A Study to Assess the Effectiveness of Progressive Muscle Relaxation Technique among the Patient with Anxiety Disorders in the Selected Mental Health Centers

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Author’s contribution

The sole author designed, analyzed, interpreted and prepared the manuscript.

ABSTRACT

Nowadays, major impact of researchers’ to evaluate the intensity of anxiety between Anxiety Disorder with the Patient, and their efficacy of enlightened muscle relaxation and disorder of anxiety to the patients, intensity of anxiety amongst mental health center describe the anxiety disorder patients with correlated with the social cum geographical values. Hypothesis, nominated socio demographic variables around the difference between posttest level and pretest anxiety of disorder patients. Nearby is an important association among intensity of unease. In tangible background: Inaccurate Roy’s variation classical was cast-off for this study. Methodology: A Pre-experimental and progressive muscle and decreases therapy by used as a posttest. 40 anxiety ailment patients were confident by successive sampling process. Hypothesis formulated between. Pre and posttest was shown progressive muscle relaxation on forty minutes training to the anxiety patients on 5 consecutive days. In our results suggested anxiety patients output of reduced levels of anxiety disorder on the 6th day of posttest. To evaluate the Reformist muscle slackening is non-invasive, cost effective, non – pharmacological complementary therapy to between disorder patients with anxiety and diminish anxiety. Also posttest levels varied with age, academic qualification, anxiety, social value and alcoholic addiction and its duration.

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1. INTRODUCTION

The time for relaxation and training is more methods, like as procedure, activity, process that all are helps a person to relax; finally it attain a status as a significantly calmness, otherwise significantly to reduces a levels of stress, anger, pain and anxiety [1]. Furthermore, wider stress supervision program and it would be a decrease muscular dissertation, and healthy heart and breath rates by the action of low levels of blood pressure, from stress relief on muscular contraction [2]. Others techniques are used as relaxation of muscular contraction. Some trained professional help to involve movements to another person by the different methods. The progressive muscle relaxation training movements based on relaxation exercise like as Yoga, walking, gardening, Qigong and tai chi and more [3-4].

Reducing of anxiety by alternatively tensing relaxing by the therapy of progressive muscle relaxation. Edmund Jacobson, in the early 1920’s proposed that by doing whole body relaxation, one can reduces the anxiety by involvement of muscular tension to normal mental components. Purpose selected samples were used sampling techniques [5]. Awareness of anxious feelings for physiological significances of the anxiety on interrupting individual’s attention, and progressive muscle lessening was initially established as a way of dropping anxiety The heart dynamic was reduces the muscular contraction by progressive and posttest used as a relaxation for muscular therapy. The tension usually reduces the anxiety and increases the well-being feeling on individual performance [6]. The reasons related to physical state act as a tensing and peace on muscular regions like over the chest, forearms, diaphragm, face and legs. Muscular group is persistently through for ten seconds on the muscular regions [7]. From this paper it will help the psychiatric nurses to identify, community health nurses, and countless coping strategies approved by Anxiety Illness Patient strategies and promoted to perceive the myriad stress condition and challenging. Practice of progressive muscles relaxation practice will decrease anxiety by this between post and pretesting [8].

2. METHODOLOGY

2.1 Research Tactic

Quantitative study.

2.2 Research Plan

Based on the designing, two types such as pre and Post-test design.

| Pre test | Interference | Post test |
|----------|--------------|-----------|
| O1       | X            | O2        |

O1: Anxiety – pretest level in patients with anxiety disorder
X: Interference of progressive-muscle-relaxation technique, 40mts/d during morning section and dusk, on 5 successive days.

O2: Anxiety – post-test level in patients with anxiety disorder
Autonomous factors, Progressive-muscle-moderation technique
Dependent-variable: Assessing the anxiety level

2.3 Design of the Study

In Chennai, the mental health center we are collecting data from main psychiatric institution plateful the people. Other wards 744-816 patients were prepared for 150 beds and 50 beds for final census of 5800 patients.

2.3.1 Test Sample

Anxiety Disorder Patient its justify inclusion criteria [9-10]

2.3.2 Sample size

40 numbers.

2.3.3 Technique for sampling

Consecutive Technique

2.3.4 Inclusion criteria

The patients with mild and moderate anxiety, knowing Tamil for reading and writing

2.3.5 Exclusion criteria

The patients with musculoskeletal disorder, who had severe anxiety behavior, unavailable for the collection.

2.4 Data Collection

The data collected at the selected mental health center, Chennai and done from 01.08.2016 to
14.09.2016 (6 week). One group of people instructed to do exercise for shoulder, hand, upper back, face, neck, abdomen, calf muscles, arm muscles, low back, knees, and muscles of feet, and asked to relax for 20 seconds. Each group of muscle repeated for 4 times. Sittings were conducted daily morning and dusk with 40 minute session [11-13]. Ethical clearances was obtained in ethical committee.

3. RESULTS

Presently, the lower age group people highly suffered from the anxiety disorders, nearly, 24(57.5%) belonged to 25-40 years of age and 17(42.5%) between 46-50 years (Table 1). From above data suggested the practicing falling techniques, common of subjects 44(85%) were not expert relaxation practice once and the least 6(15%) were expert earlier.

3.1 Association between The Pre-Test and Post-Test Levels of Anxiety Score among the Participants

The results showed that the pre-test mean mark was 19.27 with 4.57 (average eccentricity). The post-test means core was 10.83 and the standard deviation was 4.66. The mean difference was 7.83.

### Table 1. Socio-Geographical Parameters among the participants (n=40)

| Socio-geographical values | f     | Percentage (%) |
|---------------------------|-------|----------------|
| Age of patients (years)   |       |                |
| 21-45                     | 24    | 57.5           |
| 48-55                     | 17    | 44.5           |
| Patients Religion         |       |                |
| Hindu                     | 42    | 80.0           |
| Christian                 | 8     | 20.0           |
| Educational status        |       |                |
| No formal Education       | 1     | 2.5            |
| Primary Education         | 11    | 27.5           |
| High School               | 20    | 50.0           |
| Higher Secondary          | 8     | 25.0           |
| Patients Occupation       |       |                |
| Coolie                    | 20    | 50.0           |
| Self-employment           | 14    | 44.5           |
| Housewife                 | 7     | 19.5           |
| Family monthly income     |       |                |
| Less than Rs. 2000        | 29    | 72.5           |
| Rs. 4001-Rs. 5,000        | 11    | 25.5           |
| Type of Family            |       |                |
| Joint family              | 24    | 57.5           |
| Nuclear family            | 17    | 42.5           |
| Status of Residential     |       |                |
| Rural                     | 40    | 75.0           |
| Urban                     | 10    | 45.0           |
| Details of children       |       |                |
| Two children              | 24    | 60.0           |
| More than two children    | 17    | 42.0           |
| Duration of anxiety disorder |     |                |
| 1 to 5 years              | 17    | 46.0           |
| More than 5 years         | 24    | 55.0           |
| Any physical illness      |       |                |
| Yes                       | 7     | 18.5           |
| No                        | 45    | 82.5           |
| Previous experience in relaxation techniques | | |
| Yes                       | 6     | 15.0           |
| No                        | 44    | 85.0           |

### Table 2. Proportion of anxiety behavior (%) in participants (n=40)

| Anxiety behavior | Pre-test | Anxiety Score | Post-test |
|------------------|----------|---------------|-----------|
| Slight           | 12       | 40.0%         | 44        | 82.5%     |
| Moderate         | 28       | 75.0%         | 7         | 18%        |
| Severe           | 0        | 0.0%          | 0         | 0.0%       |
| Verysevere       | 0        | 0.0%          | 0         | 0.0%       |
| Total            | 40       | 100.0%        | 40        | 100.0%     |

In Mild anxiety 44%, moderate anxiety 20% and posttest 12% and 7% of none of them showed severe behavior.
Fig. 1. Relationship between alcohol conception and anxiety disorders
55% of alcoholic husbands show anxiety disorder (>5 years) and 18(45%) showed anxiety disorder less than five years.

Table 3. Statistical parameters on pre test and post test level of anxiety among the participants (n=40)

|                      | Mean   | Standard Deviation | Mean Difference | "t"-Value | P-value |
|----------------------|--------|--------------------|-----------------|-----------|---------|
| Pre-test             | 19.27  | 4.58               | 7.54            | T         | p=0.001*** |
| Post-test            | 11.78  | 4.86               |                 | =8.45TV=4.558 |

*significant at P<0.05**, highly significant. The above table indicates pre-test and post-test was 18.27 and 11.78. The standard deviation was 4.58 and 4.86 respectively. Hence, by using the statistical parameters, the results showed that progressive muscle diminishing procedure would be an effective technique in reducing the anxiety patients.

Table 4. Assessment of pre test and post test on nervousness disorder patients (n=40)

| Anxietyscore | Mean±SD     | Mean difference | Student’s paired(t-test) |
|--------------|-------------|-----------------|-------------------------|
| Pre-test     | 19.34±4.76  | 7.54            | t=8.45, p=0.001***      |
| Post-test    | 10.74±4.66  |                 |                         |

*significant at P<0.05**, highly significant at P<0.01*** very high significant at P<0.001. The results showed that the evaluation of significant variation between the mean concern score between pretest and posttest. Significantly reducing the anxiety score.

4. DISCUSSION

From our data suggested anxiety disorder 24 (61.57) the group of age mid 30-45 years. Regarding of religion, important subjects 42 (82%) were belongs to Hindu religion, and moreover educational status 22 (53%) have studied unto high school education. While declaring occupation, popular of the subject to 31 (63%) were working as coolie. Finally we are exploration of monthly income of family and majority of the subject as 31 (74.32%) existed grossing less than Rs. 4500. It is stimulating family and 25 (54.5%) were belonging to the nuclear family. The majority of participants from the rural area 42 (78%) and most of them had two children (27, 62%).

Whereas associated the physical illness, majority of the subjects 82.5% remained not devouring physical illness. Regarding the last experiences of passionate progressive muscle slackening techniques, majority of subjects 44 whereas practiced progressive muscle relaxation. Health
center from Chennai. Plateful institution of the people the center was ready with bed asset for 150 beds. In our data suggested patients are affected 40 in the pretest, popular 70% were moderate anxiety (28), 40% were in mild anxiety (18), mild anxiety were 44 with receiving progressive muscle relaxation and moderate and mild anxiety 19.5% as a severe anxiety score. Our results were concordance with the previous results [14-15].

**PRIOR RELAXATION EXPERIENCE**

![Graph showing prior relaxation experience]

**Fig. 2. Anxiety disorder patient Vs relaxation**

Main stream on relaxation was found 44 (85%) were earlier and 6 (15%) were practiced

![Box-plot representation of the unpleasant pretest and posttest score among the participants]

**Fig. 3. Box-plot representation of the unpleasant pretest and posttest score among the participants**
5. CONCLUSION

The present study showed that the muscle relaxation technique actively reduce the anxiety disorder among the participants. The situation is cost current flattering non-invasive therapy to decrease anxiety.

CONSENT

As per international standard or university standard, patients’ written consent has been collected and preserved by the author(s).

ETHICAL APPROVAL

The study was approved by the Institutional Ethics Committee.

COMPETING INTERESTS

Author has declared that no competing interests exist.

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