



Enhancing Quality of Life: Murottal Spiritual Care for Reducing Anxiety and Depression in Coronary Heart Disease Patients - A Holistic Systematic Review

Aris Citra Wisuda¹, Tukimin bin Sansuwito², Citra Suraya³

^{1,2,3}Faculty of Nursing, Lincoln University, Malaysia

^{1,3}Faculty of Nursing, Sekolah Tinggi Ilmu Kesehatan Bina Husada Palembang, Indonesia

Email: ariscitrawisuda.edu@gmail.com¹, tukimin89@gmail.com², citrasuraya.edu@gmail.com³

Article Info

Article history:

Received Dec 2023

Revised Jan, 2024

Accepted Feb, 2024

Keywords:

Anxiety

Depression

Coronary Heart Disease

Murottal

Spiritual Care

ABSTRACT

Coronary heart disease is a chronic condition that can induce physiological and psychological changes in patients. One of the potential impacts is anxiety and depression related to the disease's progression. Patients undergoing procedures such as heart bypass often experience anxiety and depression due to various factors, particularly fear and a declining physical condition. Therefore, patients require therapy to alleviate anxiety and depression, promoting positive perceptions and relaxation to enhance their quality of life. Murottal therapy involves listening to the recitation of holy verses from the Quran, providing comfort and calmness to the patient. This research aims to assess the effectiveness of murottal therapy with Ar Rahman in addressing anxiety and depression in patients with coronary heart disease. The research methodology employed is a Literature Review, encompassing International Journals and National Journals published from 2018 to 2023. Literature was collected using Google Scholar and Pubmed databases with the keywords: Coronary Heart Disease, Anxiety, Depression, Murottal Ar-Rahman Therapy. The search yielded 317 articles based on the specified keywords. After filtering through predefined inclusion and exclusion criteria, 7 articles, comprising 6 National Journals and 1 International Journals, were reviewed. The results indicate that Ar Rahman murottal therapy can effectively reduce levels of anxiety and depression in patients with Coronary Heart Disease.

This is an open access article under the [CC BY-SA](https://creativecommons.org/licenses/by-sa/4.0/) license.



Corresponding Author:

Aris Citra Wisuda

⁴Faculty of Nursing, Lincoln University,

Wisma Lincoln, No. 12-18, Road SS 6/12, 47301 Petaling Jaya, Selangor Darul Ehsan, Malaysia.

Program Studi Ilmu Keperawatan, Sekolah Tinggi Ilmu Kesehatan Bina Husada Palembang, Indonesia

Email: ariscitrawisuda.edu@gmail.com

1. INTRODUCTION

Cardiovascular disease, which affects the circulatory system (1), necessitates continuous attention and therapy. Individuals diagnosed with this condition undergo treatment either as inpatients or outpatients at the hospital. Patients receiving hospital-based treatment, particularly inpatients, may encounter both physical and psychological challenges. These challenges contribute to the deterioration of the patient's condition, often leading to the manifestation of disease symptoms (2).

The patient's condition is deteriorating due to concerns about the illness not improving soon and a decline in physical health (3). This decline in physical health is associated with various issues such as shortness of breath, chest pain, limited activity tolerance, fatigue, ankle swelling, and difficulties with sleep or insomnia (4). Consequently, the

.....

patient's daily activities are disrupted, preventing them from engaging in their usual routines. Additionally, psychological challenges, including stress, depression, discomfort, anxiety, and a fear of death, emerge. Anxiety and discomfort problems are components of psychological disorders frequently observed in individuals with cardiovascular issues that require attention (5).

Cardiovascular disease, a leading cause of global mortality and classified as a non-communicable disease, accounts for over 9.4 million deaths annually, as per worldwide statistics. By 2030, this death toll is projected to escalate to 23.3 million, with coronary heart disease being a significant contributor. The demographic most affected by cardiovascular disease-related fatalities is those aged 65 years and older, particularly in developing countries (6). In Indonesia, research data from RisKesDas in 2017 indicated a prevalence of 1.5%, with 1.6% of cases reported in Central Java province (7). Anxiety and depression disorders associated with cardiovascular problems exhibit a relatively high prevalence, ranging from 28% to approximately 44% among younger age groups. In contrast, for older age brackets, the prevalence of anxiety and depression falls within the range of 14% to 24% (8).

Efforts to alleviate the anxiety and depression experienced by patients encompass both pharmacological and non-pharmacological approaches (9). Pharmacological therapy involves the administration of drugs such as benzodiazepines, buspirone, and Selective Serotonin Re-uptake Inhibitors (SSRIs) (10). On the other hand, non-pharmacological therapy focuses on distraction and relaxation techniques. Distraction aims to divert the patient's attention away from feelings of anxiety and discomfort. Examples of distraction methods include engaging in classical music therapy, aromatherapy, massage therapy, and spiritual therapy like murottal Al-Qur'an (11). While music therapy, aromatherapy, massage, and acupressure effectively reduce anxiety, they may not address the patient's spiritual aspect. Therefore, additional therapies are necessary to enhance spiritual values and address anxiety and depression issues, with murottal Al-Qur'an therapy being one such approach (12).

Murottal involves the recitation of sacred Quranic verses, emphasizing both the accurate pronunciation (tajwid) and the rhythmic delivery of the Quranic text (13). Engaging in murottal, or listening to the holy verses of the Quran, has a calming effect on the listener. Research by (14) has demonstrated that listening to these verses can effectively address various types of mental disorders. Consequently, this study seeks to explore the impact of murottal therapy on anxiety and depression in individuals diagnosed with coronary heart disease.

2. RESEARCH METHOD

The research methodology employed in this study is a literature review, conducted through a systematic search using computerized databases, namely Google Scholar, ScienceDirect, Pubmed, and NCBI. The search utilized keywords such as Coronary Heart Disease, spiritual care, anxiety, depression, and Murottal Therapy. A careful selection process identified 7 relevant journals, comprising 6 national and 1 international journals published between 2018 and 2023. The literature review focused on articles meeting specific inclusion criteria, including relevance to the topic, quantitative research design, randomized control trials (RCT), articles specifically addressing murottal therapy, and measurement of anxiety and depression levels within the study outcomes.

3. RESULTS AND DISCUSSION

The process of selecting literature was conducted utilizing the PRISMA flowchart, a tool that aids in narrowing down articles during literature searches and enhances the quality of reporting in publications. From two databases, namely Google Scholar, ScienceDirect, Pubmed, and NCBI, the literature selection process yielded 317 articles based on the specified keywords. Following the application of established criteria, 317 articles were excluded as they did not meet the relevance criteria. Consequently, 7 articles were retained for analysis based on their alignment with the research topic. The illustration of the literature selection process is detailed in the PRISMA flowchart (Figure 1).



Figure 1. Flowcharts for The results of data extraction are shown in Figure

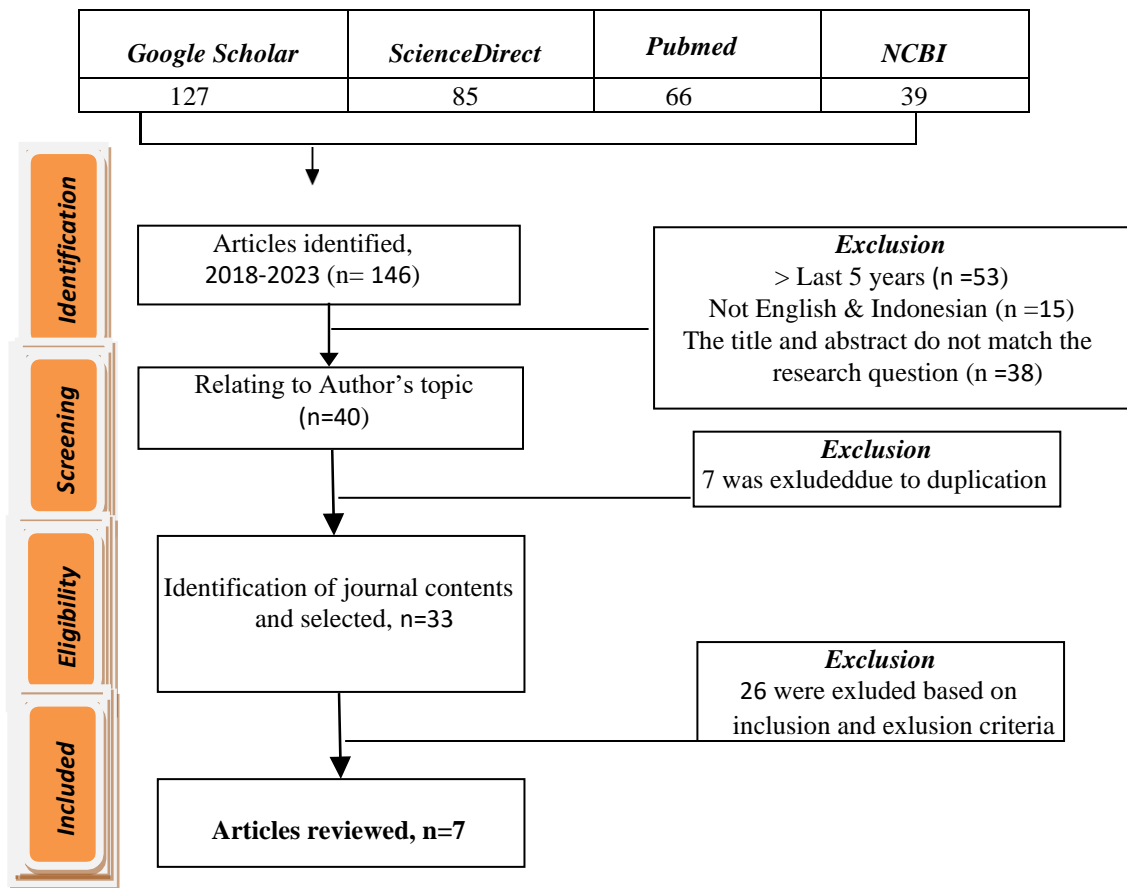


Table 1
Data Extraction Of Research Articles

Author Name (Year)	Country	Title	Method (Population/ Sample)	Research result
(15)	Indonesia	Murrotal and Clasical Music Therapy Reducing Pra Cardiac Chateterization Anxiety: A randomized controlled trial	Pre-experiment, one group pre-posttest the intervention based on spiritual care Murrotal (15 respondents).	The results of the statistical tests revealed a reduction in anxiety within the treatment group by 9.01, with a significance value of 0.000. Regarding depression, the treatment group exhibited a reduction of 9.01 with a significance value of 0.002. Murrotal Al-Qur'an serves as an effective distraction, triggering the natural release of endorphins and balancing brain waves. Consequently, listeners can attain a positive response in the form of comfort, aiding in the reduction of anxiety and depression during challenging times.

(16)	Indonesia	Al-Qur'an Murottal Therapy to Reduce Cardiovascular Reactivity to Handgrip in Hypertensive Pre-Elderly Subjects	quasi-experiment, group control before and after the test. intervention based on spiritual care Murrotal (36 respondents).	The initial assessment of anxiety in the subject (Mr. B) indicated a moderate anxiety level (HARS score 26) and moderate depression. To address this, therapy in the form of Murottal Al-Qur'an was administered with the aim of reducing anxiety levels. Following three days of implementing Murottal Al-Qur'an therapy, Mr. B's anxiety level decreased to the mild category (HARS score 15), along with a reduction in mild depression. The results demonstrate that implementing Murottal Al-Qur'an therapy for three days led to a notable decrease in anxiety levels among individuals with coronary heart disease.
(17)	Pakistan	Impact of Murottal and Muscle Relaxation Therapy on Anxiety, Depression Levels, and Quality of Sleep	quasi-experiment, group control before and after the test. intervention based on spiritual care Murrotal (46 respondents).	At the baseline, there were noteworthy variations in the overall STAI scores between the intervention and control groups, indicating the presence of anxiety and depression issues (128.5 vs. 118.3, respectively). This difference persisted during follow-up (82.1 vs. 120.1). The act of listening to Al-Qur'an readings, when compared with the control group, resulted in substantial decreases in anxiety and depression among patients with coronary heart disease, irrespective of age, gender, and family status.
(18)	Indonesia	The Effect of Music Therapy and Murottal Therapy on Heart Patients with Anxiety-Depression in the Intensive Care Room: Case Report	quasi-experiment, group control before and after the test. intervention based on spiritual care Murrotal (62 respondents).	The research findings indicate a significant difference within the group concerning anxiety, with a p-value of 0.003 ($\alpha < 0.050$). Likewise, for depression, the p-value is 0.022 ($\alpha < 0.050$), suggesting the existence of a difference. The therapy involving the listening of murottal Al Quran, specifically Surah Al Fatihah and Surah Ar-Rahman, has demonstrated effectiveness in addressing anxiety and depression among patients with coronary heart disease.
(19)	Indonesia	The Effect Of Murottal Therapy on The Level Of Anxiety and Depression in Patients with Cardiovascular Disease	quasi-experiment, group control before and after the test. intervention based on spiritual care Murrotal.	The research findings within the group reveal a significant difference in anxiety, as indicated by a p-value of 0.026 ($\alpha < 0.050$). Similarly, for depression, the p-value is 0.011 ($\alpha < 0.050$), suggesting the existence of a difference. Listening of murottal Al Quran, specifically Surah Al Fatihah and Surah Ar-Rahman, has proven effective in addressing anxiety and depression among patients with coronary heart disease.



(20)	Iran	The effect of the holy Quran recitation and listening on anxiety, stress, and depression	quasi-experiment, group control before and after the test. intervention based on spiritual care Murrotal (48 respondents).	The research findings indicated significant differences between the treatment and control groups in stress, as evidenced by the Mann-Whitney test yielding a p-value of 0.004 ($\alpha < 0.050$). Similarly, for anxiety, the p-value was 0.005 ($\alpha < 0.050$), indicating a discernible difference. In the case of depression, the p-value was 0.014 ($\alpha < 0.050$), signifying the presence of a difference. The therapy involving the listening of murottal Al Quran, specifically Surah Al Fatihah and Surah Ar-Rahman, demonstrated efficacy in alleviating stress, anxiety, and depression among patients with coronary heart disease.
(21)	Indonesia	Effects Of Nursing Spiritual Needs Treatment in Reducing Anxiety and Depression in Acute Coronary Syndrome (ACS) Patients	quasi-experiment, group control before and after the test. intervention based on spiritual care Murrotal (54 respondents).	The results of the statistical tests indicated a reduction in anxiety within the treatment group by 9.01, with a significance value of 0.021. In contrast, the control group exhibited a more substantial decrease in anxiety, amounting to 56.75, with a significance value of 0.000. As for depression, the treatment group experienced a decrease of 9.01, with a significance value of 0.000, while the control group demonstrated a reduction in depression with a significance value of 0.033.

The results of a review of 7 articles showed that murottal therapy greatly affected the levels of anxiety and depression in heart disease patients. Coronary Heart disease, which affects the circulatory system (22), necessitates continuous attention and therapy. Individuals diagnosed with this condition undergo treatment either as inpatients or outpatients at the hospital. Patients receiving hospital-based treatment, particularly inpatients, may encounter both physical and psychological challenges. These challenges contribute to the deterioration of the patient's condition, often leading to the manifestation of disease symptoms (2).

The patient's condition is deteriorating due to concerns about the illness not improving soon and a decline in physical health (3). This decline in physical health is associated with various issues such as shortness of breath, chest pain, limited activity tolerance, fatigue, ankle swelling, and difficulties with sleep or insomnia (4). Consequently, the patient's daily activities are disrupted, preventing them from engaging in their usual routines. Additionally, psychological challenges, including stress, depression, discomfort, anxiety, and a fear of death, emerge. Anxiety and discomfort problems are components of psychological disorders frequently observed in individuals with cardiovascular issues that require attention (5).

Cardiovascular disease, a leading cause of global mortality and classified as a non-communicable disease, accounts for over 9.4 million deaths annually, as per worldwide statistics. By 2030, this death toll is projected to escalate to 23.3 million, with coronary heart disease being a significant contributor. The demographic most affected by cardiovascular disease-related fatalities is those aged 65 years and older, particularly in developing countries (6). In Indonesia, research data from Riskesdas in 2017 indicated a prevalence of 1.5%, with 1.6% of cases reported in Central Java province (7). Anxiety and depression disorders associated with cardiovascular problems exhibit a relatively high prevalence, ranging from 28% to approximately 44% among younger age groups. In contrast, for older age brackets, the prevalence of anxiety and depression falls within the range of 14% to 24% (15).

Efforts to alleviate the anxiety and depression experienced by patients encompass both pharmacological and non-pharmacological approaches. Pharmacological therapy involves the administration of drugs such as benzodiazepines, buspirone, and Selective Serotonin Re-uptake Inhibitors (SSRIs) (10). On the other hand, non-pharmacological therapy focuses on distraction and relaxation techniques. Distraction aims to divert the patient's attention away from feelings of anxiety and discomfort. Examples of distraction methods include engaging in classical music therapy, aromatherapy, massage therapy, and spiritual therapy like murottal Al-Qur'an (16). While music therapy, aromatherapy, massage, and acupressure effectively reduce anxiety, they may not address the patient's spiritual aspect. Therefore, additional therapies are necessary to enhance spiritual values and address anxiety and depression issues, with murottal Al-Qur'an therapy being one such approach (17).

Al-Qur'an murottal therapy involves the recitation of Quranic verses as a form of religious therapy, with the individual listening to these verses for several minutes or hours. This practice aims to have a positive impact on the person's well-being (18). The primary objective of providing Al-Qur'an murottal therapy is to boost the release of endorphins, thereby reducing the reliance on medication. This release acts as a distraction from pain and has the potential to alleviate anxiety. The calming effect of listening to the Quran is attributed to the elements of meditation, autosuggestion, and relaxation embedded in it. This sense of calmness contributes to a positive emotional response, significantly influencing positive perceptions (19).

Moreover, sound therapy through Quranic recitation can induce changes in electrical currents in muscles, alter blood circulation, affect heart rate, and impact skin blood levels (20). These changes signify relaxation or a reduction in neuromuscular tension. The therapy also works on the brain, stimulating the production of chemicals called neuropeptides, which, in turn, provide a feedback loop in the form of pleasure or comfort. In a study conducted by (21), the impact of Ar-Rahman letter therapy on anxiety and depression levels in heart patients undergoing treatment was investigated. The statistical tests, utilizing paired sample t-tests, yielded a p-value of 0.000 ($p < \alpha = 0.05$). The results suggest that Ar-Rahman letter therapy influences a reduction in anxiety levels among patients undergoing treatment.

4. CONCLUSION

The findings from literature reviews indicate that murottal therapy positively influences anxiety and depression among individuals diagnosed with coronary heart disease. Notably, a discernible reduction in anxiety and depression levels was observed before and after the implementation of murottal therapy. This form of therapy fosters a sense of calm and comfort among patients grappling with coronary heart disease. Furthermore, Al-Quran therapy serves as a means to divert the pain experienced by patients, consequently contributing to a decrease in levels of anxiety and depression.

ACKNOWLEDGEMENTS

Thank you to my supervisor and all those who have supported the researcher in writing this literature review.

REFERENCES

1. Bass TA, Abbott JD, Mahmud E, Parikh SA, Aboulhosn J, Ashwath ML, et al. 2023 ACC/AHA/SCAI Advanced Training Statement on Interventional Cardiology (Coronary, Peripheral Vascular, and Structural Heart Interventions): A Report of the ACC Competency Management Committee. *J Soc Cardiovasc Angiogr Interv.* 2023;2(2).
2. Laiya R, Anitasari B. Cardiovascular and Digestive Disorders. Ramadhani WN, editor. Padang, Indonesia: PT. Global Ekskutif Teknologi; 2022. 190 p.
3. Braunwald's. Heart Disease; A Textbook Of Cardiovascular Medicine. Eleventh. Zipes, Libby, Bonow, Mann, Tomaselli, editors. Philadelphia: Elsevier Inc; 2019. 352 p.
4. ACNAP. Association Of Cardiovascular Nursing & Allied Professions; The ESC Textbook Of Cardiovascular Nursing. Jennings C, Astin F, Fitzsimons D, editors. USA: Oxford University Press; 2020. 422 p.
5. Setyowati R. Surgical Medical Nursing; Cardiovascular System. First. Rahmawati A, editor. Cirebon, West Java: LovRinz Publishing; 2017. 153 p.
6. Luhtfiyah S, Wijayanti AR. Cardiovascular System Disease. Pora YD, editor. Aceh, Indonesia: Yayasan Penerbit Muhammad Zaini; 2022. 182 p.
7. Ministry Of Health Republic Indonesia. Main Results of Basic Health Research. Vol. 53, Kementerian Kesehatan RI. 2018. p. 1689–99.
8. Ministry of Health the Republic of Indonesia. Regulation of The Minister of Health of The Republic of Indonesia Number 26 Year 2019 About Implementing Regulation of Law Number 38 Year 2014 Concerning Nursing. Jakarta, Indonesia: Jakarta: Minister of Health of the Republic of Indonesia; 2019. 1–9 p.
9. Rupeng K, Erika KA, Irwan AM. Effects Of Nursing Spiritual Needs Treatment in Reducing Anxiety and Depression in Acute Coronary Syndrome (ACS) Patients. *J Keperawatan.* 2023;15:263–78.
10. Arndt. Spiritual Need in Research and Practice; The Spiritual Needs Questionnaire as a Global Resource for Health and Social Care. Germany: Springer-Nature Switzerland AG; 2021. 414 p.



11. Ramadhanti, Destiani Rahma R. Description of Quality of Life in Patients Coronary Heart Disease. *J Keperawatan Indonensia Florence Nightingale*. 2022;2(1):7–17.
12. Soylu D, Ceyhan Ö, Tekinsoy Kartin P, Soylu A. Spiritual Well-Being and Nursing Care Perceptions of Coronary Intensive Care Patients. *J Nursology*. 2023;26(3):175–82.
13. Rogers M. *Spiritual Dimensions Of Advanced Practice Nursing ; Stories Of Hope*. Third. Debout C, editor. Switzerland: Advanced Practice In Nursing; 2021. 207 p.
14. Azizah N, Purnomo M, Wigati A. Application of Islamic Values Through Caring for Fulfilling Spiritual Needs of Inpatient Prayers. *J Ilmu Keperawatan dan Kebidanan*. 2021;12(1):109.
15. Darmadi S, Armiyati Y. Murottal and Clasical Music Therapy Reducing Pra Cardiac Chateterization Anxiety. *South East Asia Nurs Res*. 2019;1(2):52.
16. Trisnawati E, Azizah I Al, Jenie IM. Al-Qur’an Murottal Therapy to Reduce Cardiovascular Reactivity to Handgrip in Hypertensive Pre-Elderly Subjects. *Proc 4th Int Conf Sustain Innov 2020–Health Sci Nurs (ICoSIHSN 2020)*. 2021;33(ICoSIHSN 2020):365–70.
17. Ruby F. Impact of Murottal and Muscle Relaxation Therapy on Anxiety, Depression Levels, and Quality of Sleep. *Pakistan J Humanit Soc Sci Res*. 2022;01(05):73–84.
18. Lestari D, Handiyani H, Nuraini T, Gayatri D. The Effect of Music Therapy and Murotal Therapy on Heart Patients with Anxiety-Depression in the Intensive Care Room: Case Report. *J Heal Cardiovasc Nurs*. 2023;3(1):28–41.
19. Kisman ML. The Effect of Murottal Therapy on The Level of Anxiety and Depression in Patients with Cardiovascular Disease. Vol. 4, UNIVERSITAS ISLAM SULTAN AGUNG SEMARANG. 2023.
20. Moulaei K, Haghdoost AA, Bahaadinbeigy K, Dinari F. The Effect of the Holy Quran Recitation and Listening on Anxiety, Stress, and Depression: A scoping review on outcomes. *Heal Sci Reports*. 2023;6(12).
21. Sri Wahyuningsih I, Sukartini T, Dewi YS, Amal AI, Kisman ML. The Effect of Murottal Auditory Therapy On Anxiety and Comfort Levels in Patients with Cardiovascular Disease. *Healthc Low-resource Settings*. 2023;1–15.
22. Sudirman MS, Fairus M. *Textbook of Anatomy Physiology Edition 2*. 2th ed. Halizah UN, editor. Padang, Indonesia: Insan Cendekia Mandiri; 2021. 99 p.