



DIFFERENCES IN THE EFFECTS OF PSYCHORELIGENT THERAPY AND CLASSICAL MUSIC THERAPY ON REDUCING ANXIETY LEVELS IN ORTHOPEDIC PRE-OPERATION PATIENTS

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Abstract

Preoperative anxiety, if left untreated has physical and emotional effects, poor surgical outcomes, and prolonged preoperative care. The research design used was quasi-experimental with a pre-test-post-test approach in two groups (two group pre-test) and post test design) with a sample of 70 respondents divided into two intervention groups. The data collection method uses the APAIS questionnaire. The research results showed that the average level of anxiety before psychoreligious therapy was 14.09 and after therapy 11.29. The average anxiety level before classical music therapy was 14.40 and after therapy 12.37. Results of the Paired Sample T-Test analysis of the differences in average levels of anxiety before and after intervention in the dhikr therapy group p-value 0.000, in the classical music therapy group p-value 0.000, and test of differences in anxiety levels after intervention between psychoreligious therapy (dhikr) groups and the classical music therapy group p-value 0.27 (> 0.05) which means there is no significant difference in anxiety levels between the two therapies. Psychoreligious therapy and classical music therapy are very effective in reducing anxiety levels in pre-orthopedic surgery patients at Kanjuruhan Hospital, Malang Regency, so it is hoped that they can be applied to patients who experience anxiety before orthopedic surgery.

Keywords : Anxiety, Psychoreligious Therapy, and Classical Music Therapy

INTRODUCTION

Surgery or operations can cause physiological and psychological reactions in patients, one of which is psychological is anxiety, which is a common response to conditions that are perceived as a threat to one's role in life, integrity body or even life itself (Sutarna & Arti, 2020)). According to the data obtained from *the World Health Organization (WHO)*, the number of patients undergoing operation in 2018 showed that 50% of preoperative patients worldwide experience anxiety. It was reported that anxiety in preoperative patients in Southeast Asia was 23%. Reasons that often cause anxiety in patients include anxiety about postoperative pain, fear of damage to body image such as disability, anxiety about failure of anesthesia, anxiety about not knowing the procedure, waking up in the middle of surgery, and even death (Manggapi et al., 2023) . Music therapy is the use of music for relaxation, accelerating healing, improving mental function. Music therapy can suppress the sympathetic nervous system which is involved in reducing the body's stress response. Based on research (Basri, 2019) at the Central Surgical Installation of H. Adam Malik General Hospital, Medan, the results showed a significant effect between the provision of classical music therapy on

anxiety. Psychoreligious therapy is a form of psychotherapy that combines a modern mental health approach with a religious or religious perspective that aims to improve coping mechanisms or overcome problems. According to research (Mastuty et al., 2022) in the IBS Room (Central Surgical Installation) of Praya Hospital, the results showed a significant difference between the level of anxiety before being given dhikr and after being given dhikr. This study has differences with previous studies where the previous study did not explain the specific type of music used in music therapy. While in this study, researchers will use classical music in providing music therapy to reduce anxiety. In addition, another difference in this study is that researchers will analyze the effectiveness of classical music therapy and psychoreligious therapy in reducing anxiety in pre-orthopedic surgery patients. The purpose of this study to find out the Differences between Psychoreligious Therapy and Classical Music Therapy in Reducing Anxiety Levels in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang

RESEARCH METHODS

This research is a type of quantitative research, the design used is *quasi-experimental* with a *pre-test-post-test approach* in two groups (*two group pre-test and post-test design*). The sample of this study was pre-operative orthopedic patients at Kanjuruhan Hospital, Malang Regency, as many as 70 respondents who were divided into 2 groups. The sampling technique used was *purposive sampling / judgment sampling* . The anxiety measurement instrument used the APAIS scale. Bivariate analysis was used to analyze the differences in pre- and post-anxiety levels in the dhikr psycho-religious therapy group, pre- and post-anxiety levels in the classical music therapy group, and to analyze the differences in anxiety levels between psycho-religious therapy and classical music therapy using *the Paired Sample T-Test* .

RESEARCH RESULTS AND DISCUSSION

General Data of Research Respondents

1. Respondent Characteristics

Table 4.1 Characteristics of Respondents Based on Gender, Age and Education Level in Pre-Orthopedic Surgery Patients at Kanjuruhan Malang Regional Hospital in 2024

Category		General Data	
		f	%
1. Gender	Man	31	44.3
	Woman	39	55.7
	Amount	70	100.0
2. Age	21-35	37	52.9
	36-45	28	40.0
	46-65	5	7.1

	Amount	70	100.0
3. Level of education	SD	14	20.0
	JUNIOR HIGH SCHOOL	11	15.7
	SENIOR HIGH SCHOOL	30	42.9
	S1	15	21.4
	Amount	70	100.0

Based on table 4.1, the characteristics of respondents show that the majority of respondents were female, as many as 39 respondents with a percentage of 55.7%, the majority of ages were in the 21-35 age range (52.9%), and the highest level of education was high school and undergraduate (44.3%).

Research Respondent Specific Data

1. Identification of Anxiety Levels in Pre-Orthopedic Surgery Patients Before Intervention in Psychoreligious Therapy and Classical Music Therapy Groups at Kanjuruhan Regional Hospital, Malang Regency

Table 4.2 Anxiety Level of Orthopedic Preoperative Patients Before Intervention in the Psychoreligious Therapy and Music Therapy Groups at Kanjuruhan Regional Hospital, Malang Regency in 2024

Anxiety Level	Therapy Psychoreligious		Therapy Classical music	
	n	%	n	%
No Worries	0	0	0	0
Light	8	22.9	10	28.6
Currently	27	77.1	25	71.4
Heavy	0	0	0	0
Panic	0	0	0	0
Total	35	100.0	35	100.0

Based on table 4.2, the results show that before the intervention was given to both groups, most respondents experienced moderate anxiety with a percentage of 77.1% in the psychoreligious therapy group and 71.4% in the classical music therapy group, while the rest experienced mild anxiety.

2. Identification of Anxiety Levels in Pre-Orthopedic Surgery Patients After Intervention in Psychoreligious Therapy and Classical Music Therapy Groups at Kanjuruhan Regional Hospital, Malang Regency

Table 4.3 Anxiety Level of Orthopedic Preoperative Patients After Intervention in Psychoreligious Therapy and Classical Music Therapy Groups at Kanjuruhan Regional Hospital, Malang Regency in 2024

Anxiety Level	Therapy Psychoreligious		Therapy Classical music	
	n	%	n	%
No Worries	0	0	0	0
Light	26	74.3	17	48.7
Currently	9	25.7	18	51.5
Heavy	0	0	0	0
Panic	0	0	0	0
Total	35	100.0	35	100.0

Based on table 4.3, the results show that after being given intervention in the psychoreligious therapy group, the majority experienced mild anxiety with a percentage of 74.3% and more than half of the classical music therapy group experienced moderate anxiety with a percentage of 51.55%.

3. Analysis of Differences in Average Levels of Anxiety Before And After Being Given Intervention in the Psychoreligious Therapy Group

Table 4.4 Differences in Average Anxiety Levels Before and After Intervention in the Psychoreligious Therapy Group in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang Regency in 2024

Intervention	N	Mean		Mean decline	Sig(2-tailed)
		Before	After		
Psychoreligious therapy	35	14.09	11.29	2.80	0.00

Based on table 4.4, it can be explained that the average level of anxiety before the intervention was 14.09 (moderate) and after the intervention decreased to 11.29 (mild). The results of the *Paired Sample T-Test* obtained a *Sig (2-tailed) value* of 0.00 ($\alpha \leq 0.05$). These results mean that H0 is rejected and H1 is accepted, so there is a significant difference between the level of anxiety before and after the intervention in the dhikr psychoreligious therapy group.

4. Analysis of the Difference in Average Anxiety Levels Before and After Intervention in the Classical Music Therapy Group

Table 4.5 Differences in Average Anxiety Levels Before and After Intervention in the Classical Music Therapy Group in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang Regency in 2024

Intervention	N	Mean		Mean decline	Sig(2-tailed)
		Before	After		

Classical music therapy	35	14.40	12.37	2.03	0.00
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Based on table 4.5, it can be explained that the average level of anxiety before the intervention was 14.09 (moderate) and after the intervention decreased to 12.37 (mild). The results of the *Paired Sample T-Test* obtained a *Sig (2-tailed) value* of 0.00 ($\alpha \leq 0.05$). The results mean that H_0 is rejected and H_1 is accepted, so there is a significant difference between the level of anxiety before and after the intervention in the classical music therapy group.

5. Analysis of Differences in Anxiety Levels After Being Given Psychoreligious Therapy and Classical Music Therapy in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang Regency

Table 4.6 Differences in Anxiety Levels After Being Given Psychoreligious Therapy and Classical Music Therapy in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang Regency in 2024

Intervention	N	Mean	Std. Deviation	SE Mean	Sig.(2-tailed)
Classical music therapy	35	12.37	2.289	.387	0.27
Psychoreligious therapy	35	11.29	1.690	.286	

Based on table 4.6 above, the average post-test results of the anxiety level of the classical music therapy group were 12.37 and the psychoreligious therapy group was 11.29. However, from the results of the statistical test, *the Sig (2-tailed) value was obtained* at 0.27 (> 0.05), which means that H_0 is accepted and H_1 is rejected, so it can be concluded that there is no difference in anxiety levels after the intervention between the psychoreligious therapy group and the classical music therapy group.

Discussion

1. Identification of Anxiety Levels in Pre-Orthopedic Surgery Patients Before Intervention in Psychoreligious Therapy and Music Therapy Groups at Kanjuruhan Regional Hospital, Malang Regency

The results of the study in table 4.2 show that most respondents before being given psychoreligious therapy intervention experienced moderate anxiety as many as 27 people (77.1%) and the classical music therapy group experienced moderate anxiety as many as 25 people (71.4%). According to researchers, the level of patient anxiety before being given intervention is influenced by several factors, namely gender, age and level of education. Various reasons that cause patient anxiety before facing surgery. When the study was conducted, it was found that patients said they were afraid of pain after surgery, afraid of physical

changes, becoming ugly and not functioning normally, afraid of experiencing the same condition as other people who have the same disease, afraid of facing the operating room, surgical equipment and officers, afraid of dying while under anesthesia or losing consciousness, and afraid of surgery failure. Therefore, mental preparation is important in the process of preparing for surgery, because a patient's mental state that is not ready or unstable can affect their physical condition. This can be seen from the anxiety that patients may experience which can be detected by physical changes such as increased blood pressure, pulse and respiratory rates, uncontrolled movements, moist palms, restlessness, asking the same questions repeatedly, difficulty sleeping and frequent urination. (Harahap et al., 2021) .

2. Identification of Anxiety Levels in Pre-Orthopedic Surgery Patients After Intervention in Psychoreligious Therapy and Classical Music Therapy Groups at Kanjuruhan Regional Hospital, Malang Regency

The results of the study in table 4.3 show that most respondents after being given psychoreligious therapy intervention experienced mild anxiety as many as 26 people (74.3%) and the classical music therapy group experienced mild anxiety as many as 18 people (51.5%). This is in line with research (Ida, Fernalia, 2020) on the Effect of Classical Music Therapy on Anxiety in Preoperative Patients at Dr. M. Yunus Bengkulu Hospital, obtained from 32 people after being given classical music therapy, there were 7 people (21.9%) with severe anxiety, 16 people (50.0%) with moderate anxiety and 9 people (28.1%) with mild anxiety. Likewise, research by Sutarna & Arti, (2020) on the Effect of Dhikr Therapy on Reducing Anxiety Levels in Pre-Major Surgery Patients at Ciremai Hospital, Cirebon in 2015, found that after the intervention of 32 respondents, most felt no anxiety as many as 20 respondents (62.5%), mild anxiety as many as 11 respondents (34.4%) and for moderate anxiety as many as 1 respondent 3.1%. This means that there was a decrease in anxiety levels after dhikr therapy was carried out for ±10 minutes one hour before surgery.

Preoperative anxiety is caused because they do not know the consequences of surgery and are afraid of the surgical procedure itself. Anxious patients often experience fear or feelings of unease such as fear of the unknown, such as facing surgery, anesthesia, finances, family responsibilities, pain, fear of self-concept and even death. Anxiety can cause physical and psychological changes (Basri, 2019).

According to researchers, the level of anxiety of respondents after being given intervention in both groups decreased because dhikr therapy and classical music therapy could make respondents more relaxed.

3. Analysis of the Influence of Psychoreligious Therapy on Reducing Anxiety Levels in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang

The results of the study in table 4. The results of the *Paired Sample T-Test* obtained a *Sig value (2-tailed)* = 0.000 which is smaller than the predetermined significance level, namely $\alpha = 0.05$. This proves that there is a significant difference between the level of anxiety before being given dhikr and after being given dhikr. Similar results were found in a study (Mastuty et al., 2022) on the Effect of Dhikr on the Anxiety Level of Pre-Operative Patients in the IBS Room (Central Surgical Installation) of Praya Hospital in 2022 with a sample of 46 respondents showed that the results of the statistical test obtained a value of $p = 0.000 (<0.05)$ smaller than the alpha (α) which had been determined, namely $\alpha = 0.05$, this proves that there is a significant difference between the level of anxiety before being given dhikr and after being given dhikr.

Physiologically, dhikr therapy or remembering Allah causes the brain to work, when the brain gets stimulation from outside, the brain will produce chemicals that will provide a sense of comfort, namely endorphins. After the brain produces this, this substance will stick and be absorbed in the body which will then provide feedback in the form of calm that will make the body relax. If the body is physically relaxed, the psychological condition also feels calm so that it is able to reduce anxiety (Mastuty et al., 2022).

4. Analysis of the Effect of Classical Music Therapy on Reducing Anxiety Levels in Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang

The results of the study in table 4.4 show that there was a decrease in the level of anxiety in respondents with a p value = 0.000 (<0.05) smaller than the predetermined alpha (α), which is $\alpha = 0.05$. The results of this study are in line with the study (Basri, 2019) on the Effect of Classical Music Therapy on Preoperative Patient Anxiety at the Central Surgical Installation of H. Adam Malik General Hospital, Medan in 2018 with a sample of 32 people showed a p value = 0.00 (<0.05) which means that there is a significant effect of classical music therapy on the T test, namely before music therapy was given, the T test results (t count) 382.5 became (t count) 301.3 with a p value of 0.00 (this value is smaller than 0.05), where there is a difference in t count ($382.5 - 301.3 = 81.2$).

This shows that there is a relationship between giving music therapy to reduce anxiety in preoperative patients. This study is in line with the research that has been conducted (Ida, Fernalia, 2020) on the Effect of Classical Music Therapy on Anxiety in Preoperative Patients at Dr. M. Yunus Hospital, Bengkulu in 2020 with a sample of 32 people, the results of the *Wilcoxon Sign Rank test* obtained a Z value = -4.634 with $p = 0.000 (<0.05)$ meaning significant, so H_0 is rejected and H_a is accepted. The conclusion is that there is an effect of music therapy on anxiety in preoperative patients in the Flamboyan Room, Dr. M. Yunus Hospital, Bengkulu.

5. Analysis of the Differences in the Effects of Psychoreligious Therapy and Classical Music Therapy on Reducing the Anxiety Levels of Pre-Orthopedic Surgery Patients at Kanjuruhan Regional Hospital, Malang

From table 4.5 the results of the *non-parametric paired sample T-test* in the psychoreligious therapy and classical music therapy groups obtained a *Sig value (2-tailed)* of $0.27 > 0.05$, it can be concluded that H1 is rejected and H0 is accepted, meaning that there is no significant difference in anxiety levels after intervention in the classical music therapy group and the psychoreligious therapy group. The results of this study are in line with the study (Sukron, 2018) on the Difference in Effectiveness of Classical Music Therapy and Murottal Therapy on Anxiety Levels of Pre-Major Surgery Patients in the Operating Room of the Muhammadiyah Hospital Palembang in 2018 which stated that there was no significant difference in anxiety levels of patients who listened to classical music and listened to murottal (*p-value* 0.107) with a total of 32 respondents.

The influence of classical music can affect perception with distraction where the diversion of anxiety levels and music can also divert the respondent's concentration to pleasant things, relax causing breathing to relax and lower heart rate, creating a sense of comfort (Suwanto, et.al 2016) . According to (Rahmayati & Handayani, 2017) states that when classical music is played, the harmony in beautiful classical music will enter the ear in the form of sound (audio), vibrate the eardrum, shake the fluid in the inner ear and vibrate the hair cells in the cochlea to then through the cochlear nerve to the brain and create an imagination of beauty in the right brain and left brain.

Dhikr therapy according to (Mastuty et al., 2022) through dhikr can relax reflective nerves, function body organs, and provide a positive aura to the human body. Where the chanting of dhikr can reduce stress hormones, activate natural endorphin hormones, increase feelings of relaxation, and divert attention from fear, anxiety and tension, improve the body's chemical system so as to lower blood pressure and slow down breathing, heart rate, pulse and brain wave activity. (Mastuty et al., 2022)

According to researchers, both therapies above are useful for reducing anxiety levels which are problems in preoperative patients, both elective and emergency, and are most commonly experienced by various age groups. In terms of differences in the effects of reducing anxiety levels, both classical music therapy and dhikr therapy with interventions before and after therapy, both have an effect. However, there is a drawback to psychoreligious therapy, namely that it cannot be applied to all patients due to differences in beliefs, while classical music therapy can be applied to all patients .

CONCLUSION

Paired Sample T-Test analysis showed that there was a significant difference in the level of anxiety before and after the intervention in the psychoreligious therapy group and in the classical music therapy group. Meanwhile, the results of the test of the average difference in anxiety levels after the intervention between the psycho-religious therapy group (dhikr) and the classical music therapy group showed that there was no significant difference in the level of anxiety between the two therapies. Both of these therapies can be applied in

hospitals as an alternative that can be used to reduce the level of anxiety in pre-orthopedic surgery patients.

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