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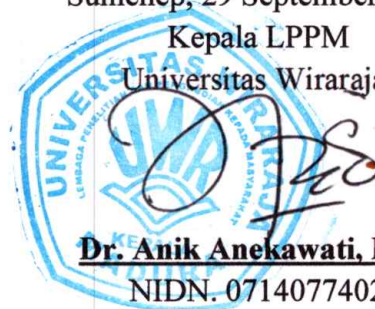
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SPIRITUAL DISTRACTION THERAPY REDUCES CHRONIC JOINT PAIN (AREA AND TIME) IN ELDERLY WHO LIVE IN COASTAL AREA

by Syaifurrahman Hidayat

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SPIRITUAL DISTRACTION THERAPY REDUCES CHRONIC JOINT PAIN (AREA AND TIME) IN ELDERLY WHO LIVE IN COASTAL AREA

SYAIFURRAHMAN HIDAYAT



BACKGROUND

- The decline of physiological functions due to the aging process induced several diseases caused by degenerative processes in the elderly
- According to the World Health Organization (WHO) in 2016, there were 335 million people in the world who experience joint pain
- Physiologically, arthritis pain often experienced by elderly.
- Distraction is conducted by focusing the patient's concentration on a specific object to avoid pain, which is a part of effective cognitive technique.

METHODS

- This study was quantitative with quasi experiment and pre-post-test control group design.
- Respondents in this study were 70 elder which chosen according to the inclusion criteria.
- Spiritual distraction therapy was given during seven days.
- The data collection used observation sheet which contain PQRST pain assessment and the VAS pain scale.
- Statistical test using the Wilcoxon and Mann Whitney tests.

RESULT

Respondent characteristic	n	%
Age (year)		
60-74 (elderly)	57	81,4%
75-90 (old)	13	18,6%
> 90 (very old)	0	0%
Sex		
Male	10	14,3%
Female	60	85,7%
Education background		
Uneducated	45	64,3%
Elementary school	25	35,7%
Junior high school	0	0%
Senior high school	0	0%
Job		
Jobless	17	24,3%
Farmer	36	51,4%
Merchant	17	24,3%

Table 2. Characteristics of Joint Pain in the Elderly

Pain characteristic	Control group		Teratment group	
	number (Σ)	Percentage (%)	number (Σ)	Percentage (%)
Provocate				
Cold Air (Morning and evening)				
Exhaustion	23	65.71	20	57.14
Movement	6	17.14	7	20.00
Total	35	100.00	35	100.00
Quality				
Continously (stabbing)	14	40.00	12	34.29
Vanish-emerge (striking)	21	60.00	23	65.71
Total	35	100.00	35	100.00
Region				
single joint	7	20.00	14	40.00
two joint	19	54.30	17	48.57
> two joint	9	25.70	4	11.43
Total	35	100.00	35	100.00
Scale				
No pain (0)	0	0.00	0	0.00
Mild (1-3)	0	0.00	4	11.43
Moderate (4-6)	3	8.57	22	62.86
Severe (7-8)	31	88.57	9	25.71
Very severe (10)	1	2.86	0	0.00
Total	35	100.00	35	100.00
Time (minutes)				
once a day (10-25)	11	31.40	14	40.00
Twice a day (25-40)	8	22.90	16	45.71
> twice a day (40-55)	16	45.70	5	14.29
Total	35	100.00	35	100.00

RESULT

Table 3. Pain Area Differences in Joint Pain Occurrence in treatment group before and after the intervention

	Pain Area	(Pre)		(Post)	
		Σ	%	Σ	%
Treatment group	single joint	7	20.00	14	40.00
	two joint	15	42.90	17	48.57
	> two joint	13	37.10	4	11.43
total		35	100%	35	100
Control group	single joint	7	20.00	7	20.00
	two joint	21	60.00	19	54.30
	> two joint	7	20.00	9	25.70
Jtotal		35	100%	35	100

Wilcoxon Rank Test at *Pre* dan *Post Test* in treatment group =sig. 0,000 (<0,05)

Mann-Whitney U at *Post Test* between control and treatment group=sig. 0,038 (<0,05)

Table 4. Differences in the time of joint pain in respondents

	Time of Pain	Before (<i>Pre</i>)		After (<i>Post</i>)	
		Σ	%	Σ	%
treatment group	Once a day (10-25 minutes)	4	11.40	14	40.00
	Twice a day (25-40 minutes)	15	42.90	16	45.71
	> Twice a day (40-55 minutes)	16	45.70	5	14.29
Total		35	100%	35	100.00
control group	Once a day (10-25 minutes)	8	22.90	11	31.40
	Twice a day (25-40 minutes)	15	42.90	8	22.90
	> Twice a day (40-55 minutes)	12	34.30	16	45.70
Total		35	100%	35	100

Wilcoxon Rank Test in *Pre* and *Post Test* treatment group =sig. 0,000 (<0,05)

Mann-Whitney U test in *Post Tes* treatment and control group =sig. 0,045 (<0,05)

DISCUSSION

- There was pain in the knee joint area In both groups, which is a degenerative joint disease and a symptom of rheumatoid arthritis (Pickering & Lucchini, 2020).
- Management in reducing pain in the knee includes spiritual distraction therapy client's sensations, feelings, and behavioural responses (Galán-Martín et al., 2019)
- Non-pharmacological management that can be done is to teach the elderly to do spiritual distraction techniques to divert their pain with spiritual methods, namely remembering God according to their beliefs (Ferreira-Valente et al., 2020).

CONCLUSIONS

- Spiritual distraction therapy is effective in reducing chronic joint pain (area and time) in the elderly who lives in the coastal area.
- Since we only apply a spiritual aspect for joint pain therapy, further research needs to apply other therapies to be used as a comparison or combination so that the most effective therapy can be found to treat joint pain in the elderly

Thank you



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