The Effectiveness of Psychoeducation in Improving Psychological and Emotional Health Patients with Chronic Diseases (Tuberculosis): A Systematic Review

Nurul Khoirun Nisa, Soedarsono and Makhfudli
Faculty of Nursing Universitas Airlangga, Kampus C Mulyorejo, Surabaya, Indonesia

Keywords: Psychoeducation, Psychological and Emotional Health, Chronic Disease Patients, Tuberculosis.

Abstract: Background: individuals suffering from chronic disease were 2.6 times greater risk for an emotional mental disorder. Tuberculosis (TB) is a chronic and infectious disease, caused by Mycobacterium tuberculosis that affects the lungs and can affect not only physical health but also psychological and social conditions. Psychically and socially perceived by clients due to TB-related stigma and changing attitudes of people around it, thus requiring the right method to know and handle it. The aim of this study was to describe the patient’s psychological and emotional health, especially patients with chronic diseases. Methods: this systematic review using PICO frameworks on some databases to searching international scientific articles such as Pro Quest, Ebsco, Pubmed, Science direct bounded from 2006 until 2017. The searching with the keyword found 1,124 articles, those articles are identified in accordance to the inclusion criteria, which got 7 articles. The search results are identified further to have critical appraisal to the stage of making systematic review. Results: In general, all the journals conducted by the review provide results that psychoeducation provides positive benefits as a medical handling strategy in improving the psychological and emotional health of the patient in terms of decreasing levels of anxiety and stress as well as providing good emotional support to the patient. Conclusions: Psychoeducation give an effective method that is beneficial in providing a positive effect and good emotional support to the patient. This effect occurs in the decline of good psychological health conditions, and increased levels of patient satisfaction to nurse.

1 BACKGROUND

Tuberculosis (TB) has become a health problem in the world, a chronic and contagious infectious disease, the third cause of death and ranks first for infectious diseases class. The situation of Tuberculosis in the world is getting worse, the number of TB cases is increasing and many which is not successfully cured, especially in countries grouped in 22 countries with high burden countries. TB caused by Mycobacterium tuberculosis that affects the lungs and can affect not only physical health but also psychological (mental) and social conditions. Physically, the patient will have a long cough with coughing up blood, breathing difficulties, weight loss, night sweats, and fever, while psychologically and socially sensed patients are due to TB-related stigma and changes in the attitude of those around them. The impact of pulmonary TB can affect many aspects of life and lead to a deterioration in the quality of life of the patient (Jannah, 2016).

Tuberculosis therapy has a positive effect on the physical condition, but there are other effects obtained after tuberculosis patients completed treatment and microbiologically declared cured, the quality of life of patients with tuberculosis significantly worse than the healthy population, in terms of physical health (physical function, physical health status, overall body pain, general health view) and mental health (vitality of life, health effects on living activity, restriction by mental health status, general mental health) (Guo et al., 2009).

One form of therapy to reduce the psychological impact is with psychoeducation. Psychoeducation is the development and provision of information in the form of community education as information related to simple psychology that affects the psychosocial well-being of society (Supratiiknya, 2011). With the provision of psychoeducation therapy, is expected to increase knowledge and ability in self care, self management in patients with chronic diseases undergoing therapy.
Provision of education has been shown to increase therapeutic satisfaction, especially in the comfort, social and quality of life domains, especially in the domain of treatment satisfaction (Mustikanigtyas, 2013). The results of the Yuni study (2016) also show that there is a significant relationship between knowledge of the disease and medication adherence. Education is one of the indicators that determine the success of treatment. Patients with low education will be difficult to receive treatment, where treatment takes a long time, with more toxic drugs, more expensive with a very large effect (WHO, 2013).

The study of psychoeducation therapy on anxiety in chronic disease patients, ever done by Espahbodi, Hosseini, Mirzade, & Beygom, 2015 entitled Effect of Psycho Education on Depression and Anxiety Symptoms in Patientson Hemodialysis said that the results showed Psychoeducation decreased depression score and total score HADS. However, it is not enough to conclude the effect of psychoeducation therapy on anxiety in patients with renal failure who underwent hemodialysis.

The purpose of this study is to conduct a systematic review of psychoeducation therapy on improving the psychological and emotional health of patients with chronic diseases. It is expected to facilitate the provision of nursing interventions and ultimately reduce the level of anxiety / psychological and emotional impacts on chronic disease patients undergoing therapy as well as other cases that allow this therapy to be given.

2 METHODS

The method used in Systematic review begins with topic selection, then the keyword is determined to search the journal using English through several databases such as Science Direct, Ebscho, Pro Quest, Google Scholar, e-resources, and Pub Med. Keywords used are "psychoeducation", "health psychological" , "emotional" , "chronic disease", "TB/Tuberculosis". This search is bounded from 2006 until 2017. Journals were selected for review based on studies that fit the inclusion criteria. The inclusion criteria in this systematic review is psychoeducation performed on patients with chronic diseases. The searching with the keyword found 1,124 articles. Those articles are identified in accordance to the inclusion criteria, which got 7 articles, then be observed and done Critical Appraisal.

3 RESULTS

This systematic reviews 7 journals. All journals discuss about the influence of psychoeducation to improve the psychological and emotional health of patients with chronic illness.

Martin's research (2017) suggests that there is a better improvement in sickle cell disease level knowledge and self-efficacy for adolescents and young adults who participate in SCD interventions than those who participate in control conditions (medication as usual). Further analysis revealed that participants in psychoeducation interventions proved significantly greater improvement in the subscale outcomes of medical treatment and handling strategies compared to those who participated in control conditions.

This results were supported by research conducted by Hemdi and Daley (2017) that improvements were found in T2 (postintervention) for stresses (F = 234.34, p = 0.00, and d = -1.52) and depression (F = 195.70, p = 0.00, and d = -2.14) but not anxiety, and these results are maintained in T3(follow up 8 weeks). Changes in child behavior problems were limited to hyperactive improvement in T2 (F = 133.66, p = 0.00, and d = -1.54). Despite the statistically significant changes in stress and depression, changes to normal clinical levels are limited to depression. None of the participants had recovered after the intervention (Mother Stress Index Short Form stress score); while 23 mothers (71.87%) in the intervention group had recovered at T2 and 22 (68.75%) in T3 (Hospital of Anxiety and Depression Scale depression score).

Similar research was also conducted Khanal et al (2017) revealed that behavioral changes proved to assist individuals in identifying appropriate changes in levels of practice and policy. The findings of this study emphasize the need for psycho-social support tailored to work on simple aspects of psychological support for the general population can be used easily for use with people with MDR-TB.

The results were supported by Montoya (2013) in the results of his qualitative study obtained analysis of participants' answers to different questions from semistructured interviews of patients in identifying major categories of self-beliefs ‘To realize that life is short’ and requires active support from the surrounding environment.

Chan (2006) also describes Psychoeducation interventions that contain education, relaxation and effective group support in improving outcomes from the care provided, while also providing a positive effect and good emotional support to the individual.
Research conducted Hosseini (2012) in Iran J Jid Kidney Dis explained that Psychological training and citalopram therapy useful in reducing symptoms of anxiety and depression of patients undergoing hemodialysis.

A similar study by Al-Rishawi (2015) proves that there is a relationship between anxiety and depression levels with socio-demographic characteristics in clients with renal failure. The results of this Psycho-educational program are suggested to improve the client's psychological and emotional status.

4 DISCUSSION

In general, all journals conducted by the review provide results that psychoeducation provides positive benefits as a medical handling strategy in improving the psychological and emotional health of patients viewed from the aspect of decreasing the level of anxiety and stress as well as providing good emotional support there are patients.

Patients suffering from chronic diseases are prone to psychological problems. Through the research of Al-Rishawi, M.K. dan Al-Juboori, A.K. (2015) suggests that the variant levels of anxiety and depression in hemodialysis patients are associated with sex, age, and occupation. The difference of variant of psychological pressure with education level showed significant result according to HADS scale. Psychoeducation is therefore expected to improve psychological function and emotional status.

Psychoeducation significantly affects stress levels, anxiety and depression is demonstrated through research conducted by Rahimipoour et al (2015) through educational therapy hope to reduce depression, anxiety, and stress levels in patients undergoing hemodialysis. There were significant results on the average score of depression, stress, and anxiety in the treatment group. Through hope-therapy education, individuals will have more realistic goals and get rid of despair that can damage self-confidence. So it is possible that the individual is more resistant to negative events. In addition, hope is a kind of feeling that enlarges the possibility of future behavior or fun events.

The research An Gyeong-Ju's (2011) study also showed that e-mail education decreased the stress score, epinephrine and cortisol serum lower than the control group after the 6-week e-mail education program. The content and encouragement given in the e-mail education program psychologically supports elderly hemodialysis patients. Psychological pressure is known to be greater than physical stress. However, e-mail patient education does not affect the limitations of time for face-to-face and space.

In Research of Montoya (2013) nurses are expected to reduce the impact of terminal illness on clients, not only by controlling the symptoms but also supporting the patient's health, by increasing the sense of satisfaction in life, providing honest and accurate information, building the patient's thoughts on realistic health, and facilitate patients and families in effective and quality communication.

Research conducted by Khanal (2017) also indicates that with behavioral changes proven helpful in identifying appropriate changes in attitude and decision making. This study describes the need for psycho-social support appropriate to the patient's condition. Recent research on simple psychological support packages for the general population can be used easily for use with MDR-TB. Good psychological support is expected to improve attitudes and ways of making decisions in determining therapy so that the success of therapy will be more optimal.

Some studies do not statistically show significant results regarding the influence of psychoeducation in reducing stress, anxiety, or depression. In the Espahbodi study (2015), psychoeducation affects anxiety, depression and total HADS levels. Total HADS is a combination of HADS depression and HADS anxiety scores. Total depression and HADS levels in decline significantly after educational treatment, but, in women, psychoeducation effects can only be seen in depression scores. Although psychoeducation reduces an anxiety HADS score, it is statistically insignificant. This may be due to the duration of education as well as follow-up with a short period of time. In addition, special skills taught such as muscle relaxation require continuous practice and require a fairly long duration.

Similar results were also raised by Hosseini (2012) in his research. There were no significant differences between citalopram groups and psychological education groups on depression, anxiety and total HADS scores. However, psychological-social interventions for depression in dialysis patients suggest that psychological interventions added to routine medical therapy may decrease depression in ESRD patients.
5 CONCLUSIONS

Psychoeducation can be an effective method useful in giving positive effects and good emotional support to Patients. This effect occurs in the decline of good psychological health conditions, and increased levels of patient satisfaction to nurse.

REFERENCES


Martin, Gweneth M.: , The Effect Of Psychoeducational Intervention On Improving Psychosocial Functioning And Disease Management Of Adolescent And Young Adults With Sickle Cell Disease, diakses 3 Oktober 2017.


Rahimipour, M., Shahgholian, N., Yazdani, M. 2015. Effect of happiness educational program on the level of stress, anxiety and depression of the cancer patients’ nurses. Iranian Journal of Nursing and Midwifery Research .vol. 20, no. 6


