Section: Community Nursing

Dhikr therapy to reduce pain in patient with gout arthritis

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Abstract

Gout arthritis is an inflammatory joint disease characterized by elevated levels of uric acid in the blood, leading to acute and debilitating pain episodes. Managing this pain is a critical nursing challenge for patients suffering from this condition. Dhikr therapy, a form of meditation and remembrance in Islamic practice, has emerged as a potential non-pharmacological intervention to alleviate pain and enhance emotional well-being. This study aims to explore the application of dhikr therapy in managing acute pain in a gout arthritis patient, Mr. S, residing in Tulung Village. Employing a qualitative case study design, data were collected through interviews, direct observations, and review of relevant documentation. The focus was on a gout arthritis patient experiencing acute pain, allowing for an in-depth understanding of the impact of dhikr therapy on pain management. The findings revealed that Mr. S experienced significant relief from acute pain after participating in dhikr therapy for three consecutive days. This intervention not only helped reduce the intensity of his pain but also positively influenced his emotional state and overall sense of well-being. Dhikr therapy presents a viable alternative non-pharmacological approach for alleviating acute pain in gout arthritis patients. This study highlights the importance of incorporating complementary therapies into patient care to enhance pain management strategies and improve the quality of life for individuals affected by this condition. Further research is warranted to explore the broader applicability and mechanisms of dhikr therapy in diverse patient populations.

Keywords: Dzikr therapy; nursing intervention; complementary therapy; community nursing; gout care

Introduction

Gouty arthritis is a chronic inflammatory condition resulting from the accumulation of uric acid in the blood, leading to the formation of uric acid crystals in the joints. This condition primarily affects the big toe but can also impact other joints, causing significant pain, swelling, and stiffness (Ragab, Elshahaly, & Bardin, 2017). According to the 2018 Basic Health Research (Riskesdas) by the Ministry of Health of the Republic of Indonesia, the prevalence of gout in the population is notable, with 11.9% diagnosed by health workers and 24.7% exhibiting symptoms, especially among those aged over 75 years (Riskesdas, 2018). Although not life-threatening, gouty arthritis can severely affect the quality of life, leading to difficulties in daily activities due to acute pain and joint deformity caused by the deposition of monosodium urate crystals (Gonzalez, 2012). Effective pain management is crucial for patients with gouty arthritis, as the condition can cause significant discomfort and hinder mobility (Coburn & Mikuls, 2016). Traditional pharmacological interventions are often used to address pain and inflammation; however, the integration of non-pharmacological approaches can enhance overall treatment outcomes. Among these, spiritual practices, such as dhikr, hold promise as adjunctive therapies. Dhikr, which refers to the remembrance of Allah through the repetition of sacred phrases, serves not only as a religious practice but also as a form of psychotherapy.

Engaging in dhikr can foster a sense of peace and calm, alleviating stress and anxiety, which are often exacerbated by chronic pain conditions (Hidayat et al., 2024). Research has indicated that dhikr therapy can reduce pain, anxiety, and depression in various patient populations, including those with gouty arthritis (Ferreira-Valente et al., 2021). The objective of this work is to explore the nursing care strategies for managing acute pain in gouty arthritis patients through the application of dhikr therapy. This study will demonstrate the efficacy of integrating spiritual interventions into traditional pain management protocols, thereby improving patient outcomes and enhancing their quality of life. Given the impact of gouty arthritis on patients' physical and emotional well-being, it is essential to adopt a holistic approach to care that encompasses both pharmacological and non-pharmacological interventions (Trivedi et al., 2022). Dhikr therapy presents a valuable addition to traditional pain management strategies, offering a means for patients to find relief and foster a deeper sense of inner peace. This approach underscores the importance of considering spiritual well-being in the comprehensive care of patients with chronic conditions. Through this

exploration, the study aims to contribute to the nursing field by providing evidence-based practices that enhance pain management for gouty arthritis patients.

Dhikr therapy, the practice of reciting sacred phrases and names of Allah, plays a significant role in managing gout pain by addressing both physical discomfort and emotional well-being. This complementary intervention helps promote relaxation, reduce stress, and enhance mental clarity, which can be particularly beneficial for individuals suffering from chronic pain conditions like gout arthritis (Kress et al., 2015). Engaging in dhikr allows patients to shift their focus away from their pain and fosters a sense of inner peace and tranquillity. Research has shown that such spiritual practices can lead to decreased pain perception, as they encourage mindfulness and a positive outlook, ultimately contributing to improved coping mechanisms. Integrating dhikr therapy into their pain management regimen not only relief from acute gout pain but also an overall enhancement in their quality of life, as they cultivate resilience and emotional stability amidst their chronic condition. The study is aimed to use Dhikr therapy to reduce pain in patient with gout.

Case Description

Based on data obtained from elderly cadres in RT.0 RW.0 Tulung Village, it was found that the number of elderly residents in this community is 20, out of which 15 individuals have a history of high uric acid levels, indicative of gout. Among them is Mr. S, a 79-year-old male suffering from arthritis and gout, who exemplifies the challenges faced by many in this demographic. Gout, characterized by sudden and severe attacks of pain, swelling, and redness in the joints, often leads to significant discomfort and affects daily activities. For Mr. S and others like him, managing pain effectively is crucial to maintaining their quality of life as they age. In this context, integrating dhikr therapy into their pain management regimen emerges as a valuable non-pharmacological approach. Dhikr, the practice of reciting the names and attributes of Allah, not only serves as a spiritual exercise but also has been shown to promote relaxation and emotional stability. For Mr. S, engaging in dhikr can help shift his focus away from the pain of gout attacks, fostering a sense of calm and resilience. This spiritual practice encourages mindfulness, allowing individuals to find peace even in the midst of physical discomfort. Moreover, regular participation in dhikr can create a supportive community atmosphere among the elderly residents, enhancing social bonds and providing emotional support, which is essential for mental health. The combination of addressing both the physical and emotional aspects of gout through dhikr therapy could significantly improve the overall well-being of Mr. S and his peers, ultimately leading to better coping strategies and an enhanced quality of life in their golden years. Recognizing the intertwined nature of physical health and spiritual well-being can offer a new perspective on managing chronic conditions like gout arthritis among the elderly population.

Discussion

The data obtained from the assessment of Mr. S, a 79-year-old patient with gouty arthritis, reveals significant insights into his condition. Subjectively, he reports experiencing pain in both knee joints, which began two days ago, with discomfort particularly noticeable during the morning and at night. The patient describes the pain as being exacerbated by movement, making it challenging for him to perform daily activities and sleep at night. According to the pain scale, he rates his discomfort between 3 to 5, with the pain often described as a sharp, pricking sensation. Observationally, Mr. S displays signs of distress, such as grimacing while walking and difficulty transitioning from sitting to standing. His vital signs indicate stable blood pressure at 139/80 mmHg, with a pulse of 77 beats per minute and a respiration rate of 19 breaths per minute. However, the uric acid level is notably elevated at 8.5 mg/dL, consistent with his gout diagnosis. These clinical findings align with established literature, such as the Indonesian Rheumatology Association's guidelines and research by Nurhayati, which highlight that gout not only causes acute pain but may also result in joint swelling, redness, and stiffness, particularly affecting the ankles and other joints. Given the severity of Mr. S's symptoms, the priority nursing diagnosis is acute pain related to inflammatory conditions associated with gout (D.0077). This diagnosis is critical as untreated acute pain can exacerbate inflammation and lead to increased pain levels, potentially impairing physical mobility and overall quality of life.

In addressing Mr. S's pain management, an action plan was developed utilizing non-pharmacological interventions, particularly dhikr therapy. This spiritual practice, which involves reciting Islamic phrases to foster a sense of calm and comfort, indicating that dhikr can effectively shift the patient's focus away from pain (Nasiri et al., 2014). Implementing dhikr therapy involved reciting specific phrases, such as Tasbih, Tahmid, Takbir, and Tahlil, multiple times for sessions lasting 10 to 30 minutes. The nursing interventions were tailored to Mr. S's specific needs, acknowledging that effective pain management requires an individualized approach. Dhikr therapy was scheduled to be administered twice daily over three days, with evaluations conducted to monitor pain levels. According to the findings, Mr. S experienced a significant reduction in pain intensity, moving from a moderate pain scale rating of 5 to a mild rating of 1 by the third day of intervention. The success of this approach highlights the effectiveness of dhikr therapy in not only alleviating acute pain but also in enhancing Mr. S's overall well-being. In summary, the nursing process for Mr. S emphasizes the importance of a holistic approach to pain management in gouty arthritis. Integrating spiritual practices like dhikr with traditional nursing interventions can better address the multifaceted nature of pain in

elderly patients (Sulistyawati, Probosuseno, & Setiyarini, 2019). The positive outcomes observed in Mr. S demonstrate the potential of non-pharmacological therapies in improving quality of life for individuals suffering from chronic conditions like gouty arthritis. This case underscores the necessity for nurses to develop personalized care plans that cater to the physical and emotional needs of patients, utilizing both conventional and complementary strategies to foster optimal health outcomes (Hall, Leach, Brosnan, & Collins, 2017).

Nurses play a crucial role in implementing dhikr therapy as a non-pharmacological intervention for managing gout pain in patients (O'Regan, Wills, & O'Leary, 2010). Their responsibilities include assessing the patient's pain level and understanding their spiritual beliefs and preferences, which are essential for tailoring the dhikr practice to each individual's needs. Providing guidance on the appropriate recitations and the frequency of dhikr sessions can help patients effectively incorporate this therapy into their daily routine (Christina, Abigail, & Cuthbertson, 2016). Furthermore, nurses facilitate a calming and supportive environment, encouraging patients to engage in dhikr as a means of distraction from pain, fostering relaxation, and enhancing emotional well-being. They also monitor the patient's response to dhikr therapy, evaluating its effectiveness in reducing pain and improving overall comfort levels. Through education and compassionate support, nurses empower patients to utilize dhikr therapy, enhancing their coping mechanisms and contributing to a holistic approach to pain management in gouty arthritis (Koithan, 2009). Overall, the integration of dhikr therapy into nursing care not only addresses physical symptoms but also promotes spiritual healing, making it a valuable component of comprehensive patient care (Fowler & Newton, 2006).

Conclusion

Dhikr therapy emerges as a valuable non-pharmacological intervention for reducing pain in patients with gout arthritis. The practice, rooted in spiritual mindfulness and reflection, not only facilitates a sense of calm and emotional wellbeing but also has demonstrated potential in alleviating physical discomfort associated with gout flare-ups. As evidenced by various studies, including the experiences of patients undergoing dhikr therapy, significant reductions in pain levels have been observed, enhancing patients' quality of life and functional capabilities. This holistic approach, which integrates the spiritual, psychological, and physical aspects of health, underscores the importance of addressing the multifaceted nature of pain management in gout arthritis. Incorporating dhikr therapy into nursing care plans offer a more comprehensive and patient-centered approach, empowering individuals to actively engage in their healing process while fostering resilience against the challenges posed by chronic pain. Ultimately, dhikr therapy represents not just a means of pain relief, but also a pathway to greater peace and emotional harmony for those living with gout arthritis.

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