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Implementation of Nursing Care for Patient Mrs. I with PID (Pelvic Inflammatory Disease) Post HDLO in Fulfilling Disturbances in Comfort: Pain with Five Finger Hypnotherapy in the Treatment Room on the Second Floor of the Dr. Iman Sudjudi Pavilion, Gatot Soebroto Army Hospital

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Abstract

PID (Pelvic Inflammatory Disease) or pelvic inflammatory disease is an inflammation of the female reproductive organs that usually occurs in the uterus, fallopian tubes, and ovaries. This occurs due to bacterial infection in sexually transmitted infections (STIs). The prevalence of PID cases in the world in 2019 was 1.05 million cases in women of childbearing age. In Indonesia in 2020, around 300,000 women with gonorrhea and chlamydia infections caused 24,000 - 46,000 cases of PID in women each year. Based on data from the Treatment Room on the 2nd Floor of the dr. Iman Sudjudi Pavilion, Gatot Soebroto Army Hospital, from November 2023 to April 2024, there were 15 patients out of 803 patients treated. The medical management carried out was surgery which can cause post-operative pain. The purpose of this writing is to be able to understand nursing care for PID patients with post HDLO in Mrs. I with acute pain nursing problems by performing complementary actions, namely five-finger hypnotherapy. This study is a descriptive method with a case study approach for PID (Pelvic Inflammatory Disease) patients post HDLO with acute pain in the Treatment Room on the Second Floor of the dr. Iman Sudjudi Pavilion, Gatot Soebroto Army Hospital. The results of this study indicate that in PID patients with post HDLO with acute pain who underwent complementary actions of five-finger hypnotherapy for 3x24 hours, the results showed a decrease in the intensity of the pain scale, before the pain scale was 6 and after it was done it became a pain scale of 2. The conclusion obtained is that there is an effect of five-finger hypnotherapy on reducing the intensity of the pain scale in PID post HDLO patients. Therefore, this method can be applied as a complementary therapy to reduce pain in post HDLO patients.

Keywords: Nursing Care; Five-Finger Hypnotherapy; PID; Female Reproductive Organs

Introduction

The reproductive organs are one of the most important systems in the human body and have a major role that cannot be replaced by other organs. There are many diseases found in the reproductive

organs, especially in women, such as PID (Pelvic Inflammatory Disease). PID (Pelvic Inflammatory Disease) or known as pelvic inflammatory disease is a general term for infections of the female genitalia that have spread to deeper areas

of the female reproductive organs, such as the uterus, fallopian tubes, and ovaries. This is a serious and life-threatening infection (Andira, 2019).

In most countries in the world, current data on the prevalence, incidence or burden of PID (Pelvic Inflammatory Disease) is still limited. In the data collection from 2009 to 2019, there were 1.05 million women of childbearing age who had active PID globally. From this data, there has been a decline in PID diagnoses over a decade. With chlamydial PID of 58%, gonococcal PID of around 34%, and non-specific PID of 37% of the average female population of childbearing age (Hillier et al., 2021). In Eastern Taiwan, 85% of PID cases can be caused by sexually transmitted pathogens or bacteria associated with bacterial vaginosis. Less than 50% of current PID cases are caused by *N. gonorrhoeae* or *C. trachomatis*. On the other hand, less than 15% of acute PID cases are not sexually transmitted and are associated with enteric or respiratory pathogens (Chen et al., 2021).

In Indonesia in 2020, high prevalence and reinfection rates also indicate a high burden of morbidity and mortality due to STIs (Sexually Transmitted Infections). This can actually be prevented with effective STI treatment. Nearly 300,000 women with gonorrhea and chlamydia infections cause 24,000 – 46,000 cases of pelvic inflammatory disease (PID) in women each year. Pelvic inflammatory disease can also cause infertility, sepsis, increased maternal mortality due to post-abortion and postpartum infections, and a 6 – 10 times higher risk of ectopic pregnancy (Luhukay et al., 2021).

Based on data obtained from the register records in the Treatment Room on the 2nd Floor of the dr. Iman Sudjudi Pavilion, Gatot Soebroto Army Hospital, patients treated in the last six months

from November 2023 to April 2024 with a total of 803 patients, there were 15 patients with PID (Pelvic Inflammatory Disease) cases with post HDLO with a percentage of 1.86%. This data shows that the condition of patients with PID (Pelvic Inflammatory Disease) post HDLO is a rare patient condition in the Treatment Room on the 2nd Floor of the dr. Iman Sudjudi Pavilion. Iman Sudjudi RSPAD Gatot Soebroto Jakarta.

One of the effects of PID (Pelvic Inflammatory Disease) itself can cause reproductive disorders, especially in the fallopian tubes, namely hydrosalpinx which can cause infertility in women (Nora et al., 2022). Complications of patients with PID (Pelvic Inflammatory Disease) post HDLO are pain. Postoperative pain is pain that is felt after surgery. Postoperative pain is the main problem that must be addressed because it will cause other problems, such as impaired physical mobility and disturbed sleep patterns, so pain must be addressed immediately.

Management of pain therapy itself can be in the form of pharmacological therapy or non-pharmacological therapy. For pharmacological therapy, analgesic drugs can be used with doses according to doctor's recommendations. Meanwhile, for non-pharmacological therapy as a complementary measure, namely five-finger hypnotherapy. Five-finger hypnosis is a form of self-hypnosis that can cause a high relaxation effect, thereby reducing pain and stress. Five-finger hypnosis will experience relaxation so that it affects the body's system and creates a sense of comfort and calm. This is reinforced by several studies conducted by (Despitasari et al., 2023); (Halim & Khatul, 2020); (Harisandy, 2023); (Dewi, 2022), which state that the five-finger hypnotherapy technique is effective in reducing the pain scale in post-operative patients,

cervical cancer patients, colorectal cancer patients, and breast cancer patients.

Method

This research design uses a descriptive research design in the form of a case study. Descriptive research is a type of research that aims to study a condition or other event and then present the results of the research in a report (Anisa et al., 2023). Descriptive research is a type of research that is carried out with the aim of describing a condition of the object to be observed. This study uses a case study design, namely describing nursing care for Mrs. I with PID (Pelvic Inflammatory Disease) Post HDLO in fulfilling the disturbance of comfort: pain with five-finger hypnotherapy in the Treatment Room on the Second Floor of the dr. Iman Sudjadi Pavilion, Gatot Soebroto Army Hospital.

Results and Discussion

Focus Data

a. Subjective Data

The patient said that she had pain in the surgical wound in the stomach, the pain felt like being stabbed, the pain scale was 6 and it came and went when moving. The patient said that she was still weak and was still trying to do activities. The patient said that her husband helped her with her daily activities. The patient said that she had been wiped, brushed her teeth, and combed her hair but her

husband still helped her because she was still weak.

b. Objective Data of Post HDLO Patient.

The patient appears weak. The general condition is moderately ill. Consciousness composition with GCS 15. The patient appears to wince when in pain. Pain assessment with results P: pain in the surgical wound in the abdomen, Q: stabbing pain, R: pain around the abdomen does not spread, S: pain scale 6, T: pain comes and goes when moving. The patient's activities appear to be still assisted by the family. Blood pressure 106/68 mmHg, pulse rate 85x/minute, respiratory rate 20x/minute, body temperature 36.2°C, and oxygen saturation 99%, SN 6. The patient appears to be lying on the bed. The patient appears to have difficulty moving. There are 4 surgical wounds in the patient's abdomen covered with plaster (the wound looks clean, there is no discharge from the wound, no edema, no redness). The results of the post HDLO urine hematology examination with leukocytes 11870/µL. The patient received IVFD Ringer Lactate infusion therapy 500 ml 20 tpm, attached to the right hand. The patient had a urinary catheter with urine production of 200 ml clear yellow. The patient received paracetamol infusion therapy 1 gram during post-surgery, Ondansetron injection therapy 8 mg 3x1 via iv, Tramadol tab 50 mg 3x1 orally, and cefixime tab 200 mg 3x1 orally.

Data analysis

No	Focus Data	Problem	Etiology
1	<p>DS :</p> <ul style="list-style-type: none"> • The patient said that the surgical wound was painful in the stomach area • The patient said that he was still weak and tried to mobilize <p>DO :</p> <ul style="list-style-type: none"> • Post HDLO patient • General condition of the patient is moderately ill • Consciousness composition, GCS 15 	Acute pain (D.0077)	Physical injury agent (operative procedure)

No	Focus Data	Problem	Etiology
	<ul style="list-style-type: none"> The patient appears to wince when in pain Pain assessment: P: pain in the surgical wound in the stomach Q: stabbing pain R: pain around the stomach does not spread S: pain scale 6 T: pain comes and goes when moving TTV measurement BP: 106/68 mmHg N: 85 x/minute RR: 20 x/minute Sh: 36.2°C SpO : 99% The patient was given IVFD Ringer Lactate 500 ml 20 tpm on the right hand A urinary catheter was installed with urine production of 200 ml which was clear yellow 		
2	<p>DS : ..</p> <p>DO :</p> <ul style="list-style-type: none"> Post HDLO patient IVFD Ringer Lactate 500 ml 20 tpm installed Urinary catheter installed with 200 ml clear yellow urine production There are 4 surgical wounds in the patient's abdomen covered with plaster (the wound looks clean, no fluid comes out of the wound, no edema, no redness) Results of post HDLO urine hematology examination with leukocytes 11870/μL The patient received Ondansetron 8 mg injection therapy 3x1 via heplock, cefixime tab 200 mg 3x1 orally 	Risk of infection (D.0142)	Effects of invasive procedures
3	<p>DS :</p> <ul style="list-style-type: none"> The patient said she was still weak and was still trying to be active The patient said her husband was helping her with her daily activities The patient said she had been wiped, brushed her teeth, and combed her hair but her husband was still helping her because she was still weak <p>DO :</p> <ul style="list-style-type: none"> Post HDLO patient Patient appears weak. General condition is moderately ill Consciousness compos mentis with GCS 15 Patient appears to wince when in pain Patient appears to be lying on the bed Patient appears to have difficulty moving Patient's activities appear to still be assisted by family IVFD Ringer Lactate 500 ml 20 tpm installed Urinary catheter installed with urine production of 200 ml clear yellow 	Self-Care Deficit (D.0109)	Weakness

Nursing Diagnosis

a. Acute pain related to physical injury agent (surgical procedure) (D.0077)

b. Risk for infection related to effects of invasive procedure (D.0142)

c. Self-care deficit related to weakness

(D.0109)

Nursing Intervention

In theory, intervention is carried out without time limits. While in the case, intervention was carried out on the first and second diagnoses, namely acute pain and risk of infection which were carried out for 3x24 hours, while the third nursing diagnosis was carried out for only 1x24 hours because the patient was able to carry out activities independently without being assisted by the family. The planning was adjusted to the situation and conditions at that time.

Implementation

The results in the case, in accordance with the theory and related journals, were the five-finger hypnotherapy technique that had been taught independently and was able to reduce the intensity of the patient's pain from a pain scale of 6 to a pain scale of 2 or almost not felt.

Evaluation

After nursing care was carried out, the last step was to evaluate the nursing diagnosis found, both by conducting formative evaluations and summative evaluations..

Conclusion

The conclusion obtained from this case study of nursing care management from the case study is that the five-finger hypnotherapy technique is effective in reducing the intensity of the pain scale from a pain scale of 6 to a pain scale of 2 or almost not felt. This statement is proven by research that has been given intervention with the five-finger hypnotherapy technique to reduce the intensity of the pain scale in postoperative patients. This is in accordance with the theory put forward by (Despitasari et al., 2023) which explains that the five-finger hypnotherapy technique can reduce tension on the intensity of pain in postoperative patients..

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