

REDUCING THE ANXIETY OF DIABETIC ULCUUS PATIENTS WITH COUNSELING

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ABSTRACT

Diabetic ulcers have an impact on the patient's psychological condition which affects the quality of diabetes management and the management of diabetic ulcers. Diabetic patients with ulcer complications tend to be unable to accept reality and experience a decrease in self-management abilities, which can trigger psychological disorders, which ultimately harm health. The diabetic ulcer respondent's view of the future will also change, causing a feeling of worry or anxiety. The purpose of this study was to see the effect of counseling on reducing anxiety in diabetic ulcer patients. This research method is Quasi-Experimental with One Group Pretest-Posttest design. The location of the research was the DD Care Wound Care Clinic, Padang City from January to June 2022. The population was all diabetes mellitus patients who experienced diabetic ulcers at DD Care, namely 18 people. A sample of 15 people was taken by purposive sampling technique. Sampling was done by interview and observation sheets. The statistical test used is the Paired T-test. The results showed that the average patient's anxiety before being given counseling intervention was 26.87 in the moderate anxiety category and the average after counseling intervention was 19.93 in the mild anxiety category. There is an effect of counseling on reducing the anxiety of diabetic ulcer patients with a p-value (0.000). This research suggests that counseling can be used as an alternative that can be used to reduce the anxiety of diabetic ulcer patients at DD Care in Padang City.

Keywords: anxiety; counseling; ulcer patients

INTRODUCTION

Diabetes Mellitus (DM) is a progressive chronic disease characterized by the inability of the body to metabolize carbohydrates, fats, and proteins which is characterized by increased blood glucose levels (hyperglycemia). The condition of hyperglycemia is caused by defects in insulin secretion, insulin action, or both (Maria, 2021). Insulin is a hormone that controls carbohydrate metabolism by transporting glucose into cells (Firdaus, 2017).

The occurrence of diabetic ulcers is inseparable from the high blood glucose levels of patients with diabetes mellitus. High blood sugar levels that are sustainable and in the long term can cause neuropathy and abnormalities in blood vessels which then cause foot problems in patients with diabetes mellitus (IDF, 2019).

One of the complications in people with diabetes mellitus is neuropathy, which is reduced sensation in the feet and is often associated with foot injuries. Peripheral neuropathy causes loss of stimulation of the feet and has a high risk of developing foot ulcers (Infodatin, 2019). Ulcers on the feet experienced by diabetics are also called diabetic ulcers, which are disorders of the lower limbs as a whole that begin with a lesion until an ulcer form (Riskesdas, 2018).

The general objective of this study was to determine the effectiveness of counseling to reduce anxiety in diabetic ulcer patients at DD Care, Padang City.

Diabetes mellitus is a metabolic disorder involving insulin that is characterized by high blood glucose levels in the body. This involves the main endocrine hormone insulin. This condition occurs due to abnormalities in insulin secretion, insulin action, or both. Decreased function of the pancreas as an insulin producer or insulin receptor on cells that are not sensitive causes disturbances in lipid, carbohydrate, and protein metabolism which can stimulate hyperglycemia (Firdaus, 2017).

Anxiety is a vague and unclear feeling accompanied by feelings of uncertainty, helplessness, isolation, and insecurity (Dinkes Padang, 2018). Anxiety is a very subjective experience that is difficult to observe directly. Nurses conclude anxiety based on the behavior that appears, and the behavior must be validated by the client. Anxiety is caused by unspecified objects, provoked by something unknown, and accompanies all new experiences in the course of human life (Zulaekha & Arisdiani, 2019).

Counseling is a helpful relationship, namely the existence of interaction between the counselor and the counselee in a condition that helps the counselee to achieve change and learn to make their own decisions and be responsible for the decisions taken. Counseling as a branch of knowledge and the practice of assisting individuals has a specific understanding in line with the concepts developed within the scope of their knowledge and profession. Among the various sciences that have a close relationship with counseling is psychology, even specifically it can be said that counseling is an application of psychology. This can be seen especially in the objectives, the theory used, and the implementation process (Rahmadhani, 2019).

METHOD

This type of research is quantitative research with a Quasi-Experimental research design (one group pretest-posttest). This design aims to see the changes that occur from the results of counseling interventions with the intervention group. This research was conducted in one group by giving a pre-test using the HARS scale questionnaire to measure anxiety levels as an initial observation, after which intervention was given in the form of education and

counseling. Then a post-test was carried out with the same HARS scale questionnaire as the final observation.

The instrument used is the HARS scale (Hamilton Anxiety Rating Scale) developed by Max Hamilton in 1956. The validity of HARS is shown in the Corrected Item-Total Correlation section, all questions have a positive value and are greater than the 0.05 requirement, while Reliability is indicated by a value Cronbach's Alpha was 0.793 with a total of 14 items greater than 0.6, so the questionnaire used proved to be reliable ($0.793 > 0.6$).

RESULTS AND DISCUSSION

In this study, respondents were patients suffering from diabetic ulcers. Patient characteristics consisted of characteristics of age, gender, occupation, duration of suffering, and degree of injury

Table 1. Average Respondents based on Characteristics (Age) at DD Care in Padang City in 2022

Variabel	Mean	SD	Median	Min-Mak	95% CI
Age	63,40	9,679	62,00	44-80	58,04 – 68,76

The results of the analysis in Table 1 show that the average age of diabetic ulcer patients who are treated at DD Care in Padang City is 63.40 (95%: 58.04-68.76), with a standard deviation of 9.679. The youngest is 44 years old and the oldest is 80 years old. From the interval estimation results, it can be concluded that 95% believed that the average age of diabetic ulcer patients was between 58.04 to 68.76 years.

Table 2. Frequency Distribution Based on Characteristics (Gender, Occupation, Length Suffering from Ulcers and Degrees of Wounds) at DD Care, Padang City in 2022

Characteristics	n	%
Gender		
a. Man	10	66,7
b. Woman	5	33,3
Work		
a. Work	4	26,7
b. Doesn't work	11	73,3
Long Suffering Ulcers		
a. <5 th	14	93,3
b. >5 th	1	6,7
Wound Degree		
a. 1	3	20,0
b. 2	10	66,7
c. 3	2	13,3

Based on Table 2, the characteristics of diabetic ulcer patients show that the largest proportion of patient gender is male (66.7%), more than half (73.3%) of patients do not work, more than half of patients (93.3%) suffer from diabetic ulcers more than 5 years and the largest proportion of patients (66.7%) had grade 2 injuries.

The description of the anxiety of diabetic ulcer patients in this study was measured with a measuring tool in the form of a questionnaire which totaled 14 symptom group questions, analyzed using explore analysis to see the normality of the data with the Shapiro-Wilk test because the number of samples was less than 50.

Table 3. Distribution of Respondents' Average Anxiety Values Before and After the Intervention Counseling at DD Care Padang City in 2022

Anxiety	Mean	Median	SD	Min-Max	95% CI	Shapiro-Wilk
Before	26,87	27,00	3,944	18-33	24,68-29,05	0,652
After	19,93	20,00	4,114	13-28	17,66-22,21	0,958

Based on Table 3, the average score of diabetic ulcer patients before the research intervention was 26.87 (95% CI: 24.68-29.05) which is believed to mean that the average anxiety score of diabetic ulcer patients is in the range of 18 to 33, with a standard deviation of 3.944. While the average anxiety score of diabetic ulcer patients after the research intervention was 19.93 (95% CI: 17.66-22.21) it is believed that the average anxiety score of diabetic ulcer patients is in the range between 13-28, with a standard deviation of 4.114. The results of the Shapiro-Wilk test showed that the distribution of anxiety was normal, which was before the intervention ($p \text{ value} > 0.05$) and after the intervention ($p \text{ value} > 0.05$), as shown in Table 3.

To see changes in anxiety in diabetic ulcer patients before and after intervention using the Paired t-test because the results of the normality test with Shapiro-Wilk (the number of respondents is less than 50) with a $p \text{ value} > 0.05$.

Table 4. Distribution of the average change in anxiety value of diabetic ulcer patients before and after counseling interventions at DD Care in Padang City in 2022

Variabel	n	Mean	SD	t	Sig. (2-tailed)	
Anxiety	Before	15	26,87	3,944	14,666	0,000
	After	15	19,93	4,114		
Difference			6,933			

Based on Table 4 the research results were obtained from 15 respondents, the table shows the results of the Paired t-test with a Sig value. (2-tailed) is $0.000 < 0.05$. then H_0 is rejected and H_a is accepted. These results indicate a decrease in the average score before being given the intervention and after being given the intervention with a difference value of 6.933. It can be concluded that there is an effect of counseling on reducing the anxiety of diabetic ulcer patients.

This study, as described in the previous section, aims to determine changes in the anxiety of diabetic ulcer patients through counseling. Data were collected by giving questionnaires before and after being given an intervention in the form of counseling. The average anxiety of the respondents before being given the intervention was 26.87% while the average anxiety of the respondents after being given the intervention was 19.93%. These results indicate that there is a decrease in the average level of anxiety in respondents after being given an intervention using counseling.

This research is in line with the research of Yusriani dan Permatasari (2021) which shows that there is an effect of group counseling on reducing anxiety levels experienced by DM survivors with the average respondent's anxiety before being given the intervention, which is 18.14, while the average respondent's anxiety after the intervention is 7.71.

Based on the statistical test results, the anxiety level of the respondents before being given intervention in the form of counseling and the anxiety level of the respondents after being given intervention in the form of counseling obtained 4 categories of anxiety levels, namely no anxiety, mild anxiety, moderate anxiety, and severe anxiety. The results showed that the anxiety level of the respondents before being given the intervention was mostly moderate anxiety level with 8 people (53.3%) while the highest level of anxiety after the intervention was mild anxiety level with 9 people (60.0).

The results of this study are almost the same as the research of Prihati & Wirawati (2018) showing that the highest level of anxiety before intervention was moderate anxiety level, amounting to 7 (41.2%), while the highest level of anxiety after intervention was mild anxiety level, amounting to 16 (94.1%).

Based on the characteristics of the degree of injury of the respondents, the majority of respondents in the study indicated that the wound was at degree 2, namely 10 respondents (66.7). The results of the study by Kano, M.R.S, et al showed that the most common degree of the wound in patients with diabetic ulcers, namely degree 2, was 26 people (66.7%). The results of the study by Efendi Dhanang & Rosalina (2022) show an overview of the degree of patient injury, namely (30.1%) with a degree of injury 2. An overview of the patient's anxiety level

(30.6%) is moderate anxiety. The test results with Kendall Tau obtained a p-value = 0.004. The correlation coefficient value is 0.401 which means that the direction of the correlation is positive and the degree of closeness is sufficient. The conclusion from the results of this study is that there is a relationship between the degree of injury and the level of anxiety in diabetic ulcer patients at the Diabetes Wound Specialist Clinic in Semarang.

Anxiety if not controlled will affect the mindset and behavior so that it can become a psychological disorder. Efforts to treat patients with diabetic ulcers, ideally not only treat physical health but mental and social. Counseling is one of the steps that can be used to overcome anxiety, the counseling process has been proven to be able to control and reduce anxiety levels in general (Kamil dkk, 2020).

Counseling is carried out for diabetic ulcer patients, namely counseling which is supportive which provides support or encouragement to patients to be able to overcome their problems. After short-term counseling, it is hoped that the patient will be able to understand the disease correctly, adjust to the disease, and will follow the treatment of the disease properly. This ability will provide better results in managing the disease, including the psychological problems encountered, namely anxiety.

CONCLUSION

The patient characteristics are based on the respondent's minimum age of 44 years and maximum age of 80 years. The proportion of male respondents is higher than that of female respondents. The duration of suffering from diabetic ulcers for less than 5 years was 14 respondents higher than > 5 years. Based on the characteristics of the degree of injury of the respondents, the majority of respondents in the study indicated that the wound was at degree 2, namely 10 respondents. There is the effectiveness of counseling in reducing the anxiety of diabetic ulcer patients at DD Care in Padang City as evidenced. Health workers must study more deeply the bio, psycho, social, and spiritual aspects of people with diabetic ulcers as a reference for providing quality health services. Listen to complaints and give directions and motivation to sufferers to be enthusiastic in living life with diabetic ulcer disease which is a complication of diabetes mellitus so that sufferers do not experience mental and psychological disorders. For future researchers, this research can be continued by other researchers with different designs and is expected to be a reference and initial data to start further research as reference material. Counseling should be carried out by professional and competent people to get more meaningful results.

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