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Application of Complementary Therapy of Warm Compress with Boiled Ginger Water to Reduce Pain in Mr. S's Family, Especially the Elderly Mrs. S with Osteoarthritis in Perum Puspa Raya RT 002 RW 012 Kel Bojong Baru, Kec Bojong Gede, Bogor Regency, West Java

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Abstract

Elderly is someone who is over 60 years old. And the elderly will experience changes such as physical, psychological and psychosocial changes. There are several disorders that are commonly found in the elderly process, one of which is joint disorders such as osteoarthritis. Osteoarthritis is a chronic degenerative disease that is widely suffered by elderly adults and is characterized by damage to the cartilage in the joints. The purpose of this family nursing care is to help families overcome osteoarthritis problems independently by applying complementary therapy of warm compresses with boiled ginger water to reduce pain. One of the families targeted for family nursing care is Mr. S, especially the elderly Mrs. S with osteoarthritis. After the assessment, it was found that the nursing diagnosis of family nursing management was ineffective. Furthermore, the action was taken, namely the application of complementary therapy of warm compresses with boiled ginger water for 5 consecutive days and there was a decrease in pain. The last step was to evaluate the problem, TUK 1, TUK 2 were achieved and in TUK 3, TUK 4, TUK 5 had not been achieved so that follow-up was needed to overcome the problem. The writing method used is descriptive with a case study approach where the author took one of the families given care by applying complementary therapy of warm compresses boiled with ginger water. The application of complementary therapy of warm compresses boiled with ginger water has been proven to be able to reduce pain in families with osteoarthritis problems, although the results are not significant because they are only carried out for 5 consecutive days.

Keywords: Osteoarthritis; Pain; Warm Compress Therapy; Boiled Ginger Water.

Introduction

Elderly is someone who is over 60 years old. And the elderly will experience changes such as physical, psychological and psychosocial changes (Astutik and Mariyam, 2021). There are several disorders that are commonly found in the aging process, one of which is joint disorders such as osteoarthritis.

Knee osteoarthritis is a chronic degenerative disease that is widely suffered by elderly families which is characterized

by damage to the cartilage in the knee joint. Patients may experience joint pain, stiffness, and joint deformity, and have a high level of disability (Tan, 2022). Muscle weakness is one of the characteristics of knee osteoarthritis. Muscle stability can be an important addition to knee muscle strength in improving physical function in knee osteoarthritis (Satam et al., 2022). If not treated properly, it will cause complications.

WHO reports that 40% of the world's

elderly population will suffer from OA, of which 80% experience limited joint movement. The prevalence of osteoarthritis is quite high in Indonesia. The UN predicts that the percentage of elderly in Indonesia will reach 74 million elderly in 2025 or around 25% in Indonesia. BPS (Central Statistics Agency) also explained that in 2045 Indonesia will have around 63.31 million elderly people or almost 20% of the population. The prevalence of OA based on age in Indonesia is quite high, namely 5% at the age of 40 years, 30% at the age of 40-60 years, and 65% in the elderly (elderly) over 61 years.

According to data taken from RISKESDAS 2018, the prevalence of joint disease in Indonesia reached around 7.3% and osteoarthritis (OA) or arthritis as one of the most common joint diseases. Knee osteoarthritis is the most common type of OA because 83% of OA cases are knee OA 1.2% (Wijaya, 2018). The prevalence of OA will increase with age and obesity.

According to the Basic Health Research Report (Riskeidas, 2018), the prevalence of osteoarthritis sufferers in West Java reached 713,783 people. Meanwhile, the prevalence of osteoarthritis in West Java Province reached 52,511 people and 1,206 people in Bogor City.

One of the symptoms of osteoarthritis is pain. Osteoarthritis pain is pain caused by chronic joint disorders accompanied by bone and joint damage in the form of disintegration and progressive softening of joint cartilage called osteophytes and fibrosis in the joint capsule. This disorder arises from the abnormal mechanism of the aging process, trauma or other disorders that cause damage to joint cartilage. To overcome osteoarthritis pain, one of the nursing actions that can be taken is non-pharmacological therapy, namely complementary therapy using plants. One of the plants that can be used is ginger by

applying a warm compress with boiled ginger water.

Giving a warm compress with boiled ginger water is an alternative that can be used to reduce osteoarthritis pain in the elderly (Hannan et al., 2019). The purpose of giving a warm compress of boiled ginger water is to improve blood circulation, reduce pain or soreness and provide a feeling of comfort and warmth. Giving a warm compress of boiled ginger water with a temperature of 40-42 degrees Celsius for 10 to 15 minutes can reduce pain in the elderly (Sunarsih and Nugroho, 2022).

This has been proven by research. From the research and results of data analysis in the previous journal entitled "The Effect of Ginger Compress (Zingiber Officinale) on Reducing Joint Pain in the Elderly with Osteoarthritis" by Nursipa, et al., 2021, ginger compress therapy is effective in reducing the scale of joint pain in the elderly with Osteoarthritis, this is because ginger contains zingerol which is warm so that it opens blood vessels and improves blood circulation, so that the supply of food and oxygen is better and joint pain is reduced.

Method

Descriptive case study design where the author will describe the application of warm compress therapy with boiled ginger water to families with osteoarthritis to see the effectiveness of reducing pain. The focus of the case study in writing this scientific paper is the application of warm compress therapy with boiled ginger water in the nursing care of Mr.'s family, especially Mrs. S, with osteoarthritis in Puspa Raya RT 002 RW 012, Bojong Baru Village, Bojong Gede District, Bogor Regency, West Java.

Results and Discussion

Data Analysis

Data	Nursing Diagnosis
DS: - Mrs. S said she did not fully understand the meaning, causes, signs and symptoms, how to treat and how to care for osteoarthritis	Ineffectiveness of Family Health Management

<ul style="list-style-type: none"> - Mrs. S said it was difficult to do other treatments besides taking medication because she did not know other treatments to reduce pain - Mrs. S said the thing that made her knee pain worse was if there was no activity at home such as walking <p>DO:</p> <ul style="list-style-type: none"> - Mrs. S looked confused when asked about osteoarthritis - Mrs. S looked confused when asked what treatments could be done for osteoarthritis <p>P: Osteoarthritis Q: pricked R: right and left knee S: 7 T: sometimes</p>	(Osteoarthritis)
<p>DS :</p> <ul style="list-style-type: none"> - Mr. S said that he already knows the definition, causes, signs and symptoms, treatment and care of cholesterol. - Mr. S said that he has had cholesterol for approximately 2 years but for the past year has been able to maintain cholesterol levels within normal limits - Mr. S said that he wanted to know more details about cholesterol disease =Mr. S said that a healthy lifestyle by reducing fatty foods can reduce the risk factors for cholesterol to come back <p>DO :</p> <ul style="list-style-type: none"> - TTV : BP : 129/75 mmHg N : 89x/minute S : 36.7°C Cholesterol : 117 GDS : 117 Uric acid : 8.9 -Mr.S explained about hyper-cholesterolemia clearly - Mr. S seemed enthusiastic in receiving counseling 	Readiness for Improving Health Management (Hypercholesterol)

Nursing Diagnosis

1. Ineffectiveness of family health management (osteoarthritis)
2. Readiness to improve health management (hypercholesterol)

Intervention

In this writing, the author only describes the main priority problem, namely the ineffectiveness of Mr. S's family health management, especially Mrs. S with osteoarthritis. Nursing planning for the diagnosis of ineffectiveness of Mr. S's family health management, especially Mrs. S (osteoarthritis) is to discuss with the family about the definition, causes and signs of osteoarthritis symptoms.

Discuss with the family about the effects of osteoarthritis. Discuss with the family about how to care for and treat osteoarthritis. Discuss with the family about how to prevent osteoarthritis. Discuss with the family about health facilities that

the family can use.

At the family nursing planning stage according to Friedman, the author can also only apply supplemental planning where the author can provide direct nursing services to Mr. S's family, namely with complementary therapy of warm compresses with boiled ginger water to reduce the pain scale.

Implementation

After planning, implementation is carried out, namely discussing with the family about the definition, causes and signs of osteoarthritis, discussing with the family about the effects of osteoarthritis, discussing with the family about how to care for and treat traditional osteoarthritis, discussing with the family about how to prevent it, discussing with the family the health facilities used by the family.

In this writing, the author focuses on observing one of the traditional treatments,

namely complementary therapy with warm compresses of boiled ginger water to see whether with warm compresses of boiled ginger water for 5 consecutive days, patients with osteoarthritis feel a decrease in the pain scale.

The procedure for complementary therapy with warm compresses of boiled ginger water is to peel approximately 100 grams of ginger, wash the ginger thoroughly, slice the ginger, put the ginger in a container filled with water then boil the sliced ginger with water until boiling. Then pour the ginger water into a basin, wait

until warm then put in a washcloth, squeeze and use on both painful knees, let stand for approximately 10-15 minutes. This action was carried out by the author for 5 consecutive days.

Evaluation

From the results of the implementation and when observing the action, namely the application of complementary therapy with warm compresses of boiled ginger water for 5 consecutive days for 10 minutes, the following results were obtained:

Action Observation

No	Day/Date	Before Action	After Action
1	Monday, May 12, 2021	Before doing the compress, the author measured the patient's pain scale using the numeric pain scale method and the patient said the pain scale was 7.	After performing the warm compress therapy technique with boiled ginger water for 10 minutes, Mrs. S said the pain in her knee decreased with a pain scale of 6.
2.	Tuesday, May 14, 2021	Before doing the compress, the author measured the patient's pain scale using the numeric pain scale method and the patient said the pain scale was 6	After performing the warm compress therapy technique with boiled ginger water for 10 minutes, Mrs. S said the pain in her knee decreased with a pain scale of 5.
3	Wednesday, May 15, 2021	Before doing the compress, the author measured the patient's pain scale using the numeric pain scale method and the patient said the pain scale was 5.	After performing the warm compress therapy technique with boiled ginger water for 10 minutes, Mrs. S said the pain in her knee decreased with a pain scale of 4.
4	Thursday, May 16, 2021	Before doing the compress, the author measured the patient's pain scale using the numeric pain scale method and the patient said the pain scale was 6.	After performing the warm compress therapy technique with boiled ginger water for 10 minutes, Mrs. S said the pain in her knee decreased with a pain scale of 6.

Based on the results of observations of complementary therapy of warm compresses with boiled ginger water conducted by the author, it can be concluded that complementary therapy of warm compresses with boiled ginger water has an effect on reducing the pain scale in osteoarthritis patients because from 5 days of observation there was a decrease in the pain scale.

Conclusion

At the implementation stage, all plans can be implemented according to the family's ability. The supporting factor in

this implementation is that the patient is very cooperative. In the implementation of time and providing family nursing care must be continuous. Based on the results of the theory, the results of previous studies and the results of the implementation that the author did, no gaps were found because there was an effect of complementary therapy of warm compresses with boiled ginger water on reducing pain in osteoarthritis patients. After the author conducted an evaluation, there was an effect of complementary therapy of warm compresses with boiled ginger water to reduce the pain scale in elderly

osteoarthritis patients.

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