

An Anxiety Case Report with Murottal Alqur'an Approach in Woman Who Got Hemodialysis in Universitas Sumatera Utara Hospital, Medan

Agusmita Agusmita, Elmeida Effendy*

Department of Psychiatry, Faculty of Medicine, Universitas Sumatera Utara, Indonesia

Abstract

Citation: Agusmita A, Effendy E. An Anxiety Case Report with Murottal Alqur'an Approach in Woman Who Got Hemodialysis in Universitas Sumatera Utara Hospital, Medan. *Open Access Maced J Med Sci.* 2019 Aug 30; 7(16):2695-2697.
<https://doi.org/10.3889/oamjms.2019.420>

Keywords: Chronic renal failure; Hemodialysis; Anxiety; Murottal Al-Qur'an Therapy

***Correspondence:** Elmeida Effendy, Department of Psychiatry, Faculty of Medicine, Universitas Sumatera Utara, Indonesia. E-mail: micipsych@yahoo.com

Received: 30-Jun-2019; **Revised:** 13-Jul-2019; **Accepted:** 15-Jul-2019; **Online first:** 20-Aug-2019

Copyright: © 2019 Agusmita Agusmita, Elmeida Effendy. This is an open-access article distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (CC BY-NC 4.0)

Funding: This research did not receive any financial support

Competing Interests: The authors have declared that no competing interests exist

BACKGROUND: Chronic renal failure (CRF) is a term used to describe a decrease in kidney function caused by irreversible damage. Until now, hemodialysis is the main alternative to replacement therapy for renal function in patients with chronic renal failure because of its lower cost and lower risk of bleeding when compared to peritoneal dialysis. The effects that are felt when undergoing hemodialyses, such as muscle cramps, hypotension, headache, nausea, and vomiting. The psychological impact felt by patients is anxiety. To overcome anxiety in patients undergoing hemodialysis, we need to provide relaxation therapy, one of which is murottal Al-Qur'an. The aim is to find out whether there is an effect of giving Murottal Al-Qur' to the anxiety level of hemodialysis patients in North Sumatra Hospital Medan. The instrument in the form of the Hamilton Rating Scale for Anxiety (HRS A). The conclusion, in this case, is that there is the effect of giving Murottal Al-Qur'an therapy to the anxiety level of hemodialysis patients in North Sumatra Hospital Medan.

CASE REPORT: Mrs R 48-year-old female, Javanese tribe, Islamic religion, patient complains of palpitations, neck pain and a feeling of suffocation in the chest, anxiously felt by patients almost every day, even throughout the day, patients experience complaints when going through hemodialysis therapy, and the patient cannot cope so that the patient feels very agitated and uneasy, has difficulty sleeping at night and often wakes up, this complaint is experienced by patients 1 month and burdensome in the past 2 weeks.

CONCLUSION: Overall, this case has several unique features, the problem of anxiety in patients undergoing hemodialysis and there is an effect of giving Murottal Al-Qur'an therapy to the anxiety level of hemodialysis patients at Medan North Sumatra Hospital.

Introduction

Chronic renal failure (CRF) or end-stage renal disease (ERDS) is a term used to describe a decrease in kidney function caused by irreversible damage. Kidney failure is characterised by the inability of the kidney to maintain its normal function to maintain the volume and composition of body fluids in the normal state of food intake. Chronic kidney failure occurs after a variety of diseases that damage mass nephrons [1].

According to the World Health Organization (WHO, 2007), globally, more than 500 million people have experienced chronic kidney failure.

Approximately 1.5 million people have to live life depending on hemodialysis. While in Indonesia, there are currently around 70,000 people with chronic kidney failure who need dialysis/hemodialysis. According to Central Java Health Office data (2008) that the highest cases of kidney failure in Central Java were Surakarta City with 1497 cases (25.22%) and the second was Sukoharjo District, 742 cases (12.50%) [2], [9], [10].

Chronic kidney failure patients in their management, in addition to requiring diet and medical therapy, also need replacement therapy for kidney function consisting of dialysis and kidney transplantation. Among the two types of replacement therapy for kidney function, dialysis is a commonly

used therapy because of the limited number of living kidney donors in Indonesia. According to the type, dialysis is divided into two types, namely hemodialysis and peritoneal dialysis. Until now, hemodialysis is the main alternative to replacement therapy for renal function in patients with chronic renal failure because it considers in terms of lower costs and lower risk of bleeding when compared to peritoneal dialysis [1], [3], [4].

Hemodialysis (HD) is a replacement therapy for kidney function that is performed 2-3 times a week, with a period of each HD action that is 4-5 hours, which aims to remove residual protein metabolism and to correct disorders of fluid and electrolyte balance. The effects are felt when undergoing hemodialyses, such as muscle cramps, hypotension, headache, nausea, and vomiting. The psychological impact felt by patients is anxiety. The psychological impact felt by patients is often less of a concern for doctors or nurses. In general, treatment in hospitals is focused on restoring physical conditions without regard to the patient's psychological conditions, such as anxiety and depression [5], [6].

Anxiety is a disorder of feeling (affective) that is characterised by feelings of fear or concern that are deep and sustained, do not experience interference in assessing reality, intact personality, behaviour can be disturbed but still within normal limits. Our actions for handling patient anxiety problems can be in the form of independent actions, examples such as relaxation and distraction techniques. One of the distraction techniques used to treat anxiety in patients is murottal Al-Quran therapy because the distraction technique is an act of distraction. The influence of the Qur'an on the organs of the body has proved that only by listening to the recitation of the verses of the Qur'an, a Muslim, whether they speak Arabic or not, can feel enormous physiological changes. Decreasing depression, anxiety, sadness, gaining peace of mind, warding off various types of diseases are common influences that people feel are the object of their research [1], [4], [9].

The instrument used in this case used a questionnaire and an anxiety scale instrument. The questionnaire contains questions about the characteristics of the respondents, including age, gender, education, occupation, marital status, duration of hemodialysis, frequency of undergoing hemodialysis and patient dependence. Another instrument used is the anxiety scale using the Hamilton rating scale for anxiety (HRS-A). HRS-A consists of 14 questions that contain feelings of anxiety, tension, fear, difficulty sleeping, physical and behavioural complaints. The range of questions for each item in HRS-A from 0 – 4 and the total score is 56. Where the score will be interpreted as follows: mild anxiety less than 17, moderate anxiety 18 – 24 and severe anxiety 25-30 [3], [9].

The relaxation of murottal al-Quran therapy, in

this case, was carried out for three days, in one day, a session was held for 25 minutes. Therapy was carried out when the patient underwent haemodialysis in the hemodialysis room of the North Sumatra Hospital in Medan. The patient is then explained the procedure and informed consent. The next stage of the patient will be given murottal therapy for 3 days while the patient is undergoing haemodialysis, therapy is given in the morning at 09.00 WIB, As for the stages of implementing murottal therapy by ensuring a calm environment, the patient is asked to sit down or sleep relaxed, doing relaxation techniques deep breath followed by muscle relaxation techniques [8], then the last stage of the patient listens to murottal al-Quran by using an mp3 tool. player and headphones. After carrying out murottal al-Quran therapy for three training sessions, the researcher re-measured the anxiety level of the respondents with the Back HRS-A instrument [9].

Case Report

Mrs R 48-year-old woman, Javanese tribe, Islam, who is undergoing hemodialysis for 3 years, 3 times a week, with 3-4 hours every time hemodialysis was performed. Based on observations and interviews at the end of April 2019 in the hemodialysis room of the Universitas Sumatera Utara Hospital Medan, the patient complained of palpitations, neck pain and a feeling of suffocation in the chest, anxiously felt by patients almost every day, even throughout the day, complaints were more often experienced by patients when undergoing hemodialysis therapy, and patients could not cope, so patients feeling very anxious and uneasy, having trouble falling asleep at night and often waking up, this complaint is experienced by patients for 1 month and weighing in the past 2 weeks.

At the interview, a woman was met, her face was of age, neat, the impression was that she could take care of herself, normal posture, behavior and psychomotor activity: restlessness, normal way of walking, attitude towards the examiner: cooperative, eye contact found, discussion: fill in accordingly, ordinary flow, ordinary tone of voice, ordinary productivity, ordinary language repertoire, Affect: appropriate, Mood: dysforic, other emotions: tension, free-floating anxiety, no disturbance of mind content and disturbance of perception, compos mentis, good concentration, insight degree V (the patient accepts that the patient is sick and that failure in social adjustment is caused by irrational feelings or certain disturbances in the patient himself without applying that knowledge to future experiences, social judgment and good personal. After measuring the patient's anxiety level using instruments HRS-A that is obtained, anxiety in this patient is severe anxiety.

Discussion

Someone who is experiencing anxiety tends to experience changes in perception and has negative thoughts related to the problems they face. If a person is always in negative thoughts, then there are several impacts including decreasing health status, decreasing one's adaptation function to environmental changes, pessimistic attitudes towards the future and depression tendencies and decreasing quality of life. That is being faced so that someone will have more negative thoughts about the problems experienced. Therefore, we need an intervention that can decide the cycle of negative thoughts experienced by individuals who are experiencing anxiety. The technique of concentration of mind towards the chanting of the Holy Qur'an was able to break the cycle of one's negative thoughts. Mind concentration techniques can be done through murotal Al-Qur'an therapy.

Overall, this case has several unique features, the problem of anxiety in patients undergoing hemodialysis and there is the effect of giving Murottal Al-Qur'an therapy to the anxiety level of hemodialysis patients in Medan North Sumatra Hospital.

Reference

1. Kaplan B, Sadock V. Kaplan and Sadock's synopsis of psychiatry: Behavioral Sciences/Clinical Psychiatry. (9th ed.). Philadelphia: Lippincott Williams & Wilkins, 2003.
2. Benson H. The relaxation response. Harper Collins, 2000.
3. Cukor D, Coplan J, Brown C, Friedman S, Newville H, Safier M, Spielman LA, Peterson RA, Kimmel PL. Anxiety disorders in adults treated by hemodialysis: a single-center study. American journal of kidney diseases. 2008; 52(1):128-36. <https://doi.org/10.1053/j.ajkd.2008.02.300> PMID:18440682
4. Al-Kaheel, A. Al-Qur'an The Healing Book. Jakarta: Tarbawi Press, 2011.
5. Finnegan-John J, Thomas VJ. The psychosocial experience of patients with end-stage renal disease and its impact on quality of life: findings from a needs assessment to shape a service. ISRN nephrology. 2012; 2013. <https://doi.org/10.5402/2013/308986> PMID:24959536 PMCID:PMC4045426
6. Lewis SL, Dirksen SR, Heitkemper MM, Buncher L, Camera IM. Medical Surgical Nursing Assessment and Management of Clinical Problems, Eighth Edition : volume: 2. United States of America : ELSEVIER MOSBY, 2011.
7. Park ER, Traeger L, Vranceanu AM, Scult M, Lerner JA, Benson H, Denninger J, Fricchione GL. The development of a patient-centered program based on the relaxation response: the Relaxation Response Resiliency Program (3RP). Psychosomatics. 2013; 54(2):165-74. <https://doi.org/10.1016/j.psym.2012.09.001> PMID:23352048
8. Martinez JJ. Is music therapy?. Nephrology Nursing Journal. 2009; 36(3):329.
9. Markum. Prevalence of symptoms of depression among patient with chronic kidney disease. 2006:588. <http://njcponline.com>.
10. Psychiatric Association. Amira O. Prevalence of symptoms of Depression among patient with chronic kidney disease. 2011:345-356. <http://njcponline.co>