

## EFFECTIVENESS OF EFFLEURAGE BACK MASSAGE AND SLOW DEEP BREATHING ON VITAL SIGNS IN HYPERTENSION PATIENTS AGE 45 – 54 YEARS

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### ABSTRACT

There are quite a lot of hypertension sufferers in middle age in society, and they are easy to detect. Controlling hypertension requires lifelong medication and non-pharmacological measures. To reduce the side effects of treatment, non-pharmacological measures are needed, namely effleurage back massage and slow deep breathing. This study aimed to assess the effectiveness of effleurage back massage and slow deep breathing on vital signs, oxygen saturation, and anxiety in primary hypertension sufferers aged 45 - 54 years. The method in this research uses a quasi-experimental design with a non-randomized pretest-posttest control group design approach. The sample for this study was primary hypertension sufferers aged 45 - 54 years who received routine treatment at the Health UPTD in the Blitar City area, totalling 101 sufferers (51 in the treatment group, 50 in the control group). Inclusion criteria for patients were having systolic blood pressure of 140 – 180 mmHg and diastolic blood pressure of 90 – 100 mmHg, receiving a maximum of 2 standard antihypertensive treatments, and not smoking. Analysis used descriptive and t-tests. The results of this study showed that after effleurage back massage and slow deep breathing, there was a decrease in systolic blood pressure of 16.37 mmHg, diastolic blood pressure of 10.39 mmHg, pulse of 3.53 times/minute and respiration of 0.73 times per minute. Effleurage back massage and slow deep breathing are effective if done regularly, but they require a massage break after the sixth appointment.

**Keywords:** hypertension, effleurage back massage, slow deep breathing

### Background

Hypertension in middle age has become a major cause of disability and death in almost all countries. Hypertension is also a factor that causes high mortality and morbidity rates in Indonesia (1). In Indonesia, the prevalence of hypertension, based on a doctor's diagnosis and treatment, reaches 8.84%, while in East Java, it reaches 8.59%. Based on the age group 45-54 years, the prevalence of hypertension is 13.3% (2).

Management of hypertension includes medication and lifestyle changes (non-pharmacological). The side effects and costs of antihypertensive drugs that must be consumed throughout life encourage the application of non-pharmacological management in hypertensive patients. Management includes weight loss, meal planning, reducing dietary sodium, physical activity, smoking cessation, relaxation techniques, and stress management. One useful relaxation technique is effleurage back massage, which has been proven to reduce vital signs (except body temperature) and anxiety levels in hypertensive patients after 10 minutes of

massage (3). Back massage is also able to reduce systolic and diastolic blood pressure as well as mean arterial pressure in hypertensive patients (4).

Management of hypertension using pharmacology and non-pharmacology needs to be done to control blood pressure to normal. Providing non-pharmacological measures of effleurage back massage and slow deep breathing can reduce blood pressure, pulse, respiration and anxiety and increase oxygen saturation in primary hypertension patients. However, in Indonesia, this is not widely known. Based on the existing explanation, it is necessary to determine the effectiveness of effleurage back massage and slow deep breathing on vital signs, oxygen saturation and anxiety in primary hypertension sufferers aged 45 - 54 years. The research objective was to assess the effectiveness of effleurage back massage and slow deep breathing on vital signs, oxygen saturation and anxiety in primary hypertension sufferers aged 45 - 54 years.

## Methods

This study used a quasi-experimental design with a non-randomized pretest-posttest control group design approach. The sample for this study was primary hypertension sufferers aged 45 - 54 years who received routine treatment at the Primary Health Service in the Blitar City area, with a total of 101 sufferers. The treatment group consisted of 51 hypertension sufferers, and the control group consisted of 50 hypertension sufferers. Inclusion criteria for patients were having systolic blood pressure of 140 – 180 mmHg and diastolic 90 – 100 mmHg, receiving standard antihypertensive treatment with a maximum of 2 drugs (Diuretics, ACE inhibitors/Calcium Channel Blockers), and not smoking. The independent variables were effleurage back massage and slow deep breathing, carried out for 21 minutes every 3 days for 6 massages and continued with slow deep breathing for 10 minutes before measuring vital signs. The dependent variables are blood pressure, pulse, respiration, oxygen saturation, and anxiety, measured before and after the procedure. The analysis used is descriptive and t-test..

## Results

**Table 1. Characteristics of Hypertension Patients**

Variable	Treatment Group		Control Group		Total	
	f	%	f	%	f	%
<b>Gender</b>						
Man	18	35.3	17	34.0	35.0	34.7
Women	33	64.7	33	66.0	66.0	65.3
					<b>101</b>	<b>100</b>
<b>Last Education</b>						
Elementary School	13	25.5	11	22.0	24	23.8
Junior High School	12	23.5	13	26.0	25	24.7
Senior High School	20	39.2	21	42.0	41	40.6
College	6	11.8	5	10.0	11	10.9
					<b>101</b>	<b>100</b>
<b>Anti-hypertension medication</b>						
One	46	90.2	46	92.0	92	91.0
Two Type	5	9.8	4	8.0	9	9.0
					<b>101</b>	<b>100</b>
<b>Check Blood Pressure</b>						
Routine	30	58.8	22	44.0	52	51.5

No	21	41.2	28	56.0	49	48.5
					<b>101</b>	<b>100</b>

The results of the analysis showed that more than half (53.3%) of hypertension sufferers were female, almost half (40.6%) had a high school education, most (91.0%) received one anti-hypertension drug and more than half (51.5%) routine control at the community health centre

## Measurement of Vital Signs in the Control Group before and after being given a prone position on the bed for 21 minutes, Blitar September 2023

Table 2. Measurement of vital signs in the control group

Variabel	N	Mean	SD	<i>P value</i>
<b>Tekanan Darah Sistolik :</b>	51			
- Pre Test		152,65	16,197	0,004
- Post Test		146,67	15,197	
<b>Tekanan Darah Diastolik :</b>	51			
- Pre Test		90,20	9,693	0,004
- Post Test		86,35	7,205	
<b>Nadi :</b>	51			
- Pre Test		87,35	13,431	0,975
- Post Test		87,41	10,153	
<b>Respirasi :</b>	51			
- Pre Test		20,43	1,237	0,757
- Post Test		20,37	1,058	

The results of the analysis showed that in the control group, given the prone position on the bed for 21 minutes, there were changes in systolic and diastolic blood pressure. In the prone position, there were no changes in pulse and respiration.

## Results of Vital Signs Measurement in the Treatment Group Before and After Effleurage Back Massage and Slow Deep Breathing, September 2023

Table 3 Measurement of vital signs in the treatment group at the first to sixth visits

Variabel	N	Mean	SD	<i>P value</i>
<b>Tekanan Darah Sistolik :</b>	51			
- Pre Test		160,90	16,913	0,000
- Post Test		144,53	14,002	
<b>Tekanan Darah Diastolik :</b>	51			
- Pre Test		100,06	10,563	0,000
- Post Test		89,67	10,563	
<b>Nadi :</b>	51			
- Pre Test		87,61	7,990	0,004
- Post Test		84,08	5,854	
<b>Respirasi :</b>	51			
- Pre Test		20,27	2,040	0,000
- Post Test		19,55	51,815	

The analysis showed that in the treatment group, after effleurage, back massage was carried out for 21 minutes and continued with slow, deep breathing for 10 minutes; there were changes in systolic blood pressure, diastolic blood pressure, pulse and respiration.

#### 4. Results of the independent sample t test for vital signs between the control group and the intervention group

Variabel	N	Mean	SD	<i>P value</i>
<b>Tekanan Darah Sistolik :</b>	51			
- Kontrol		5,98	14,072	0,000
- Intervensi		16,37	12,277	
<b>Tekanan Darah Diastolik :</b>	51			
- Kontrol		3,84	9,210	0,001
- Intervensi		10,39	9,802	
<b>Nadi :</b>	51			
- Kontrol		-0,6	13,306	0,016
- Intervensi		3,53	8,240	
<b>Respirasi :</b>	51			
- Kontrol		0,06	1,348	0,011
- Intervensi		0,73	1,234	

## Discussion

The results of this study are in line with research, which shows that 70.8% of hypertensive patients are female (5). Other research supports which states that 66.7% of hypertension patients are female. This gender difference is related to blood vessel tone and the possible protective effect of female hormones, namely estrogen and progesterone (6). In menopausal conditions, there is a decrease in the hormones estrogen and progesterone so that the protective function of blood vessel tone decreases, causing an increase in vascular resistance, which has an impact on increasing blood pressure and the risk of cardiovascular disease. The research results showing the use of one type of anti-hypertension drug are also supported by research results (7). All hypertensive patients used a single antihypertensive drug. Hypertension treatment is given to achieve target blood pressure. A single combination pill can be given to increase patient compliance with taking medication (2).

The results of the analysis showed that in the control group, given the prone position on the bed for 21 minutes, there were changes in systolic blood pressure and diastolic blood pressure. In the prone position there are no changes in pulse, respiration and oxygen saturation.

The results of this study, which show that blood pressure changes with the prone position on the bed, align with the research results (8). Systolic blood pressure decreases with the prone position for approximately 15 minutes. Systolic blood pressure decreases with the prone position for approximately 15 minutes. The prone position can cause increased nerve activity in the front part of the brain, the amygdala, and the posterior part, especially the precuneus tissue. This response can cause an increase in parasympathetic tone in the brain and, as a result, relaxation and a decrease in blood pressure.

The analysis results showed that in the treatment group, changes in both systolic and diastolic blood pressure, pulse, and respiration occurred in the sixth week of evaluation.

This study's results align with research showing that blood pressure decreases in hypertensive older adults after having Swedish massage (9). Other research shows that primary hypertension patients experience decreased systolic blood pressure, diastolic blood pressure, pulse, and respiration after a Swedish back massage (10). A decrease in blood pressure, pulse, and respiration after effleurage back massage can occur because manual massage/massage therapy can release oxytocin, associated with stress-reducing effects such as decreasing blood pressure and pulse. Oxytocin is produced by the paraventricular nucleus (PVN) and supraoptical nucleus (SON). During massage, oxytocinergic fibres from the PVN cause the release of endogenous oxytocin into other brain areas, including the nucleus of the solitary tract (NTS) and locus coeruleus (LC), which play a central role in blood pressure regulation and reactions to stress (11). Massage puts pressure on the tissue so that tissue increases. An increase in tissue will increase the pressure gradient between tissue and blood vessels. This condition will increase fluid movement between tissues and blood vessels, thus having an impact on blood pressure. Hand raising also facilitates comfort and relaxation, reducing stress and lowering blood pressure. Massage also reduces the hormone cortisol and facilitates the release of endorphins, which impact blood vessel dilation and cause a decrease in blood pressure.

The massage process should be done up to 5 times, followed by a rest phase. The results showed that after Swedish massage was performed twice a week for 4 weeks, there was a decrease in systolic blood pressure of 6.44 mmHg, diastolic blood pressure of 4.77 mmHg, and respiration of 0.94 breaths per minute (10). Another similar study showed that after massage for one hour per week for 4 weeks, there was a reduction in systolic blood pressure of 12 mmHg and diastolic blood pressure of 5 mmHg. Effleurage back massage, which is part of Swedish massage, is an action that manipulates soft tissue and muscles, which will increase circulation, increase parasympathetic stimulation, and increase the release of hormones. These endorphins cause a decrease in heart rate, blood pressure, and respiration (12).

Slow deep breathing is a relaxation technique that involves slowly adjusting the frequency and depth of breathing until it relaxes the body. Based on previous research, slow, deep breathing exercises five times a day with a rhythm of six cycles per minute for one month can lower blood pressure. Providing effleurage back massages and slow deep breathing interventions can strengthen the effectiveness of relaxation in hypertension sufferers.

The analysis showed differences in vital signs between the group that received effleurage back massages and slow, deep breathing and those that did not. Effleurage back massage and slow deep breathing can lower blood pressure, pulse, and respiration.

This study's results align with research showing that effleurage back massage performed for 21 minutes can reduce systolic blood pressure, diastolic blood pressure and respiration (13).

## Conclusion and Recommendations

Effleurage back massage and slow deep breathing can reduce systolic blood pressure by 16.37 mmHg, diastolic blood pressure by 10.39 mmHg, pulse by 3.53 times/minute, and respiration by 0.73 times per minute. They are effective if done regularly and require a massage break after the sixth appointment. Effleurage back massage and slow deep breathing can be nursing interventions to control blood pressure and prevent complications.

Primary hypertension patients should receive effleurage back massages for 21 minutes every three days as an accompaniment to pharmacological management to reduce blood pressure and respiratory rate and increase oxygen saturation.

Primary hypertension patients maintain a healthy lifestyle, have regular check-ups at health services, and take regular medication according to instructions from health workers to control blood pressure and prevent complications.



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