

Effectiveness of Relaxation Handheld Fingertechnique and Benson Relaxation to the Changes Level of Post Operative Pain Sectio Caesarea in Rsi Sakinah Mojokerto

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Abstract

Pain after major or minor surgery will impact the anatomical and physiological changes in patients. Giving anesthetic is not always sufficient to eliminate the sensation of pain because the pain response of each patient is different. Postoperative pain caesarea section must be solved with non-pharmacological methods of handheld eg relaxation techniques and relaxation benson finger. The purpose of this research was to prove efektifitas between both these relaxation techniques to changes in the level of postoperative pain section caesarea in RSI Sakinah Mojokerto. The research design is pre experiment with methods of the two groups without pretest-posttest control group. The population in the research of 20 respondents with non-probability sampling technique that was concecutive sampling, while the samples are 10 respondents in the relaxation group and 10 respondents handheld finger on relaksai group benson. Analysis of data using univariate analysis showed a decrease in pain level respondents in the relaxation group handheld finger 10 respondents (100%), while the decrease in the level of pain in the relaxation group benson much as 8 respondents (80%). Wilcoxon statistical test results showed $p = 0.005 < \alpha = 0.05$, for relaxation handheld fingers and $p = 0.016 < \alpha = 0.05$ for benson relaxation, so H_0 was rejected it means there was the influence of both good therapy relaxation techniques handheld fingers or relaxation benson but when compared fingers handheld relaxation techniques more effectively to changes in the level of postoperative pain caesarea section. The results of this reseach recommended relaxation techniques and relaxation benson finger handheld can be used as a standalone action undertaken nonpharmacologic nursing nurses to reduce the level of postoperative pain caesarea section.

Keywords: Relaxation Techniques Handheld Finger, Benson Relaxation, Pain Level, Post Operative Sectio Caesarea

Introduction

Relaxation is a mental and physical freedom from tension and stress, because it can change the perception of cognitive and affective motivation pasien. Teknik relaxation makes patients can control themselves when the discomfort or pain, physical and emotional stress on pain⁵. Handheld Relaxation finger is a relaxation technique is very simple and easy to do by anyone associated with fingers as well as the flow of energy in our bodies. Handheld finger technique is also called finger hold³. While Benson relaxation technique developed by Benson at Harvard's Thorndike Memorial Laboratory and Boston's Beth Israel Hospital reinforced by Proctor by explaining that the formula of words or sentences that read again

by involving elements of confidence raises more powerful relaxation response.

According Tanra (2007), that the number of patients undergoing surgery in the United States about 25 million people per year. Of this amount, the majority of them are still suffering because of post-surgical pain management is not robust. Post-surgical pain management, not just an effort to reduce the suffering of the client, but also improve the quality of life. WHO data (2009) showed that for more than a century, surgical treatment has become an important component of health care around the world. It is estimated that each year there are 230 million surgical procedures performed worldwide. WHO (2009) estimated that the number of labor with caesarea estimation

sectio 10% to 15% of all labor. In developed countries like the United Kingdom sectio Caesarea incidence by 20% and in the United States by 23%. Sectio Caesarea development operations in Indonesia by a simple survey conducted by Gulardi and Basalamah, to 64 hospitals in Jakarta in 1993 the result was recorded 17 665 births as 35.7 to 55.3% gave birth to the operation sectio Caesarea (Hasri, 2012).

Data Tabulation National Ministry of Health in Indonesia in 2009, outlines that the surgery ranks 11th out of 50 patterns of disease in Indonesia with a percentage of 12.8%. In the district of Mojokerto itself on the case of either major or minor surgery nearly a percentage of 88.9% spread across every major region of Mojokerto Hospital each year. Based on medical records RSI Sakinah Mojokerto on January 2, 2016, in the last 1 year RSI Sakinah Mojokerto has handled 1536 cases of surgery.

An incision in the skin will stimulate the nerves to conduct pain signals to the brain. A painful stimuli turn into an electrical activity that will be accepted in nerve endings. These stimuli can be either physical stimuli (pressure), temperature (heat) or chemical (substance pain). The distribution of sensory nerve impulses through the following transduction process. This impulse is supplied by nerve fibers A delta and C fibers as the first neuron, from the periphery to the spinal cord where the experience of impulse modulation before passing to the thalamus by sphinotalamikus tract as a second neuron. From next thalamus impulses channeled into somato sensory area of the cerebral cortex via a third neuron, where impulses are interpreted and perceived as pain perception. Endogenous analgesic systems have effects that can suppress pain impulses in the spinal cord dorsal horn is described as a door that can close or open the sensation of pain, causing pain becomes very subjective perception per orang. Seiring body begins to heal, the pain should diminish and eventually disappear once. The duration of post-operative pain can depend on several factors such as a person's general health (Prasetya, 2010).

In the management of pain management is usually used pharmacologically form of analgesic drugs and non-pharmacological measures. Non-pharmacological methods of pain relief usually involves the risks very rendah. Meskipun such action is not a substitute for drug action, such action may be necessary or appropriate to shorten

episodes of pain that lasts only a few seconds or minutes.

Relaxation techniques handheld fingerprint is the easy way to manage their emotions and develop emotional intelligence (Cane, 2013) and Potter & Perry (2006) suggest that relaxation techniques makes patients can control themselves when the discomfort or pain, physical stress and emotions on pain , While relaxation techniques or relaxation religious benson is a development of the relaxation response developed by Benson, where relaxation is a mix between relaxation by incorporating factors that embrace religious beliefs.

The purpose of this research was to prove the effectiveness of relaxation techniques and relaxation handheld finger benson terhadap postoperative pain level changes Sectio Caesarea in RSI Sakinah Mojokerto.

RESEARCH METHODS

This research used a pre-experiment with the design of the two groups' pre test - post test without control group in research design. Dependent variabel relaxation techniques and relaxation Benson handheld fingers, while the independent variable was painful postoperative pain Caesarea section. The sample in this study are patients with postoperative SC in RSI Sakinah Mojokerto who met the inclusion criteria were 20 people with consecutive sampling technique.

The instrument used SOP handheld relaxation techniques and relaxation techniques fingers Benson.

Research Location in RSI Sakinah Mojokerto and time of the study conducted from January 2016 to August 2016. The data collection technique: in this ressearch using interview techniques (pre-test and post-test). Results were analyzed using the Wilcoxon statistical test.

Research Result

No. Respondent	Before treatment	After treatment	Ordinal scale
1	5	2	0= no
2	4	3	pain
3	6	1	1-3=
4	4	1	mild
5	5	3	pain
6	6	1	4-6=
7	5	2	moderate
8	3	2	severe pain
9	5	3	7-10=
10	6	3	severe pain
Mean	4,9	2,1	

Table 4.1 Distribution of comparison before and after relaxation techniques handheld finger

Table 4.2 Distribution of comparison before and after benson technique.

No. Respondent	Before treatment	After treatment	Ordinal scale
1	4	5	0= no
2	5	2	pain
3	2	0	1-3=
4	3	0	mild
5	3	0	pain
6	7	4	4-6=
7	3	3	moderate
8	5	4	severe pain
9	4	3	7-10=
10	4	3	severe pain
Mean	4,0	2,4	

Based on Table 4.1 and Table 4.2 above showed that the scale of the pain experienced by the respondents before being given treatment after the given treatment there is a decrease in pain.

Wilcoxon statistical test results showed $p = 0.005 < \alpha = 0.05$, for relaxation handheld fingers and $p = 0.016 < \alpha = 0.05$ for benson relaxation which meant that H_0 rejected so that it can be concluded that there was a good therapeutic effect of both hand-held relaxation techniques benson finger or

relaxation, but if compared with handheld finger relaxation techniques more effectively to changes in the level of postoperative pain caesarea section.

Discussion

Based on table 4.1 above studies conducted on the finger handheld relaxation therapy group of 10 people, all (100%) said mild pain after being given treatment with a mean of 2.1. Wilcoxon statistical test results also value $p = 0.005$ smaller than $\alpha = 0.05$. Table 4.2 above and based on research conducted at group therapy techniques Benson many as 10 people, all (100%) say mild pain after being given treatment with a mean of 2.4. Wilcoxon statistical test results also value $p = 0.016$ smaller than $\alpha = 0.05$.

An incision in the skin will stimulate the nerves to conduct pain signals to the brain. A painful stimuli turn into an electrical activity that will be accepted in nerve endings. These stimuli can be either physical stimuli (pressure), temperature (heat) or chemical (substance pain). The distribution of sensory nerve impulses through the following transduction process. This impulse was supplied by nerve fibers A delta and C fibers as the first neuron, from the periphery to the spinal cord where the experience of impulse modulation before passing to the thalamus by spinothalamic tract as a second neuron. From next thalamus impulses channeled into somato sensory area of the cerebral cortex via a third neuron, where impulses were interpreted and perceived as pain perception (Prasetya, 2010). Changes pain that occurs due to the action of skeletal muscle relaxation by grasping the finger will produce impulses that are sent through the nerve fiber afferent nociceptors resulting in non-gelatinous substance enclosed so the stimulus of the cerebral cortex is inhibited by counter finger grips (Pinandita, 2012).

Relaxation handheld and restore the finger can control the emotions that will make the body become relaxed. Stimulation of pain in surgical wounds caused the release of mediators of pain that would stimulate the transmission of impulses along the afferent fibers of nociceptors. In this case the state of calm and concentration greatly affect the success of relaxation therapy was done because of the quiet atmosphere created will generate positive energy flowing -energy of each body. And when the concentration was increasing stimulus generated by nerve fibers A-delta and C will be many more to inhibit pain stimuli to the brain.

Benson relaxation developed by Benson at Harvard's Thorndike Memorial Laboratory and Boston's Beth Israel Hospital. Benson and Proctor explained that the formula of words or phrases that read repeatedly by involving the element of faith and belief will build relaxation response which was more powerful than just relaxation without involving elements of the patient's beliefs (Datak, 2008).

Man-Whitney test results there were differences in levels of pain after Benson relaxation technique in the control group and the treatment group ($p = 0.000$) (Puspa, 2015).

Benson Relaxation itself had many benefits for human organs, if done the right way. Formula words or sentences that read repeatedly by involving elements of conviction will lead to a positive response in the nerve fibers delta-A which will enhance the work of the dorsal horn and gelatinous substance so that the stimulus of pain stimuli may be hindered.

On the handheld relaxation finger relaxes muscle tension frame with finger grips and the flow of energy in the body is able to increase the employment stimulus gelatinous substance on nerve fibers -A delta and C nerve fibers that inhibit excitatory mechanisms of T cells in the brain. While relaxation benson who rely on words with the element of confidence will not be successful if the patients' concentration disturbed. So the stimulus from noniseptor impulses generated by the formulation of positive words of faith and confidence will not be able to hinder the work mechanism of the T cells in the brain stimuli. That is why the finger handheld relaxation to more effectively reduce the level of pain post opertif section Caesarea compared with Benson relaxation.

Conclusion

Relaxation techniques Handheld Fingerprint more effective to change the level of postoperative pain compared with the section Benson relaxation techniques. The more often we merelaksasikan skeletal muscle by holding a finger, the greater the pain stimulus was inhibited by counter finger grips.

Suggestion

1. For Health Care Institutions

For Hospital is expected to be considered for implementation as nursing care with finger

handheld relaxation therapy in patients with post-operative section Caesarea.

2. For Educational Institutions

For Institutions are expected to be a reference in the provision of mobile finger relaxation therapy in patients with post-operative section caesarea as an independent non-pharmacological interventions in nursing care.

3. For the Respondents

For respondents expected to increase knowledge about the simple handling when the pain.

4. For Nursing Profession

Is expected to become an independent action for nurses when handling cases that postoperative analgesic drug use can be minimized.

5. For researchers Selanjunya

Are expected to evaluate the general data by adding experience / history of labor (especially history SC), as well as the number of parity.

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