Original Article

Health Education on Anxiety Levels in Projective Surgery Patients In Mokoyurli Buol Hospital

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ARTICLE INFO

Article History:
Submit, 11 May 2021
Revised, 20 May 2021
Accepted, 30 May 2021
Available online, 30 June 2021

Keywords:
Pre-Surgery, Appendectomy, Health Education

ABSTRACT

Background: Nurses have the longest contact in handling patient problems and the role of nurses in their efforts to heal patients is very important. A nurse was required to know the patient's condition and needs. Objective of Knowing the Effect of Health Education on Anxiety Levels in Pre-appendectomy Surgeons in Mokoyurli Buol Hospital
Methods: The design was used in the study was pre-experiment one group pre-post-test. The population was all patients with appendectomy. The sample size was 37 respondents using Simple random sampling technique. Independent variable of research was health education. The dependent variable was the level of anxiety. Data were collected using a questionnaire, then the data were analyzed using Wilcoxon test with a significance level of α <0.05.
Results: The results showed that 15 respondents who experienced an anxiety level decreased, and 22 respondents had a level of anxiety remained after the intervention. Based on the results of statistical tests it was found that p = 0,000 with a <0,05, which means that there was an effect of Health Education on the Anxiety Level to Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital
Conclusion: There was a decrease in anxiety levels after Health Education because of the provision in information and orientation readiness, thus reducing the causes of anxiety such as lack of information and make causing anxiety.

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Ain, I. (2021). Health Education On Anxiety Levels In Projective Surgery Patients In Mokoyurli Buol Hospital. Journal of Applied Nursing and Health, 3(1), 15–21. https://doi.org/10.55018/janh.v3i1.20

Introduction

Nurses have the longest contact in dealing with patient problems and the role of nurses in healing patients is very important. A nurse is required to be able to know the condition and needs of the patient. Including one of them in patient care during pre-appendectomy surgery. Appendectomy is an operative action to remove tissue in the appendix. Treatment of preoperative appendicitis that can effectively reduce the risk of postoperative surgery, one of the nursing priorities in this period is to reduce patient anxiety (S. Smeltzer, 2014; S. C. Smeltzer & Bare, 2014). Anxiety can occur in all patients who will undergo surgery.

There are various reasons that can cause a patient's fear or anxiety in the face of surgery, including fear of pain after surgery, fear of physical changes, and fear

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that surgery will fail (Adhisty, 2020) . One action to reduce the level of anxiety is to prepare mentally from the patient. One of the mental preparations can be done through health education. Preoperative health education can help patients and families identify perceived concerns. The nurse can then plan nursing and supportive interventions to reduce the patient's anxiety level and help patients successfully deal with the stress encountered during the perioperative period (Chen et al., 2020; Groeben et al., 2020; Ward et al., 2018).

The mortality rate due to appendicitis is 21,000 people, where the male population is more than women. The appendicitis mortality rate is around 12,000 in men and around 10,000 in women (WHO, 2017). Data in Indonesia shows that every year appendicitis attacks 10 million Indonesians. currently the rate of appendicitis morbidity in Indonesia reaches 95 per 1000 population and this figure is the highest among countries in the Association of South East Asia Nation (ASEAN). Surveys in 12 provinces in Indonesia in 2008 showed 3,251 cases of hospitalized appendicitis. This number has increased dramatically compared to the previous year, which was 1,236 people. At the beginning of 2009, there were 2,159 people in Jakarta who were hospitalized due to appendicitis (Rismawan, 2019; Rokawie et al., 2017; Wahyuningsih, 2016). The Ministry of Health considers appendicitis a health priority issue at the local and national level because it has a major impact on public health.

Most respondents before being given health education were anxious 73.3%, while those who experiencing mild anxiety and severe anxiety 13.3%. Anxiety is a shocking condition because of the threat to health. The results of the preliminary study found that there were 480 patients with appendectomy in Buol district in 2017. Patients with Pre-Appendectomy Surgery in Mokoyurli Buol General Hospital in January 2018 were 40 patients. The results of the preliminary study through interviews of 9 pre-operative patients found that 6 patients had moderate anxiety levels, 2 mild, and 1 severe anxiety (Qur'ana, 2019; Rahmayati et al., 2018; Ulfa, 2017). The researcher asked the patient's feelings about preoperative surgery and the patient revealed about anxiety, tension, fear, sleep disturbances before surgery.

The factors that cause appendicitis are the clogging of the appendix often by objects carried by food, by hard dirt, which then causes an infection that causes swelling, and an appendectomy must be performed. Factors that influence the anxiety of preoperative appendectomy patients are lack of information, perception of threat threats to one's integrity, physiological inability to occur or decrease in capacity to carry out daily living activities and threats to one's self system can endanger self-identity, self-esteem, and function someone's intimate social (Nursalam, 2008). Signs of anxiety in the preoperative appendectomy include a rather excessive attitude with anxiety experienced. Anxiety experienced by patients and families is usually associated with all kinds of foreign procedures that patients must undergo and also threats to life safety due to all kinds of surgical procedures and anesthesia measures. If the anxiety of preoperative appendectomy is not overcome, it can have an impact on physical and psychological readiness even related to the success rate of the operation. Anxiety that occurs in patients can interfere with the physical condition and psychological condition of the patient preoperatively. Preoperative anxiety that occurs can affect the condition of the patient preoperatively until after surgery.

Anxiety can be reduced by health education preoperative appendectomy.

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Information is given to the patient so the patient will have a good orientation, understanding and good psychosocial support, so that it can ultimately reduce anxiety. The five dimensions of preoperative counseling that are most important to clients: 1) Information. Among other things what will happen to the client, when, and what the client will feel, such as the sensations and discomfort that will be felt. 2) Psychosocial support to reduce anxiety. Nurses provide support with an introduction and provide accurate information. The nurse must correct all errors. 3) The role of clients and closest people in preoperative preparation, surgical procedures, and during the postoperative phase. The client's understanding of his role during the perioperative experience will increase his sense of control and decrease client anxiety. 4) Presence will be very instrumental in guiding patients to pray before undergoing surgery. With counseling, it is expected that patients' anxiety can be reduced even if they are not anxious, cooperative in their actions, and physical health and spikes can be better. Based on this background the researcher was interested in examining the title of Health Education Against Anxiety Levels in Pre-Appendectomy Patients in Mokoyurli Buol Hospital

Method

design used in the study was a pre-experimental one group pre-posttest. Population is All patients Pre-Appendectomy Surgery. The sample size was 37 respondents using the Simple random sampling technique. Independent variable of research is health education. The dependent variable is the level of anxiety. Data was collected using a questionnaire, then the data were analyzed using the test Wilcoxon with a significance level of $\alpha \leq 0.05$ (Sugiono, 2009).

Results

Table 1. Distribution of Frequency of Characteristics of Respondents by Age in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital on July 9-August 9 2018 (n = 37)

No	Age	Frequency	Percentage
1	17-25 years	6	16.2
2	26-35 year	5	13.5
3	36-45 years	17	45.9
4	46-55 years	9	24.3
	Total	**37**	**100**

The results of the study showed that most of the respondents aged 36-45 years were 17 respondents (45.9%).

Table 2. Distribution of Frequency of Characteristics of Respondents by Gender in Patients with Pre-Appendectomy Surgery in Mokoyurli Buol Hospital on 9 July-9 August 2018 (n = 37)

No	Gender	Frequency	Percentage
1	Male	16	43.2
2	Women	21	56, 8
	Total	**37**	**100**

The results of the study found that most of the respondents were female as many as 21 respondents (56.8%).

Table 3. Distribution of Frequency Characteristics of Respondents Based on Education In Pre-Appendectomy Patients in Mokoyurli Buol Hospital on July 9-August 9 2018 (n = 37)

No	Education	Frequency	Percentage
1	SD	4	10.8
2	SMP	10	27.0
3	SMA	23	62.2
	Total	**37**	**100**

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The results of the study showed that most of the respondents had high school education as many as 23 respondents (62.2%).

Table 4. Distribution of the Frequency of Characteristics of Respondents by Job in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital on 9 July-9 August 2018 (n = 37)

No	Job	Frequency	Percentage
1	Employee	10	27.0
2	Private	14	37.8
3	Not working	13	35.1
	Total	**37**	**100**

The results of the study showed that most respondents had private employment as many as 14 respondents (37.8%).

Table 5. Frequency Distribution of Respondents based on the level of anxiety (pretest) Before *Health Education* in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital on July 9-August 9 2018 (n = 37)

No	Anxiety Level	Frequency	Percentage
1	No Anxiety	3	8.1
2	Mild Anxiety	15	40.5
3	Moderate Anxiety	19	51.4
	Total	**37**	**100**

The results of the study showed that before health eduation more than half of respondents had moderate anxiety levels as many as 19 respondents (51.4%).

Table 6. Frequency Distribution of Respondents based on Level of anxiety (post test) After *Health Education* in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital on July 9-August 9 2018 (n = 37)

No	Anxiety Level	Frequency	Percentage
1	No Anxiety	12	32, 4
2	Mild anxiety	16	43.2
3	Moderate anxiety	9	24.3
	Total	**37**	**100**

The results of the study showed that after health eduation more than half of respondents had a mild level of anxiety of 16 respondents (43.2%). Respondents who experienced a decrease in anxiety before and after the intervention were 15 respondents, and those who had a constant anxiety level were 22 respondents.

Table 7. Level of anxiety in Pre-appendectomy Surgery Patients at Mokoyurli Buol Hospital on 9 July-9 August 2018 (n = 37)

Anxiety Level (Pretest)	Anxiety Level (Post test)						*p*
	No Fear		Light Anxiety		Anxiety Medium		
	∑	%	∑	%	∑	%	
No Fear	3	8,1	0	0	0	0	0,000
Light Anxiety	5	13,5	10	27	0	0	
Anxiety Medium	4	10,8	6	16,2	9	24,3	
Total	12	32,4	16	43,2	9	24,3	

The results of the study found that most respondents had mild anxiety before and after health education as many as 10 respondents (27%). The results showed that there were 15 respondents who experienced decreased pain levels, and 22 respondents had a constant level of pain. Based on the results of statistical tests it was found that p = 0,000 with a <0,05, which

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means that there is an effect of *Health Education on the* Anxiety Level in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital.

Discussion

The results of the study showed that there were 15 respondents who experienced pain levels, and 22 respondents had a constant level of pain. Based on the results of statistical tests it was found that p = 0,000 with a <0,05, which means that there is an effect of Health Education on the Anxiety Level in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital. In accordance with what was suggested by Kurniawan (2013), most of the respondents obtained before being given health education were anxious because anxiety was a shocking condition due to a threat to health. Health information provided is very important to give a good orientation to the patient so that the patient can be more cooperative and the level of anxiety can be lowered (Bedaso & Ayalew, 2019).

Anxiety can be reduced by health education preoperative appendectomy. Information is given to the patient so the patient will have a good orientation (Mulugeta et al., 2018), understanding and good psychosocial support, so that it can ultimately reduce anxiety. The five dimensions of preoperative counseling that are most important to clients: 1) Information. Among other things what will happen to the client, when, and what the client will feel, such as the sensations and discomfort that will be felt. 2) Psychosocial support to reduce anxiety. Nurses provide support with an introduction and provide accurate information. The nurse must correct all errors. 3) The role of clients and closest people in preoperative preparation, surgical procedures, and during the postoperative phase. The client's understanding of his role during the perioperative experience will increase his sense of control and decrease client anxiety. 4) Presence will be very instrumental in guiding patients to pray before undergoing surgery.

Based on the results of the study, it was found that the results showed that there were 15 respondents who experienced pain levels, and 22 respondents had a constant level of pain. Based on the results of statistical tests it was found that p = 0,000 with a <0,05, which means that there is an effect of Health Education on the Anxiety Level in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital. Factors that affect anxiety (Stuart, 2007): Threats to physical integrity include physiological disability that will occur or a decrease in the ability to carry out daily activities and Threats to self-systems can endanger identity, self-esteem, and social functions integrated in individuals (Supriani et al., 2017)

. Anxiety or anxiety can be reduced by providing health education so that unclear and diffuse concerns related to feelings of uncertainty and helplessness can be reduced. Health Education can provide psychosocial support to patients to reduce tension or anxiety, the role of nurses in providing initial support before entering the operating room by providing accurate information

Conclusion

The results showed that before health education more than half of respondents had moderate anxiety levels of 19 respondents (51.4%), and at least no anxiety as many as 3 respondents (8.1%). The results showed that after health education more than half of respondents had mild anxiety levels of 16 respondents (43.2%), and at least had moderate anxiety as many as 9 respondents (24.3%). There

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is a significant effect of Health Education on the Anxiety Level in Patients with Pre-Appendectomy Surgery at Mokoyurli Buol Hospital, because the information provided provides a good understanding and orientation of the actions to be carried out.

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