



Comparison of Asmaul Husna and Benson Relaxation on Decreasing of Pain among Patients with Post Antebrachii Operated at Public Hospital Sidoarjo

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Abstract. Fractures are a breakdown of bone continuity caused by sudden and excessive force. The study aimed at examining the comparison of Asmaul Husna and Benson relaxation on decreasing pain among patients with post operated of ante brachial fracture at public Hospital Sidoarjo. Methods: A quasi-experimental, pre-test, and post-test with a non-equivalent control group was applied in this study. Twenty-eight samples were recruited using consecutive sampling. Data analysis was performed and presented in descriptive statistics, and significant findings were computed using the ANOVA t-test. Results: The results showed that the mean pain scale Benson relaxation group downhill from 6.07 ± 2.20 to 3.29 ± 2.30 after the intervention. Meanwhile, the control group, mean pain scale downhill from 5.29 ± 2.37 to 2.50 ± 1.40 . The repeated Anova obtained a p-value of 0.000, indicated that there were significant differences in pain level between the patients who received the benison relaxation than the asmaul husna distraction. Benson relaxation can reduce the pain scale better than asmaul husna Benson in patients' post-ante brachial fracture surgery in Sidoarjo Hospital. Nurses should consider the Benson relaxation to manage pain among post antibrachial operated.

Keyword: fracture, pain scale, benson relaxation, asmaul husna distraction



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PENDAHULUAN

Fracture is a breakdown of bone continuity caused by sudden and excessive force, which can be in the form of beating, destruction, bending, twisting, or withdrawal (1). Pain due to trauma appears as a result of nerve endings free of damage. Pain receptors include free

nerve endings that respond to various stimuli, including mechanical stress (trauma), deformation, extreme temperatures, and multiple chemicals. The energy from these stimuli can be converted into electrical energy, and this energy change is called transduction. Transduction starts at the periphery when the stimulus of pain sends impulses that pass peripheral pain nerve fibers found in the five senses; it will cause an action potential. After the transduction process is complete, the transmission of pain impulses begins (2). Cell damage can result in the release of neurotransmitters such as histamine, serotonin, some prostaglandins, potassium ions, hydrogen ions, and substance P. Each of these substances is deposited in the site of the injury including fractures, hypoxia, or cell death. Sensitive substances that are present around pain fibers in extracellular fluid spread the message of pain and cause inflammation (3).

A study mentioned that pain felt by a person affects not only his physical condition but also affects his psychological condition. Pain affects the emotional component of the patient and is often accompanied by anxiety (1). Pain is often explained in terms of destructive tissue processes (such as being punctured, burning heat, twisting, such as being torn apart, such as squeezing) and a bodily or emotional reaction (eg, feeling afraid, nauseous, drunk). What's more, feelings of pain with moderate to vigorous intensity are accompanied by feelings of anxiety (anxiety) and a strong desire to escape from or negate those feelings (4). This is supported by the study of Agiani (2012) entitled the relationship of the use of coping mechanisms to pain intensity in patients post-fracture surgery. This study shows the average results of respondents having maladaptive coping mechanisms, namely as many as 16 people (53.3%) and 14 people (46.7%) have adaptive coping mechanisms. The results for the intensity of the respondent's pain, namely, severe pain as many as 12 people (40%), moderate pain as many as 11 people (36.7%), and mild pain as many as seven people (23.3%).

Handling in general in postoperative fracture patients is pain management, which is one of the methods used in the field of health to deal with pain experienced by patients. There is no limited pharmacological approach because emotions and individual responses to him also influence pain. Non-pharmacological pain relief methods are used. Also, not a substitute for drug therapy. Non-Pharmacological therapy is to use relaxation and distraction techniques (1). The advantages of exercising relaxation techniques compared to other methods are more comfortable to do, and there are no side effects (5). Listening to the reading of the Asma ul Husna can be used in dealing with anxiety or pain in various diseases. Applicatively listening to Asmaul Husna is not challenging to do and is easy and fast to implement (6). Both of these therapies have an excellent effect on reducing pain.

OBJECTIVE

The study aimed to examine the comparison of Asmaul Husna and Benson relaxation on decreasing pain among patients with post operated of antebrachial fracture public Hospital Sidoarjo.

METHOD

A quasi-experimental study design, pre, and post-test design with the non-equivalent control group were applied in this study. Twenty-eight samples were recruited using the consecutive sampling technique. The samples were divided into the first group who received the Benson relaxation intervention (n=14) and the second group who received the Distraction Asmaul Husna group (n=14). We conducted the study at a public hospital at Sidoarjo. The inclusion criteria of this study, including 1) conscious patients, 2) Islam religious with aged 18-65 years old, and 3) under post antebrachial fracture surgery. Samples who have

experienced mental disorders and severe to communication in verbal and nonverbal were excluded from this study.

The Benson Relaxation Group was given 15 minutes with a frequency of 2 times a day, and the Asmaul Husna distraction group was given for 15 minutes with a frequency of 2 times a day. Objective and subjective measurements were carried out before and after the intervention. A repeated measure ANOVA test was used to measure the mean difference of the first group and the second group for more than two times measured.

The research ethics committee approved this study of the Health Research Ethics Commission of Sidoarjo Hospital. All respondents were informed about the purpose of the study and agreed to their participation in this study

RESULTS

Characteristic of respondents

Table 1 showed the characteristic of respondents. Most of the respondents were 17-25 years old (57,2%). More than half of the respondents were men (53,5%). Regarding the education level, the majority of them have graduated from high school (89,3%). Details were summarized in table 1.

Table 1: Frequency of trust in tuberculosis treatment

Trust	Frequency	(%)
Aged		
17-25	16	57.2
26-35	6	21.5
36-45	2	7.1
46-55	2	7.1
56-65	2	7.1
Gender		
Man	15	53.5
Women	13	46.5
Education		
Junior high school	1	3.6
High school	25	89.3
College	2	7.1

Comparison of asmaul husna Benson and Benson relaxation on pain reduction among post antebrachial fractures operated at public hospital Sidoarjo

Table 2 showed the comparison of asmaul husna Benson and Benson relaxation on pain reduction among post antebrachial fractures operated at public hospital Sidoarjo. The findings described before receiving the Benson relaxation, the pain level was 6,07, and after the intervention, the mean pain level decreased to be 3,29. The group who received the Asmaul Husna Distraction showed decreased from 5,29 to be 2,50.

Regarding the comparison of mean difference, a group who received the Asmaul Husna Distraction showed a higher mean difference (Delta=3.07) and a group who receive the Benson relaxation (Delta=2.79). Therefore, the group with Asmaul Husna Distraction more effective compared group who receive the Benson relaxation in terms of decreasing pain level. Details were summarized in table 2

Table 1: Comparison of asmaul husna Benson and Benson relaxation on pain reduction among post antebrachial fractures operated at public hospital Sidoarjo

Group	Variable	Mean (SD)	Delta Δ	P Value
Benson Relaxation	Pain Pre Test	6.07 ± 2.20	3.07	0.000
	Pain Post 1	4.93 ± 2.27		
	Pain Post 2	3.00 ± 1.52		
	Pain Post 3	3.29 ± 2.30		
Asmaul Husna Distraction	Pain Pre Test	5.29 ± 2.37	2.79	0.000
	Pain Post 1	3.79 ± 1.53		
	Pain Post 2	2.57 ± 1.28		
	Pain Post 3	2.50 ± 1.40		

DISCUSSION

The results of the study explained that the Benson Relaxation intervention had a significant difference in pain response in the pre-test to the third post-test measurement. It dramatically affects the decrease in the scale of pain in postoperative patients. This study also supports the (7) study, which states that Benson relaxation is highly recommended to reduce post-surgical pain.

Benson Relaxation is one of the complementary therapies to reduce post-surgical pain. Benson Relaxation is a relaxation technique that is combined with the beliefs held by the patient explaining that certain word or sentence formulas that are read repeatedly by involving elements of faith and belief will lead to a stronger relaxation response than just relaxation without involving the patient's beliefs (7) Benson Relaxation is a relaxation technique created by an expert medical researcher from the Harvard medical faculty named Herbert Benson. Herbert Benson examines some of the benefits of prayer and meditation that a person does to improve health. This relaxation technique is known as the Benson Relaxation technique (5). Benson Relaxation can develop relaxation response methods by involving patient confidence factors, which can create an internal environment so that it can help patients achieve higher health and wellness conditions (8).

The purpose of breathing relaxation technique is to improve ventilation of the alveoli, maintaining gas exchange, prevent lung attenuation, increase cough efficiency, reduce stress both physical and emotional stress, namely reduce pain intensity and reduce anxiety and reduce systolic and diastolic blood pressure (9). The benefits of Benson relaxation are as follows: peace of mind, reduced anxiety, worry and anxiety, low stress and mental tension, lower heart rate, decreased blood pressure, higher resistance to illness, better sleep and mental health for the better, better memory, increase the power of logical thinking, increase creativity, increase confidence, improve strength and increase the ability to relate to other people (10).

Distraction is to divert the client's attention to something else so that it can reduce alertness to pain, even increase tolerance to pain. Distraction techniques can overcome pain based on the theory of reticular activation, which inhibits pain stimuli when a person receives sufficient or excessive sensory input, which obstructs pain impulses to the brain (pain is reduced or not felt by the client) (11). Distraction is thought to reduce pain perception, which stimulates the descending control system, which results in less pain stimulation transmitted to the brain (12). Pleasant sensory stimulation will stimulate endorphins secretion so that the pain stimulus felt by the client becomes less. Distraction works best for short periods, to deal with intense pain lasting only a few minutes, for example during the implementation of

invasive procedures or when waiting for analgesic work (13) Distraction can be used in hospitals, at home, or in long-term care facilities (14).

The workings of this Benson relaxation technique are focused on certain words or sentences repeated repeatedly with a regular rhythm accompanied by surrender to God Almighty while taking a deep breath. Long breathing can provide enough energy because when exhaling exhale carbon dioxide (CO₂) and when breathing deeply get oxygen which is needed by the body to cleanse the blood and prevent damage to brain tissue due to lack of oxygen (hypoxia). When inhaling the muscles of the abdominal wall (abdominal rectus, transverse abdominal, internal and external bonds) pressing the lower ribs towards the back while pushing the diaphragm partition upward can result in elevating intra-abdominal pressure, which can stimulate blood flow both the inferior vena cava and abdominal aorta, resulting in blood flow (vascularization) to increase throughout the body, especially vital organs such as the brain so that O₂ is sufficient in the brain and the body becomes relaxed (15).

This research is supported by research (6), which says that the form of distraction technique that is often used is a hearing distraction. Hearing distraction is usually done by listening to natural sounds or meditation instructions and can also be sounds that contain spiritual elements in accordance with the beliefs held. Listen to the reading of the Asma ul Husna can be used in dealing with anxiety or pain in various diseases. Applicatively listen. Asmaul Husna is not challenging to do and is easy and fast to implement. This therapy can be used as a complementary therapy for pharmacological treatment. Medical treatment alone is not complete without being accompanied by religion (religion and dzikir), and vice versa, religious treatment is also incomplete without medical treatment. When the brain will produce chemicals that will give a sense of comfort, namely neuropeptides. After the brain produces these substances, these substances will be involved and absorbed in the body, which will then provide feedback in the form of pleasure and comfort (16). According to the result, the limitations are the respondent's pain response influenced by surgery and socio-cultural actions which can also affect the client's response

CONCLUSION

The Benson Relaxation can reduce the Pain Scale better than Asmaul Husna Benson In Patients Post-Antebrachii Fracture Surgery in Sidoarjo Hospital. The nurse profession is expected to be able to use preoperative Benson Relaxation to Decrease Pain Scale On Post Operation Patients Antebrachii Fractures. The limitations were also accoutered since several factors associated with pain may influence that difficult to manage by the researcher directly.

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