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RELAXATION AND DISTRACTION TECHNIQUES FOR REDUCING ANXIETY IN PATIENTS WITH CIRCUMCISION

ABSTRACT

Relaxation and distraction are non-pharmacologic techniques in the therapy of anxiety. In circumcision patients, the experience of anxiety is felt by the patients, either children or adolescents. This study aimed to measure relaxation and distraction technique in reducing anxiety in circumcision patients. The respondents were 36 divided equal into two groups;18 person in each relaxation and distraction groups. The respondents were assessed their anxiety levels before and after the intervention (pre-test and post-test for each group). The Wilcoxon Signed rank test result for the relaxation group was in a Z statistic of -3.317, which resulted in an exact p-value of .001; and the distraction group results were in a Z statistic of -2.449, which resulted in an exact p-value of .014. There was significant result between pre-test and post-test for each group regarding anxiety level. However, the parents could be part of the delivery of these techniques to help the child's fear of the circumcision's procedure.

Keyword: Anxiety, Relaxation, Distraction, Circumcision

INTRODUCTION

In recent years, circumcision has undergone many developments, including the method that prioritizes patient comfort. However, circumcision is still categorized as a minor surgical procedure which causes pain after the procedure (Prasetyono, 2010). This reason leads patients to feel anxious, especially in the face of pre-circumcision surgery.

Compared with performing circumcision on younger children, the performing circumcision of the child > 1-year-old is more at risk of being affected psychologically by the procedure (Bicer et al, 2015). The anxiety perception in children may affect the quality of surgery. In the clinic, "Rumah Khitan Sarirogo Sidoarjo", most of the children who will perform circumcision in that place experience problems such as fear, crying, refuses to enter the room and asking their parents to accompany them when they want to enter the room. This shows the problem in children who will do circumcision in the clinics.

Anxiety is a feeling of fear and worries about something that may not be obvious. Techniques to reduce anxiety can be of various kinds, including distraction and relaxation techniques (Ramaiah, 2003). Relaxation can be interpreted as a technique used to deal with stress where there will be an increase in blood flow so that feelings of anxiety and worry will decrease. The distraction technique is a technique that is done by diverting the patient's attention to things that are pleasant according to the patient, in contrast the relaxation technique is a deep breathing technique that is carried out to make the patient more relaxed so that the patient's anxiety is expected to decrease (Darlina, 2006; Dio, 2017).

Based on the things mentioned above, the authors are interested in examining the distraction and relaxation techniques on reducing anxiety levels in patients with circumcision.

METHOD OF RESEARCH

The study design was a pre-experimental two-group pretest-posttest research design. The groups were the relaxation group and the distraction group. Each group consisted of 18 respondents that assessed their anxiety level twice (before and after intervention). The research was conducted at "Rumah Khitan Sarirogo Sidoarjo" in December 2021. The respondents were patients > 5 years old and undergoing circumcision. The respondents and their parents have informed that their participation in the study was voluntary, and each participant with the parents signed a consent form indicating her willingness to participate in the study. Permission to conduct the study was obtained from the head of the clinic.

The instrument of anxiety was Hamilton Rating Scale for Anxiety (HARS). Anxiety scale consists of four levels: normal or no anxiety (0–9), mild to moderate anxiety (10–18), moderate to severe anxiety (19–29), and severe anxiety (30–63) (Stuart, 2009). The researcher did the intervention for the respondents based on the procedure instrument used in the clinic. The intervention was relaxation and distraction. For the relaxation group, the researcher explained the relaxation purpose to the respondents and their parents, then demonstrated the deep breathing technique (breath in deeply and slowly through the nose, hold for a count of 3 to 5, and breathe out slowly and entirely through pursed lips) while focusing on breathing. For the distraction group, the researcher explained the distraction purpose to the respondents and their parents, and then asked patients to watch the movie for about 5 minutes.

RESULTS

The total of respondents in this study was 36 persons divided into two groups. The characteristic of respondents showed in Table 1.

Characteristics	Number	Percentage (%)			
Age (years old)					
5 – 7	12	33.3			
7 – 9	7	19.4			
9 – 11	10	27.9			
> 11	7	19.4			
Born as					
1 st kid	14	38,9			

Table 1. Characteristic of Respondents (N=36)

2 nd kid	3	8,3
3 rd kid	9	25
> 3 rd kid	10	27,8

The anxiety level of both relaxation and distraction groups assessed before and after the intervention as shown in Table 2. The Wilcoxon signed-rank test was used to compare of pre-test and post-test on each relaxation and distraction technique in reducing anxiety levels. The p-value of the relaxation group was .001 (Z statistic = -3.317), and the distraction group was .014 (Z statistic = -2.449).

Table 2. Anxiety Level on Relaxation and Distraction Group (N= 36)

	Relaxation Group		Distraction Group	
	Pre-test	Post-test	Pre-test	Post-test
No Anxiety	2	5	0	2
Mild Anxiety	7	10	12	13
Moderate Anxiety	7	3	5	3

Severe Anxiety	2	0	1	0

Z statistic	-3.317	-2.449
Asymp Sig. (2-tailed)	.001	.014

DISCUSSION

Based on Table 2, shows that more than half experienced mild-moderate anxiety before receiving the intervention. Anxiety is a normal reaction to situations that are very stressful for a person's life and therefore lasts for a short time. Age is one of the internal factors that contribute to feel anxious. The older age might more mature a person's psychology, and then would be better in adapting anxiety (Sumiati et al, 2013). Children who experience high levels of anxiety might cause deep trauma, and can inhibit the process of growth and development. In general, anxiety factors in children who undergo medical treatment can be divided into 3 factors: children, parents and environmental factors (Ramainah, 2003). The younger the child's age, the more difficult it is to adjust to the new environment; which is an unfamiliar environment and procedure of action.

Seveal ways can be done to reduce anxiety in patients, one of which is relaxation. The purpose of using relaxation techniques in nursing interventions is to divert or keep the client's attention away from something that is being faced, such as pain (Darlina, 2006). While the benefits of this technique are that someone who receives this technique more comfortable, relaxed, and feels in a pleasant position. Relaxation technique was used on patients with chronic desease to increase comfort through maintaining the respiratory process (Wibrata et al, 2019).

Another intervention to reduce anxiety is a distraction. Distraction is a reticular activation system that can inhibit a painful stimulus if a person receives sufficient or excessive sensory input. Distraction is an activity to divert the client's attention to other things and thus can reduce fear of pain and can even increasing tolerance to pain (Potter & Perry, 2012). There are several kinds of distraction techniques such as visual, auditory, respiratory, and intellectual (Sumiati et al, 2013). From the study results conducted on 15 children to be performed in circumcision surgery (Dio, 2017), it was the provision of visual distraction techniques for cartoon films that effectively reduced their anxiety level (before intervention was 1.73 after the intervention was 1.27, and statistical test results the p-value of .004).

According to comparison results between the two techniques as in Table 2, the anxiety level of the relaxation group (pre and post) was -3.317, and significant p-value of .001 (< .05); and the anxiety level of the distraction group (pre and post) was -2.449 and significant p-value of .014 (< .05). Both techniques were effective in reducing the anxiety level of the patient with circumcision surgery. However, the relaxation group was a slightly high different of anxiety levels before and after the intervention compared with the distraction group. Relaxation technique might be more adequate for children who faced

circumcision because they would be more focused on their bodies even though they see the area of circumcision. Compared with the distraction technique they would easily feel anxious if they see the nurse circumcise. This technique may be associated with some factors as well. There needs more research to explore this field.

CONCLUSION

There was a significant decrease in the level of anxiety in relaxation and distraction group in patients with circumcision. Non-pharmacology technique is recommended to be delivered to children before performing circumcision. Furthermore, parents' support is needed regarding psychological aspect of their children.

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