Effectiveness of Reflex Therapy on Dysmenorrhea Among Residents of Nirmal Jyothi Technical Institutes, Bangalore

Anitha Sujith
Assistant Professor, Dept. of Obstetrics and Gynaecology, Bombay Hospital College of Nursing, Mumbai, India

Abstract: This paper presents an overview on effectiveness of reflex therapy on dysmenorrhea among residents of nirmal jyothi technical institutes, Bangalore.

Keywords: reflex therapy, dysmenorrhea

1. Introduction

Changes make life more beautiful and worth living if one knows how to adopt one self and adjust to the changes presented by the situation he or she can face any challenges in life. Adolescence is a transition period from childhood to adulthood and is characterized by a spurt in physical, endocrine, emotional, and mental growth. One of the major physiological changes that take place in adolescent girls is the onset of menarche or puberty. The rapid growth and change in the physical structure is after the attainment of puberty. The first menstruation or menarche usually occurs at puberty, typically between the ages of 12-16 years and continue until the menopause around the age of 45-50 years.

Attainment of puberty is an event of celebration in the life of a girl child as it opens her to maturity and women hood. But it’s viewed as an instrument of social control over women’s in all culture and religion of the world. It’s the earliest time of reproduction. For many girls physical problems can arise in relation with menstruation such as dysmenorrhea, weight gain, head ache, back pain, giddiness etc.

Dysmenorrhea is one of the common problems experienced by many adolescent girls. There are two types of dysmenorrhea-primary and secondary dysmenorrhea. Primary dysmenorrhea is a periodic pain and cramping, that may radiate to the lower back and upper thighs. This is not caused by an underlying medical condition. It may lasts for 1-3 days of periods, when chemical messenger called prostaglandin peaks. Symptoms may include backache, leg pain, nausea, vomiting, diarrhoea, headache, and dizziness whereas secondary dysmenorrhea is a cramps caused by medical problems.

2. Background of study

The prevalence of dysmenorrhea, worldwide is with rates ranging from 15.8 to 89.5 percent, with higher prevalence rates reported in adolescent population compared to others. In Asia, Overall, 74.5 percent of the girls who had reached menarche had dysmenorrhea; 51.7 percent of these girls reported that it affected their performance in classes; 50.2 percent that it restricted their social activities; 21.5 percent reported that it caused them to stay back school; and 12.0 percent caused poor academic performance. In India, incidence of dysmenorrhea among adolescent girls was reported as 33.5 percent. A study showed that more than 50 percent of all menstruating women experience some discomfort. In Karnataka an epidemiologic study was conducted on adolescents, between the ages of 12-17 years reported a prevalence of dysmenorrhea. Results showed that 59.7 percent are having pain, in that 12 percent described it as severe; 37 percent as moderate; 49 percent as mild and also it caused 14 percent of girls to miss school frequently.

3. Aim

Assess the perceived intensity of pain among the experimental and control group of residents before and after intervention reflex therapy.

4. Need for study

Conventional treatment of dysmenorrhea consists of non-steroidal anti-inflammatory or oral contraceptive pills which causes unwanted side effects. Therefore, there is a potential for effective non pharmacological treatment. Studies reported significant effects of complementary therapy on pain, negative mood states and physical symptoms with significant effects on all measures across the menstrual cycle phase. Reflexology; one of the complementary therapies is scientific which shows the relationship between foot and body. Its complementary and not a substitute. Reflexology is 93 percent effective as found in a year-long analysis of 168 studies from twenty-three countries. Reflexology is holistic treatment, promotes natural healing, induces relaxation, and improves blood circulation and nerve supply. Touch has always been a part of the nursing mandate and reflexology has become a part of these reach out to patient. Foot reflexology is a way to enhance the nurse-patient interrelationship.

It offers a strategy to fulfil the goals for human touch and holistic nursing care. It can be performed at any location, is non-
invasive, and does not interfere with patient’s privacy. Reflexology is cost effective and a technique of using hand on feet, it can be implemented by a skilled midwife as well. Moreover, the investigator as a teacher has come across many students who suffer from dysmenorrhoea and are forced to abstain from classes and clinical. Hence the personal experience of the researcher working and staying with young girls also motivated her to take up this study.

5. Hypothesis

H1: There is a significant reduction in intensity of pain during menstruation after the reflex therapy.

H2: There is a significant association between the pre intensity of pain and selected demographic variables.

6. Sample

60 Resident girls of nirmal jyothi technical institute Bangalore.

Sampling technique: Non probability purposive sampling

Inclusion Criteria: The sample includes resident girls
1. Suffering from primary dysmenorrhoea.
2. Available during the time of data collection.
3. Willing to participate in this study.

Exclusion Criteria: The sample excludes resident girls suffering from pathological dysmenorrhoea.

7. Tool

Part A: self-administered questionnaire which consists of 10 items used to collect the sample characteristics such as age, religion, basic education before joining for technical education, source of income, age at menarche, hygienic practices during menstruation, food habits, healthy habits practiced, use of medication for dysmenorrhoea and source of information regarding reflexology.

Part B: Visual Analog scale for assessing the intensity of pain.

8. Material and method

The experimental group from Nirmal Jyothi Technical institute and the control group from Nirmal Jyothi Charitable trust Bangalore. Each group consists of 30 resident girls respectively. The researcher explained the purpose of the study and obtained the consent from the resident girls who are willing to participate in this present study. The data collected and analysed by using statistical measures in terms of the objectives. The result of the study reveals that there is effectiveness of reflex therapy by comparing the pre-post intensity of pain among experimental group and control group and association between demographic variable and intensity of pain. The investigator will analyse the data obtained by using descriptive and inferential statistics.

9. Result

Findings related to the perceived intensity of pain among experimental and control group

Pre-test: The mean pre interventional intensity of pain perceived as moderate is 46.1 and 47. The mean pre interventional intensity of pain perceived as severe is 69.95 and 65.8 respectively among experimental group and control group.

Post-test: The mean post interventional intensity of pain perceived as moderate is 33.5 and 45.5 among experimental group and control group. The mean post interventional intensity of pain perceived as severe is 65.5 in control group and as mild is 22.8 in experimental group.

A. Effectiveness of reflex therapy

1) The post-test mean intensity of pain is lesser than the pre-test mean intensity of pain (25.6<62) among experimental group and the obtained “t” value is 14.5 which is greater than the table value t (29, 0.001) = 3.646 at 0.001 level.

2) The mean of post test intensity of back pain is higher than the mean intensity of pre-test (62.8>62.6) among control group and the obtained “t” value is 0.991.

3) The mean intensity of post-test in experimental group is lesser than the mean intensity of post-test in control group (25.6<62.8). The obtained “T” value is 16.6 with df 38 at 0.001 level is greater than table value.

Association between the intensity of back pain and the demographic variables

The finding of the present study in the experimental group shows that there was significant association between the perceived intensity of pain and demographic variables like source of income of the subjects (15.05), health habits practiced (15.16) medications for dysmenorrhoea (19.7). Hence the research hypothesis is accepted at 0.05 level of significance. However there is no significant association between the perceived intensity of pain and demographic variables such as age (0), religion (2.08), basic education before joining for technical education (2.14), age at menarche (0.134), and hygienic practices during menstruation (0.12), food habits (1.8) and source of information about reflexology (4.78). Hence the research hypothesis is rejected at 0.05 level of significance.

10. Nursing implications of the study

The result of the study proved that there is a necessity of giving education on Reflex therapy in order to decreasing the intensity of pain. Hence, it becomes the responsibility of the health personnel to demonstrate about the reflex therapy. The nursing implication of the study can be discussed under nursing practice, nursing education, nursing administration and nursing research.

11. Recommendation

- A similar study may be replicated on large sample size.
- A similar study can be done only among the adolescent girls.
A comparative study can be done between the married and unmarried women.

A similar study can be done for longer duration which would have produced more significant result.

Comparative study can be done between reflex therapies with some other alternative method to reduce pain.

12. Conclusion

The findings of the study prove that reflexology is effective in reducing the perceived intensity of pain during dysmenorrhea.

References