



Nursing Care for Mental Health with Sensory Perception Disorders: Hallucinations In Schizophrenia Patients

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ABSTRACT

Hallucinations are a symptom of mental disorders. Patients experience changes in sensory perception, experiencing false sensations of sound, sight, taste, touch or smell. Patients feel stimuli that are not actually there. The purpose of this study was to provide psychiatric nursing care to patients with sensory perception disorders Hallucinations. The research method is a case study by studying patient cases directly using the nursing process approach. Continued with data collection techniques. The results state that the nursing problems found, in cases of auditory hallucination patients based on theory there are three nursing diagnoses , namely: Risk of harming oneself, others, and the environment related to auditory hallucinations that Changes in sensory perception: auditory hallucinations related to withdrawal; Impaired social interaction: Withdrawal related to Low self-esteem. The conclusion obtained is that there is an increase in the patient's ability to control the hallucinations experienced and the impact on reducing the symptoms of auditory hallucinations experienced.

Keywords : Nursing Care, Mental Health, Disorders, Sensory Perception, Hallucinations, Schizophrenia Sufferers

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1. Introduction

Mental disorders are a serious health problem because the number of diseases continues to increase, including chronic diseases such as schizophrenia which affect the thought process for sufferers. As a result, people with schizophrenia have difficulty thinking clearly, difficulty managing emotions and difficulty socializing with others. (Hairani, Kurniawan, Latif & Innudin, 2021). Schizophrenia is a disease that affects the brain and causes strange thoughts, emotions, perceptions, movements and behaviors (Fatturahman, Putri & Fradianto 2021).

Schizophrenia is a group of psychotic reactions that affect various areas of an individual's functioning, including thinking, communicating, feeling and showing emotions and brain disorders characterized by chaotic thoughts, delusions, hallucinations, and strange behavior (Pardede & Ramadia, 2021). According to ECA (2021). The prevalence of schizophrenia in the United States has increased from 30% of people. Meanwhile, in Indonesia, the prevalence of schizophrenia has increased to 25% of the population. The prevalence of North Sumatra has increased to 7% of the population (Risksedes 2018).

Based on the increase in schizophrenia patients, changes in perceptual responses are the first symptoms that appear in schizophrenia. Around 70% of schizophrenia patients experience hallucinations (Stuart, Keliat & Pasaribu, 2016).

Hallucinations are sensory perceptions without any external stimulus. Patients with hallucinations often feel conditions that can only be felt by them but cannot be felt by others. (Nurlaili, Nurdin, Putri, Arif, Basmanelly, & Fernandes, 2019).

The impact caused by hallucinations is the loss of social self, which in this situation can commit suicide, kill others, even damage the environment. In minimizing the impact caused by hallucinations, proper handling is needed. With the increasing number of hallucinations, it is increasingly clear that the role of nurses is to help patients control hallucinations (Maulana, Hernawati & Shalahuddin, 2021).

In handling hallucinations, several nursing therapies have been handled, such as Implementation Strategy Therapy, which is the application of scheduled nursing care standards applied to patients with the aim of reducing the mental health nursing problems being handled. Implementation strategies for hallucinating patients include activities to





recognize hallucinations, teach patients to rebuke, take medication regularly, talk to others when hallucinations appear, and carry out scheduled activities to prevent hallucinations (Livana, Rihadini, Kandar, Suerni, Sujarwo, Maya & Nugroho. 2020) and Classical music therapy can change behavior that was initially maladaptive to adaptive behavior in patients with auditory hallucinations. This technique can help patients change behavior from negative to positive (Wijayanto & Agustina, 2017).

Hallucinations are false perceptual distortions that occur in maladaptive neurobiological responses, sufferers actually experience sensory distortions as something real and respond to them (Pardede, 2020). Hallucinations are a symptom of mental disorders. Patients experience changes in sensory perception, experiencing false sensations of sound, sight, taste, touch or smell. Patients feel stimuli that are not actually there (Dermawan, 2018). Hallucinations are patient perceptions of the environment without real stimuli, meaning that patients interpret something that is not real as external stimuli (Manulang, 2019).

Hallucinations are mental disorders in which patients experience changes in sensory perception, feeling false sensations in the form of sound, sight, taste, touch, or smell (Abdurkhan & Maulana 2022). Hallucinations are perceptions received by the five senses without any external stimulus. Patients with hallucinations often feel conditions that can only be felt by them but cannot be felt by others (Harkomah, 2019). Based on several definitions above, hallucinations are disorders of the perception of the five senses, the presence of external stimuli that feel false sensations but cannot be felt by others.

Hallucinations or reality orientation disorders are caused by impaired brain function (Neurobiological Response) namely cognitive function and thought processes as well as impaired emotional, motor and social functions. Some predisposing factors for the emergence of neurobiological responses to hallucinations are:

a. genetic factors

Genetically, schizophrenia is passed down through certain chromosomes, however, which chromosome is the determining factor for this disorder is still under research.

b. Neurobiological Factors





It was found that the prefrontal cortex and limbic cortex in schizophrenic clients never fully develop.

c. Neurotransmitter Studies

Schizophrenia is also thought to be caused by an imbalance of neurotransmitters, excessive dopamine, unbalanced with serotonin levels.

d. Virus Theory

Exposure to influenza virus in the third trimester of pregnancy may be a predisposing factor for schizophrenia.

e. Psychological

Some psychological conditions that are predisposing factors include children who are treated by anxious, overprotective, cold and unfeeling mothers, while fathers distance themselves from their children.

Hallucinations can be a reason why patients commit violent behavior because of the voices that give them orders so that they are prone to non-adaptive behavior. Violent behavior that occurs in schizophrenia patients begins with feelings of worthlessness, fear and rejection by the environment so that individuals will withdraw from interpersonal relationships with others (Keliat, 2016). Complications that can occur in patients with primary problems of sensory perception disorders: hallucinations, include: risk of violent behavior, low self-esteem and social isolation.

2. Research Methods

The research method is a case study by studying patient cases directly using the nursing process approach carried out on February 14, 2024 at the Regional Special Hospital of South Sulawesi Province. Continued with data collection techniques through:

a) Observation techniques

Observation techniques are carried out by conducting direct observations of patient behavior with changes in sensory perception; auditory hallucinations during the author's care at the Special Hospital for South Sulawesi Province.

b) Interview techniques

This is done to obtain accurate data, directly through questions and answers with patients.





3. Results and Discussion

1) Assessment

It is the initial stage in collecting data on patients. At the stage of patient assessment, the source of information in the collection is data from patients, status and room nurses. The data obtained is in accordance with the signs and symptoms on the basis of the theory of hallucinations.

2) Nursing Diagnosis

Nursing problems found, in the case of auditory hallucination patients based on theory there are three nursing diagnoses, namely: Risk of harming oneself, others, and the environment related to auditory hallucinations; Changes in sensory perception: auditory hallucinations related to withdrawal; Impaired social interaction: Withdrawal related to low self-esteem. While in the case of managed patients, four diagnoses were also obtained, namely Risk of harming oneself, others, and the environment related to auditory hallucinations, changes in sensory perception: auditory hallucinations related to withdrawal, social isolation: withdrawal related to low self-esteem, strain on the role of caregivers, ineffective family coping related to family's ignorance in caring for patients at home. In this case, we diagnosed social isolation, withdrawal because the patient's problems were low self-esteem due to environmental factors where the patient was not supportive.

3) Nursing care plan

Nursing plans are prepared based on theoretical foundations that are adapted to the patient's condition / based on problems found in the patient during the assessment.

4) Implementation

Implementation is carried out in accordance with existing interventions and in stages based on the level of achievement for each diagnosis.

5) Evaluation

Evaluation actions are carried out per TUK to monitor the progress that has been achieved by the patient, this is also to facilitate the preparation of further plans, or to carry out further interventions. Evaluation is oriented towards the patient and the patient's family.





The level of achievement that has been achieved based on the nursing problems identified in patients can be briefly described as follows:

- a) Risk of harming oneself, others and the environment related to auditory hallucinations the patient is able to perform up to TUK 4.
- b) Altered sensory perception: auditory hallucinations related to withdrawal patient is able to perform up to TUK 6.
- c) Social isolation, withdrawal related to low self-esteem, patient is able to perform up to TUK 4.
- d) Tension in the role of caregiver related to family's ignorance in caring for patients at home, patients are able to carry out up to TUK 6.

4. Conclusion

The assessment was conducted directly on the patient and also by making the patient's status a source of information that can support the assessment data. During the assessment process, the nurse used therapeutic communication and built a trusting relationship between the nurse and the patient. In this case, it was found that the patient experienced symptoms of hallucinations such as hearing voices, restlessness, difficulty sleeping, appearing tense, pacing, unable to maintain eye contact, sad, embarrassed, hopeless, withdrawn, easily angered and others. Predisposing factors in the patient were having previously experienced mental disorders and having a history of consuming alcohol and illegal drugs.

The evaluation found that there was an increase in the patient's ability to control the hallucinations they experienced and an impact on reducing the symptoms of auditory hallucinations they experienced.

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