

THE EFFECT OF BRANDT DAROFF THERAPY IN REDUCING THE INCIDENT OF VERTIGO

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Abstract

Background: Vertigo is a term that comes from the Latin vertere which means turning. Often accompanied by feelings of dizziness, staggering, floating, the world around him spinning. The Brandt Daroff method is a form of physical therapy or vestibular physical exercises to treat vestibular disorders such as vertigo. Objective: This research is to provide nursing care to patients experiencing vertigo by applying Brandt Daroff therapy at Koja Regional Hospital, Jakarta. Methodology: the research used was descriptive research with a case study design held in March 2024. Results: research on 10 patients who experienced acute pain related to intracranial enhancement showed a reduction in the pain scale with non-pharmacological Brandt Daroff therapy techniques. This can be successful because of the patient's willingness to carry out routine and disciplined exercises according to the direction of the researcher. Conclusion: Brandt Daroff exercise can be done routinely independently for patients who have or have a history of vertigo to reduce post-symptom pain and discomfort. Suggestion: this research can be applied to the general public, both for those who have a history or not so that it can be used as a treatment and really needs to be socialized

Keywords: Vertigo, Pain, Daroff Brand Therapy

1. INTRODUCTION

Vertigo is a form of headache in which sufferers experience the perception of inappropriate movement (usually spinning or floating movements) caused by disorders of the vestibular system. Complaints of vertigo felt by sufferers include dizziness, a feeling of spinning, nausea and vomiting, sweating and the inability to maintain body balance and can result in difficulty standing or walking.

In general, vertigo is caused by stress, tired eyes, and certain foods/drinks. Apart from that, vertigo can be functional and no connection with changes in organs in the brain. The brain itself is actually not sensitive to pain. This means that in general vertigo is not caused by damage. Vertigo is a disease that attacks the body's balance system. Because the body's balance system is attacked, vertigo sufferers often complain of several things such as unbearable nausea, headaches and spinning sensations, feeling so weak that they have no energy and ultimately find it very difficult to set foot on the ground. Balance disorders are the symptom most often complained by vertigo sufferers. Apart from medical treatment, vertigo also requires physical exercise which can reduce or overcome balance disorders for sufferers.

The Brandt Daroff method is a form of physical therapy or vestibular physical exercise to treat vestibular disorders such as vertigo. Brandt Daroff exercise has advantages or advantages over other physical therapies or pharmacological therapies, namely that they can speed up recovery from vertigo and prevent recurrence without having to take medication. Brandt Daroff's exercises aim to adapt patients to balance disorders in vertigo sufferers.

2. METHODOLOGY

The design that the author used in preparing this research is through a case study with the aim of exploring the problem of vertigo with pain by carrying out Brandt Daroff therapy. The author took 10 respondents with the same medical diagnosis and nursing problem. The location used in this research is Koja Regional Hospital, North of Jakarta. Data collection were through interviews, observation, physical examination and documentation. Validity tests are carried out directly on respondents as the main data source. The data analysis process evaluates the extent of the success of the nursing actions that have been taken in reducing vertigo pain with Brandt Daroff Therapy. Research ethics uses informed consent, anonymity and confidentiality

3. RESULTS

3.1 Nursing care for patients with vertigo

3.1.1 Assessment

The assessment process was carried out on all respondents starting from basic data such as name, age, gender, ethnicity, marital status, education and employment. Followed by collecting nursing data in the form of current, past, psychosocial and spiritual health history, daily habit patterns (eating, bathing and elimination). Then a physical examination was done directly on the respondent to collect direct data that supported the vertigo problem. The results of the studies carried out on respondents were strengthened by the results of supporting examinations (laboratory). Data collection on pharmacological management was also used as supporting data in research by the author.

3.1.2 Nursing Diagnosis

From the results of the assessment carried out on the respondents, nursing diagnoses were obtained, namely pain related to increased intracranial pressure, changes in nutrition related to inadequate intake and sleep disturbance related to physiology.

3.1.3 Nursing Intervention

The general nursing plan has been done and adjusted by the author and has been set at 3x24 hours to make it easier to carry out evaluations and also in accordance with the time for providing nursing care.

3.1.4 Nursing Implementation

In general, the priority nursing action for the nursing diagnosis raised is pain, which can be carried out in accordance with the plan that has been prepared, then adjusted to the condition of the respondent in the field. Where in the implementation the researcher collaborated with the room nurse in carrying out nursing actions. Supporting factors for the implementation of nursing are good cooperation between the respondent, the respondent's family, and the room nurse in carrying out nursing actions and also adequate room facilities.

3.1.5 Nursing Evaluation

The evaluation carried out by the author was based on the condition of the respondents and was made according to the problems in the evaluation, namely by using SOAP (Subjective, Objective, Analysis and Planning). After carrying out the Brandt Daroff exercise with a frequency of 1 time a day for 30 seconds, the respondents used in the research responded that the respondents were able to carry out the Brandt Daroff exercise independently, dizziness had decreased and the pain scale had decreased. The supporting factor in the nursing evaluation is that the respondents are very cooperative, with increased knowledge about correct Brandt Daroff exercises and patient discipline so that they can reduce pain due to vertigo.

4. CONCLUSIONS

Vertigo is a neurological disease that can make sufferers experience dizziness so that their surroundings spin. In the process of assessing the signs and symptoms that most often appear is headache like spinning. The examination carried out is to do a CT scan of the head to find out whether a person has vertigo or not. In the formulation of the nursing diagnosis is Acute Pain Associated with Intracranial Increase. The nursing action planning stage is prepared based on problems found in the field. The implementation of nursing actions can be carried out based on plans that have been prepared and determined, the actions are adjusted to the circumstances or condition of the respondent.

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6. REFERENCES

- 1) Andarmoyo, S. (2013). Pain Nursing Concepts and Processes. Yogyakarta: Ruzz Media.
- 2) Apriyani, S. (2017). The Influence of Service Quality on Consumer Satisfaction. Sidoarjo.
- 3) Dewanto, G. (2015). Practical Guide to Diagnosis & Management of Nervous Diseases. Jakarta.
- 4) Gunawan, I. (2017). Qualitative research methods Theory and Practice. Jakarta: Bumi Literacy.
- 5) Handayani, S. (2015). The Effect of Early Mobilization on Pain Intensity. Surakarta.
- 6) Herlina, A. (2017). The Effectiveness of Brandt Dahe reroff Exercises. Jakarta: Medical Journal.
- 7) Indonesian Ministry of Health. (2017). Indonesian Ministry of Health Data and Information Center Situation of Short Toddlers. Jakarta: Infodation.
- 8) Kusumastuti, R., & Sutarni, S. (2018). Peripheral Central Vertigo Syndrome As a Clinical Manifestation. Jakarta: Medical Scientific Periodical Duta Wacana.
- 9) Laksmidewi, & et al. (2016). Bali Neurology Update. Denpasar: Udayana University.
- 10) Novitasari, K. (2015). Pain Assessment. Jakarta: Publishing House.
- 11) Nursalam. (2017). Nursing Science Research Methods. Jakarta: Salemba Medika.

- 12) PPNI. (2016). Indonesian Nursing Diagnosis Standards. Jakarta: Indonesian Nurses Association.
- 13) Prince, S. A, W. (2013). Pathophysiology Clinical Concepts Disease Processes. Jakarta: EGC.
- 14) Pulungan, P. (2018). Relationship between Peripheral Vertigo and Sleep Quality. Yogyakarta.
- 15) Sherwood, H. (2015). Human Physiology From Cells to Systems. Jakarta: EGC.
- 16) Sumarliyah, & et al. (2011). The Effect of Vertigo Exercises on Body Balance. Surabaya: Journal of Health Research.
- 17) Sutarni S., d. (2019). Vertigo Potpourri. Yogyakarta.
- 18) Sutarni, d. (2018). Vertigo Spice Flower. Yogyakarta Tarwonto. (2012). Medical Surgical Nursing for Endocrine System Disorders. Jakarta: Trans Info Medika.
- 19) Tetty, S. (2015). Concepts and Management of Pain. Jakarta: EGC.
- 20) Triyanti, N. (2018). The Effect of Brandt Daroff Physical Therapy on Vertigo. Pasuruan: Journal of Applied Nursing.
- 21) Wahyudi, B. (2012). Pain Source Management. Bandung: Sulista.