



ISSN: 0975-833X

Available online at <http://www.journalcra.com>

International Journal of Current Research
Vol. 11, Issue, 07, pp.5502-5504, July, 2019

DOI: <https://doi.org/10.24941/ijcr.35890.07.2019>

**INTERNATIONAL JOURNAL
OF CURRENT RESEARCH**

RESEARCH ARTICLE

RELATIONSHIP BETWEEN FAMILY SUPPORT AND ADHERENCE TO PHYSIOTHERAPY IN LOW BACK PAIN PATIENTS AT DR. PIRNGADI GENERAL HOSPITAL IN MEDAN

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ARTICLE INFO

Article History:

Received 19th April, 2019
Received in revised form
20th May, 2019
Accepted 25th June, 2019
Published online 31st July, 2019

Key Words:

Family Support, Adherence,
Physiotherapy, Low Back Pain.

ABSTRACT

Background: Low back pain is a pain syndrome occurring on the low back regions are the result of a variety of reasons. It is often experienced by those who work with the wrong posture. Based on data known to the high proportion of physiotherapy visits disobedience do physiotherapy in patients LBP (71.7%) in the General Hospital Pirngadi Medan year 2016. **Object:** To identify relationship between family support and adherence to physiotherapy in low back pain patients. **Methods:** the research used descriptive correlation quantitative with cross sectional approach. The instrument used questionnaires. Data were taken on 125 respondents with the randomly selected a simple (simple random sampling) and analyzed by Chi-square test, **Results:** The result showed ratio prevalence 95% CI family support between adherence to physiotherapy were 1,792 (1,031-3,114), and correlated with significantly $p=0.046$. **Conclusion:** There was a significant relationship between family support with adherence to physiotherapy.

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Citation: Anita Andriany, Erna Mutiara and Halinda Sari Lubis. 2019. "Relationship Between Family Support and Adherence to Physiotherapy in Low Back Pain Patients at Dr. Pirngadi General Hospital in Medan", *International Journal of Current Research*, 11, (07), 5502-5504.

INTRODUCTION

Low back pain prevalence (LBP) in the United States in one year ranged between 15-20% while the incidence based on new patient visits to doctors was 14.3% (Panduwinata, 2014). Hameed (2013) in India gained an LBP prevalence of 51%, then Sandhya (2015) in India had a prevalence of 74.2%. Himnikaiye et al (2012) in Nigeria obtained LBP prevalence of 78.1% while Yilmaz and Dedeli (2012) in Turkey obtained LBP prevalence of 34.3%. There is epidemiological data on LBP yet in Indonesia but it is estimated that the prevalence of around 40% is acute, namely men at 18.2% and women at 13.6%. Wulandari et al (2013) and (Purnamasari, 2010) cite the opinion of Ramadhani (2010) that incidents based on patient visits to several hospitals in Indonesia ranged from 3-17%. Kaur (2015) and Putri et al. (2014) argued that the 2007 Indonesian Nerve Specialist Association (PERDOSSI) found the number of LBP sufferers was 1,589 people (35.86%) of the total pain patient visits 4,456 visits (25%). LBP data got 7th place out of 25 causes of death in Indonesia in 1990-2010 (Global Burden of Disease, 2010). LBP patients' physiotherapy visits were 2,438 visits (43.86%) from all physiotherapy visits at the Dr. Pirngadi Hospital Medan in January-April 2016.

The number of patients who did physiotherapy at the Dr. Pirngadi Hospital Medan in January-April 2016 as many as 273 people (42.00%) of all patients who did physiotherapy at the Dr. Pirngadi Hospital Medan. The number of patients in August 2016 who took 6x physiotherapy were 43 people (28.29%) and patients who underwent physiotherapy <6x as many as 109 people (71.71%). Based on the high proportion of noncompliance with physiotherapy in LBP patients in Dr. Pirngadi Hospital Medan in 2016, a study will be conducted to identify family support with adherence to physiotherapy in LBP patients at Dr. Pirngadi Hospital Medan.

MATERIALS AND METHODS

Study design: This research used descriptive correlation quantitative with cross sectional approach. This study was conducted at Dr. Pirngadi Hospital Medan and the data had been collected from January to July 2016, using simple random sampling technique. The total respondents who followed the study were 125 respondents.

Instrument: Family support and adherence with physiotherapy were measured using questionnaire made by the researchers themselves.

The family support questionnaire had been tested with the result of validity and reliability ie 0.361 – 0.903. Adherence with physiotherapy questionnaire had been tested with the result of validity and reliability ie 0.361 – 0.874.

Data analysis: The relationship between variables examined with beivariate data analysis using chi-square test.

RESULTS

Table 1. show that the results of the family variables were found that out of 94 LBP patients who lacked family support there were 72 patients (76.6%) who did not comply with physiotherapy while 22 patients (23.4%) obediently did physiotherapy.

Table 1. Relationship Between Family Support and Adherence to Physiotherapy in Low Back Pain Patients in Dr. Pirngadi General Hospital in Medan (n = 125)

Variable	Adherence with physiotherapy				Amount		RP 95 % CI	P
	Not obedient		obedient		n	%		
	n	%	n	%				
Family Support								
Less supportive	72	76.6	22	23.4	94	100	1.792 (1.031-3.114)	0.046
Supportive	18	58.1	13	41.9	31	100		

The results of data processing were obtained from 31 LBP patients who received family support, there were 18 patients (58.1%) who did not comply with physiotherapy while 13 patients (41.9%) were obedient to doing physiotherapy. The results of statistical tests are known that the value of $p < 0.050$ so it can be concluded that there is a significant relationship between family support and compliance with physiotherapy. This means that there is a relationship between family support and adherence to physiotherapy in LBP patients in Dr. Hospital. Pirngadi Medan City in 2016. The value of RP was obtained at 1,792 with 95% CI (1,031-3,114) so that it could be interpreted that patients who received family support had 1,792 chances of compliance with physiotherapy compared to patients who received less support family.

DISCUSSION

Based on the research, it was found that family support was one of the determinants related to adherence to physiotherapy in LBP patients at Dr. Pirngadi Hospital. The results of the study showed that of 31 LBP patients who received family support there were 18 patients (58.1%) who did not obedient with physiotherapy and from 94 LBP patients who received less family support there were 72 patients (76.6%) not obediently doing physiotherapy. Chi square test showed $p < 0.050$. This is in line with the research of Roslina (2012) cited by Pratiwi et al (2014) arguing that there is a relationship between family support and compliance with return visits to health facilities. Family support is the attitude, action and family acceptance of patients who are sick. Families have an important role in making decisions to seek and adhere to treatment recommendations. People who lack support from their families have a risk of experiencing recurrence of pain. The family can be a very influential factor in determining the beliefs and values of individual health and can determine the treatment program received. Families also provide support and make decisions regarding the care of sick family members. The research results of Irnawati (2016) cited by Romadhon (2016) argue that not only is the patient's responsibility to achieve treatment success but it must be seen how other factors influence the behavior of patients in completing and adhering to their treatment.

Factors related to medication adherence are individual sufferers, social support, support from health workers and family support. Support from the family plays a role as a factor that can affect patient compliance in taking medication regularly. The presence and attitude of the closest person to the patient can affect the response to pain. Patients who experience pain often depend on family members or close friends to get support, assistance or protection. Although pain is still felt, the presence of the closest person can minimize feelings of loneliness and fear. Family support is very important to help patients recover to their original state and there is a relationship with the compliance of LBP patients for treatment (Chaira, 2016)

Conclusion

Based on the result of the study, there was a significant relationship between family support with adherence to physiotherapy at Dr. Pirngadi Hospital in Medan.

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