



Effectiveness of Guided Imagery Technique on pain among terminally ill Patients at selected Hospitals of Jaipur

1Ph.D. Scholar
2Professor cum Principal Geetanjali Nursing College, Udaipur

Terminal illness is an incurable disease that cannot be adequately treated. Pain at terminal illness is significant such as cancer, late HIV disease, and degenerative diseases. The aim of study to evaluate the effectiveness of guided imagery technique regarding pain, among terminally ill patients. A quantitative experimental research approach with Quasi-experimental, non-equivalent control group design was used with 210 terminally ill patients (105 in experimental groups and 105 in control group) to evaluate the effectiveness of guided imagery technique regarding pain. Consecutive sampling technique was used. A socio-demographic data, pain assessment scale, was developed by the researcher to evaluate pain, among terminally ill patients. Researcher used Guided imagery technique as intervention for study. The guided imagery technique was found effective to reduce pain. In pain experimental group pre-test mean ± S.D was 5.68 ± 2.53, in follow up mean ± S.D was 1.94 ±1.36, mean difference was -3.7, t= 13.34, p=<.01, Significant, whereas in c

03-Jun-2022, Manuscript No. jabt-22-67074; 05-Jun-2022, PreQC No. jabt-22-67074 (PQ); 19-Jun-2022, QC No. jabt-22-67074; 23-Jun-2022, Manuscript No. jabt-22-67074 (R); 30-Jun-2022, DOI: 10.4172/2155-9872.1000465

Bashir J, Goswami YP (2022) Effectiveness of Guided Imagery Technique on Pain among terminally ill Patients at Selected Hospitals of Jaipur; J Anal Bioanal Tech

2022 Bashir J, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

with terminal illness. Surveys of adult cancer patients with advanced disease—often performed in a hospice or palliative care setting indicate that the prevalence of pain ranges from 50% to 90%.16 It is observed that 40-50% of those with pain from cancer report it to be severe while 25-30% describe it to be very severe [5].

ere are many pharmacological and non-pharmacological methods

terminally ill patients

effectiveness of guided imagery technique among terminally ill patients admitted in selected hospitals

the association of Pain, with selected demographic characteristics among terminally ill patients admitted in selected hospitals at

the 20th century incurable disease that cannot be cured or controlled and is expected to result in the death of the patient. Terminal patients is a rough estimate based on previous data and does not

terminal illness is significant such as cancer, late HIV disease, and degenerative diseases; most people equate pain at the end of life

**Aims and Objectives**

To evaluate the effectiveness of guided imagery technique regarding pain, among terminally ill patients.

**Hypotheses**

H<sub>0</sub>1- There is no statically significant relationship between the obtained score of pain, among terminally ill patients admitted at selected hospitals in Jaipur.

H<sub>0</sub>2- There is no statically significant relationship between effect of guided imagery technique and score obtained on level of pain, among terminally ill patients admitted at selected hospitals in Jaipur.

H<sub>0</sub>3- There is no statically significant relationship between pre-test score obtained on level of pain, with socio demographic variables among terminally ill patients admitted at selected hospital in Jaipur.

**Research Design**

The study was conducted in a descriptive and comparative manner. It was a non-experimental study. The study was carried out at 3 selected hospitals of Jaipur.

Section-A: Prevalence of terminal illness

Section-B: Pain in terminal illness

Section-C: Guided Imagery Technique on terminal illness

**Materials and Methods**

A quantitative experimental research approach with Quasi-experimental, non-equivalent control group design was used which help the researcher to evaluate the effectiveness of guided imagery technique regarding pain. 216 terminally ill patients were selected with Consecutive sampling technique. The researcher consider three type of variable under study -Dependent Variable, Independent Variable, Attributed variable. The study was carried out at 3 selected hospitals of Jaipur. A socio-demographic data, pain assessment scale, was developed by the researcher to evaluate pain, among terminally ill patients. Socio-Demographic Performa consist of 14 items which include information of respondents about Age, Gender, Religion, Marital status, Habitat, Education qualification, Occupation, Family type, Monthly family income, Source of major income in family, Area of hospitalization, Duration of taking treatment, Types of disease and Level of dependency. Researcher was use standardized Numerical universal pain assessment scale. The scale was created by Mc Gill University's Dr. Ronald Melzack and Dr. Warren Torgerson [6].

Researcher used Guided imagery technique as intervention for study. Tool and Guided Imagery Technique was validated with 14 different subject expert Numerical pain assessment scale is a standard tool and reliability already established and tested by the valedictory authority. Physiopedia a nonpro t organization and worldwide physiotherapist community established reliability of numerical pain assessment scale with test – retest method r=.95. 97.

A formal permission was obtained from the concern authority. The data were collected from Dec. 2020 to July 2021. The researcher collected the data from 210 terminally ill patients. A total of 210 (105 in experimental group and 105 in control group) respondents were selected for the study. Researcher obtained informed written consent from each respondent. Ethical approval was obtained from the institutional ethical committee to conduct the study. Direct face to face interview was conducted and confidentiality of study was assured. The data was

analyzed in the term of objectives of the study using descriptive and inferential statistic. A master sheet was prepared by the researcher as response is given by respondent. The effectiveness of Guided Imagery Technique was analyzed by using t-test for experimental and control group. The association between pre-test score of numerical pain assessment, with selected socio demographic variables was analyzed by chi square test for experimental and control group. Experimental and control group data were presented in table, graph and diagram.

**Results**

- Section 1: Distribution of the socio-demographic variables.
- Section 2: Pre-test assessment of pain among terminally ill patient.
- Section 3: Effectiveness of guided imagery technique on pain.
- Section 4: Association between pre-test score of pain, with selected socio-demographic variables.

SECTION 1: Distribution of socio-demographic variables. (Table 1)


Table 1 showed the distribution of respondent according to age. In experimental group 23.8% belonged to 21-30yrs and 51-60 yrs., 23.3% belonged to 31-40 yrs. and 41-50yrs and only 8.6% respondent belonged to above 60yrs of age whereas in control group most of respondent 24.8% belonged to age group of 21-30yrs and 51-60 yrs. 21% belonged to 31-40yrs, 18.1% belonged to 41-50 yrs. and only 11.4% respondent belonged to above 60 years age. In experimental group majority of respondent were males 52.4%, females 47.6%, whereas in control group majority of respondent were also males 55.2%, females 44.8% and transgender 0.0% were in both experimental and control group. majority of sample in experimental group were Hindus 40%, Muslim 33.3%, any other 23.8%, Christian 3% whereas in control group majority of respondent were Hindu 51.4%, any other 22.9%, Muslim 21%, Christian 4.8%.

In experimental group majority of respondents were married 89.5%, separated 5.7%, unmarried 3.8% and divorced 1% whereas in control group majority of respondents were married 91.4%, unmarried 4.8%, separated 2.9% and divorced 1%. In experimental group most

there was a significant relationship between pain score with terminally ill patients at selected hospitals, Jaipur. Hence, null hypothesis  $H_0$  was rejected.

**SE**

area of hospitalization  $\chi^2=14.41$ , duration of taking  $\chi^2=14.02$  level of dependency  $\chi^2=15.09$ . So, there was significant association between control group levels of pain. Hence, the null hypothesis H03 was rejected for above socio-demographic variable.

#### **Discussion**

The aim of study to evaluate the effectiveness of guided imagery technique regarding pain, among terminally ill patients. In pre-test in experimental group most of respondents i.e.: 41% had severe pain, 40% had moderate pain, 16.2% had mild pain and only 2.9% had no pain

whereas in control group most of respondents i.e.: 38.1% had severe pain, 35.2% had moderate pain, 23.8% had mild pain and only 2.9% had no pain. It showed there was a significant relationship between pain score with terminally ill patients at selected hospitals, Jaipur, hence null hypothesis H01 was rejected. A similar study was conducted on "Prevalence of Pain in terminally Ill Cancer Patients: A Prospective Nonrandomized Observational Study" at Shri Mahant Indires Hospital, Dehradun, Uttarakhand, India. 126 patients incorporated

26.98%, neuropathic pain 13.49%. The average duration of pain was

