

# Effectiveness of Savasana On Blood Pressure Among Patients with Hypertension - A Quasi Experimental Study

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**Abstract:** This paper presents an overview on effectiveness of savasana on blood pressure among patients with hypertension.

**Keywords:** Savasana, Blood Pressure, Hypertension.

## 1. Introduction

Hypertension is very common indeed and hence a major public health issue. The estimated number of adults living with high blood pressure globally was 972 million. This is expected to increase to .56 billion by 2025. (Duluth, 2003) Hypertension was common in both developed (333 million) and developed (639 million) countries. In Europe hypertension occurs in about 30-45% of People. (Soreson, 2010).

Hypertension is a worldwide epidemic. The prevalence of hypertension in the United States is increasing and reached 34% in 2006 and African American adults have among the highest rates of hypertension in the world at 44%. Hypertension is more prevalent in men (though menopause tends to decrease this difference) and in those of low socioeconomic status. (Ferroini, 2007). One in every 10 Indian suffers from high blood pressure. Antihypertensive drugs have side effects and are expensive. Noncompliance to medication is very common among hypertensive patients due to various reasons. Antihypertensive drugs alone cannot control blood pressure. Physiological relaxation is very important for maintaining blood pressure. (Indian express bureau, 2004) Savasana therapy relaxes the body and facilitates normal blood circulation without obstruction and it is one of the important technique to control blood pressure. Based on the review of literature, prevalence and incidence of hypertension is existing in various regions and the investigator practice in the field of community; felt that savasana may be beneficial to the patients with hypertension. It is a simple procedure to carry out in day to day life and potentially risk free procedure, so the investigator had selected this study and proved by evidence based approach.

## 2. Methodology

The conceptual frame work of this study was based on Daniel L. Stuffle beams context, input, process and product evaluation model and it provided a complete frame work for achieving the central purpose of the study. The research methodology adopted

for the study was quasi experimental pre test and post test control group design. The Study was conducted in selected Villages of Gujarat. The Sample size for the study was 60, 30 persons were in experimental group another 30 persons were in control group. The samples were selected based on the inclusive criteria by using purposive sampling technique. The collected data was analyzed and interpreted based on the objectives using descriptive and inferential statistics.

## 3. Findings

On analysis of frequency and percentage of demographic variables, majority of the patients 12 (40%) were between the age group of 41-50 years and 51-60 years among hypertensive patients in experimental group, whereas in the control group 14 (46.67%) of subjects were between the age group of 51-60 years. With regard to sex, majority of patients 20 (66.67%) were females in the experimental group, whereas in the control group 17 (56.67%) of patients were female. With respect to education majority of the patients 15 (50%) had no formal education in the experimental group, whereas in the control group 17 (56.67%) of subjects had no formal education. With regard to occupation majority of patients 22 (73.33%) were belongs to coolie in the experimental group, whereas in the control group 22 (73.33%) of subjects were belongs to coolie. With regard to monthly income, majority of the patients 20 (66.66%) of them were belongs to <3000, in the experimental group, whereas in the control group 15 (50%) of subjects were belongs to <3000. Regarding the family history of hypertension, majority of patients 23 (76.67%) did not have family history of hypertension, in the experimental group and 24 (80%) in the control group did not have family history of hypertension. Regarding the bad habits majority of patients, 22 (73.33%) of them were do not have any bad habits in the experimental group. whereas in the control group, majority of patients 16 (53.33%) of them were do not have bad habits. With regard to dietary habits majority of patients 25 (83.33%) were belongs to non-vegetarian in the experimental group, whereas in the control group majority of patients, 29 (96.67%) were belongs to non-vegetarian. On analysis the pretest level of blood pressure among experimental group, majority of patients 25

(83.33%) had prehypertension and in the control group majority of patients 27 (90%) had prehypertension. On analysis the posttest level of blood pressure among experimental group, majority of patients 25 (83.33%) had normal level of blood pressure and in the control group majority of patients 25 (83.33%) had prehypertension. On analysis of posttest level of blood pressure among experimental group, majority of patients 25 (83.33%) had normal level of blood pressure and in the control group majority of patients 25 (83.33%) had prehypertension. On analysis of mean score of blood pressure among experimental group was 0.16 and in control group was 1.16. Standard deviation after intervention among experimental group was 0.36 and in control group was 0.39 and calculated 't' value was 15.625. It shows reduction of blood pressure in experimental group. analysis revealed there was no significant association between the post test level of blood pressure and demographic variables such as age, sex, education, occupation, monthly income, family history of hypertension, bad habits and dietary habits. In experimental and control group, the calculated chi square value showed that there was no association between demographic variables and blood pressure respectively at  $p < 0.05$  level.

#### 4. Conclusion

This study was assessed the effectiveness of savasana on reduction of blood pressure among patients with hypertension. The study findings revealed that there was a significant association on the level of blood pressure after administration of savasana in the experimental group. On the basis of the study, the researcher concluded that administration of savasana has a significant effect on blood pressure. Savasana is an effective, easy to apply and potentially risk free intervention.

#### References

- [1] Kearney PM., Whelton, M. (2004). Worldwide prevalence of hypertension Journal of Hypertension.22 (1):11-19.
- [2] Annetrin Jytte Basler, (2011), Pilot Study Investigating the Effects of Ayurvedic Abhyanga Massage on Subjective Stress Experience, The Journal of Alternative and Complementary Medicine on hypertension. 17(5): 435-440.
- [3] Anand PM, (2002). Non pharmacological management of essential hypertension. The journal of Indian medical association, 24-26.
- [4] Asokkar, (2003). Hypertension in the next millennium. Journal of Indian medical association, 32-34
- [5] Agarwalk K, (2001). Non pharmacological treatment of hypertension. Herald of Health (61), 14-15.
- [6] Datey et.al, (2001). Shavasana and yogic exercise in management of hypertension. Angiology research foundation (20), 325-330.
- [7] Gopal K. S, (2004). Effect of yogasana and pranayamas on blood pressure and pulse rate. Indian journal of physio pharmacological therapy, 273-275.
- [8] Mohan V., Deepa M., (2007). Prevalence, awareness and control of hypertension in Chennai representing Urban South India. Journal of Association of physician India (55), 326-32.
- [9] Kannan L, (2009). An epidemiological study of hypertension. Sri Ramachandra Journal of Medicine, 2(2), 1-5.
- [10] Yadav S, (2008). Prevalence and risk factor of pre hypertension and hypertension. Indian journal of medical research, (128), 712-720.
- [11] Karen Tu, (2008). Prevalence and incidence of hypertension. Canadian Medical Association of Journal, (11),178.
- [12] Ihab Hajjar, (2006). Prevalence and incidence of hypertension. Annual Review of Public Health (27), 465-490.
- [13] S. S. Reddy, G. R. Prabhu., (2005). Prevalence and Risk Factors of Hypertension in Tirupati. Indian journal of community medicine 30 (3), 84-86.
- [14] Hennis A, (2002). Prevalence of hypertension. Journal of hypertension 20(12), 2363-2369.
- [15] S. V. Joshi, (2000). Prevalence of hypertension in Mumbai. Indian journal of medical science 54 (9), 380-383.
- [16] Gupta R, (2004). Trends in Hypertension Epidemiology India. Indian journal of medical science, 18(2), 73-78.