International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

A Quasi Experimental Study to Assess the Effectiveness of Savasana among Hypertensive Patients Residing in Selected Community Areas of Lakhimpur Kheri, Uttar Pradesh.

[1]Prem Prakash Suman, [2]Yamini Ajmera

[1]Professor, Srajan Institute of Nursing and Para medical Sciences, Uttar Pradesh.
[2]Nursing Tutor, Srajan Institute of Nursing and Para medical Sciences, Uttar Pradesh.

Introduction

Being so common, hypertension is a major public health problem. It is estimated that 968 million people worldwide have high blood pressure. This is anticipated to increase to $1.61 billion by 2025. As of 2013, hypertension was common in both developed (422 million people) and developing (722 million people) nations. In Europe, between 31 and 46% of people have hypertension. 2019 (Stephen). High blood pressure is a worldwide issue. The prevalence of hypertension among African Americans in the United States is the highest in the world at 48 percent, and it has increased to 38 percent since 2017. In terms of hypertension, males are more likely than women to experience it (though menopause seems to reduce this disparity). (Fenic, 2019) One in ten Indians suffer from high blood pressure. Antihypertensive drugs may be rather expensive and come with unpleasant side effects. People with hypertension commonly forget to take their medication as directed for a number of reasons. Antihypertensive drugs cannot be the exclusive means of lowering blood pressure. By letting your body's muscles rest, you can control your blood pressure. (Indian Express Bureau, 2021)Savasana treatment is a great method for managing blood pressure since it relaxes the body and allows normal blood flow without obstruction. A review of the literature revealed that hypertension is common and on the increase in many nations, and community-based researchers think that savasana may benefit people who have the condition. The procedure being studied is one that may be used in everyday life and is both straightforward and possibly risk-free.

Methodology

The main objective of this research was framed by an assessment model based on the input-throughput-Output model of the ED Crowding Product Evaluation Model. The study's method of inquiry was a quasi-experimental pre- and post-test control group design. The research was carried out in a selected villages in Lakhimpur Kheri, Uttar Pradesh. There were 100 individuals in the study, 50 of whom were in the experimental group and 50 in the control group. Purposive sampling was used to select the samples based on the inclusion criteria. According to the objectives of the project, data were analysed and interpreted using descriptive and inferential statistics.

Findings

In the experimental group of hypertension patients, 30% were between the ages of 41 and 50 and 51 and 60, whereas in the control group, 48% were in the same age range. In the experimental group, 69% of patients were female, compared to 58% in the control group, and just 42% were male. 38 participants in the control group and 31% of respondents in the experimental group, respectively, had no formal schooling. While 77 percent of the patients in the experimental group were coolies, only 69 percent of the patients in the control group were coolies.Most of the patients in the experimental group (74%), as well as the control group (79%), had monthly incomes in the 10,000 and 15,000 range, respectively. In both the experimental and control groups, 77% of the participants had no family history of high blood pressure. 64 percent of the experimental group were determined to be habit-free when it came to bad behaviours. However, only 55% of those in the control group engaged in any inappropriate behavior.While 93% of those in the control group were not vegetarians, 81% of those in the experimental group were not. According to the analysis of pre-test blood pressure values, the majority of patients in the experimental group (82%), and the control group (94%), had prehypertension.In contrast to the majority of patients in the control group (82%) who had prehypertension, the majority of patients in the experimental group (88%) had normal blood pressure. After post-test blood pressure levels were analysed, 86 percent of the experimental group had normal blood pressure, whereas 79 percent of the control group showed prehypertension.In the experimental group, the mean blood pressure score was 1.18, compared to 1.12 in the control group. The experimental group's standard deviation was 0.38, whereas the control group's was 0.36. following the intervention, with a 12.83 calculated "t"-value. It demonstrates that the blood pressure in the experimental group is lower. The results showed that there was no relationship between the post-test blood pressure reading and any of the following demographic characteristics: gender, age, education, employment, gross monthly income, or family history of hypertension. The computed chi square value indicated that there was no association between demographic variables and blood pressure in either the experimental or control groups.

Conclusion

In this research, hypertensive individuals underwent testing to see if savasana might lower their blood pressure. The study's findings demonstrated that savasana significantly lowered blood pressure in the experimental group. The results of the investigation convinced the researcher that savasana treatment dramatically decreases blood pressure. A straightforward, efficient, and risk-free intervention may include Savasana..

Bibliography

- Kearney PM., Whelton, M.(2004).Worldwide prevalence of hypertension Journal of Hypertension.22 (1):11-19.
- AnnetrinJytte Basler,(2011).The Journal of Alternative and Complementary Medicine on hypertension. 17(5): 435-440
- Anand PM, (2002). Non pharmacological management of essential hypertension.The journal of Indian medical association, 24-26
- Asokkar, (2003).Hypertension in the next millennium.Journal of Indian medical association, 32-34
- .Agarwalk.k, (2001). Non pharmacological treatment of hypertension.Herald of Health (61), 14-15
- . Dateyet.al, (2001). Shavasana and yogic exercise in management of hypertension.Angiology research foundation (20), 325-330 . GopalK.S, (2004). Effect of yogasana and pranayamas on blood pressure and pulse rate.Indian journal of physiopharmacological therapy, 273-275
- MohanV., Deepa M., (2007).Prevalence, awareness and control of hypertension in Chennai representing Urban South India.Journal of Association of physician India (55), 326-32.
- Kannan L, (2009). An epidemiological study of hypertension. Sri RamachandraJournal of Medicine 2(2), 1-5
- Yadav S, (2008). Prevalence and risk factor of pre hypertension and hypertension.Indian journal of medical research (128), 712-720
- Karen Tu, (2008).Prevalence and incidence of hypertension.Canadian Medical Association of Journal(11),178
- IhabHajjar, (2006).Prevalence and incidence of hypertension.Annual Review of Public Health (27), 465-490
- SS. Reddy,GR.Prabhu., (2005).Prevalence and Risk Factors of Hypertension in Tirupati.Indian journal of community medicine 30 (3), 84-86
- Hennis A, (2002).Prevalence of hypertension.Journal of hypertension 20(12), 2363-2369
- SV.Joshi,(2000).Prevalence of hypertension in Mumbai.Indian journal of medical science 54 (9), 380-383
- Gupta R.,(2004). Trends in Hypertension Epidemiology India.Indian journal of medical science18(2), 73-78