

The Effectiveness of Zikir Therapy in Reducing Anxiety in Stage 2 Colon Cancer Patients Before Undergoing Chemotherapy

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ABSTRACT

Background & Objective: Anxiety is an emotional response that often arises in cancer patients before undergoing chemotherapy. High levels of anxiety can have a negative impact on the physiological and psychological condition of patients. Zikir therapy is one non-pharmacological intervention that can be used to help reduce anxiety through a spiritual approach. This study aims to determine the effectiveness of zikir therapy in reducing anxiety in colon cancer patients before undergoing chemotherapy in the HOTA (Hematology Oncology Treatment) Room at RSD Gunung Jati Hospital in Cirebon City. **Method:** This study employed a qualitative approach with a case study design involving three patients experiencing anxiety prior to chemotherapy. Data were collected through interviews, observations, and assessments of vital signs before and after zikir therapy was administered. **Result:** The study results showed that after receiving zikir therapy, there was a reduction in anxiety symptoms and signs in all three patients, both subjectively and objectively. Patients felt calmer, blood pressure and heart rate decreased, and no longer appeared restless or pale. **Conclusion:** It can be concluded that zikir therapy is effective as a nursing intervention in reducing anxiety in colon cancer patients before undergoing chemotherapy.

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Introduction

Colon cancer is one of the types of cancer in the lower digestive tract that develops slowly. Stage 2 indicates that cancer cells have penetrated the intestinal wall but have not yet spread to the lymphatic system. Understanding the pathophysiology

of colon cancer at this stage is crucial in developing a nursing care plan, particularly in addressing anxiety that arises before further treatments such as chemotherapy. (National Cancer Institute, 2023). Stage 2 colon cancer is characterized by tumor invasion into the colon wall, but has not yet reached the lymph nodes or distant metastasis, indicating that the cancer is localized but beginning to exhibit structural invasiveness. (American Cancer Society, 2024)

Cancer is one of the major health issues with significant global impact, including in Indonesia. Colon cancer or colorectal cancer ranks third among all types of cancer worldwide and continues to show increasing incidence rates year after year. Cancer ranks second as the leading cause of death globally, with over 10 million deaths per year. In Indonesia alone, the Globocan 2020 report recorded 396,914 new cancer cases and 234,511 cancer-related deaths. One of the most prevalent types of cancer is colorectal cancer, including colon cancer. (World Health Organization, 2020)

Data obtained from the Medical Records Department of RSD Gunung Jati Hospital in Cirebon City shows that in 2023, there were 564 cancer patients undergoing outpatient and inpatient treatment. Although there is no data that separates cancer types in detail, this number indicates that the burden of cancer cases in the region is quite high and requires a holistic approach to treatment, including psychological aspects such as anxiety (RSD Gunung Jati, 2023).

In Indonesia, the prevalence of colon cancer tends to increase with changes in lifestyle, diet, and delayed early detection (Ministry of Health of the Republic of Indonesia, 2023). One of the most common treatment methods for colon cancer is chemotherapy. Chemotherapy works by disrupting cell division processes and damaging cancer cell DNA, thereby inhibiting proliferation and stimulating apoptosis. Adjuvant chemotherapy for stage II colon cancer is administered to patients with high-risk factors to reduce the likelihood of local or systemic recurrence. The choice of chemotherapy regimen must be tailored to the stage, the patient's clinical condition, and the presence of specific risk factors. (Smeltzer & Bare, 2018)

Although it is the primary therapy for most cases of advanced colon cancer, it often has psychological effects on patients, one of which is anxiety. Anxiety before chemotherapy is a common phenomenon experienced by cancer patients, which can cause sleep disturbances, increased blood pressure, and a decrease in the patient's overall quality of life (Fitriyani & Wulandari, 2021). Anxiety can also interfere with patients' acceptance of therapy and worsen their response to treatment.

Therefore, comprehensive anxiety management is an important part of the cancer patient care process. In addition to pharmacological interventions, *non-pharmacological* approaches such as complementary and alternative therapies are increasingly being used. According to the Indonesian Nursing Intervention Standards (SIKI), one of the primary interventions for the nursing diagnosis of anxiety is anxiety reduction. This intervention aims to help individuals reduce, manage, or prevent anxiety through various strategies, including relaxation techniques, education, and spiritual interventions (Fajrin, 2019).

One nursing action that can be included in anxiety reduction interventions is zikir therapy. Zikir therapy is a spiritual approach relevant to the needs of Muslim patients, aimed at enhancing inner peace through the repeated recitation of Allah's name, either verbally or mentally. This intervention aligns with spiritual nursing interventions outlined in the SIKI, such as Spiritual Support, as well as Religious Music Therapy or Religious Relaxation, which fall under complementary approaches.

One of the most promising spiritual approaches is zikir therapy, which is a form of worship in Islam performed by remembering Allah through specific utterances, such as "Subhanallah," "Alhamdulillah," and "Allahu Akbar." (Nurlina, 2021)

Zikir can reduce anxiety by stimulating the parasympathetic nervous system and suppressing the activity of the sympathetic nervous system, thereby lowering heart rate, blood pressure, and stress hormone levels such as cortisol. In addition, zikir also activates areas of the brain that play a role in emotional control, thereby strengthening feelings of calmness, trust in God, and self-acceptance. Through this mechanism, zikir therapy is considered effective as a *non-pharmacological* approach to help reduce anxiety, particularly in cancer patients undergoing invasive procedures such as chemotherapy. (Fajrin, 2019)

Zikir therapy has a significant impact in reducing anxiety levels, especially in patients facing severe stress conditions such as chronic illnesses or invasive procedures like chemotherapy. Zikir provides a relaxing effect that works through psychophysiological and spiritual mechanisms. When zikir is performed, there is a decrease in sympathetic nervous system activity and an increase in parasympathetic nervous system activity, resulting in a slower heart rate, calmer breathing, and reduced levels of stress hormones like cortisol and adrenaline. This directly impacts the reduction of physical anxiety symptoms, such as restlessness, palpitations, difficulty sleeping, and muscle tension. Psychologically, zikir also fosters inner peace and a sense of surrender (*tawakal*). Patients feel more at ease because they have a spiritual anchor, enabling them to accept their condition with greater acceptance and avoid overreacting to stressors. (Nurlina, 2021)

Additionally, zikir provides positive psychological effects by connecting patients with transcendental power, thereby reducing feelings of fear, anxiety, and despair (Ningsih, 2020). Another study by Kartika and Wahyuni (2021) showed that zikir therapy is effective in reducing anxiety levels in patients prior to invasive medical procedures. This indicates that spiritual interventions play a significant role in helping patients adapt psychologically to cancer treatment.

Objective

Given the importance of managing anxiety prior to chemotherapy and the potential benefits of zikir therapy as a holistic approach, the researchers were interested in investigating the effectiveness of zikir therapy in reducing anxiety levels in stage 2 colon cancer patients prior to chemotherapy in the HOTT (*Hematology Oncology Thalassemia*) Room at Gunung Jati Hospital in Cirebon. This study is expected to contribute to the development of spiritually and culturally based nursing interventions and improve the overall quality of nursing care.

Method

The type of research used in this study is qualitative research with a case study design. The qualitative approach was chosen because it can deeply describe the subjective experiences of colon cancer patients undergoing chemotherapy, particularly regarding the anxiety levels they feel and their responses to zikir therapy as a spiritual intervention.

The case study design was used to comprehensively explore information from several participants experiencing similar phenomena, namely anxiety prior to chemotherapy. Each case was studied in depth through interviews, observations, and

documentation, so that the researchers could understand the personal, emotional, social, and spiritual contexts that influenced the patients' conditions. This case study is exploratory in nature and aims to gain a comprehensive understanding of the effects of zikir therapy in helping patients manage their anxiety before undergoing chemotherapy.

Results

This study was conducted on three colon cancer patients in the HOT Room at Gunung Jati Hospital in Cirebon City on February 5–7, 2025. All three patients exhibited varying levels of anxiety prior to or during chemotherapy. The following is a summary of the assessment results for each patient:

Patient 1 (Mrs. R, 45 years old): The patient was diagnosed with stage II colon cancer and had undergone a right hemicolectomy. She is currently in her second cycle of chemotherapy. The patient reported feelings of fear and anxiety about the effects of chemotherapy, as well as restlessness, especially before the procedure. She also experienced sleep disturbances, nausea, and fatigue. Main complaint: "I am afraid of the effects of this chemotherapy, afraid that my cancer will worsen and I will die, leaving my child behind." Vital signs: BP 130/90 mmHg, Pulse 98 beats/minute, Temperature 36.5°C, RR 22 breaths/minute, SpO₂ 99%. The patient appears restless, withdrawn, and spiritually active. Family support is helping with the adaptation process.

Patient 2 (Mr. A, 40 years old): The patient has undergone a hemicolectomy and is currently undergoing the fifth of six planned chemotherapy cycles. The patient expresses severe anxiety, fear of losing his family, feeling mentally unprepared, and experiencing sleep disturbances. He also feels weak, nauseous, and has negative thoughts about the treatment. Main complaint: "I'm afraid I'll die and leave my wife and children. I'm not ready." Vital signs: BP 135/85 mmHg, Pulse 102 beats/minute, Temperature 36.8°C, RR 20 breaths/minute, SpO₂ 98%. The patient exhibits high anxiety but still has family support and strong spiritual resilience.

Patient 3 (Mrs. M, 37 years old): The patient was diagnosed with colon cancer approximately two months ago, has undergone a hemicolectomy, and is preparing for her first chemotherapy session. The patient complains of severe anxiety, fear that chemotherapy will fail, and fear that the disease will worsen. She also experiences sleep disturbances, decreased appetite, and abdominal tenderness. Main complaint: "I'm afraid that this chemotherapy won't work and my cancer will get worse. I'm not ready to leave my children." Vital signs: BP 140/90 mmHg, Pulse 111 beats/minute, Temperature 36°C, RR 24 breaths/minute, SpO₂ 99%. The patient appears anxious, experiences cramps in the toes, abdominal pain rated at 5, but is still able to communicate well and receives strong family and spiritual support.

Discussion

Anxiety is a common psychological response found in cancer patients, especially when facing invasive treatment procedures such as chemotherapy (Taylor, 2019). All three patients in this study exhibited noticeable symptoms of anxiety, both verbally and through physical manifestations.

Patients 1, 2, and 3 consistently reported feelings of fear and anxiety related to their cancer diagnosis and the side effects of chemotherapy treatment. For example, Patient 3 expressed fear about the success of chemotherapy and concerns about

leaving their family. This aligns with the findings of Sulistyawati et al. (2019) and Ma'arif et al. (2023), who noted that anxiety in cancer patients is often triggered by uncertainty about prognosis and treatment side effects. Physiologically, anxiety is characterized by increased heart rate (tachycardia), high blood pressure, and rapid breathing, which were observed in Patient 3 (BP 140/90 mmHg, heart rate 111 beats per minute, respiratory rate 24 breaths per minute). This condition is supported by Leary's theory (2020), which states that anxiety triggers the sympathetic nervous system response, leading to an increase in vital signs.

The vital signs of the three patients were generally within normal limits, except for patient 3, who exhibited physiological stress signs such as increased blood pressure and heart rate due to anxiety. The patients' level of consciousness was *compos mentis*, indicating no impairment of consciousness due to the disease or side effects of treatment. Anxiety experienced by colon cancer patients is closely related to physical manifestations such as increased vital signs, sleep disturbances, and decreased appetite. This aligns with the theory that anxiety can trigger bodily responses, including activation of the sympathetic nervous system and hormonal changes that affect the patient's physical condition (Fajrin, 2019).

Additionally, excessive anxiety can exacerbate pain perception, making it important to provide psychological support and supportive therapies such as *dzikir* therapy, which has been proven effective in reducing anxiety (Syahri et al., 2024). Strong family support was also found to be an important protective factor in helping patients cope with fear and anxiety related to their illness.

The results of the assessment of three colon cancer patients undergoing chemotherapy in the HOT Room at Gunung Jati General Hospital in Cirebon City. The main focus of the discussion is on the nursing diagnosis 'Anxiety related to situational crisis' based on subjective and objective data collected and referencing the Indonesian Nursing Diagnosis Standards (SDKI), nursing theory, and evidence-based nursing (EBN). From the three cases, it can be concluded that anxiety symptoms in colon cancer patients undergoing chemotherapy manifest at varying levels of severity and are influenced by physical, mental, and environmental support conditions. The application of nursing approaches consistent with SDKI and based on evidence-based nursing (EBN) is crucial in managing anxiety in cancer patients with these conditions.

Monitoring anxiety symptoms such as blood pressure, heart rate, body temperature, and observing restless behavior are important initial steps in assessing the patient's psychophysiological condition (SDKI, 2022). Routine monitoring can help nurses identify changes and the patient's response to interventions (Nurlina, 2021). Creating a safe and trusting therapeutic environment is an important component in reducing anxiety (Halid et al., 2021). A humanistic approach involving actively listening to patients' complaints and feelings can provide a sense of being heard and accepted, thereby reducing emotional tension (Sulistyawati et al., 2019).

Teaching patients to express their feelings and perceptions about their illness helps them cope with anxiety constructively (Prastio, 2023). Additionally, training in stress management techniques, such as *dzikir* therapy, has proven effective in reducing anxiety in cancer patients (Ma'arif et al., 2023). *Dhikr* therapy as a spiritual approach can calm the mind, divert attention from fear, and enhance inner peace (Mastuty et al., 2022). This approach aligns with the principles of holistic nursing, which encompasses the physical, psychological, and spiritual aspects of the patient (SDKI, 2022).

Based on evidence-based nursing, interventions must be based on scientific evidence and tailored to the individual needs of patients (Sulistyawati et al., 2019). Studies indicate that psychosocial interventions involving emotional support and spiritual approaches such as dzikir are effective in reducing anxiety levels in colon cancer patients (Halid et al., 2021; Ma'arif et al., 2023). Therefore, this nursing plan has been developed by combining current research evidence and appropriate clinical practices.

In therapeutic actions, nurses teach spiritual relaxation techniques in the form of dzikir therapy to patients as a form of distraction and an effort to activate the relaxation response. Dzikir therapy was chosen based on the spiritual approach in transpersonal nursing, which states that spiritual activities can help individuals cope with stress and strengthen coping mechanisms (Watson, 2008).

The results of the implementation showed that all patients were able to follow the dzikir therapy well. Patients reported feeling calmer and more comfortable after performing dzikir, as indicated by a reduction in physical anxiety symptoms, such as decreased heart rate and blood pressure, as well as improved sleep quality. This aligns with research by Sulistyawati et al. (2019) and Syahri et al. (2024), which concluded that dzikir therapy is effective in reducing anxiety levels in patients with chronic conditions.

Objectively, patients' blood pressure and heart rate decreased, and they appeared fresher and less pale. This is consistent with the findings of Lutfiana et al. (2022) and Ma'arif et al. (2023), which showed that dzikir therapy can stimulate the parasympathetic nervous system, reduce stress hormones like cortisol, and thereby alleviate anxiety symptoms. Additionally, these results are supported by the theory in the book *Evidence-Based Practice* by Melnyk & Fineout-Overholt (2019), which states that non-pharmacological interventions such as relaxation therapy are effective in reducing patient anxiety.

From these evaluation results, it can be concluded that dzikir therapy as a nursing intervention is effective in reducing anxiety in colon cancer patients undergoing chemotherapy. The implementation of dzikir therapy in accordance with Indonesian nursing diagnosis and intervention standards (SDKI and SIKI) can be used as one of the evidence-based intervention (EBN) options in nursing practice in chemotherapy rooms.

Conclusion

Based on the results of a study of three colon cancer patients undergoing chemotherapy preparation in the HOT Room at Gunung Jati Hospital in Cirebon City, it was found that all patients experienced anxiety with various manifestations, both subjective and objective. Commonly reported symptoms included fear, sleep disturbances, decreased appetite, and emotional complaints that arose prior to chemotherapy. Physiologically, one patient exhibited signs of stress characterized by increased blood pressure, heart rate, and respiratory rate.

After receiving intervention in the form of dzikir therapy, all three patients showed positive responses. There was an improvement in emotional condition, characterized by a sense of calmness, comfort, and improved sleep patterns. Additionally, there was a decrease in previously elevated vital signs, particularly in patients with severe anxiety. These results suggest that dzikir therapy can be an

effective non-pharmacological approach to help reduce anxiety levels in colon cancer patients undergoing chemotherapy.

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