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NURSING CARE POST OPERATIONAL APPENDICITIS PATIENTS WITH NURSING PROBLEMS ACUTE PAIN IN BIMA ROOM RSUD JOMBANG

Sifa'ur Rohma¹, Tiara Fatma Pratiwi², Faishol Roni³, H. Arif Wijaya⁴, Ahmad Wahid⁵ D3 Nursing, Akper Bahrul Jombang, Pasuruan, Indonesia ^{2,3,4,5} Lecturers, Akper Bahrul Ulum Jombang, Indonesia

Email: 1rohmasifa1@gmail.com

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ABSTRACT

Background: Appendicitis is an inflammation of the appendix caused by a bacterial infection as the main cause.

Method: This research design is a case study using 2 clients who experience postoperative appendicitis with acute pain nursing problems, nursing care is carried out for 3 consecutive days using non-pharmacological therapeutic interventions, namely Benson relaxation and aromatherapy therapy.

Result : The results showed that acute pain with Benson relaxation and aromatherapy therapy, the problem was resolved by reducing the severe pain scale to a mild pain scale for both clients.

Analysis : To carry out nursing care for clients who experience Post operational appendicitis with priority problems of Acute pain.

Conclution: Non-pharmacological techniques of benzene relaxation and aromatherapy are related. Giving Benson relaxation therapy carried out for 30 minutes will result in a decrease in pain receptors, stimulate the release of endophins so as to create a relaxed or calming state that can overcome complaints of postoperative pain after appendicitis, this therapy is given for 3 days in a row.

Keywords: Appendicitis, Acute Pain, Benson Relaxation, Aroma Therapy

1. INTRODUCTION

Appendicitis is inflammation channel hidden intestine and small in size about 4 inches (10 cm) dead ends on cecum. Appendix could obstructed by period hard stools, which is the result will happen inflammation, infection, gangrene, and possible perforation . A ruptured appendix is symptom serious because content intestines could enter into the abdomen and cause peritonitis or abscess (Caroline & Kowalski ,2017).

Phenomenon or problem happened on patient appendicitis that is emergence painful or don't think so nice on around the umbilicus. Symptom this generally going on more from one or two day. In several hours of pain shift to quadrant right lower with accompanied by norexia, nausea and vomiting (Thomas et al, 2016).

Word Health Organization (WHO) numbers mortality in the world consequence appendicitis is 21,000 souls, where population man more many compare girl. Number mortality appendicitis 12,000 souls on man and around 10,000 souls on women (2018). Prevalence appendicitis acute in Indonesia ranges from 24.9 cases per 10,000 population. Appendicitis this can override on man nor woman with risk suffer appendicitis During his life reach 7-8%. Prevalence highest happen on aged 20-30 Appendicitis perforation own prevalence between 20-30% and increased 32-72% on age more from 60 years from all case appendicitis (Gunawan, 2018). In Java East as many as 5,980 patients and 177 sufferers among them causing death (Nurlina et al., 2019). Based on data in Space Bima Hospital Jombang period month January until December 2018 reached 352 cases postoperative appendicitis (Saputro et al , 2018). Based on data in Space Bima Hospital Jombang period April to June 2022 reached 10 cases postoperative appendicitis.

One solution in resolve problem nursing painful I on patient postoperative appendicitis that is collaboration relaxation

benzon and aromatherapy. Benson's relaxation which is merger Among relaxation and factor belief philosophical or religion by someone. Focus relaxation this there is on expression certain what is said over and over again with use regular rhythm accompanied surrender attitude .phrases used could form What is the name Lord or the word that has soothing meaning for patient. Reading over and over again on element belief, faith to Lord could raises response strong relaxation so that could lower worry and pain. As for management non- pharmacological pain for reduce painful wrong only one is technique aromatherapy (Warsono et al, 2019).

The research objective is to carry out Nursing Care On experienced clients postoperative appendicitis with problem nursing painful. Use therapy relaxation benzon and aromatherapy.

2. METHODS

This research plan uses a case study approach. The subjects of this study were 2 respondents with the criteria for a patient with a medical diagnosis of febrile seizures. The focus of this case study is a patient who has an increase in body temperature resulting in hyperthermia nursing problems. The place for taking this case study was carried out in the Srikandi room Jombang Hospital on 25-27 July 2022. Data collection is by interview, observation and documentation study.

3. RESULTS

Results assessment subjective data obtained Client 1 is 25 years old and client 2 aged 28 years who experienced post op appendicitis. While the objective data obtained second client sigh pain . Client 1 complains painful stomach part right lower already 2 days ago and client 2 pain stomach part right lower already 4 days ago. kindly theory is Appendicitis is inflammation that occurs in a manner sudden on (appendix) or intestines dead end , where intestines dead end is channel

end of the intestine dead end and stand out from part beginning intestines big or caecum (Afriani , 2019).

Appendicitis is inflammation channel hidden intestine and small in size about 4 inches (10 cm) dead ends on cecum . Appendicitis can obstructed by period hard stools, which is the result will happen inflammation, infection, and possible perforation.

Ruptured appendicitis is symptom serious because content intestines could enter into the abdomen and cause peritonitis or abscess (Caroline & Kowalski, 2017).

Action nursing for reduce the pain that is done as action nursing independent that is therapy nonpharmacological which includes relaxation benzon for lower pressure blood, health getting better with method loosen up muscles relax maybe, start of the legs, calves, thighs, abdomen, and continue to all muscle body. Hands and arm held out then relax and let drooping fair.

Try to stay relax start with slow breathing and reasonable, as well say in heart words already chosen by Allahu Akbar on moment interesting breath and be repeated moment Secrete breath. Relax whole body accompanied with attitude resigned. Repeat for 10-15 minutes Observation scale painful after intervention Say it greetings.

Based on evaluation results that decline painful second client already resolved partially.

4. DISCUSSION

There is a difference Among studies case and theory because no all arranged or planned because adapt problem and priority corresponding need client.

5. CONCLUSION

Results assessment Mrs F and data obtained Mrs A is there difference that is on patient 1 scale painful that is 6 , painful as stabbed prick and is lost appears , the diagnosis appears is painful I related with agent injury physical . Patient 2 scale pain 6 diagnoses that appear is painful I related with agent injury physical with planned intervention relaxation benzon.

Implementation done on second patient are :

- a. Giving regards
- b. Monitor sign vital signs
- c. Identify characteristics, location, duration, frequency painful
- d. Deliver technique nonpharmacological that is relaxation benzon for reduce pain until the results you get painful I resolved part.

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