

ELDERLY ANXIETY WITH HYPERTENSION ON QUALITY OF LIFE

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ABSTRACT

Due to changes in the circulatory system, hypertension is still a health issue that affects the elderly and, if untreated, can interfere with the operation of other organs. Thus, the problem of elderly people experiencing anxiety feelings is raised. The purpose of this study is to examine the association between hypertension survivors' levels of anxiety and their overall quality of life. this quantitative research style. A questionnaire was employed as the research tool. 40 older people with hypertension participated in the study. The study was carried out in the Limbangan District of Kendal, Central Java, from May to August of 2021. Rank Spearman test analysis is the technique employed. The degree of anxiety and the quality of life of older people with hypertension are correlated. According to the results of the Spearman Rank statistical test analysis, which yielded a p-value of 0.05 and an r-value -0.602, there is a significant negative association between the two variables, meaning that the quality of life decreases as anxiety levels rise. In Limbangan Village, Kendal Regency, there is a correlation between senior people's anxiety levels and their quality of life.

Keywords: Anxiety, Elderly, Hypertension, Quality of life

INTRODUCTION

Every cycle of human life has an elderly stage or process. (Puspawati & Rekawati, 2017) state that a person must be 60 years of age or older to be considered older. According to Law No. 13 of 1998 on the welfare of the elderly, someone is considered elderly if they are 60 years of age or older. (Dwi Retnaningsih, 2018) According to Globe Health Organization (WHO) predictions, there will be 1.2 billion elderly people in the world by 2025, and that number will continue to rise to 2 billion by 2050. According to the WHO, half of the world's senior people will live in Asia by 2025, with 75% of the elderly population living in emerging nations. There are 23.66 million senior citizens living in Indonesia (9.03%). According to projections, there will be 27.08 million senior people in 2020, 33.69 million in 2025, 40.95 million in 2030, and 48.19 million in 2035. (Friska et al., 2020).

Changes in the cardiovascular system in the elderly, such as hypertension because the vessels that were previously flexible and elastic will harden and stiffen, so that the blood vessels are unable to supply the needs of blood flow to every organ (Kurniadi & Nurrahmani, 2015). Hypertension is a condition when the blood pressure in the blood vessels is chronically elevated. This may occur because the heart has to work harder to pump blood in order to supply the body with the nutrients and oxygen it requires. According to data on hypertension cases provided by the World Health Organization, there are 1.13 billion hypertensive individuals worldwide. This translates to a diagnosis of hypertension in 1 out of 3 individuals, only 36.8% of whom are taking medication. According to estimates, there will be 1.5 billion people with hypertension worldwide by 2025. Additionally, 10.44 million people are predicted to die each year as a result of complications related to hypertension (Purwono et al., 2020).

Based on the findings (Riskeddas, 2018), it can be concluded that 34.1% of Indonesia's 260 million people have hypertension. Additionally, 37.57% of people in Central Java Province have hypertension. Women (40.17%) have a higher prevalence of hypertension than men (34.83%). The elderly may also experience a variety of social changes, such as an economic downturn, the loss of family members or close friends, the loss of a job, and the incapacity to take part in communal activities. The aged are more susceptible to mental illnesses as a result, particularly depression (Nareswari, 2021).

Hypertension, also referred to as high blood pressure, is a disorder in which the blood pressure rises above the healthy range of 120/80 mmHg. According to WHO (World Health Organization), a blood pressure reading of less than 130/85 mmHg is considered normal, and a reading of more than 140/90 mmHg is classified as hypertension (Tarigan et al., 2018). The reason of hypertension in the elderly is the hardening and stiffening of blood vessels, which prevents the blood arteries from providing the blood flow that each organ requires (Kurniadi & Nurrahmani, 2015).

the effects of high blood pressure on social, psychological, and physical aspects of quality of life (Suardana et al., 2010). In the end, having this illness can be uncomfortable and have an impact on a person's quality of life.

Patients with hypertension who have a decline in their quality of life experience challenges with their physical, psychological, and social connections (such as being immobile and experiencing headaches and vomiting) (Hasana & Harfe'i, 2019).

Anxiety is a generalized unpleasant sensation brought on by discomfort or fear and is followed by a reaction (the cause is not specific or unknown to the individual). Anxiety is a natural disorder characterized by intense, persistent feelings of fear or worry that do not interfere with one's ability to assess reality (reality testing abilities), with one's personality remaining intact or not experiencing personal fracture (splitting personality), and with one's behavior remaining within acceptable bounds. -normal ranges (Sohat et al., 2016).

(Azizah & Hartanti, 2016) define health-related quality of life as the emotional reaction of patients to social, emotional, work, and family activities, a sense of happiness, a match between expectations and actual reality, the satisfaction of performing physical, social, and emotional functions, as well as in the capacity to socialize with others. Seniors with hypertension may experience a lower quality of life due to both personal and environmental causes. Age, gender, education, marital status, occupation, length of hypertension symptoms, and frequency of therapy are all personal aspects that can impact an elderly person's quality of life (Chendra, R., Misnaniarti., & Mohammad, 2020).

RESEARCH METHOD

Residents of RW 03 Limbangan Village, Limbangan District, Kendal Regency participated in this research, which was done in Limbangan Village, Limbangan District, and Kendal Regency. For this study, a sample of 40 older participants with a history of hypertension who agreed to participate as respondents was used. The senior respondents with hypertension who are willing to participate in the study and who are in good control and cooperation meet inclusion criteria. Additionally, there are criteria for this study's exclusions, including individuals with communication impairments. Utilizing the questionnaire method as a research instrument, the research is quantitative in nature. The anxiety and depression instrument (HADS) employed in this study is a commonly used tool, and it was also utilized in Roudhotul Auliyak's study, "The Relationship of Anxiety and Depression to Fatigue in Breast Cancer Patients Undergoing Chemotherapy," hence the researcher did not assess its validity. Chasanah (2017) tested the validity of the quality of life questionnaire variable with 30 respondents. The validity test results showed that the value of rcount ranged from 0.3730 to 0.8180. With 30 respondents in the samples and a significance threshold of 5%, the value of rtable is 0.3610. All of the questions on the quality of life questionnaire are valid, as shown by the comparison of thecalculated being higher than the rtable.. A correlational study strategy was employed to ascertain the link between one variable and another. In this study, cross-sectional research is used, which can be completed in a very short amount of time (Notoadmojo, 2018).

RESULTS

According to the report's results based on the characteristics of the respondents by gender, out of 40 respondents, 25 of them were female and 15 were male. According to their age, 35.0% of respondents are above 71 years old, 17.5% are between 66 and 70, and 47.5% are between 60 and 65. Table 1 shows that 20% and 80% of respondents who do not attend school have completed elementary school. This information is based on the respondents' education levels.

Table 1.
 Characteristics of Respondents

Gender	Total	Percentage (%)
Male	15	37.5
Female	25	62.5
Total	40	100%
Age Category	Total	Percentage (%)
60-65 Years	19	47.5
66-70 Years	7	17.5
>71 Years	14	35.0
Total	40	100%
Education	Total	Percentage (%)
Not in School	8	20
Graduated from Elementary School	32	80
Graduated from Junior High School	0	0
Graduated from High School	0	0
Total	40	100%

Table 2.
 Anxiety Level

Anxiety	Total	Percentage (%)
Normal	0	0
Mild Anxiety	31	77.5
Moderate Anxiety	9	22.5
Severe Anxiety	0	0
Total	40	100

In table 2 shows the results that most of the 40 respondents had mild anxiety, namely 77.5% of respondents, and 22.5% of other respondents had moderate anxiety.

Table 3.
 Quality of Life of Elderly

Quality of Life	Total	Percentage (%)
Good	0	0
Enough	31	77.5
Less Good	9	22.5
Total	40	100

In table 3 shows that of the 40 respondents, most of the respondents have sufficient quality of life, namely 77.5% of respondents and 22.5% of respondents have a poor quality of life.

Table 4.
 Relationship of Anxiety to Quality of Life

Anxiety	Quality of Life for Elderly Patients with Hypertension								p value	r	
	Good		Fairly		Poor		Total				
	F	%	F	%	F	%	F	%			
Normal	0	0	0	0	0	0	0	0	0	0.000	-0.602
Mild	0	0	31	77.5	0	0	31	77.5			
Moderate	0	0	0	0	9	22.5	9	22.5			
Severe	0	0	0	0	0	0	0	0			
Total	0	0	31	77.5	9	22.5	40	100			

It was discovered that there were 31 respondents (77.5%) who had mild anxiety and a good quality of life, and there were 9 respondents (22.5%) who had moderate anxiety and a bad quality of life. A p value of 0.000 (p value 0.005) was obtained from the Rank-Spearman statistical test regarding the impact of anxiety on the quality of life of elderly people with hypertension in RW 03, Limbangan Village. This means that H_a is accepted and H_0 is rejected, indicating that there is a relationship between anxiety and elderly sufferers' quality of life. hypertension in RW 03 Limbangan Village and found a value of closeness of relationship ($r = -0.602$), indicating that the correlation is strong in a negative direction and that the quality of life is negatively correlated with anxiety and depression.

DISCUSSION

Characteristics of Respondents

Based on the gender of the 40 respondents, it can be concluded that 25 respondents (62.5%) are female on average, and 15 respondents (37.5%) are male. According to this study, older women are more likely than males to acquire hypertension. The findings of this survey are consistent with studies by (Putri, Nabilla Sholikhah, 2021), which found that there are more women than men in Indonesia. The findings of this study are also consistent with studies from (Nasrani & Susi, 2015), which explains that women experience a higher incidence of hypertension because their levels of the hormone estrogen decline as they age, making them more vulnerable to the condition.

According to the study's findings, there were 19 respondents aged 60–65 (47.5%), 7 respondents aged 66–70 (27.5%), and 14 respondents aged >71 (35%) respectively. It reveals that the majority of responders are between the

ages of 60 and 65. The study's findings are consistent with (Suhadak et al., 2011), which found that as people age, their chance of developing hypertension increases. Although hypertension can affect anyone at any age, it is most prevalent in those between the ages of 60 and 74 (46.5%). Age-related small increases in blood pressure are typical. Changes in the heart, blood arteries, and hormones are to blame for this. However, if additional factors are present at the same time as these changes, hypertension may result.

The findings of this study are also consistent with research (Bin Mohd Arifin & Weta, 2016), which claims that hypertension prevalence in Indonesia ranges from 29% in people aged 25 to 44 to 51% in people aged 45 to 64 and 65% in those aged 65 and beyond. These statistics demonstrate that people over 65 have a higher risk of having hypertension. This occurs as a result of the big arteries losing their elasticity and stiffening with age, forcing blood to flow through narrower blood channels than usual with each heartbeat, raising blood pressure. (Retnaningsih & Larasati, 2021).

According to the study's findings, 8 respondents (20%) did not complete primary school, whereas 32 respondents (80%) did. These findings indicate that the degree of education plays a significant role in solving the issue, regardless of its level. The findings of this study are consistent with studies (Wahyuningsih & Priyono, 2020), which contends that anxiety levels decrease with increasing educational attainment. The main element influencing how anxious an elderly person is is their level of education.

The findings of this study are consistent with research from (Bin Mohd Arifin & Weta, 2016), which shows that the majority of senior persons had a low level of education, with 34 of 50 elderly people (or 68%) having completed elementary school (SD). The ability to absorb information is greatly influenced by education. A person will learn knowledge more readily the more schooling they have. People with higher education levels have a lower tendency than those with lower education levels to acquire hypertension. Education and lifestyle, stress, and nutritional status are strongly correlated. According to (Notoadmojo, 2018), a person's education level will impact whether or not they find it easy to understand the knowledge they learn because in general, the greater a person's education, the better his knowledge is.

According to the study's findings in RW 03 Limbangan Village, 31 of the 40 respondents (or 77.5%) reported mild anxiety, and 9 respondents (or 22.5%) had moderate anxiety. This study is consistent with research (Putri, Nabilla Sholikhah, 2021) in which moderate anxiety (11.5%) was experienced by moderately 85 respondents (88.5%). Aging elements and the body's aging process contribute to anxiety. The result is a weakening of the body, making it harder for the old to meet their needs as time goes on. The elderly are concerned about this powerlessness the next day.

The findings of this study are also consistent with previous research (Wulandari, 2019), concluding that it demonstrates that moderate anxiety has the highest distribution, with a total of 53.6%. In this case, moderate anxiety can be interpreted as the fact that more than half of all elderly respondents are neither overly concerned about the situation that is affecting them nor do they feel sufficiently at ease with it at this time due to the hypertension they experience, so that their activities are only mildly disturbed.

Aging-related variables and an aging body are the root causes of anxiety in the elderly. The result is a weakening of the body, making it harder for the old to meet their needs as time goes on. The elderly are concerned about this powerlessness the next day.

The findings revealed that 31 respondents, or 77.5% of the sample, had a poor or mediocre quality of life due to a history of hypertension and were still able to perform some daily tasks independently even while other activities, like traveling, still required assistance. Meaning that they believe their current state of physical, psychological, interpersonal, and environmental health is moderate.

Quality of life is defined as an individual's assessment of their position in life and their relationship to objectives, expectations, standards that have been set, and their concerns, according to (Suryani, 2016). The four dimensions of physical health, psychological well-being, social relationships, and environmental interactions are used to assess four different aspects of quality of life.

31 respondents in RW 03 Limbangan Village who participated in the study with 40 participants reported having minor anxiety, according to the findings. Nine responders in total experience moderate anxiety. Nine respondents out of 31 who were asked about it reported having a low quality of life. The test conclusion was H_0 was rejected based on the findings of this study in accordance with (Suryani, 2016) utilizing the Spearman rank correlation statistical test. A correlation value of -0.269 was obtained with a significance value (p-value) of 0.041, which was smaller than 0.05. It is established that there is a correlation between the elderly's quality of life at the Panti Wredha Darma Bhakti Pajang Surakarta and their level of anxiety based on the test decision, which states that H_0 is refused. The correlation coefficient value, which is negative (-0.269), indicates that the relationship between anxiety and quality of life is inverse, i.e., that it decreases as anxiety increases.

The findings of this study are also consistent with (Wulandari, 2019), who came to the conclusion that a significant value of 0.001 is equal to 0.05 and that there is a relationship between anxiety levels and quality of life in

the elderly with chronic diseases in the Sangkrah Health Center Work Area, with the elderly's quality of life decreasing as anxiety levels rise. The two variables have a -0.551 correlation, indicating a moderate link between the elderly's quality of life and their level of worry.

CONCLUSIONS AND RECOMMENDATIONS

The findings revealed a connection between anxiety and the standard of living for elderly hypertensive persons in Limbangan Kendal Village. With this study, it is hoped to educate the public about the value of the elderly's quality of life, assist nursing institutions in creating learning materials and methods about the relationship between anxiety and depression and quality of life in elderly people with hypertension, and be used as evaluation material for elderly cadres in RW 03 Limbangan Village, Limbangan District.

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