Benson Relaxation and Hypnosis in Quality of Elderly Sleep

Kastubi[1], Rini Ambarwati[2(CA)]

[1]Health Polytechnic of Ministry of Health at Surabaya, Indonesia; rinirachmadi@gmail.com

[2(CA)]Health Polytechnic of Ministry of Health at Surabaya, Indonesia; rinirachmadi@gmail.com (Corresponding Author)

ABSTRACT

The process of degeneration in the elderly resulting in the quantity of sleep the elderly will be reduced so as not achieved adequate sleep quality. This study aimed to analyze the influence of Benson relaxation and hypnosis to improve the fulfillment of sleep needs and control of elderly blood pressure, with experimental design that is Pretest - Posttest with Control Group. The subjects of the study were elderly at Integrated Service Post (Posyandu) of Elderly who had sleep disorder, selected by simple random sampling technique. Data were collected by using questionnaires. Benson relaxation and hypnosis were performed 2 times a week for 2 weeks. The collected data were analyzed descriptively in the form of mean and standard deviation, then analyzed using Wilcoxon and Mann Whitney test. The results showed that insomnia could be derived by implementing Benson relaxation, hypnosis, hypnosis + relaxation. Based on research results recommended that health care institutions use relaxation techniques and hypnosis as one of the standard operational procedures in overcoming insomnia problems.

Keywords: Benson Relaxation, Sleep, Hypnosis

INTRODUCTION

Changes in physical, psychological and social conditions in the elderly will potentially cause health problems both physically and mentally.[1] The process of degeneration will result in the quantity of elderly sleep becomes lessened, so as not achieved adequate sleep quality.[2] The elderly tend to be more easily awakened from sleep, whereas sleep is an absolute basic necessity for everyone. Sleep is characterized by minimal physical activity, varying levels of consciousness, changes in physiological processes of the body, and decreased response to external stimuli. Sleep can restore the physical condition after the move, reduce stress and anxiety, and can improve the ability and concentration when about to perform daily activities.[3]

East Java Provincial Health Office noted that the number of elderly people in East Java in 2010 was 7,956,188 people and 3,399,189 people (42.72%) of them had received health services.[4] Insomnia occurs in about 50% of people aged 65 years. Every year an estimated 20% -50% of elderly have insomnia and about 17% is a serious insomnia.[5] Nengah reported that in Ubud, the proportion of insomnia in the elderly was low insomnia (23%), moderate insomnia (30%), high insomnia (47%).

Physiologically, if a person does not get enough sleep can occur various effects such as forgetfulness and disorientation.[6] With regard to the above, relaxation is necessary for the treatment of insomnia. Miltenberger proposed five kinds of relaxation, namely progressive muscle relaxation, diaphragmatic breathing, imagery training, biofeedback and hypnosis.[7] Progressive relaxation is by far the cheapest method of relaxation, requires no imagination, no side effects, is easy to do, and can make the body and mind feel calm, relaxed, and easier to sleep.[8] In accordance with Regulation of the Minister of Health of the Republic of Indonesia No. 1109 / MenKes / Per / IX / 2007 on the provision of Complementary-Alternative Medicine at Health Services Facilities.[9] Non-pharmacological treatment efforts are currently in great demand by the public especially for chronic diseases that require treatment in the long term. Non-pharmacological treatments include Benson relaxation and hypnosis.

This study aimed to analyze the influence of Benson relaxation and hypnosis to improve the fulfillment of sleep needs and control of elderly blood pressure.

METHODS

The design of this experimental study was Pretest-Posttest with Control Group Design. The population of this study were all elderly who suffered sleep disturbance at Integrated Service Post (Posyandu) Elderly in RW X Pacar Keling and RW IX Bronggalan Sawah, Pacar Kembang, Surabaya. Population criteria were aged 55 - 80 years old, can communicate well and not have hearing loss. The sample size was 24 elderly, selected using simple random sampling technique. These independent variables were Benson relaxation techniques, hypnosis and relaxation plus hypnosis; while the dependent variable were the fulfillment of sleep needs. Data were collected through questionnaires. Benson relaxation and hypnosis were performed 2 times a week for 2 weeks. The collected data were analyzed descriptively in the form of mean[10], then analyzed using Wilcoxon and Mann Whitney test.

RESULTS

Table 1. Differences in insomnia status between before and after relaxation therapy

Group	Phase	n	Mean	p-value	Note
E1	Pre test	8	4.50	0.011	Significant
	Post test	8	0.00		
C1	Pre test	8	0.00	0.317	Not significant
	Post test	8	1.00		
E2	Pre test	8	4.50	0.012	Significant
	Post test	8	0.00		
C2	Pre test	8	1.00	0.317	Not significant
	Post test	8	0.00		
E3	Pre test	8	4.50	0.012	Significant
	Post test	8	0.00		
C3	Pre test	8	0.00	1.00	Not significant
	Post test	8	0.00		

The results showed that in the treatment group (relaxation, hypnosis and relaxation + hypnosis) there has been a decrease in insomnia. Wilcoxon test results showed p-value <0.05, so it was concluded that the insomia status before and after treatment was significantly different. Meanwhile, p-value for control group was> 0.05, so it was concluded that insomia status before and after treatment was no different.

Table 2. Differences in insomnia status between before and after relaxation therapy

Phase	Group	n	Mean Rank	P-value	Note
Pre	E1	8	6.31	0.065	Not significant
	C1	8	10.69		
Post	E1	8	4.50	0.000	Significant
	C1	8	12.50		
Pre	E2	8	9.25	0.574	Not significant
	C2	8	7.75		
Post	E2	8	4.50	0.000	Significant
	C2	8	12.50		
Pre	E3	8	9.94	0.234	Not significant
	C3	8	7.06		
Post	E3	8	4.50	0.000	Significant
	C3	8	12.50		

Table 3. Differences in insomnia status among treatments

Group	n	Mean Rank	P-value
Relaxation	8	8.19	0.104
Hypnosis	8	14.56	
Relaxation + hypnosis	8	14.75	

The results showed that before treatment, there was no difference in insomnia status between treatment group and control group. Whereas after treatment, there was a difference of insomnia status between treatment group and control group.

The result of Kruskal Wallis test shows that the highest mean is in relaxation + hypnosis. The biggest change in insomnia is in the relaxed group + hypnosis, the second is hypnosis and in the last sequence is relaxation. These three treatments did not result in differences in insomnia status.

DISCUSSION

The results showed that the group treated with relaxation, hypnosis and relaxation + hypnosis experienced a decrease in insomnia status. Decreased status of insomnia in the elderly who received treatment is a result of the principle of hypnosis therapy that uses several stages of induction, deepening, suggestion and termination. The communication technique used to bring the subject into a hypnotic state is called induction. Through induction, the conscious mind of the subject is "tricked" into becoming busy, bored, or careless in guarding the subconscious gate. Furthermore, the therapist can directly communicate with the subject's subconscious mind. The induction stage is a suggestion that brings the elderly from the normal level to the hypnotic stage so that the elderly becomes very relaxed or asleep. Deepening stage is to guide subjects to imagine doing something activity or being in a place that is easy to feel so that it can enter a deeper level trance. If the subject goes into a very deep trance condition, it is possible that it will move from low theta waves to delta waves. When a subject enters a delta wave, it will not be able to hear or feel anything. The delta wave represents the unconscious condition.

In the normal state of consciousness, the dominant brain wave is the beta wave. When a person starts to be hypnotized, the dominant brain waves shift from beta waves to alpha waves. Based on the results of the study, it is known that the condition of hypnosis is in alpha and theta waves. The deeper a person enters into a state of hypnosis (trance), the lower the brain waves. In this case, it will go into deep theta waves. As one gets deeper into hypnosis, the dominant brainwave is theta. This is reinforced by research conducted using EE Spectra.

There are two types of theta waves, ie theta type I and theta type II. Theta type I is a theta wave that appears when a person is in a relaxed or drowsy state. Whereas theta type II is associated with effective mind work with high ability. Theta type II shows a focused state of mind that improves efficiency in problem solving, perceptual processes, and memory

Suggestion stage is a series of words or sentences that are delivered in a certain way, in certain situations, so as to influence the listener in accordance with the intent and purpose of the suggestion. The phrase suggestion in hypnosis using permissive sentence is to ask and invite (not rule), pacing and leading (using facts and suggestions), repetition and language, words and phrases must be understood by the subject. The last stage is the termination of building positive suggestions that will make the body become more fresh and relaxed, then followed by the process of counting a few seconds to bring the subject to normal condition again.

The results showed the highest mean was on relaxation + hypnosis. This shows that the biggest change in insomnia is in the technique. The second sequence is hypnosis and the third is relaxation. The results showed no significant differences in insomnia changes between the three groups. Insomnia can be caused by psychic conditions such as depression. Psychic disturbed can cause difficulty to sleep. Insomnia can bring mood changes, hormones and physiology. Symptoms of depression (lack of energy, loss of interest or motivation, feeling sad or discouraged) may be associated with insomnia. Anxiety can also easily lead to the onset of insomnia or awaken during sleep and can not start sleeping again. Anxiety that often causes stress, an always-on mind so the hypothalamus still responds, causing the body to stay awake.

CONCLUSION

The elderly who undergo Benson relaxation and hypnosis have an increased need for sleep, so it is recommended that the elderly are consistent in practicing Benson relaxation and hypnosis as an attempt to overcome imsonia.

REFERENCES

1. Sarwono. Cognitive Psychology (Psikologi Kognitif). 8th ed. Jakarta: Erlangga; 2010.
2. Nugroho. Gerontic and Geriatric Nursing (Keperawatan Gerontik dan Geriatrik). Jakarta: EGC; 2008.
3. Mubarak WI, Indrawati L, Susanto J. The Book of Basic Nursing Science (Buku Ilmu Keperawatan Dasar). Jakarta: Salemba Medika; 2015.
4. Dinas Kesehatan Provinsi Jawa Timur. Health Profile of East Java Province in 2011 (Profil Kesehatan Provinsi Jawa Timur Tahun 2011). Surabaya: Dinas Kesehatan Provinsi Jawa Timur; 2012.

5. Puspitosari. The Influence of Benson Relaxation Technique on The Fulfilling Needs of Elderly Sleep at The "Hargo Dedali" Nursing Home, Surabaya (Pengaruh Teknik Relaksasi Benson Terhadap Pemenuhan Kebutuhan Tidur Pada Lansia di Panti Wreda Hargo Dedali Surabaya). Surabaya; 2011.
6. Asmadi. Nursing Procedural Techniques: Concepts and Applications for the Basic Needs of the Client (Teknik Prosedural Keperawatan: Konsep dan Aplikasi Kebutuhan Dasar Klien). Jakarta: Salemba Medika; 2008.
7. Miltenberger. Relaxation (Relaksasi) [Internet]. 2004 [cited 2008 Feb 2]. Available from: http//www.eworld-indonesia.com
8. Davis M, Eshelman ER, Matthew M. Guide for Relaxation and Reduction of Stress (Panduan Relaksasi dan Reduksi Stres). 3rd ed. Translater: Budi Ana Keliat and Achir Yani. Jakarta: Penerbit Buku Kedokteran EGC; 1995.
9. Health Ministry of Republic of Indonesia. Regulation of the Minister of Health of the Republic of Indonesia No. 1109 / MenKes / Per / IX / 2007 on The Provision of Complementary-Alternative Medicine at Health Services Facilities. Jakarta: Health Ministry of Republic of Indonesia; 2007.
10. Nugroho HSW. Descriptive Data Analysis for Numerical Data (Analisis Data Secara Deskriptif untuk Data Numerik). 1st ed. Ponorogo: Forum Ilmiah Kesehatan (Forikes); 2014.