

The Influence of Thought Stopping Therapy and Family Psychoeducation Toward Anxiety Client Who Undergo Hemodialysis in DR. Achmad Mochtar Hospital

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Abstract

Background: Clients hemodialysis who were hospitalized around 43.1% experienced anxiety conditions. This is caused by the Client renal failure undergoing hemodialysis, takes 12-15 hours of dialysis every week, or at least 3-4 hours therapies. This activity will take place continuously throughout their life. **Purpose:** To determine the effect of Therapy Thought Stopping and Family Psychoeducation Toward anxiety clients who undergo hemodialysis in RSAM Bukittinggi. **Method:** The research design is Quasi Experimental Pre and Post test with a total sample of 64 peoples. Who received Therapy Thought Stopping and Family Psychoeducation as many as 32 peoples, and Therapy Thought Stopping just as much as 32 peoples. The using HARS scale to determine the client's level of anxiety. **Results:** The results showed a significant decrease in anxiety condition in the intervention group who received Therapy Thought Stopping and family psychoeducation, compared with group who only get of therapy thought stopping (P value <0.05). **Conclusion:** Therapy Thought Stopping and Family Psychoeducation hemodialysis is recommended to clients who experience anxiety.

Keywords: Anxiety, Thought Stopping Therapy, Family Psychoeducation

INTRODUCTION

Chronic kidney failure is progressive renal failure and irreversible, where the body failed to maintain metabolism and electrolyte and water balancing, which cause uremia (Smeltzer & Bare, 2005). The procedure that recommended to maintain this problem are with kidney transplant, hemodialysis, and peritoneal dialysis (Mahdavi, et al, 2013). Hemodialysis is a therapy to taking out our metabolism residue and liquid that stay inside the body improperly and it just replacing a half of kidney function. Hemodialysis will continue and can not be stopped unless the patient having kidney transplant (Lubis, AJ., 2016). The prevalence of chronic kidney failure patient who has hemodialysis in this world is quite high. According to WHO the number is 1,5 million people. While in Indonesia, hemodialysis number has increased to 4.268 people, make them in total 19.621 new client of hemodialysis

(Indonesia Renal Registry, IRR, 2013). Based on study that has been doing in kidney failure patient in Iran, it has been found that hemodialysis patient have higher anxiety problem compared to patient with kidney transplant. Patient with hemodialysis, 43,6% having depression and 43,1% having anxiety (Ahmad, et al, 2012).

According to Yadin and Foa, explaining that to reduced anxiety, the therapy that can be used is restructure cognitive in a form of thought stopping. This thought stopping therapy was chosen because it is safe and fits especially for hemodialysis patient because the patient used many health equipment that prevented them from moving because it can be dangerous for them, and by having this therapy, the patient still can lying in the bed and still can follow the instruction from therapist without moving. Besides personal therapy, family also has a major role in reducing patient anxiety. According to Stuart (Stuart, GW, 2013).

Family psycho education is one method that can be done by nurse in community area in order to solve psychological problem that related to physhycal problem that happen in family member. Psycho education therapy able to reduced the necessity to comeback to hospital 50%-80%.

METHOD

This research has quantitative research approach by using "Quasi Experimental pre and post test with Comperison Group" with thought stopping and family pfsychoeducation therapy, both as invervention. And thought stopping therapy withour family psychoeducation therapy for observing the impact of these intervention impact on reducing anxiety. This research also comparing the different of anxiety reduction between intervention group who got both therapy and control group who only received one thought stopping therapy

RESULTS

The client characteristic whose having hemodialisis are 50% male and female, with average age 49,45 years old. Almost all of them have highschool education (39,062%), some are not working (75%) and most of them already having hemodialisis for 12-25 month, age between 21-40 years old.

Preparation Phase

Preparation pahse in this research wasstarted with working on permission letter from academic unit of Nursery

Faculty of Andalas University Padang and continued with permission letter on RSUD Dr. Achmad Mochtar Bukittinggi. After het the permission, the researcher idetify the chronic kidney failure patient, whose going hemodialisis, in the hemodialisis unit, whose having anxiety by using quisioner B. This preparation phase was done in one day in September 2015.

Intervention Phase

a. Thought Stopping Therapy

On this first group intervention researcher applied thought stopping therapy, which did in 3 session to 32 responden and each responden got 20 minute. The day that researcher choose to do it is Monday (Morning and afternoon shift), Thursday (morning and afternoon shift) Wenesday (morning shift only). The average number of patient in one shift to received a therapy are 11 patient with total therapy time is 220 minute (4 hour) so it takes 2 week to finish all therapy session.

b. Family Psychoeducation Therapy

After thought stopping therapy done to group I and II, then the researcher continue with post test on group II (because they finish therapy already) whileintervention group I continued with family psycoeducation therapy which consist of 5 session. The day for this therapy is same with the thought stopping therapy (morning shift only). After every session finish in week 4 group Icontinued with having a posttest.

Table. The Change of Anxiety Condition of Hemodialysis Patient Before and After Intervention with Thought Stopping Therapy and Family Psychoeducation in RSUD . Dr. Achmad Mochtar Bukittinggi. Year 2015 (n=64)

Group	Anxiety condition	N	Mean	SD	SE	P Value
TS and FPE	Before	32	33,91	4,321	0,764	0,000
	After	32	27,31	2,799	0,495	
	Gap		6,6			
TS	Before	32	32,44	2,873	0,508	0,000
	After	32	28,28	1,611	0,285	
	Gap		4,16			

The average anxiety condition on group before having thought stopping therapy and family psychoeducation therapy, before intervention is 33,91 where its in high anxiety condition with deviation standart 4,321. After receiving intervention the average anxiety condition turn to 27,31 where its means the anxiety is in moderat

level with deviation standar 2,799. The result of statistik test shows theres meaningful decreasing in anxiety level before and after receiving intervention therapy of thought stopping and family psychoeducation therapy with P point = 0.000 (Pvalue <0,05).

Table 5.5 The Different of Anxiety Condition of Hemodialiasis Patient with Intervention of Thought Stopping and Family Psychoeducation Therapy in RSUD Dr. Achmad Mochtar Bukittinggi year 2015 (n=64)

Variabel	Group	N	Mean	SD	SE	Min-Max	PValue
Anxiety condition (Post Test)	TS dan FPE	32	27,31	2,799	0,495	23-34	0,015
	TS	32	28,28	1,611	0,285	25-32	
	Total	64					

Based on table 5.5 its explain that hemodialisis patient who receiving thought stopping therapy and family psychoeducation therapy have decreasing their anxiety condition in higher level after receiving the intervention compare to hemodialisi patient who just receive one

thought stopping therapy only (P V<0.05). the average condition in a group that get both therapy is 27,31 with deviation standar 2,799 and the average condition of a group who receive just thought stopping therapy is 28,28 with deviation standar 1,611.

DISCUSSION

Patient Anxiety Before Receiving Thought Stopping Therapy and Family Psychoeducation Therapy to a Patient Whose Gone Trough Hemodialysis

The research result shows the anxiety condition before giving

intervention, thought stopping therapy and family psycho education therapist 33,91, its means severe anxiety. This is related to Videbeck (2008) statement in Agustarika (2009) that says anxiety have 2 aspect which are healthy aspect and dangerous aspect. The healthy aspect of anxiety will increased individual strength and fight

(Noreen, 1998), while the dangerous aspect anxiety can cause individu to having flight and freeze response or becoming frozen and not frozen, unable to do something untill its disturb the individual function. The research asumption if patient anxiety in savere level not get proper care it will turn into panic and it will stooping the individu do it function.

Patient anxiety after receiving thought stopping and family psychoeducation therapy

The research result shows there are meaningful decreasing in a group of patient that received thought stopping education and family psychoeducation therapy. The theory about anxiety explaining that patient anxiety decreasing was effected by the application of thought stopping therapy and family psychoeducation therapy. When the patient was given thought stopping therapy, the patient able to stop the thought that disturb them and caused them anxiety by saying stop. Saying stop will give order to the brain untill its effected the activity of of neurotransmitter gamma aminobutyric acid (GABA), which responsible to producing anxiety. (Stuart, 2013). The researcher asumption to the thought stopping therapy is the therapy is effective to reducing anxiety because there is repeating information from therapist to cut the thought that caused stress or disturbing the patient in session one, two and three. Anxiety will gradually lower if the patient get motivation how to adaptive coping to overcome anxiety from the nurse. Beside the thought stopping therapy, family is the most close people to the patient. Family psychoeducation is one of important element in family mental health program which giving information, education trough theropathic communication. The family needs to know what is the effect of hemodialysis patient gone trough, beside

itphysical effect. The family (caregiver) are expected to help and reminded patient how to overcome the psychological effect of their physical illness like anxiety.

The reseacher asumption of family support really help patient with savere anxiety condition, because the condusive environment (like family support) will give positive impact in decreasing patient anxiety. With family support, negative thought will be reduce and patient can enjoy their life

CONCLUSIONS

There is an effect of thought stopping therapy and family psychoeducation therapy to hemodialysis patient anxiety in RSUD. Dr. Achmad Mochtar Bukittinggi with P value ($<0,05$).

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