

RELIGIOUS MUSIC THERAPY INTERVENTION TO REDUCE PAIN SCALE IN PATIENTS POST ORIF SURGERY FOR SINISTRA CLAVICLE FRACTURE

Rayhan Safito^{1*}, Istiqomah¹, Samsu Pranowo²

¹Diploma Three Nursing Study Program, Politeknik Kesehatan Karya Husada Yogyakarta, Jl. Tentara Rakyat Mataram No.11B, Bumijo, Yogyakarta 55231, Indonesia

³RSUP Dr.Sadjito Yogyakarta, Jl. Kesehatan Sendowo No.1, Sendowo, Sinduadi, Sleman, Yogyakarta 55281, Indonesia

*rayhansafito1@gmail.com

ABSTRACT

A fracture is a disruption of bone continuity caused by direct or indirect trauma which causes pain. The pain of post-fracture surgery patients must be treated because it disrupts the patient's life, accelerates tissue damage and thus worsens the quality of the patient's health. Nonpharmacological pain management consists of massage, ice and heat therapy, electrical nerve stimulation, distraction, relaxation, distraction techniques such as music, guided imagery, and hypnosis. One thing that can be intervened is religious music therapy. According to the register data at Dr. Sardjito Hospital, the incidence of fractures in Dahlia 1 ward at Dr. Sardjito Hospital. Sardjito in 2023 will be 92 cases. Describe the application of religious music therapy intervention to reduce the scale of pain in post-operative patients with left clavicle fractures in Dahlia Ward 1, Dr. Sardjito Hospital, Yogyakarta. The method used is a descriptive method with a case study using 1 respondent who experienced pain less than 7, collecting data using interviews and observations then providing religious music therapy for 3 days, carried out 1 day 2 times within 15 minutes each implementation.. On the first day of religious music therapy intervention, the patient's pain scale was 6, after therapy the pain scale became 4, on the second day the patient's pain scale was 3, after therapy the pain scale became 1 and on the third day the pain scale was 1 after therapy became 1 with a frequency of 2 times a day for 3 days and the duration of therapy is 15 minutes. Pain scale measurements were carried out using the Numeric Rating Scale (NRS). Based on the results of a case study conducted in Dahlia ward 1 of RSUP Dr.Sardjito Yogyakarta For 3 days, it can be concluded that the provision of religious music therapy religious music therapy can reduce the scale level of pain in patient after post-operative left clavicle fracture surgery.

Keywords: clavicle fracture surgery; pain; religious music therapy

INTRODUCTION

Fracture is a term for disruption of bone continuity, from various types of bones have good properties in total or in part where possible caused by trauma or physical exertion(Jhonet et al., 2022). According to WHO, 2019 in (Fauzian & Rahayu, 2021) that in world, the incidence of fractures is increasing, It was noted that a fracture had occurred more or less 15 million prevalence 3.2%. Fracture in year In 2017 there were approximately 20 million people with a prevalence rate of 4.2% and in in 2018 it increased to 21 million people with a prevalence rate of 3.8% due to traffic accident. according to (Kemekes RI, 2019) for population Indonesia reached 269.6 million people with the percentage number of fractures, namely 5.5% where this makes a number The incidence of fractures in Indonesia is increasing. Fracture cases in Indonesia reached prevalence of 5.5%, meanwhile according to (Risksedas,2018), parts of body who suffered the most injuries viz in the lower extremities (67%), upper extremity (32%), injury head (11.9%), back injury (6.5%), chest injury (2.6%), and abdominal injury (2.2%). Of the 92,976 people with cases resulting lower extremity fracture accidents, 19,754 people experienced fracture of the femur, 14,027 people suffered a cruciate fracture, 3,775 people suffered a tibia fracture, 970 people suffered fractures to the bones small feet and 337 people experienced it fibula fracture.

According to (Riskesdas,2018) at D.I Yogyakarta has prevalence 64.5% in extremity injuries lower (which consists of fractures of the femur, tibia and fibula fractures), whereas looking at (Sardjito, 2024), figures Fracture incidence in Dahlia ward 1 RSUP Dr. Sardjito in 2023 will be 92 cases. According to SDKI, 2016 in (Rico Eko, 2018) in fracture sufferers, will experiencing problems that cause disruption in carrying out activities including impaired physical mobility, ineffective peripheral perfusion, impaired skin integrity, impaired physical mobility, self-care deficit: bathing, risks infection, risk of shock and pain. Fracture management is one of them the so-called surgery is performed ORIF (Open Reduction Internal Fixation). This is in line with research Kneale, 2011 in (Ery, 2022), around 80% patients undergoing ORIF procedures experiencing acute pain after surgery. According to Satriana, 2016 in (Ery, 2022) post-operative pain, namely a response to someone's discomfort or an emotional experience that is not fun to relate to actual, potential tissue damage or what is felt during a current event damage occurs. Pain management Post-operative fractures are treated with therapy pharmacological and non-pharmacological. Therapy Pharmacology is a treatment procedure given by doctors to patients use drugs for lowering the pain scale that includes analgesics and antibiotics, while therapy non-pharmacological is an intervention independent care provided for reducing pain in patients includes stimulation and massage, ice and heat therapy, electrical nerve stimulation, distraction, relaxation, distraction techniques such as music, guided imaginary, and hypnosis. Non-technique pharmacology is widely used for managing pain in fracture patients, apart from The non-pharmacological therapy does not have side effects (Risnah et al.,2019).

Therapy Music can control an individual physical, psychosocial, emotional and spiritual. The mechanism of music is by adjusts the body's basic vibration patterns man. Musical vibrations that are tied to the body's basic frequency or basic vibration pattern can have a healing effect is great for the body, mind and soul man (Wndyastuti et al.,2016). Therapy music makes nurses oblige patient or family to provide listening equipment (ex: mp3 player, CD, mobile phone or radio) to maximize the effects of music therapy. According to (Amalia, 2020) therapy religious music is a method of giving therapy utilizes recorded religious music calm accompanied by reflection the meaning of the song. In religious music it can carries our feelings and hearts, increase faith in God The Almighty Creator. Religious music therapy has its own efficacy because holds a deeper meaning and certain message signals, which meaningful to people who listen to it. In research results according to (Muhsinah, 2020) entitled “Effectiveness of Religious Music Therapy on Pain in Fracture Patients”, in fact after religious music therapy classified as significant in reducing pain scale in postoperative patients fracture. Based on the description above, researchers interested in doing a case study about Religious Music Therapy Interventions To Reduce Pain Levels in Post ORIF Fracture Surgery Patients Sinistra Clavicle in Dahlia Ward 1 Dr. Sardjito Hospital, Yogyakarta.

METHOD

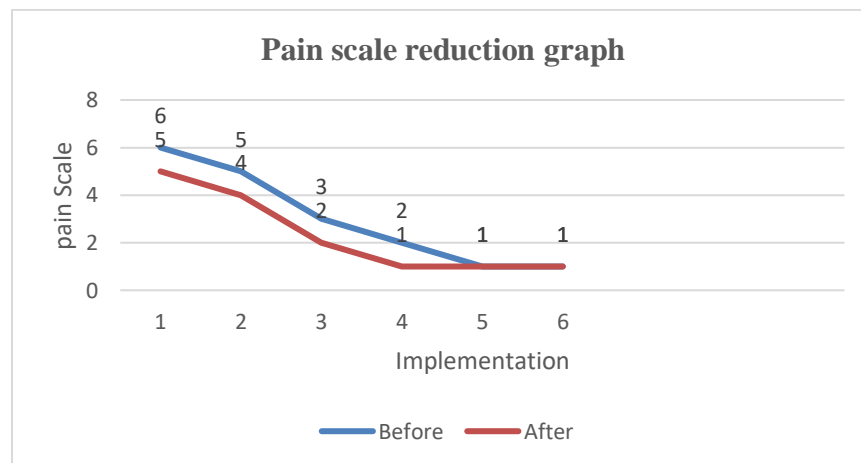
This case study uses descriptive type case study design, is descriptive case study how to intervene in religious music therapy for post-operative fracture orifice patients left clavicle in ward dahlia 1 Dr. Sardjito Hospital, Yogyakarta. Intervention in this case study based on the Intervention Standards book Nursing and Research articles previously that had been implemented. After the researcher finished will evaluate the decrease in pain scale felt by the patient before and after being given Music Therapy Intervention Religion in Post-ORIF Surgery Patients Sinistra Clavicle

Fracture in Bangsal Dahlia 1 Dr. Sardjito Hospital Yogyakarta. Samples used in This research consisted of 1 person suffered a fracture of the left clavicle with h+1 post-surgery. Instrument data collection using sheets Numeric Rating Scale (NRS) observation which is used as a measurement tool pain scale and Music Therapy SOP as Guide to music therapy intervention religion, apart from observation sheets and SOPs The equipment used is a headset, cellphone, observation notes, stationery and a small book. Data analysis used is data collection from interviews, observations and documentation which will then be reduced.

RESULT AND DISCUSSION

The results of the case studies have been carried out is presented in tables and graphs decrease in pain scale, measured by Numeric Rating Scale, patient initials Ms. Z, age 23 years, address Tamalanrea, South Sulawesi, medical diagnosis Close Fracture Of Middle Thirld of The Left Clavicula Allman Group I. Following are the results implementation of religious music therapy

Day/date	Time (WIB)	Scala Pain	
		Before Action	After the action
Wednesday/13 March 2024	6.am	6	5
	12.pm	5	4
Thursday/14 March 2024	6.am	3	2
	12.am	2	1
Friday/15 March 2024	6.am	1	1
	1.pm	1	1



From the graph above, that's it before implementing therapy religious music highest pain scale 6 (medium) and after 3 days, 1 day 2 times implementation of religious music therapy lowest pain scale 1 (mild). Results of intervention on respondents above there is a gradual decrease, shown from the Numeric Rating results Scale. Ms. Z is a patient who has meet the inclusion criteria for the study this, which has previously been explained objectives, procedures and seeking approval to the patient, who then contracts time to provide implementation religious music therapy. First Day March 13, 2024 at 00.am the patient is given medication analgesic injection, at 06.am. The first session of religious music therapy was carried out, previously carried out scale measurements pain was obtained on a scale of 6, then carried out 15 minutes of religious music

therapy with song entitled "A Confession" and "When Time" uses headset and music comes from cell phones, then evaluated the patient said pain scale 5, feel relaxed, very enjoy the music and look shed tears at the start implementation of religious music therapy, because the patient really appreciates the music he hears, it makes it easier to sleep, the mind feels light, and feels coolness in the heart, so the scale the pain felt by the patient decreases. Matter This is in line with research (Martini et al., 2018) where music therapy is provided for three days done 2 times a day a day, implemented for 15 minutes with a decrease in the pain scale from religious music therapy, before average implementation experiences scale pain 4.41 (moderate pain), after implementation decreased the average pain scale to 2.77 (pain mild), because after administering analgesics the effect decreases within 4-6 hours, where this is in line with (Wahyuningsih et al., 2020) half-life ketorolac is 4-6 hours, as well as based on (Lavenia, 2022) that religious music can bring feelings listener's heart, becomes food for reflection thus creating focus with meaning songs and forget the pain felt by the body and makes you relax thoughts that can affect sleep.

The second day is March 14 2024 Religious music therapy was carried out back in at 06.am , before implementation, The patient was observed and reported pain with a scale of 3. After therapy religious music. for 15 minutes pasien said the pain reduced to a scale 2. Implementation of religious music therapy in the second session starting at 12 pm. Before pain scale measurements were carried out obtained a pain scale of 2, then carried out 15 minutes of religious music therapy with the same song and evaluated with The patient reported pain on a scale of 1. The third day is March 15 2024 religious music therapy was carried out again in at 06.am. Before doing it religious music therapy says pain scale 1 and after music therapy the patient said the pain scale was 1. On at 01.pm it was carried out again measurement of the pain scale before in application of religious music therapy and patients says pain scale 1, after religious music therapy was carried out on a pain scale is 1. For three days, the results were It was found that pharmacological therapy followed by therapy nonpharmacological showed a decrease pain scale, in line with the results research (Wahyuningsih et al., 2020) that non-pharmacological intervention measures which is part of therapy complementary can be given for reducing the patient's perception of pain does not denied the provision of analgesic therapy This is a standard procedure that can be done reducing pain perception and therapy complementary with a combination of techniques Religious music therapy distraction can be reducing the patient's pain scale after surgery, in line with this, in Basically the patient gets the medicine pharmacology of ketorolac injection and according to (Rizqi & Ambar, 2023) Ketorolac is one type of Nonsteroidal Anti Inflammatory Drugs or called NSAIDs which is often used intravenously or intramuscular, as it is well known has a good analgesic effect if used in post orthopedic surgery which can provide an analgesic effect post surgery from moderate to moderate scale heavy, good to use as a supplement in the use of opioids or as single drug.

Based on the discussion above, in line with research (Muhsinah,2020) entitled "Effectiveness of Therapy Religious Music Against Pain in Patients Fracture" where in the study obtain the results of the decreasing difference significant pain scale between before and after providing religious music therapy, which was originally an average of 6 down on the pain scale to a pain scale of 1.

CONCLUSION

The differences obtained from pain scale before and after administration religious music therapy for 3 days decreased gradually characterized by a scale of perceived pain early post-operatively or before in provide religious music therapy on the first day namely scale 6 and after being given

religious music therapy until the third day on the pain scale becomes 1. So it can be concluded that religious music therapy as therapy complementary or complementary can be reduce the pain scale in post-patients clavicle fracture surgery.

REFERENCES

- Amalia, Y. R. (2020). Manfaat Musik Religi bagi Kesehatan. July, 1–23.
- Ery, A. (2022). Nyeri Akut Pada NY.G Dengan Post Op Fraktur Tibia Fibula Di Ruang Bedah Rumah Sakit Bhayangkara Aanton Soedjarwo (Nomor 8.5.2017). Stikes Muhammadiyah Pontinak.
- Fauzian, M., & Rahayu, W. (2021). Penatalaksanaan Fisioterapi Pada Kasus Fraktur Cruris 1/3 Distal Sinistra Dengan Modalitas Ultrasound Dan Hold Relax Di Rsud Kota Bandung. *JPhiS (Journal of Phisioteraphy Student)*, 142, 142– 150.
- Jhonet, A., Armin, M. F., Mandala, Z., Sudiadnyani, N. P., & Sari, H. M. (2022). Angka Kejadian Fraktur Tibia Berdasarkan Usia, Jenis Kelamin Dan Klasifikasi Fraktur Berdasarkan Mekanisme Trauma Di Rsud. H. Abdul Moeloek Bandar Lampung. *Jurnal Ilmu Kedokteran dan Kesehatan*, 9(1), 645–651. <https://doi.org/10.33024/jikk.v9i1.6283>
- Kemenkes RI. (2019). Profil kesehatan Indonesia 2019. In Kementrian Kesehatan Republik Indonesia. <https://pusdatin.kemkes.go.id/resources/download/pusdatin/profilkesehatan-indonesia/ProfilKesehatan-indonesia-2019.pdf>
- Lavenia, P. T. (2022). Analisis Intervensi Terapi Musik Religi Untuk Mengurangi Nyeri Pada Pasien Post Operasi Fraktur Di Rumah Sakit Peln Jakarta. 8.5.2017, 2003–2005.
- Martini, M., Watiningsih, Pertama, A., & Lisnayani, K. (2018). Terapi Distraksi (Musik Klasik) terhadap Penurunan Nyeri pada Pasien Post Operasi Fraktur di Ruang Bedah RSUD Kabupaten Buleleng. *Jurnal Kesehatan MidWinerslion*, 3 no 2(september), 155–161. <http://ejournal.stikesbuleleng.ac.id/index.php/Midwinerslion/article/view/7>
- Muhsinah, S. (2020). Efektifitas Terapi Musik Religi terhadap Nyeri pada Pasien Fraktur. *Health Information : Jurnal Penelitian*, 12(2), 201–213. <https://doi.org/10.36990/hijp.v12i2.228>
- Rico Eko, P. (2018). Asuhan Keperawatan Pada Tn. S Dan Tn. A Post Op Fraktur Kruris Dengan Masalah Keperawatan Nyeri Akut Di Ruang Kenanga Rsud Dr. Haryoto Lumajang Tahun 2018 Repository.Unej.Ac.Id. <https://repository.unej.ac.id/handle/123456789/87930>
- Riskesdas, R. (2018). Hasil Riset Kesehatan Dasar Tahun 2018. Kementrian Kesehatan RI, 53(9), 1689–1699
- Risnah, R., HR, R., Azhar, M. U., & Irwan, M. (2019). Terapi Non Farmakologi Dalam Penanganan Diagnosis Nyeri Pada Fraktur :Systematic Review. *Journal of Islamic Nursing*, 4(2), 77. <https://doi.org/10.24252/join.v4i2.10708>
- Rizqi, H., & Ambar, R. (2023). Implementasi Terapi Musik Dan Aromaterapi Lavender Untuk Mengurangi Nyeri Pada Pasien Fraktur Post ORIF. *Informasi dan Promosi Kesehatan*, 2(1), 43–51. <https://doi.org/10.58439/ipk.v2i1.91>

Sardjito, H. (2024). Instalasi Rekam Medik Kemenkes RS Sardjito. humas rs sardjito.
<https://sardjito.co.id/infopasien-pengunjung/>

Wahyuningsih, T., Warongan, A. W., & Rayansari, F. (2020). Pengaruh Terapi Musik Degung Terhadap Tingkat Nyeri Pada Pasien Post Orif (Open Reduction and Internal Fixation) Fraktur Extremitas Bawah Di Rsud Kabupaten Tangerang. *Journal of Islamic Nursing*, 5(2), 121. <https://doi.org/10.24252/join.v5i2.17664>.

Windyastuti, E., S-, P., & Kusuma Husada Surakarta, Stik. (2016). Pengaruh Terapi Musik Gamelan Untuk Menurunkan Skala Nyeri Pada Lansia Dengan Osteoarthritis Di Panti Wredha Aisyiyah Surakarta. *Jurnal Kesehatan Kusuma Husada*.