical); kelompok Dosis 1 : HFD + trigonella reborn 1gr/grBB; Kelompok dosis 2: HFD + Trigonella reborn 2gr/grBB; Kelompok dosis 3; HFD + 4gr/grBB. *Berbeda signifikan ($p<0,05$) terhadap kelompok normal, #Berbeda Signifikan ($p<0,05$) terhadap kelompok negatif.



Gambar 26. Gambaran Histopatologi jaringan adiposa perbesaran 40X, pengecatan H&E. Keterangan : A. Kelompok Normal (Diet Normal); B. Kelompok kontrol negatif (HFD); C. Kelompok kontrok positif (HFD + Orlistat); D. kelompok dosis 1 (HFD + Trigonella Reborn 1gr/grBB); E. kelompok dosis 2 (HFD + Trigonella Reborn 2gr/grBB); F. kelompok dosis 3 (HFD + Trigonella Reborn 4gr/grBB).



Gambar 23. Persentase penurunan BB. Keterangan : Kelompok normal : diet normal; Kelompok kontrol negatif : HFD; Kelompok kontrol positif: HFD + Orlistat(Xenical); kelompok Dosis 1 : HFD + trigonella reborn 1gr/grBB; Kelompok dosis 2: HFD + Trigonella reborn 2gr/grBB; Kelompok dosis 3; HFD + 4gr/grBB. *Berbeda signifikan ($p<0,05$) terhadap kelompok normal, #Berbeda Signifikan ($p<0,05$) terhadap kelompok negatif.



Gambar 8. Grafik rata-rata KDG ± SD H38 (hari ke-14 setelah perlakuan). Keterangan: Kelompok normal (tanpa perlakuan), negatif (aquadest), positif (glibenklamid dengan dosis 0,09 mg/200 gBB), dosis 1 ("Trigonella" dosis 18 mg/200 gBB tikus), dosis 2 ("Trigonella" dosis 36 mg/200 gBB tikus), dosis 3 ("Trigonella" dosis 72 mg/200 gBB tikus). [a]sig. <0,05 terdapat perbedaan secara signifikan antar kelompok dibandingkan kelompok normal. [b]sig. <0,05 terdapat perbedaan secara signifikan antar kelompok dibandingkan kelompok negatif. [c]sig. <0,05 terdapat perbedaan secara signifikan antar kelompok dibandingkan kelompok positif.

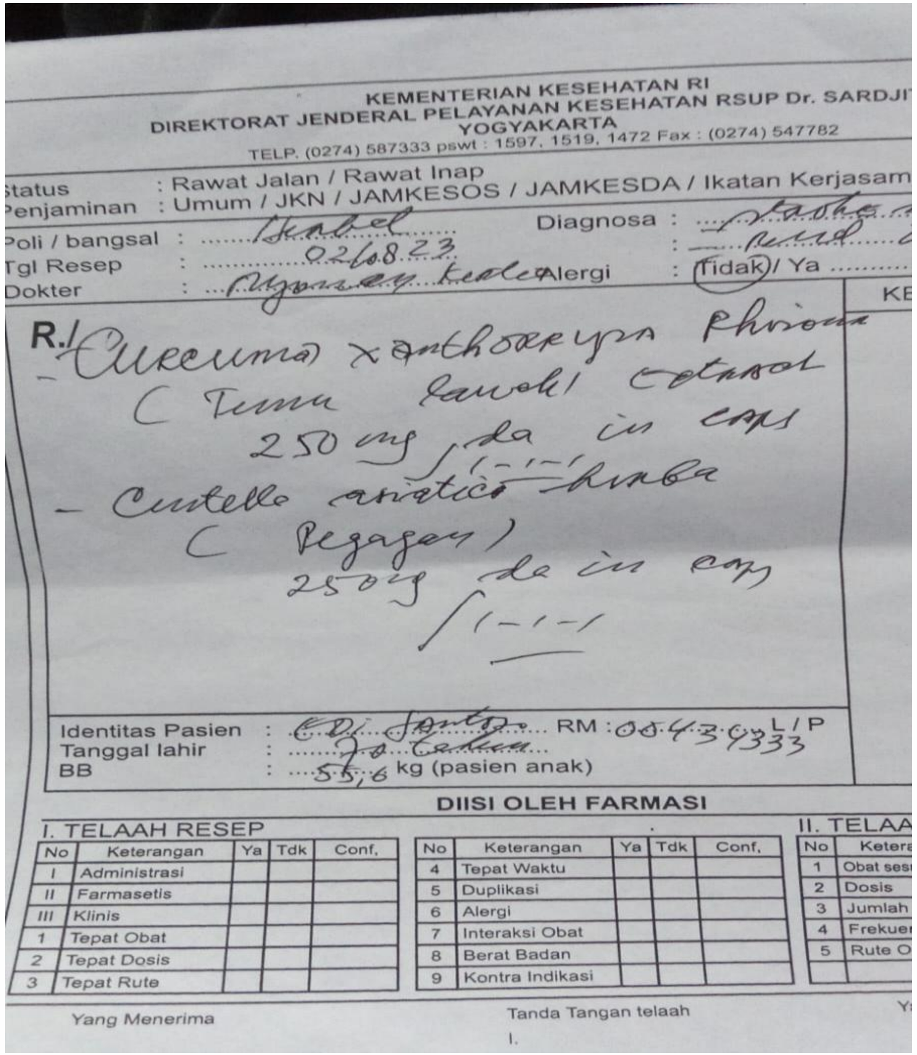
Tabel 8. rata-rata persentase penurunan KGD

KELOMPOK	PENURUNAN (%)
Normal	-
Negatif	17,204
Positif	70,082
Dosis 1	65,807
Dosis 2	71,736
Dosis 3	79,726

Keterangan : Kelompok normal (tanpa perlakuan), negatif (aquadest), positif (glibenklamid dengan dosis 0,09 mg/200 gBB), dosis 1 ("Trigonella" dosis 18 mg/200 gBB tikus), dosis 2 ("Trigonella" dosis 36 mg/200 gBB tikus), dosis 3 ("Trigonella" dosis 54 mg/200 gBB tikus).

CV GRIYA AN NUR Kampung Raden RT 01 RW 02 No.55 Kelurahan Jatiraden, Kecamatan Jatisampurna	Pabrik: **CV. GRIYA AN NUR** Kampung Raden RT 01 RW 02 Gedung B, No. 88 Kelurahan Jatiraden, Kecamatan Jatisampurna	**KINOTENS** Dus, Blister @ 2, 4, 8, 10, 12 kapsul Obat Tradisional
CV GRIYA AN NUR Kampung Raden RT 01 RW 02 No.55 Kelurahan Jatiraden, Kecamatan Jatisampurna	Pabrik: **CV. GRIYA AN NUR** Kampung Raden RT 01 RW 02 Gedung B, No. 88 Kelurahan Jatiraden, Kecamatan Jatisampurna	**KINORAT** Dus, Blister @ 2, 4, 8, 10, 12 kapsul Obat Tradisional
CV GRIYA AN NUR Kampung Raden RT 01 RW 02 No.55 Kelurahan Jatiraden, Kecamatan Jatisampurna	Pabrik: **CV. GRIYA AN NUR** Kampung Raden RT 01 RW 02 Gedung B, No. 88 Kelurahan Jatiraden, Kecamatan Jatisampurna	**KINOTEROL** Dus, Blister @ 2, 4, 8, 10, 12 kapsul Obat Tradisional
CV GRIYA AN NUR Kampung Raden RT 01 RW 02 No.55 Kelurahan Jatiraden, Kecamatan Jatisampurna	Pabrik: **CV. GRIYA AN NUR** Kampung Raden RT 01 RW 02 Gedung B, No. 88 Kelurahan Jatiraden, Kecamatan Jatisampurna	**KINODIAB** Dus, Blister @ 2, 4, 8, 10, 12 kapsul Obat Tradisional
CV GRIYA AN NUR Kampung Raden RT 01 RW 02 No.55 Kelurahan Jatiraden, Kecamatan Jatisampurna	Pabrik: **CV. GRIYA AN NUR** Kampung Raden RT 01 RW 02 Gedung B, No. 88 Kelurahan Jatiraden, Kecamatan Jatisampurna	**KINOMAG** Dus, Blister @ 2, 4, 8, 10, 12 kapsul Obat Tradisional


Nama: Nani Suryani
Umur: 61 tahun
Keluhan: Sakit lambung
Sulit BAB
Susah napas
GERD
↑ Asam lambung
Inflamasi
Gangguan motilitas usus (konstipasi)
- Jahe
- Kunyit
- Pisang
- Jahe
- Kunyit
- Jahe
- Pisang
R/ Zingiber officinale 300 mg
Curcuma longa 200 mg
Musa sp. 100 mg



KEMENTERIAN KESEHATAN RI
DIREKTORAT JENDERAL PELAYANAN KESEHATAN RSUP Dr. SARDJI
YOGYAKARTA
TELP. (0274) 587333 pswt : 1597, 1519, 1472 Fax : (0274) 547782

Status : Rawat Jalan / Rawat Inap
Penjaminan : Umum / JKN / JAMKESOS / JAMKESDA / Ikatan Kerjasam
Poli / bangsal : ....
Diagnosa : ....
Tgl Resep : 02/08/23
Alergi : Tidak / Ya ....
Dokter : ....

R./ - Curcuma xanthorrhyza Rhizoma (Temu lawak) extract 250 mg da in caps
S 1-1-1
- Centella asiatica herba (Pegagan) 250 mg da in caps
S 1-1-1

Identitas Pasien : .... RM : .... L/P
Tanggal lahir : ....
BB : ....55,6 kg (pasien anak)

DIISI OLEH FARMASI

I. TELAAH RESEP

No	Keterangan	Ya	Tdk	Conf.
I	Administrasi			
II	Farmasetis			
III	Klinis			
1	Tepat Obat			
2	Tepat Dosis			
3	Tepat Rute			
4	Tepat Waktu			
5	Duplikasi			
6	Alergi			
7	Interaksi Obat			
8	Berat Badan			
9	Kontra Indikasi			

II. TELAA

No	Ketera
1	Obat ses
2	Dosis
3	Jumlah
4	Frekue
5	Rute O

Yang Menerima

Tanda Tangan telaah

I.

PELATIHAN TIBBUN NABAWI

TO CURE IS SOMETIMES
TO RELIEVE IS OFTEN
TO COMFORT IS ALWAYS

Untitled. Benyamin Lampson.
Academic Medicine 2007;82:1112-3

Terima Kasih