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CASE SERIES INTENSIVE CARE

Building holistic health using Quran-based spiritual therapy application media for chronic disease patients in intensive care units

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ABSTRACT

Background & objective: In the implementation of "Aplikasi Terapi Al-Quran (ATAQ)" (in English: Al-Quran Therapy Application) in the ICU, Kendari City Hospital, Indonesia, it is realized that each patient with chronic disease is a unique person, who certainly has a different response to their disease and to ATAQ. This study aimed to explore the meaning felt by patients with chronic disease after implementing ATAQ.

Methodology: This case series is part of a research project on ATAQ testing, involving 3 patients in the ICU. After all patients received an explanation and gave their consent, spiritual therapy using ATAQ was carried out every morning and evening and continued for 3 months. During the therapy process, in-depth interviews were conducted about the important meaning felt by each patient about the changes that occurred in him/her after undergoing spiritual therapy using ATAQ. In addition, observations were also made on the patient's condition. The data obtained were analyzed thematically, then presented narratively.

Results: The results of the study on the three patients were as follows. The first patient looked fresher. He promised to be disciplined in performing prayers, which were previously not routinely done, could sleep soundly every night, the feeling of tightness decreased, but the stomach pain was still felt. In the last days, he stated that he was much calmer and his mind was more open. The second patient also looked fitter with a radiant red face. He felt that his sleep quality had improved, his anxiety had decreased, he could accept his illness, the pain had decreased slightly, and his appetite had improved. On the last day, he expressed his gratitude. The third patient was initially not interested in ATAQ. After discussing, the patient finally agreed to undergo therapy using ATAQ. He felt calmer and always cried with emotion every time he underwent therapy, felt more comfortable and peaceful, and regretted having previously refused therapy.

Conclusion: With spiritual therapy using ATAQ, patients with chronic diseases feel healthier holistically; both physically, socially, mentally, and spiritually; so, they can adapt better to their condition.

Abbreviations: 'ATAQ': Aplikasi Terapi Al-Quran; ICU: Intensive care unit

Keywords: Patients; Chronic Diseases; Holistic Health; Quran-Based Spiritual Therapy; Intensive Care Unit

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1. INTRODUCTION

Chronic diseases are still a burden of hospital care, ¹⁻⁵ causing various problems for sufferers, not only in the physical dimension, but also in the social, mental, and spiritual dimensions of the sufferer's life, including in patients treated in intensive care units. ⁶ These four dimensions must be maintained in a balanced condition in order to realize optimal patient resilience to adapt to illness and maintain and improve quality of life optimally. ⁷ In this case, the last dimension, namely spiritual beliefs, can affect quality of life based on aspects of experience, meaning of life, sources of comfort, well-being, security, and a sense of belonging. ⁸

Patients with chronic diseases have more than one chronic condition with severe life conditions, so this can have an impact on the patient's inability to manage their own conditions. The limitations of the medical model have resulted in a new paradigm in chronic disease care, which continues to develop by involving collaborative care systems and health education. This is important for self-management for patients with chronic diseases so that they obtain the best health conditions, along with the implementation of the medical therapy provided. One manifestation of the new paradigm above is spiritual therapy, a highly recommended therapy of choice.

Spiritual therapy is a holistic approach to caring for patients with chronic diseases, and must be adjusted to the individual's beliefs and values. 13 There are several types of spiritual therapy that are widely known today. The first is psycho-religio-spirituality therapy, which combines psychological aspects with religious and spiritual aspects to improve the patient's coping mechanisms for their illness. The second is meditation which includes mindfulness and meditation on the Name of God, which helps calm the mind and reduce stress. The third is religious-based interventions, such as prayer, prayer, dhikr, and murotal Al-Our'an which are often used to provide spiritual and emotional support for patients. The fourth is spiritual counselling, which provides a space for patients to talk about their concerns and hopes, also an important part of holistic care. The fifth is therapy that focuses on individual meaning, such as life review, where patients are encouraged to reflect on their lives, can provide insight and inner peace. Whatever spiritual therapy is chosen, it is important to note that spiritual therapy must be adjusted to the conditions, religion, and beliefs held by the patient, so that it can provide maximum benefits for their quality of life.14

"Aplikasi Terapi Al-Quran (ATAQ)" (in English: Al-Quran Therapy Application) is a spiritual therapy based

on the guidance of Islam, in the form of Al-Quran therapy packaged in an Android-based application so that it is easy to apply anytime and anywhere. ATAQ is based on the verses of the Quran and hadiths; which consist of complete instructions for implementing therapy, dhikr, reading and listening to the Quran, praying for oneself and others, and a series of ablution and prayer when sick.

In the process of introducing ATAQ as a spiritual therapy for patients in the ICU which was carried out in several hospitals in Kendari City, Indonesia; it was realized that each patient with a chronic illness is a unique individual, who certainly has a different response to their illness and to ATAQ. With this consideration, a study is needed that aims to explore the meaning felt by patients with chronic disease after implementing ATAQ.

2. METHODOLOGY

This case series is part of a larger research project on testing spiritual therapy using ATAQ in the ICU of Kendari City Hospital, Southeast Sulawesi Province, Indonesia. As part of this research project, a small team was formed to study the response of patients with chronic diseases treated in the ICU to the spiritual therapy provided, then reported as a case series. This study involved 3 patients selected by purposive sampling; with inclusion criteria, namely: Muslims, at least 20 years old, and having a physical condition that allows them to cooperate in the therapy process. Patient involvement was based on the principles of health research ethics, as evidenced by ethical approval from Poltekkes Kemenkes Kendari, number: LB.02.01/Etik-025/2021.

Patients were given an explanation of the purpose, risks, and benefits of participating in this spiritual therapy program; and then stated their agreement to cooperate. The next stage is the implementation of spiritual therapy using ATAQ which is carried out every morning and evening and continued for 3 months. During the therapy process, in-depth interviews were conducted about the important meanings felt by each patient about the changes that occurred in him/her after undergoing spiritual therapy using ATAQ. In addition, observations were also made on the patient's condition. Furthermore, the researcher processed and analyzed the meanings expressed by the patient, into the main themes about the important meanings obtained from spiritual therapy using ATAQ. The results of this analysis are presented narratively.

3. RESULTS

3.1. First patient (male patient)

In the initial condition, the patient looked pale, had difficulty sleeping, felt tightness in his chest, had a chaotic mind, felt afraid, and felt like he was going to die. If he recovered, he promised to be disciplined in performing prayers, which he had not done regularly before. After reaching the 10th day, not only prayers, but also other worships were performed regularly. He began to be able to sleep soundly every night, the feeling of tightness decreased, but abdominal pain was still felt. Therapy was continued regularly, and that it was not only done in the morning but also in the evening. In the last days of therapy, he stated that he felt much calmer, more open-minded. Observation showed that his face looked fresh and not pale anymore.

3.2. Second patient (female patient)

In the initial condition, the patient looked very pale, had a thin posture, decreased appetite, felt short of breath. lacked sleep, was restless, stressed with his illness, could not sleep well at night, often woke up during sleep, felt worthless, and felt pain in almost his entire body. The patient showed a photo of herself before she was sick, with a good body and beautiful face; in addition, the patient had said that he could not read the Quran. On the 10th day of therapy, the patient felt the positive effects of this therapy, especially improved sleep quality, and reduced chest tightness. The feeling of anxiety also decreased. She felt more able to accept her illness, the pain in her body began to decrease slightly although she still felt soreness in her legs. In addition, her appetite improved, until the last days of therapy using ATAO. Her face turned pinkish (no longer pale) and she looked fit. On the last day, the patient and her family expressed their gratitude, because if the nurse had not come to guide the therapy using ATAQ, she would have felt uneasy.

3.3. Third patient (male patient)

In the initial condition, the patient could not move her body, had difficulty sleeping, felt pain all over his body, felt like he was going to die, experienced stress, felt helpless to recover and resigned to his illness. He was not interested in other therapies because he felt that he had been sick for a long time, there was no improvement in his condition, he had been hospitalized many times, and felt that there were no more effective medicines and therapies. He did not want to bother his wife and children and was tired of being hospitalized.

On the 1st day, the patient and his family refused to be given spiritual therapy using ATAQ. They said that they did not need spiritual therapy. They said that they were already Muslims so they did not need to be given lessons about Islam. On the 2nd day, the head of the research team met the patient and his family and invited them to discuss calmly about the steps of therapy, the application

used, the pictures, the user guide, and the Al-Quran speaker that would be given. Finally, the patient and his family agreed to undergo therapy using ATAQ.

On the 10th day, the patient stated that he felt calmer and always cried with emotion at the end of each therapy session. He felt more comfortable and peaceful, moved because during his illness he had been guided to get closer to Allah by remembering Allah and reading the Al-Quran. He also regretted that he had previously refused to be given therapy. It turned out that, in addition to providing peace of mind, spiritual therapy also provided a lot of useful knowledge, such as how to perform ablution and pray while sick. The amazing thing is that every day the patients always look forward to the presence of the spiritual therapy guide, like the prayers that were taught, and always missed the moments of undergoing therapy with the guide.

4. DISCUSSION

This research on the application of spiritual therapy using ATAQ has truly provided a very valuable experience, both in terms of process and results. As we all know that the application of a new innovative therapy, including ATAQ, of course raises two main questions, namely: is the innovation accepted by patients, can it be applied smoothly, and can it produce the expected effects?¹⁵⁻¹⁷ Because of these considerations, in addition to experimental studies, qualitative studies are also needed to study how patients respond to spiritual therapy using ATAQ; both in terms of acceptance, participation and outcome of this therapy.

In terms of patient acceptance, the results of the study show that it is not easy to convince patients and their families that spiritual therapy will be beneficial for the patient's health, both in physical, mental, social and spiritual dimensions. However, with the solidarity and hard work of the companion team, patients can finally be convinced that ATAQ will greatly help patients to adapt to their condition. In this case, every spiritual therapy companion must have a high fighting spirit and convey information as clearly as possible, so that patients can accept what is offered. This is an unforgettable experience that providing the most complete explanation to the maximum is the best trick so that patients can accept innovative therapy voluntarily.

In terms of the process, the results of the study show that it is not easy to get patients used to undergoing spiritual therapy consistently. Companions must be patient to accompany each patient every day for a long period of time, even for months. Long-term therapy is very risky for dropout.¹⁹ To prevent this, companions are always committed to establishing therapeutic communication with patients and their families, informing the progress

of the process and results of therapy step by step in detail, and providing reinforcement to patients every time they can achieve success. ^{19,20} During this therapy process, finally the companions got an unforgettable experience that the implementation of innovative therapy must be accompanied by consistent communication, information on progress and appreciation for success.

In terms of therapy outcomes, this study shows that the success of spiritual therapy cannot be achieved instantly. The results of therapy will be achieved gradually little by little.²¹ However, it is very encouraging that spiritual therapy using ATAQ provides extraordinary results in the final phase of therapy, in all dimensions of health. From a physical aspect, the patient's body becomes fresher and more cheerful on the face. From a social perspective, patients can adjust to interact warmly with others, including therapy companions. From a mental perspective, stress and anxiety are reduced, and they also become calmer. From a spiritual perspective, patients find it easy to accept their condition and surrender to Allah, even entering into a new habit of continuing to worship Allah in any condition. This provides an unforgettable experience that spiritual therapy using ATAQ successfully heals patients holistically both physically, socially, mentally and spiritually; so that they can adapt better to the chronic illness they are experiencing.

5. CONCLUSION

Based on the results of the study, it can be concluded that with spiritual therapy using ATAQ, patients with chronic diseases feel healthier holistically; both physically, socially, mentally, and spiritually; so, they can adapt better to their condition. The results of this study provide awareness of the importance of spiritual therapy to build holistic health. We need multi-center research with a large sample size to strengthen the awareness.

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7. Conflict of interest

All authors declare no conflict of interest.

8. Authors contribution

LR: Conception; data collection; data management; data analysis; draft writing; manuscript development; submission

IH: Conception; data collection; data management; data analysis; manuscript writing

HSWN: draft writing; manuscript development; review; editing; submission

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