

## “Te’undur” Techniques for Sleep Disorders

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### **Abstract.**

*Individuals who have hypertension often experience Complex issues such as sleep disturbances, pain, anxiety, and family support are low. So that individuals experience limitations in carrying out activities and are still dependent on other people around him. Non-pharmacological interventions with The retreat method can have a positive impact on the elderly who experience sleep disorders due to hypertension to maintain its life and always respond to the environment Surrounding. This community service is carried out in the village Tambak Baru ilir Martapura District, Banjar Regency City South Kalimantan. The measurement results obtained data that the elderly who experienced mild sleep disorders as much as 81.8% and those who experienced moderate sleep disorders as much as 18.2%. Te'undur is effective in overcoming sleep problems in the elderly caused by hypertension. Te'undur technique can provide relaxation / calm to respondents spiritually by saying istighfar or hamdalah accompanied by deep breathing techniques and loosening the muscles of the body.*

**Keywords:** Sleep disorder, elderly and te'undur.

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### **I. INTRODUCTION**

Sleep disturbances are common symptoms in elderly and are related to various factors, including the use of caffeine, tobacco and alcohol; sleep habits; and comorbid diseases [1]. An epidemiological survey performed in Japan reported an insomnia prevalence of 21.4% when insomnia was defined to include at least one instance of difficulty initiating sleep (8.3%), maintaining sleep (15.0%), or early morning awakening (8.0%) [2]. More than half of older adults suffer from insomnia, and these subjects are often undertreated [3]. The annual incidence of insomnia in older people is reported to be 5-8% [4]. In a large epidemiological study of 28 714 subjects, the prevalence of excessive daytime sleepiness, defined as a self-reported feeling of excessive daytime sleepiness “always” or “often” among five choices, was 2.5% [5]. In elderly, managing sleep disorder is a challenging issue that may require lifestyle changes. The recognition of sleep disorder is especially important in the elderly due to age-related increases in comorbid medical conditions and medication use as well as age-related changes in sleep structure, which shorten sleep time and impair sleep quality. When sleep problems are present in older people, it is essential to assess whether sleep duration, quality, and timing are adequate. Mental disorders or medical conditions that may cause sleep disorder should also be checked. Loss of appetite and interest in addition to insomnia may suggest depression. In addition, delirium related to dementia, anxiety disorders, alcoholism, psychological factors, and life events (loneliness, the death of a partner/spouse or hospitalization) may also cause sleep disorder in the elderly [3]. Maladaptive sleep habits can be detrimental to sleep. These habits are often referred to as poor sleep hygiene. The most common are irregular sleep awake schedules, irregular napping in the daytime, spending excessive time in bed, or carrying out activities that are not conducive to falling asleep. In addition, an individual may have certain personality traits that heighten his/her physiological reaction in the face of stress.

For example, one may have the tendency to ruminate over negative events or catastrophize about future events. They may be anxiety prone and engage in unhealthy sleep practices such as lying in bed while awake, or take naps during the day. The above factors place them at an increased risk of developing insomnia in the face of a life stressor [7]. As a nurse, there is clearly a growing need for occupational

therapists to provide interventions for patients with sleep problems and related mental health issues. To facilitate the development of sleep management practice in occupational therapy, there is a need to further conceptualize on how sleep and occupation are linked and identify evidence-based occupational-based interventions that could be used in clinical practice. According to our study which entitled levine's conceptual model-based nursing interventions for blood pressure recovery in the elderly, It was found that the te'undur intervention was effective for overcoming sleep disorders in the elderly ( $p=0.016$ ) [6]. In the te'undur intervention, participants were asked to choose one of the dhikr word, namely Astaghfirullah (I ask God for forgiveness) or Alhamdulillah (All praise be to God). Then Ask to close the eyes of the elderly while breathing deeply through the nose For 3 seconds, hold your breath for 4 seconds and then exhale through your mouth for 5 seconds while saying "Astaghfirulloh hal'adzim" or Alhamdulillah which selected. While relaxing the muscles of the elderly body so that relax/comfortable. Managing sleep disorder is a challenging issue that may require lifestyle changes. The recognition of sleep disorder is especially important in the elderly due to age-related increases in comorbid medical conditions and medication use as well as age-related changes in sleep structure, which shorten sleep time and impair sleep quality. In this Community service, we describe sleep disturbances commonly observed in older people and apply te'undur technouque for sleep problem.

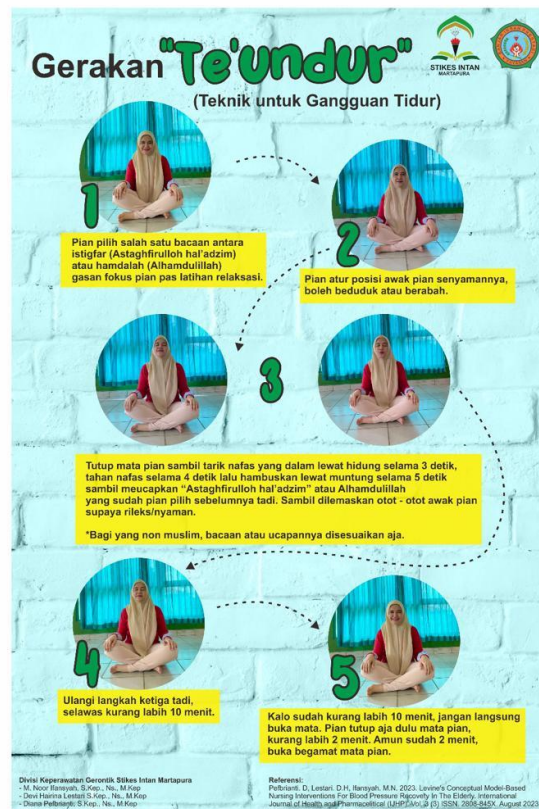
## II. METHODS

The location of this Community Service activity is located in Tambak Baru Ilir Village, Banjar Regency, South Kalimantan. The media used is a questionnaire. Then carry out te'undur technique for sleep problem in elderly. There are three stages of activity, namely: Preparation The first step in this community service activity is to make observations about health problems that are often suffered by the community. Furthermore, the Community Service screened health problems in the community and it was found that the elderly in Tambak Baru Ilir Village mostly suffered from sleep disorders due to hypertension. Then the elderly fill out a sleep disorder questionnaire (sleep quality scale questionnaire).

The next step, devotees will teach te'undur techniques to overcome sleep problems in the elderly. The first step for the elderly is to choose the sentence istigfar (Astaghfirulloh hal'adzim) or hamdalah (Alhamdulillah), Adjust the position of the elderly body as comfortable as possible, can sit or position Fell, Ask to close the eyes of the elderly while breathing deeply through the nose for 3 seconds, hold your breath for 4 seconds and then exhale through your mouth for 5 seconds while saying "Astaghfirulloh hal'adzim" or Alhamdulillah which pre-selected. While relaxing the muscles of the elderly body so that relax/comfortable. Repeat for approximately 10 minutes. When you're done, don't open your eyes right away. Wait until more or less 2 minutes, just open your eyes slowly (For non-Muslims, the reading or speech is adjusted).



**Fig 1.** Te'undur technique implementation activities



**Fig 2.** Te'undur technique poster

#### Monitoring and evaluation

Monitoring and evaluation (monev) is carried out directly to the target. Monitoring and evaluation is carried out by conducting discussions and questions and answers after implementation te'undur technique in Tambak baru ilir Village. This evaluation aims to determine the Elderly Feelings After Performing Te'undur Technique. The results of the evaluation are both through questions and answers and the implementation of te'undur technique, All elderly are enthusiastic when participating in te'undur technique activities and can follow te'undur technique activities provided and some elderly experienced a calm feeling. Overall, te'undur technique activities can be carried out by all elderly in Tambak Baru Ilir Village.



**Fig 3.** Elderly demonstrate te'undur technique



### III. RESULT AND DISCUSSION

Results of long suffering from hypertension, grade of hypertension and sleep problem in elderly conducted in Tambak baru ilir Village which was attended by 33 participants. Participants were enthusiastic about the activities carried out. Data collection was carried out in Tambak baru ilir Village on February 23, 2023.

**Table 1.** Long suffering from hypertension

long suffering from hypertension	f	%
<1 year	12	36,4
1-5 years	17	51,5
>5 years	4	12,1
<b>Total</b>	<b>33</b>	<b>100</b>

Table 1 explains that the majority of the elderly suffer from hypertension within 1-5 years, which is as much as 17 partisipant (51,5%).

**Table 2.** Grade of hypertention

Grade	f	%
Pre hipertensi	11	33,3
Ht Grade 1	10	30,3
Ht Grade 2	12	36,4
<b>Total</b>	<b>33</b>	<b>100</b>

Table 2 explains that the majority of grade of hypertention was hypertention grade 2, which is as much as 12 partisipant (36,4%).

**Table 3.** Sleep problem in elderly

Sleep problem	f	%
Moderate sleep problem	6	18,2
Mild sleep problem	27	81,8
<b>Total</b>	<b>33</b>	<b>100</b>

Table 3 explains that the majority of sleep problem was mild sleep problem, which is as much as 27 partisipant (81,8%). The next stage, the implementation of community service, first the elderly choose the sentence istigfar (Astaghfirulloh hal'adzim) or hamdalah (Alhamdulillah), Adjust the position of the elderly body as comfortable as possible, can sit or position Fell, Ask to close the eyes of the elderly while breathing deeply through the nose for 3 seconds, hold your breath for 4 seconds and then exhale through your mouth for 5 seconds while saying "Astaghfirulloh hal'adzim" or Alhamdulillah which pre-selected. While relaxing the muscles of the elderly body so that relax/comfortable. Repeat for approximately 10 minutes. When you're done, don't open your eyes right away. Wait until more or less 2 minutes, just open your eyes slowly (For non-Muslims, the reading or speech is adjusted). This is in line with our research on levine's conceptual model-based nursing interventions for blood pressure recovery in the elderly, It was found that the te'under intervention was effective for overcoming sleep disorders in the elderly ( $p=0.016$ ) [6]. At this time nonpharmacological therapy is prioritized in management before taking pharmacological therapy to reduce the side effects of drug use. This is in line with the journal of Devi where asihema therapy (listening to Asmaul Husna, handgrip relaxation and aromatherapy) is used in lowering blood pressure in the elderly [11]. One study excluded subjects affected by various factors that can disrupt sleep such as poor health, primary sleep disorders, and poor sleep hygiene (e.g. irregular sleep schedules, poor sleeping environments). It found that older adults do not experience excessive daytime sleepiness and the concomitant need to nap regularly during the day [8].

Nevertheless, the majority of older adults have significant sleep disturbances, which are related to a variety of causes. Physical and psychiatric illnesses, and the medications used to treat them, also contribute towards sleep problems in old age [9]. This is in accordance with the results of the examination in this community service where all elderly experience sleep disorders due to hypertension. This is in accordance too with Diana's journal, where from the results of health screening in the elderly in Astambul Village, Banjar Regency, data on the majority of diseases, namely hypertension, were found as much as 42,8% [10]. Ageing is associated with increased incidences of sleep-related ailments. Older people have difficulty in

falling asleep and staying asleep due to frequent arousals. Changes in sleep patterns are a part of the normal ageing process, and their caregivers must be educated about the sleep patterns of the elderly. Te'undur technique are extremely important and helpful in dealing with the sleep problems of the elderly. Growing older does not always mean sleeping poorly, but sleeping well can certainly improve overall health.

#### IV. CONCLUSION

Community service activities in the form of Te'undur technique for sleep disorder in elderly conducted in Tambak baru ilir Village one of the efforts to overcome the sleep disorder in elderly. Method of activities carried out by carrying out measurements sleep quality scale, then carry out interventions in the form of Te'undur technique for approximately 10 minutes.

#### V. ACKNOWLEDGMENTS

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#### REFERENCES

- [1] E Bixler, Sleep and society: an epidemiological perspective, *Sleep Med*, 2009;10 (Suppl 1):S3–6
- [2] K Kim, Uchiyama M, Okawa M, Liu X, Ogihara R, An epidemiological study of insomnia among the Japanese general population, *Sleep*. 2000;23:41–7.
- [3] N.S.Kamel,J.K.Gammack, Insomnia in the elderly: cause, approach, and treatment, *Am J Med*, 2006;119:463–9.
- [4] N.S. Gooneratne, M.V. Vitiello, Sleep in older adults: normative changes, sleep disorders, and treatment options. *Clin Geriatr Med*. 2014;30:591–627
- [5] Y. Kaneita, T. Ohida, M. Uchiyama, et al.Excessive daytime sleepiness among the Japanese general population. *J Epidemiol*. 2005;15:1–8.
- [6] P. Diana, H.L. Devi, N.I. Muhammad, Levine's onceptual Model-Based Nursing Interventions for Blood Pressure Recovery In The Elderly, *International Journal of Health and Pharmaceutical (IJHP)*, 2023; 3;3
- [7] R. Schutte. S., Broch, L., Buysse, D., Dorsey, C., & Sateia, M. Clinical guideline for the evaluation and management of chronic insomnia in adults. *Journal of clinical sleep medicine: JCSM*: official publication of the American Academy of Sleep Medicine, . 2008, 487-504.
- [8] M. V. Vitiello. Recent advances in understanding sleep and sleep disturbances in older adults: growing older does not mean sleeping poorly. *Curr Dir Psychol Sci* 2009; **18**: 316– 320.
- [9] K. F. Zdanys, D. C. Steffens, Sleep disturbances in the elderly. *Psychiatr Clin North Am* 2015; 38: 723– 741.
- [10] P. Diana, H. L. Devi, N. I. Muhammad, Optimalisasi Kesehatan lansia dengan Kegiatan Skrining Diabetes Mellitus dan Hipertensi, *Covit (Community service of Health)*, 2022, 2,1.
- [11] H. L. Devi, P. Diana, N. I. Muhammad, Penerapan Asihema therapy untuk menurunkan tekanan darah pada lansia, *Jurnal Abdimas Kesehatan (JAK)*, 2023, 5, 1: 70-77.