

The Effect Of Reminiscence Therapy And Progressive Muscle Relaxation On Reducing Depression In Elderly Patients With Hypertension

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Abstract: Hypertension is a deadly disease that makes elderly people with hypertension feel afraid, anxious, stressed and worried. If it is not treated immediately, it will cause depression. Signs and symptoms of hypertension such as headaches, nosebleeds, red face, fatigue, nausea, vomiting, shortness of breath, anxiety, low quality of life, susceptible to psychosocial problems, one of which is depression. There are ways to reduce the level of depression in the elderly with hypertension, namely by reminiscence therapy and progressive muscle relaxation. The purpose of this study was to determine the effect of reminiscence therapy and progressive muscle relaxation on reducing depression in the elderly with hypertension. This study used the Pre-Experiment method with the One Group Pre-Post Test design. The sampling technique used purposive sampling of 10 respondents with the criteria of elderly respondents who experienced depression with primary hypertension stage 1 with mild depression according to the GDS with a score of 5-8. The analysis of this study used univariate and bivariate with the Paired T-Test. Reminiscence therapy and progressive muscle relaxation were carried out for 5 meetings with a duration of each therapy for 30 minutes. The measuring instruments used were the Geriatric Depression Scale (GDS) and sphygmomanometer. Measurement of depression and blood pressure scales was carried out before and after the procedure. Based on the results of the study and the results of the analysis that had been carried out using the Paired T-Test statistical test, a p-value of 0.000 (<0.05) was obtained, so it can be concluded that statistically there is an Effect of Reminiscence Therapy and Progressive Muscle Relaxation on Reducing Depression in the Elderly.

Keywords: Elderly, level of depression, hypertension, reminiscence, progressive muscle relaxation

INTRODUCTION

Elderly (Lansia) is defined as someone who is over 60 years old (World Health Organization, 2022). A person who has passed the age of 60 years must have experienced changes in the "aging" process or what is commonly known as aging (Senja and Prasetyo, 2021). Aging can cause a gradual decline in physical and mental capacity. Common health conditions associated with aging include hearing loss, cardiovascular disorders, chronic obstructive pulmonary disease, diabetes, depression and dementia (World Health Organization, 2022).

World Health Organization (WHO) in 2030, said that 1 in 6 people in the world will be 60 years old or older. In 2020 the number of people aged 60 years and over increased from 1 billion to 1.4 billion. In 2050 it is estimated that the population aged over 60 years in the world will double to 2.1 billion. Between 2020 and 2050 the number of people aged 80 years and over is estimated to increase threefold to 426 million people (World Health Organization, 2022).

The March 2022 national socio-economic survey data shows that 10.48% of the population is elderly, where female elderly are more numerous than male elderly, namely 51.81% compared to 48.19%. And urban elderly are more numerous than rural elderly, namely 56.05% compared to 43.95%. As many as 65.56% are classified as young elderly aged 60-69 years, 26.76% are middle elderly aged 70-79 years, and 7.69% are old elderly aged 80 years and over. Yogyakarta is the province with the highest number of elderly, namely 16.69%, while the province with the lowest number of elderly is Papua at 5.02%. In 2022, there were eight provinces which includes the aging population, namely West Sumatra, Lampung, Central Java, Yogyakarta, East Java, Bali, North Sulawesi and South Sulawesi (Badan Pusat Statistik, 2022).

One of the common health conditions experienced by the elderly is cardiovascular system disorders. Changes that occur in the elderly's cardiovascular system include decreased heart muscle contraction ability, decreased elasticity of the heart muscle and blood vessels, and arteriosclerosis which causes the elderly to experience high blood pressure or hypertension (Erni and Ning, 2018).

Hypertension or what we know as high blood pressure according to (Adi, 2019) which is a disorder of the blood vessels that causes the supply of oxygen and nutrients carried by the blood to be blocked to the body tissues that need it. Hypertension is a deadly disease called the silent killer or heterogeneous group of diseases. A person must measure their blood pressure to make sure they have hypertension or not. The normal limit of blood pressure according to the World Health Organization (WHO), systolic / diastolic 120-180 / 80-90 mmHg, so a person is said to have hypertension if their blood pressure is more than 140/90 mmHg. This blood pressure can be influenced by older age, genetics, being overweight or obese, being physically inactive, a high-salt diet, or excessive alcohol consumption. Symptoms of hypertension include headaches, chest pain, dizziness, difficulty breathing, nausea, vomiting, blurred vision, anxiety, confusion, ringing in the ears, nosebleeds, and abnormal heart rhythms (World Health Organization, 2023).

An estimated 1.28 billion adults aged 30-79 worldwide have hypertension. Two-thirds of those with hypertension live in low-income countries. Between 1990 and 2019, the number of people with hypertension increased from 650 million to 1.3 billion. Based on Riskesdas data in 2018, cases of hypertension in Indonesia reached 34.1%. This has increased compared to the prevalence data in 2013, which was 25.8%. The prevalence of the province with the highest hypertension is South Kalimantan at 44.1%, while the lowest is in Papua province at 22.2%. Central Java is the province with the 3rd largest prevalence of hypertension after East Kalimantan province, which is 37.5% (Riset Kesehatan Dasar, 2018).

The Head of the Disease Control and Eradication Program (P2P) of the Kudus District Health Office stated that the prevalence of the population in Kudus District, Central Java, who suffer from hypertension at the age of over 60 years is 48,233 people with a percentage of 5.54%. The female gender is 26,660 people with a percentage of 3.06% and the male gender is 21,573 people with a percentage of 2.48%. Ngembal Kulon is the sub-district with the highest number of hypertension sufferers, namely 6,391 people with a percentage of 26.54%. The number of male gender is 2,920 people with a percentage of 13.53% and the female gender is 3,471 people with a percentage of 13.01%. Gondosari is the sub-district with the second highest number of hypertension sufferers, namely 6,238 people with a percentage of 26.49%. The number of male gender is 3,511 people with a percentage of 16.27% and female gender is 2,727 people with a percentage of 10.22%. Gribig is a sub-district with the third highest number of hypertension sufferers, namely 5,264 people with a percentage of 21.74%. The number of male gender is 2,262 people with a percentage of 10.48% and female gender is 3,002 people with a percentage of 21.74% (Dokumen Dinas Kesehatan Kabupaten Kudus 2023).

Hypertension experienced by the elderly will cause feelings of fear, anxiety, stress, and worry about the impact of hypertension, and the elderly will feel prolonged sadness because they have to undergo continuous care or treatment and if this is not treated immediately it will cause depression (Azizah and Hartanti, 2016). Depression is a mental disorder that involves a depressed mood or loss of pleasure and interest in activities over a long period of time (Arum, 2023). An estimated 3.8% of the world's population experiences depression. 5% in adults (4% in men and 6% in women), and 5.7% in those over 60 years of age (World Health Organization, 2023).

There are two efforts to reduce the level of depression in elderly people with hypertension, namely pharmacological and non-pharmacological therapy. Pharmacological therapy to reduce depression is therapy using antidepressant drugs such as bupropion, mirtazapine, trazodone (National Library of Medicine, 2015). People only consume drugs to lower their hypertension such as amlodipine, felodipine, diltiazem, isradipine, nicardipine, nimodipine, nisoldipine, and verapamil. While non-pharmacological therapy to reduce depression in the elderly with hypertension includes a combination of reminiscence therapy and progressive muscle relaxation therapy, music therapy, writing therapy, and dhikr therapy. However, people usually only focus on lowering their hypertension by using foot soak therapy, slow deep breathing therapy, and eating or drinking various fruit or vegetable juices. (Vinandia, 2022).

Research conducted by Tobing and Novianti entitled "Combination of Reminiscence Therapy and Progressive Muscle Relaxation Reduces Depression in Elderly with Hypertension" found that the combination of reminiscence therapy and progressive muscle relaxation therapy can significantly reduce the level of depression in the elderly. The difference in the decrease in the level of depression in the elderly who received a combination of reminiscence therapy and progressive muscle relaxation therapy was significantly greater than the elderly who only received reminiscence therapy (Tobing and Novianti, 2021).

Reminiscence therapy is an approach used to remember and talk about events in a person's life (Mia, Ni and Tien, 2019). Meanwhile, progressive muscle relaxation therapy is a therapy that focuses on movements that tighten and relax muscles progressively and this therapy can build awareness of tension in the body. (Anthoni. J and S, 2022). This reminiscence therapy can be in the form of remembering the past, or remembering other pleasant events (Hermawati and Permana, 2020). Reminiscence therapy is useful in remembering past events and is useful for reflecting on one's life, resolving conflicts from the past, finding the meaning of life, and assessing the adaptive coping that will be used. This therapy has been proven to be able to present a sense of meaning as an individual who was once meaningful in the lives of others. (Tobing and Novianti, 2021). In addition to reminiscence therapy, progressive muscle relaxation therapy is also useful in reducing depression and is useful in reducing hypertension (Anthoni. J and S, 2022).

The mechanism of reminiscence therapy is by holding joint meetings and using 5 sessions, in the first session the patient shares childhood experiences, in the second session the patient shares teenage experiences, in the third session the patient shares adult experiences, in the fourth session the patient shares experiences with the family, and in the fifth session the patient evaluates activities (Tobing and Novianti, 2021). Meanwhile, the mechanism of progressive muscle relaxation therapy is to tense muscle groups and then consciously and spontaneously stretch certain muscle groups. (Puji and Dewi, 2023).

Based on the description above, the author is interested in conducting research with the title "The Effect of Reminiscence Therapy and Progressive Muscle Relaxation on Reducing Depression in the Elderly Patients with Hypertension."

METHOD

This study used the Pre-Experiment method with the One Group Pre-Post Test design. The sampling technique used purposive sampling with 10 respondents. The inclusion criteria were elderly aged between 60-74 years who experienced stage 1 primary hypertension with a value of 140/90-159/99 with mild depression according to the Geriatric Depression Scale (GDS) with a score of 5-8, able to communicate verbally, not using depression medication. Implementation of reminiscence therapy and progressive muscle relaxation for 5 meetings with a duration of each therapy for 30 minutes. The research instrument used the Geriatric Depression Scale (GDS) questionnaire, sphygmomanometer, stethoscope, SOP guide and blood pressure monitoring sheet. This therapy begins with blood measurement using a sphygmomanometer and continues with depression scale measurement using the Geriatric Depression Scale (GDS) then reminiscence therapy is carried out with interview discussions given to the elderly by discussing past events. After that, progressive muscle relaxation therapy was carried out with 15 movements. Depression and blood pressure measurements were performed before and after the procedure. The analysis of this study used univariate and bivariate analysis with the Paired T-Test.

RESULT AND DISCUSSION

Result

Respondent Characteristics

Based on the results of research on the characteristics of respondents consisting of gender, age of respondents and education as follows:

Table 1 Respondent Characteristics

Characteristic	F	Precent
Gender		
Male	3	30%
Female	7	70%

Age			
60-64 years	70-74 years	5	50%
65-69 years		3	30%
years		2	20%
Education			
Elementary School		4	40%
Junior High School		2	20%
High School		2	20%
College		1	10%
Not Attended School		1	10%

Based on Table 1, it can be explained that out of 10 respondents, more than half of the respondents (70%) are female and the rest are male (30%). Meanwhile, the age of the respondents is mostly in the age range of 60-64 years (50%), 65-69 years (30%) and the rest are 70-74 years (20%). Based on educational characteristics, the results obtained are that the majority have elementary school education of 40%, junior high school 20%, high school 20%, college 10% and those who have not attended school 10%.

Univariate Analyze

Table 2 Results of Depression Level Measurement Before and After Intervention

No	Initial	Age	Depression Level		Difference
			<i>Pretest</i>	<i>Posttest</i>	
1	R1	62 years	7	3	4
2	R2	60 years	8	4	4
3	R3	67 years	9	7	2
4	R4	74 years	10	8	2
5	R5	64 years	10	6	4
6	R6	63 years	11	8	3
7	R7	69 years	8	5	3
8	R8	64 years	9	6	4
9	R9	72 years	11	9	3
10	R10	65 years	12	11	1
Mean			9,5	6,7	3

Based on table 2, it is known that the average level of pain before being given reminiscence therapy was 9.5 with the highest level of depression with a value of 12 and the lowest level of depression with a value of 7, while after being given reminiscence therapy intervention the average value became 6.7 and the difference before and after intervention was 3. So with these results there is a decrease in the level of depression before and after being given reminiscence therapy in the elderly

Table 3 Blood Pressure Measurement Results Before and After Intervention

No	Initial	Age	Blood Pressure		Information
			<i>Pretest</i>	<i>Posttest</i>	
1	R1	62 years	155/90mmHg	135/75mmHg	Down
2	R2	60 years	150/95mmHg	125/70mmHg	Down
3	R3	67 years	150/80mmHg	130/75 mmHg	Down
4	R4	74 years	140/85mmHg	130/80 mmHg	Down
5	R5	64 years	155/95mmHg	125/80 mmHg	Down
6	R6	63 years	145/85mmHg	120/80 mmHg	Down
7	R7	69 years	150/80mmHg	130/75mmHg	Down
8	R8	64 years	140/85mmHg	125/80mmHg	Down
9	R9	72 years	155/95mmHg	130/75mmHg	Down
10	R10	65 years	155/95mmHg	120/80mmHg	Down

Bivariate Analyze

Table 4 Effect of Reminiscence Therapy and Progressive Muscle Relaxation on Decreasing Depression

No	Variable	Mean	SD	SE	P-Value	N
1	Pretest	9.50	1.581	.500	.000	10
2	Posttest	6.70	2.406	.761		10

Berdasarkan tabel 4 diatas, didapatkan hasil statistik dengan uji *Paired T-Test* yaitu nilai *p-value* = 0,000 (<0,05), maka dapat disimpulkan bahwa secara statistik terdapat Pengaruh Terapi *Reminiscence* terhadap Penurunan Depresi pada Lansia.

Table 5 Effect of Reminiscence Therapy and Progressive Muscle Relaxation on Decreasing Systolic Blood Pressure

No	Variable	Mean	SD	SE	P-Value	N
1	Pretest	88.50	6.258	1.979	.001	10
2	Posttest	77.00	3.496	1.106		10

Based on table 5 above, the statistical results on systolic blood pressure were obtained with the Paired T-Test, namely the *p-value* = 0.000 (<0.05), so it can be concluded that statistically there is an Effect of Reminiscence Therapy on Reducing Systolic Blood Pressure in the Elderly.

Table 6 Effect of Reminiscence Therapy and Progressive Muscle Relaxation on Decreasing Diastolic Blood Pressure

No	Variable	Mean	SD	SE	P-Value	N
1	Pretest	149.50	5.986	1.893	.000	10
2	Posttest	127.00	4.830	1.528		10

Based on table 6 above, the statistical results on diastolic blood pressure were obtained with the Paired T-Test, namely the *p-value* = 0.000 (<0.05), so it can be concluded that statistically there is an Effect of Reminiscence Therapy on Reducing Diastolic Blood Pressure in the Elderly.

DISCUSSION

Based on the research results explained in table 4 above, statistical results were obtained with the Paired T-Test test, namely the *p-value* = 0.000 (<0.05), so it can be concluded that statistically there is an Effect of Reminiscence Therapy on Reducing Depression in the Elderly. While in tables 5 and 6, statistical results were obtained on systolic and diastolic blood pressure with the Paired T-Test test, namely the *p-value* = 0.000 (<0.05), so it can be concluded that statistically there is an Effect of Reminiscence Therapy on Reducing Systolic and Diastolic Blood Pressure in the Elderly.

Based on the characteristics of respondents in terms of gender, namely 7 respondents, most of whom (70%) are female. According to Hatmanti (2019), this condition can be explained that this is due to the mindset of women who tend to use emotions rather than rationality, or problems that are actually simple for women can become complicated. The elderly think too much that the life they are currently experiencing is not in accordance with their expectations, where an elderly person expects their life to be peaceful and without any burdens on their mind, but on the contrary, in old age they think too much about their family leaving them, the illnesses they suffer from.

Based on age, it can be seen that elderly people who experience depression are aged 60-64 years as many as 5 respondents (50%), elderly people aged 65-69 years as many as 3 respondents (30%) and aged 70-74 years as many as 2 respondents (20%). Related to age, as the age of individuals increases, they will experience changes in physical and mental, especially decline in various functions and abilities that they once had. Changes in physical appearance as part of the normal aging process such as decreased sharpness of the five senses, decreased endurance are threats to the elderly. In addition, the elderly still have to deal

with changes in roles, social status and separation from loved ones, these conditions make the elderly more susceptible to mental problems (depression) In terms of educational history, the elderly with low education mostly experience depression. According to Sutinah (2017) education can affect a person's behavior, the higher a person's education, the easier it is for them to receive information so that the more knowledge they have. Of the 80 elderly respondents, most of the elderly had elementary school education, namely 4 elderly (40%).

These results indicate that the level of education of the elderly is mostly low. According to Nurwijayanti (2020), education is capital in cognitive development, cognitive can be a mediator between an event and feelings, so that lack of education can be a factor in the elderly suffering from psychosocial problems. Hipertensi atau darah tinggi merupakan gangguan aliran darah dalam kondisi jangka panjang yang ditandai dengan tekanan darah yang meningkat pada dinding pembuluh darah arteri dan dapat menyebabkan kerusakan pembuluh darah, penyakit degeneratif, serta menyebabkan kematian (Yanita, 2022). Seringkali lansia dengan hipertensi menganggap bahwa keadaan tersebut adalah sesuatu yang merugikan diri dan dinilai buruk sehingga memunculkan pesimistik dan ketidakpuasan. Lansia termasuk kelompok rentan, apalagi ketika lansia menemui masalah keseharian dalam kehidupannya yang dapat memunculkan skema negatif awal dan membentuk depresi (Long *et al.*, 2015).

Efforts to overcome this problem include providing simple health education about hypertension on the first day and carrying out reminiscence therapy and progressive muscle relaxation therapy, where reminiscence therapy is a therapy with an approach used in remembering and talking about events in a person's life (Mia, Ni and Tien, 2019). Reminiscence therapy itself aims to be able to share pleasant experiences and improve quality of life, improve socialization and relationships with others, provide cognitive stimulation, improve communication and can be an effective therapy to reduce symptoms of depression (Videbeck, 2015). Progressive muscle relaxation therapy is a therapy that focuses on movements that progressively tighten and relax muscles and this therapy can build awareness of tension in the body. (Anthoni. J and S, 2022). The goals of progressive muscle relaxation therapy include lowering high blood pressure, reducing cardiac dysrhythmia, reducing depression, reducing fatigue, etc (Setyoadi, 2015).

Both therapies are carried out for 3 weeks because to achieve significant changes, where depression itself is a complex condition that requires ongoing intervention to provide long-term effects, when therapy is only carried out in the short term, the resulting impact will also be short-term, such as only improving mood for a moment, then the next reason is to build a therapeutic relationship and the patient's self-confidence with the therapist, if done for a moment, then the therapeutic relationship is not optimal, the patient will not tell their past experiences in detail and cause the results of the therapy to be ineffective, the last reason is that the patient needs to get used to the therapy techniques so that the patient is able to participate actively, if this is done in the short term, the patient will not be able to get used to the therapy techniques (Azizah and Hartanti, 2016) (Azizah and Sudaryanto, 2023).

The results of the application of reminiscence therapy and progressive muscle relaxation therapy can reduce depression in the elderly with hypertension, this is in accordance with research conducted by Puji and Dewi entitled "Application of Reminiscence Therapy and Progressive Muscle Relaxation to Reduce Depression in the Elderly with Hypertension at Wonogiri Hospital" with the results of a significant decrease in the level of depression of respondents after reminiscence therapy was carried out by means of a post-test at each meeting and the application of progressive muscle relaxation therapy to 2 respondents for 5 meetings (Puji and Dewi, 2023). The results of the application of reminiscence therapy and progressive muscle relaxation therapy also showed a decrease in depression in the elderly with hypertension, this is in line with research conducted by Tobing and Novianti entitled "Combination of Reminiscence Therapy and Progressive Muscle Relaxation Reduces Depression in the Elderly with Hypertension" with the results of the combination of reminiscence therapy and progressive muscle relaxation therapy can significantly reduce the level of depression in the elderly. The difference in the decrease in the level of depression in the elderly

who received a combination of reminiscence therapy and progressive muscle relaxation therapy was significantly greater than the elderly who only received reminiscence therapy (Tobing and Novianti, 2021).

CONCLUSION AND SUGGESTIONS

Conclusion

Based on the results of the study, the author can conclude that the provision of reminiscence therapy and progressive muscle relaxation therapy to reduce depression in the elderly with hypertension is effective in reducing depression in the elderly with hypertension after being treated 5 times in a period of 3 weeks for 2 meetings a week and 1 meeting in the last week. Based on the results of the study and the results of the analysis that have been carried out using the Paired T-Test statistical test, the $p\text{-value} = 0.000 (<0.05)$ was obtained, so it can be concluded that statistically there is an Effect of Reminiscence Therapy and Progressive Muscle Relaxation on Reducing Depression in the Elderly.

Suggestion

1. For Health Workers

It is expected that health workers will introduce and socialize treatment with reminiscence therapy and progressive muscle relaxation therapy to reduce the level of depression in the elderly with hypertension. Improve skills by attending training or seminars in an effort to help improve the scale of depression in the elderly with hypertension..

2. For Respondent

It is hoped that elderly depressed patients with hypertension whose levels of depression and blood pressure are increasing can apply reminiscence therapy and progressive muscle relaxation therapy to reduce the level of depression in the elderly with hypertension.

3. For Further Researchers

It is hoped that further case study research will be further developed by increasing the number of case study subjects and using different intervention techniques.

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