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APPLICATION OF BENSON RELAXATION TECHNIQUE TO REDUCE PAIN IN POST SECTIO CAESAREA : CASE STUDY

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ABSTRACT

Sectio caesarea is a surgical intervention performed to deliver a baby by making an incision through the abdominal wall. Patients who undergo this procedure commonly experience abdominal pain during the recovery period. This study aims to evaluate the effectiveness of Benson relaxation technique in reducing pain among post sectio caesarea patients. This case study utilizes a descriptive approach in providing specialized postpartum nursing care, incorporating interviews, observations, physical examinations, and analysis of medical records. In the first case, the patient's pain level was recorded as 8 prior to the application of Benson relaxation. After three consecutive days of the intervention, the pain level decreased to 3. Similarly, in the second case, the initial pain score was 8, which reduced to 5 following three days of Benson relaxation therapy. The use of Benson relaxation techniques over a period of three days proved effective in alleviating abdominal pain in patients post sectio caesarea.

Keywords : Sectio Caesarea, Pain, Benson Relaxation Technique

Introduction

Childbirth is the process of delivering a baby and the placenta through the birth canal. It can be classified into two main types: vaginal delivery and delivery via sectio caesarea. Vaginal birth occurs naturally through the birth canal, while a sectio caesarea involves a surgical procedure performed by medical personnel (Pamilangan, 2020).

Sectio caesarea is a medical intervention used to deliver a baby by making surgical incisions in the abdominal and uterine walls to safeguard the health of both mother and child. This procedure is indicated in various obstetric conditions such as fetal distress, transverse fetal position, premature rupture of membranes, umbilical cord entanglement, placenta previa, retained placenta, and placenta accreta. The frequency and success rate of cesarean deliveries have increased over time, though the procedure is still regarded as a last resort (Purba, 2021).

According to the World Health Organization (WHO), the global average cesarean section rate is estimated at 5–15% per 1,000 live births. In public hospitals, the rate is around 11%, while in private hospitals it exceeds 30%. Between

2017 and 2018, cesarean births worldwide reached 110,000. Notably, the prevalence rose by 46% in China and 25% across Asia, Europe, and Latin America (WHO, 2018).

Based on Indonesia's national health survey data, childbirth among women aged 10–54 reached 78.73%, with 17.6% of deliveries performed by cesarean section. In Jakarta, this rate was 31.1%, whereas Papua recorded the lowest at 6.7% (Riskesdas, 2018).

Post sectio caesarea complications are more prevalent compared to vaginal deliveries. Common issues include pain at the surgical incision site, which, if unmanaged, may lead to decreased functional capacity, reduced abdominal muscle elasticity, weakened pelvic floor muscles, post-operative wound infection, bleeding, bladder injury, swelling of the lower limbs, and breastfeeding challenges. Patients typically report pain at the incision site due to surgical trauma to the abdominal and uterine walls (Pratiwi, 2012). On the first day post-surgery, mothers often experience intense pain at the incision site, resulting from tissue damage to the abdominal wall and uterus. Pain intensity varies between individuals and is often accompanied by uterine contractions as the organ returns to its pre-pregnancy size (Warsono, Fahmi, & Irantono, 2019).

The pain experienced after post sectio caesarea acts as a physiological stressor that may trigger biological and behavioral responses. Physically, this can manifest through changes in facial expression, pulse, respiration, body temperature, and in severe cases, cardiovascular collapse and shock. Psychologically, the pain may increase stress levels, suppress immune function,

and hinder healing, potentially leading to self-harming behavior (Haflah & Safitri, 2022). If cesarean pain is not effectively managed, it can elevate heart rate and blood pressure, cause breathing difficulties, impair gastrointestinal motility leading to nausea and vomiting, and limit physical movement due to muscle weakness. This, in turn, disrupts mother-infant bonding, delays early breastfeeding initiation, and reduces maternal responsiveness, ultimately hindering breastfeeding success (Anjar, 2017).

Among the non-pharmacological nursing interventions to alleviate post sectio caesarea pain is Benson's relaxation technique. This method is simple and effective, aiming to reduce pain perception in postoperative patients. According to Morita, Kriscilli, Amelia, and Putri (2020), Benson's relaxation integrates individual beliefs to promote internal comfort, redirecting attention from pain by influencing the hypothalamus, thereby reducing pain sensation. Additionally, it helps lower stress and anxiety by teaching patients how to perform relaxation exercises, contributing to improved overall health and well-being.

Research by Sholekha (2023) demonstrated the effectiveness of Benson's

relaxation in reducing pain among cesarean patients. In her study, two participants reported a reduction in pain scores-from 8 to 7 and from 6 to 5, respectively-after practicing the technique for three consecutive days. Both participants eventually experienced

mild pain levels (score 1-3). This supports the use of Benson's relaxation as a non-drug alternative to manage post-surgical discomfort. Similarly, Warsono (2019) found that after applying this technique to 30 patients, 25 (83%) reported moderate pain and 5 (16%) experienced mild pain, confirming its beneficial role in lowering pain intensity following a C-section.

Nurses, as the healthcare providers most consistently present with patients during their hospital stay, play a vital role in supporting post-cesarean recovery. Their responsibilities include offering empathetic care, fostering good communication with patients and their families, ensuring patient satisfaction, and demonstrating a caring attitude. By being kind, respectful, and attentive, nurses help create a healing environment that promotes patient comfort and emotional security.

Methods

This final scientific paper was developed using both primary and secondary data sources. Primary sources refer to information or data obtained directly from the participants, in this case, patients or respondents involved in the study (nurses collecting data directly). In contrast, secondary sources consist of data acquired indirectly, such as from medical records or information relayed by third parties (Notoatmodjo, 2012). This case study involved two patients who shared a common nursing diagnosis: post sectio caesarea pain.

Participants selected for this study met the following criteria: they were in the second day post sectio caesarea, provided informed consent by signing a consent form, experienced post operative pain with a pain score lower than 9, were multiparous women aged between 17 and 45 years, and were willing to participate. Patients were excluded if they experienced post sectio caesarea complications, had a vaginal delivery, had altered consciousness, refused participation, were deceased, or experienced severe pain with a score at the highest end of the pain scale.

The primary objective of this case study was to explore the effectiveness of Benson relaxation technique in reducing post sectio caesarea pain, applying a comprehensive nursing care process that includes assessment, nursing diagnosis, intervention, implementation and evaluation stages (Potter & Perry, 2017).

Instruments used in this study included postpartum maternal assessment sheets, educational leaflets, informed consent, forms, observation checklists, a standard nursing equipment kit, and a standar operating procedure (SOP) sheet outlining the Benson relaxation technique. Data collection methods encompassed patient interviews, direct observations, and

documentation review. Data were analyzed using descriptive analysis, which involved examining the results from interviews, observations, and documentation after the application of the Benson relaxation method.

Comparative analysis was conducted on the data gathered from both respondents, and the findings were then integrated into the nursing process, covering assessment, diagnosis, planning, implementation, and evaluation (Sugiyono, 2019).

Results

After the implementation of Benson relaxation therapy over a three-day period, Patient 1 showed a partial resolution of acute pain symptoms. Observable indicators such as grimacing, restlessness, and expressions of discomfort were reduced. Following three consecutive days of applying the Benson relaxation technique, the patient's pain level decreased significantly from a score of 8 (severe pain) to a score of 3 (mild pain). Similarly, Patient 2 experienced a partial improvement in acute pain, as evidenced by reduced grimacing, decreased discomfort, and less restlessness. The pain intensity dropped from a score of 8 (severe pain) to 5 (moderate pain) after the intervention was administered for three days (Sholekhah, 2023).

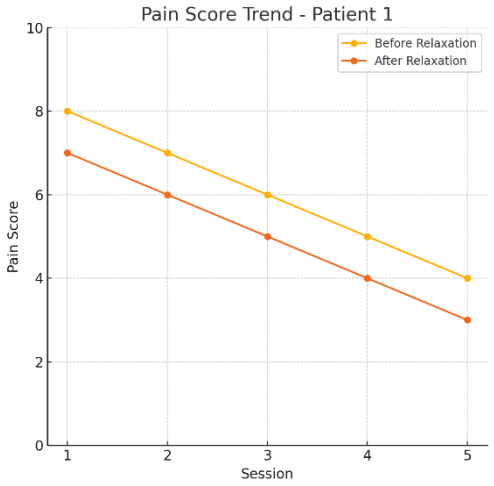
Discussion

Evaluation of Nursing Interventions for Patient 1:

On the first day, the nursing evaluation revealed that the problem of acute pain had not yet been resolved, as indicated by vital signs within normal limits but a pain scale of 8. The patient still showed signs of distress, including facial grimacing, difficulty moving, and limited mobility. This evaluation was conducted after the initial application of the Benson relaxation technique.

On the second day, Benson relaxation was administered twice. The evaluation indicated that acute pain was partially alleviated. The patient's vital signs remained stable, and there was a noticeable decrease in pain intensity. Pain during movement was reduced, and the patient appeared calmer, with fewer signs of discomfort. A pain scale of 7 was recorded during the morning assessment at 09:00, and the afternoon assessment at 15:05 showed further improvement with a pain scale of 5. These changes were supported by subjective reports, objective observations, and numerical pain scale evaluations.

On the third day, the Benson technique was again performed twice. Acute pain was partially resolved, as reflected in stable vital signs, absence of allergic reactions to medications, reduced pain, and increased patient comfort. The patient no longer experienced pain that interfered with movement and appeared relaxed. Morning evaluation at 11:08 showed a pain score of 3, and the same score was noted during the afternoon evaluation at 15:01, indicating mild pain. A clear reduction in pain levels was observed across the three-day period (Sholekhah, 2023).



Evaluation of Nursing Interventions for Patient 2:

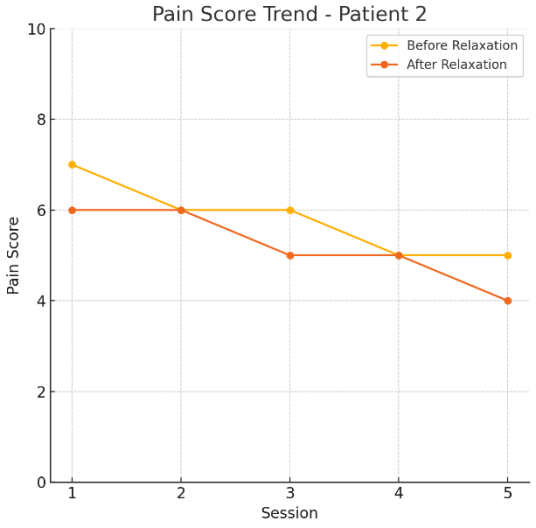
For Patient 2, evaluation on the first day showed that acute pain was partially managed, with vital signs within the normal range and a slight reduction in pain symptoms. The patient's grimacing had decreased slightly, and they reported feeling calmer. A pain score of 7 was recorded during the initial evaluation. Following the first session of Benson relaxation, the patient reported some improvement in post-surgical wound pain.

On the second day, Benson relaxation was administered twice. The patient's condition showed further improvement, with vital signs stable, reduced pain symptoms, less grimacing, and increased comfort. There were no signs of drug allergies. The morning evaluation at 09:06 showed a pain score of 7, while the afternoon evaluation at 15:10 showed a decreased pain score of 6. Both subjective feedback and objective observations confirmed this change.

By the third day, after two more sessions of Benson relaxation, the patient's acute pain had partially resolved. The vital signs remained normal, the pain significantly reduced, and the patient no longer displayed facial expressions of discomfort. The patient reported feeling calm and comfortable, and no allergic reactions to medications were observed. A morning assessment at 08:12 recorded a pain score of 5, which remained the same during the midday evaluation at 12:06. This confirmed a consistent improvement, as reflected by a moderate pain level on the numeric pain scale (Sholekhah, 2023).

Over the course of three days, nursing interventions using the Benson relaxation technique demonstrated positive outcomes

for both patients, as evidenced by a gradual decline in pain intensity. This aligns with the findings of Sholekhah (2023), who confirmed that the Benson relaxation method is effective in reducing post sectio caesarea pain levels.



Conclusion

The author concluded that the pain management intervention for post sectio caesarea patients had been successfully implemented over a three day period through the use of Benson relaxation techniques. By the third day, Patient 1 showed partial improvement in acute pain, as indicated by a reduction in facial grimacing, restlessness, and pain intensity.

After receiving Benson relaxation therapy three times over 24 hours, the patient's pain scale decreased from 8 to 3. Similarly, Patient 2 also demonstrated partial relief from acute pain, with reductions in grimacing, discomfort, and agitation, accompanied by a decrease in pain intensity from 8 to 5, indicating moderate pain (Sholekhah, 2023).

The application of Benson relaxation technique in post sectio caesarea care has demonstrated a significant impact on pain reduction, highlighting its value in nursing practice. This method, which combines deep breathing, muscle relaxation, and focusing on a calming word or phrase, activates the parasympathetic nervous system and counteracts the stress response that typically exacerbates pain perception. In mothers who undergo cesarean surgery, postoperative pain is not only a physical burden but also a psychological one, which can hinder early mobilization, bonding with the baby, and the initiation of breastfeeding.

Benson relaxation serves as a non-pharmacological intervention that empowers patients to manage their discomfort independently, aligning with the holistic approach of nursing care. However, its effectiveness may be influenced by factors such as individual pain thresholds, anxiety levels, and the patient's commitment to the relaxation process. Nurses play a crucial role in guiding and motivating patients to practice this technique consistently, integrating it as a complementary strategy alongside pharmacological management.

Incorporating Benson relaxation into standard postoperative nursing care protocols may reduce reliance on analgesics, minimize side effects, and enhance overall maternal recovery, thereby improving the quality of nursing care for post sectio caesarea patients.

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