

The benar relaxation therapy (BRT) for increasing sleep quality in diabetic type II at Pakem primary health centre

Terapi relaksasi benar meningkatkan kualitas tidur pasien dengan diabetes melitus tipe II di Puskesmas Pakem Rizgi Wahyu Hidayati¹⁷, Dwi Kartika Rukmi²

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ABSTRACT

Background: Insomnia was 4.3 times more risky improving blood glucose. Nowadays, 60% of diabetes type II patients are insomnia. Sleep regulates the hormones and regulation of glucose. Poor glucose regulation has an effect on obesity, which increases the risk of diabetes complications.

Purpose: To evaluate the effect of Benar Relaxation Therapy (BRT) on increasing sleep quality in diabetes patients.

Method: This study was a Quasi-experimental method with a pre-posttest control group design—the 37 adults with type II diabetic patients. The patients who had got ADLs independently in Pakem Primary Health Centre followed this study. Both the BRT and aromatherapy needed 3 days long and got 15 minutes for one session each day. PSQI was used to measure the sleep quality of the respondents. The Friedman was used to test statistically. **Result:** Based on the result, it showed that the p-value 0.02 (p<0.05) for the intervention group with the Post Hoc result pre—post 1 was 0.017; pre-post 2 was 0.006; and pre-post 3 was0.009 (p<0.05). However, the control group was 0.188 (p>0.05).

Conclusion: Benar Relaxation Therapy significantly increases sleep quality with one session minimum intervention. This therapy can be implemented in nursing practice who have insomnia, especially patients with type II diabetes.

Keywords: Benar Relaxation Therapy; Diabetic Type II; Sleep Quality

ABSTRAK

Latar belakang: Orang insomnia berisiko 4,3 kali meningkatkan glukosa darah. Saat ini 60% pasien diabetes tipe II insomnia. Tidur mengatur hormon dan pengaturan glukosa. Regulasi glukosa buruk memiliki efek obesitas yang meningkatkan risiko komplikasi diabetes.

Tujuan: Mengevaluasi pengaruh Terapi Relaksasi Benar (BRT) terhadap peningkatan kualitas tidur pada pasien diabetes.

Metode: Penelitian menggunakan metode Quasi-experimental dengan rancangan pre-posttest control group design. Sebanyak 37 pasien dewasa penderita diabetes tipe II. Para pasien yang sudah mendapatkan ADL secara mandiri di Puskesmas Pakem mengikuti penelitian ini. Baik BRT maupun aromaterapi membutuhkan waktu 3 hari dan dengan waktu 15 menit untuk satu sesi setiap harinya. PSQI digunakan untuk mengukur kualitas tidur responden. Friedman digunakan untuk uji statistik.

Hasil: Hasil penelitian menunjukkan nilai p=0,02 (p<0,05) untuk kelompok intervensi dengan hasil Post Hoc pre–post 1 adalah 0,017; pra–pasca 2 adalah 0,006; dan pra-pasca 3 adalah 0,009 (p <0,05). Namun kelompok kontrol adalah 0,188 (p > 0,05).

Kesimpulan: Terapi Relaksasi Benar meningkatkan kualitas tidur secara signifikan dengan intervensi minimal satu sesi. Terapi dapat diimplementasikan dalam praktik keperawatan pada orang insomnia khususnya pasien diabetes tipe II.

Kata kunci: Benar Relaxation Therapy; Diabetic Tipe II; Kualitas Tidur

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BACKGROUND

Nowadays, the diabetes patients in Indonesia is getting increase (1). The type II Diabetic Mellitus prevalence in Yogyakarta is the second highest in Indonesia, diabetic is also one of the highest non-communicable diseases, along with hypertension and cancer in Di Yogyakarta (2)(3). Many of them get psychological pain, the effect of the chronic disease. Psychological pain is almost suffers for people with psychological stress(4). Insomnia is one of the psychological syndrome. Based on Jin, Chen, Yu, & Li, there is 60% of the diabetes mellitus suffering insomnia or poor sleepers(5).

People with diabetes is risky 4.3 times increasing in blood sugar with insomnia(6) Cauter, Spiegel, Tasali, & Leproult said that sleep is the major modulator of hormonal release, the regulation of glucose, and cardiovascular function. Moreover, the poor sleeper also has risky in obesity because of the hormone which play in central control of appetite. This is improve the complication in people with diabetes type II(7).

Because of this reason, it is important patient to get good quality of sleep. There is many of management which is improving the quality of sleep, such as relaxation. Benson technique and aromatherapy are the examples of non-pharmacological therapies(8)(9). This research is modified by two of the therapy; Benson Relaxation Technique and Aromatherapy. Next, this therapy is called Benar Relaxation Therapy. The aim of this study was to know the effectiveness of Benar

Relaxation Therapy to improve the sleep quality in patients with diabetic type II.

METHOD

The method was quantitative with quasi experiment pre-post control group design. The intervention group received BRT and the control group only received inhalation lavender aromatherapy. The participants' data was taken at Pakem Primary Health Centre and the cadres helped researcher to raffle them for choosing between intervention and control groups. The respondents were diabetes patients in Pakem Primary Health Center for the respondents. The inclusion criteria were Diabetes patient which is ≥ 35 years old and they had independence Activity Daily Living's (ADLs). The exclusion criteria were Diabetes patients with severe dementia, mental disorder and severe cardiopulmonary disease. Total participants were 40 patients; however, 3 patients were dropped out because they refused to be checked the blood glucose. There was one participant in control group (aromatherapy group) and there were two patients in intervention group (BRT group). Because of that, the total participants who joined in this study were 37 participants, which is divided in two group. There were 18 patients in BRT group and 19 patients in aromatherapy group. The Instruments used Pittsburgh Sleep Quality Index (PSQI) for sleep quality. Based on normality test of SPSS 21, the statistic test used Friedman. Every respondent had 15 minutes for each session in 3 days therapy. They finished the study after 9 session therapy

in 3 weeks. The formula of the aromatherapy was formulated by the researchers with 3 drops of pure aromatherapy and it was diffused in 20 ml of sterile water. While they induced the aromatherapy, they did the Benson Relaxation Techniques. This therapy called Benar Relaxation Therapy (BRT) because it was modified from Benson Relaxation **Techniques** Inhalation and Lavender Aromatherapy. Moreover, because of The Covid-19 Pandemic, the BRT recorded into video and it was shared to the respondents by the Cadres. To maintain the dosage of the Lavender Aromatherapy, the research was formulated it before it was shared to the respondents. This study also ethical approval with a number: Skep/010/KEPK/II/2020.

RESULT AND DISCUSSION

Based on table 1, the average of aged was 58. 05. It showed that most of them were adults. Female had majority in number of the respondents with 70.3%. The unemployed, including housewives and retired, was 59.5%. Most of the respondents were educated, there was 89.2%. They also got medical treatment, it was 75.7% and they had Pakem 1 Primary Health Center activities for people with chronic disease. It was called Prolanis. The majority of patients also did the exercise such as walking in the morning for about 30 minutes each day. There were only 37.8% who had other disease such as hypertension, uric acid, stroke, and kidney failure.

Table 1. Frequencies of demographic data

No	Variable	Mean (SD)	% (N = 37)				
1	Age (years olds)	58.05 (1.02)					
2	Duration (years)						
3	Sex						
	_Male		29.7				
	Female		70.3				
	Jobs						
	a. Unemployment		59.5				
4	b. Farmer		24.3				
	c. Entrepreneur		13.5				
	d. Laborer		2.7				
	Education						
5	a. Uneducated		10.8				
	b. Elementary		13.5				
	c. Junior High School		29.7				
	d. Senior High School		40.5				
	e. Diploma		5.4				
6	Diabetes Medical Treatment						
	_Yes		75.7				
	No		24.3				
7	Exercise (≥ 30 minutes)						
	Yes		73				
	No		27				
8	Other Disease						
	Yes		37.8				
	No		62.2				

Table 2 was consist of the effectivity of the therapy. Based on the Friedman test, the Benar Relaxation Therapy was more effective than Lavender Aromatherapy in increasing sleep quality (p < 0.05). The post hoc p-value for pre-test to post-test in weeks 1, 2 and 3 were under 0.05. It meant that to increase the sleep quality, the respondents should have three days therapy of Benar Relaxation Therapy.

Table 2. The Effect of Benar Relaxation Therapy (BRT) for Physiologic symptoms (N = 37)

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Variabl	Time	Int	Intervention (BENAR Therapy)			
е	Series	N	Mean -	Median (Min- Max)	Sign	
			Rank	,		

Sleep	Pre		3.17	1.5(0-7)
Quality	Post-Test		2.42	1 (0 – 2)
	_1	. 1		
	Post-Test	R R	2.28	1 (0 – 2)
	2	0		
	Post-Test	•	2.14	1 (0 – 2)
	3			, ,

*With Intervention Post-Hoc Wilcoxon: Pre-Post 1 was 0.017; Pre-Post 2 was 0.006; and Pre-Post 3 was 0.009 (p<0.05).

The results of this study state that sleep quality can be improved with Benar Relaxation Therapy. Based on statistical tests, it was found that the value of p = 0.02 (p < 0.05), meaning that this therapy is really effective in improving the quality of sleep for patients with diabetes. The differences was be met in sleep latency, sleep disorder, and medication. In sleep latency, there were any respondent said used Benar that before Relaxation Techniques, the sleep latency had 60 - 120 minutes of duration. However, after they did this therapy, the sleep latency was decreasing from 120 minutes to 10 minutes.

This is in line with Habibollahpour, Ranikesh, Motalebi, & Mohammadi that the quality of sleep in the elderly is better in clients with Benson relaxation therapy than in the control group(10). This statement is also in line with Masry, Aldoushy, & Abd that Benson relaxation is effective for reducing sleep disorders in adults and the elderly with joint replacement surgery(11). Beside it, Rambod, Pourali-mohammadi, Pasyar, Rafii, & Sharif said that the Benson relaxation technique also effective to improve sleep quality index subscale disturbance, sleep day time dysfunction, the use of sleep medication, and subjective sleep quality for the examples(12).

Because 2.15 this \$t(0 dy 5) it used mixture of Benson Relaxation Techniques and 0.02 mather 10 do 0.0

The Benar Relaxation Therapy was modified by Benson Relaxation Techniques inhalation lavender and aromatherapy. Lavender aromatherapy is improving the relaxation effect of Benson techniques. Gultom, Ginting, & Silalahi said that aromatherapy is decreasing pressure and palpitation. Because, it has a sedative effect. Lavender aromatherapy has directly effect for the brain. The receptor in a brain catch the smell of the lavender, then it delivers the information at the brain which control the mood and emotion(14).

This finding has the same results as Keshavarz Afshar et al., stated that Lavender can improve sleep disorders in postpartum mothers in a follow-up for 8 weeks. This therapy can stimulate the liquor and neurobiological systems, as well as the sedation effects of linalool acetate(15). Muz & Taşcı inhalation aromatherapy improves sleep quality and decrease fatigue level in hemodialysis patients(16).

It consistent with our result that there was

any respondent said that he took a medicine to help in sleeping process. However, after he joined the BRT, he felt better and never take any medicine anymore after they got Benar relaxation therapy (BRT). Besides, breathing in BRT is effectively for decreasing stress(17) and lowering the blood pressure(18). Because it induce development of mood and stress control(19).

CONCLUSION

The Benar relaxation Therapy (BRT) was effectively improving quality of sleep-in patients with diabetes type II. Because of this result, this therapy can be implemented to patients' diabetes type II who has insomnia or poor sleeper.

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