



Studi Komparasi Gaya Kepemimpinan Antara Rumah Sakit Swasta dan Pemerintah
(Diwa Agus Sudrajat, Rahmi Rahmawati)

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(Dian Anggraini, Auliya Safinatunnajah)

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THE EFFECTIVENESS OF AL-QUR'AN MURROTAL THERAPY ON REDUCING PAIN AMONG POSTOPERATIVE PATIENTS: A SYSTEMATIC REVIEW

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Abstrak

Nyeri merupakan suatu kondisi yang lebih dari satu sensasi yang disebabkan oleh stimulus tertentu. Intensitas bervariasi dari rasa nyeri ringan hingga nyeri berat, tetapi menurun sejalan dengan proses penyembuhan. Manajemen nyeri pada pasien pasca operasi sangat penting baik terapi farmakologi dan nonfarmakologi. Metode farmakologi yang digunakan sebagai manajemen nyeri adalah pemberian analgesic anti nyeri, yang dibagi menjadi dua kelompok: analgesik dan non-narkotik. Nonfarmakologi menyajikan beberapa bentuk terapi musik dan distraksi. Musik adalah kumpulan bunyi yang ditetapkan untuk menghasilkan ritme atau nyanyian, yang dihasilkan dari alat-alat musik yang dapat menghasilkan ritme. Terapi murrotal Qur'an adalah terapi mendengarkan al-qur'an yang merupakan terapi keagamaan dimana seseorang mendengarkan ayat-ayat Al-Qur'an. Penulisan Karya Tulis Ilmiah ini menggunakan metode tinjauan sistematis terhadap literature yang ada, untuk mengevaluasi respon subjektif pasien setelah menerapkan terapi murrotal terhadap penurunan nyeri pasca operasi. Hasil dari penelitian literature review ini terbukti bahwa terapi murrotal Al-Qur'an efektif untuk menurunkan nyeri terhadap pasien pasca operasi. Terapi murrotal Al-Qur'an dapat menggunakan surah yang terkandung dalam Al-Qur'an dan melakukannya selama 15-20 menit.

Kata Kunci: Terapi Murrotal, Nyeri, Post Operasi, Literature review

Abstract

Pain is a condition that is more than one sensation caused by certain stimuli. The intensity varies from mild to severe pain, but decreases with the healing process. Pain management in postoperative patients is very important both pharmacological and nonpharmacological therapies. The pharmacological method used as pain management is the administration of anti-pain analgesics, which are divided into two groups: analgesics and non-narcotics. Nonpharmacologic presents several forms of music therapy and distraction. Music is a collection of sounds that are determined to produce rhythm or singing, which is produced from musical instruments that can produce rhythm. Murottal Qur'an therapy is the therapy of listening to the Qur'an which is a religious therapy where someone listens to the verses of the Qur'an. The writing of this Scientific Paper uses a systematic review method of the existing literature, to evaluate the subjective response of patients after applying murrotal therapy to the reduction in postoperative pain. The results of this literature review study prove that the Murrotal Al-Qur'an therapy is effective for reducing pain in postoperative patients. Murrotal Al-Qur'an therapy can use the surah contained in the Al-Qur'an and do it for 15-20 minutes.

Keywords: Murrotal Therapy, Pain, Post Surgery, Literature review

INTRODUCTION

Surgery or surgery is one of the important medical actions in health services and aims to save lives, prevent disability and complications (1, 2). Surgery is performed by opening or displaying a part of the body and by making an incision in the part of the body that will be treated and repaired and ended with closure and suturing of the wound (3). According to Brunner & Suddarth (2015) the stages of preparation for surgery are physical preparation: before surgery, an examination of past health status, family health history and a complete physical examination (4). Nutritional status: nutritional requirements are determined by measuring height, weight, triceps skin fold, upper arm circumference, blood protein levels. Fluid and electrolyte balance: Fluid balance needs to be considered with fluid input and output; electrolyte levels are in the normal range. Gastric and colonic hygiene: the patient is fasted and emptying the stomach and colon with an enema or lavement. Shaving surgery area: to avoid infection in the area that is performed surgically because hair that is not shaved can be a place to hide germs also disrupt or inhibit the healing process and wound care. personal hygiene: cleanliness of the patient's body is very important for the preparation of surgery because a dirty body can cause infection in the operated area. Bladder emptying: emptying is done by installing a catheter. Post-surgery is the period after surgery that begins when the patient is moved to the recovery room and ends until the next evaluation (5).

Based on data obtained from the World Health Organization WHO (2015) states that 230 million operations annually are carried out throughout the world and an estimated at least 11% of the burden of disease in the world comes from diseases or conditions that

can actually be treated with surgery (6). Research in 56 countries from 192 member countries of the World Health Organization (WHO) in 2008 estimated that 234.2 million surgical procedures performed each year had the potential for complications and death. In Indonesia, surgery in Indonesia in 2014 reached 1.2 million patients and it is predicted that the adoption will increase from year to year (6). According to data from the Indonesian Ministry of Health, that as of February 2018 alone there were 813 operations performed, most of which were urological, plastic and orthopedic surgery (7). In West Java itself, at one of the national referral hospitals it was reported that as many as 1,914 residents queued to undergo surgery (8).

Pain is one of the effects of postoperative actions that are often reported. Pain as a consequence of surgery is an unpleasant sensory and emotional experience, associated with actual or potential tissue damage (9). Surgery can cause actual and potential tissue damage so that a person can experience pain that affects daily activities. Incision pain causes pain mediators and as a result of broken tissue continuity, histamine, bradykinin, serotonin, and prostaglandins will be produced by the body (10). Pain in each person is different in terms of scale or level, and only that person can explain or evaluate the pain they experience (11). Research conducted by Mubarak (2016) states that postoperatively patients will experience severe pain and as many as 75% of patients have unpleasant experiences due to inadequate pain management (12). In addition, research conducted by Nurhayati (2015) shows that 64% of patients experience pain in postoperative wounds with a response range of 4-6 (moderate pain) (13). Another study reported that postoperatively in the

intra-abdominal region, as many as 60% of patients suffered severe pain, 25% moderate pain and 15% mild pain (14).

Pain management in postoperative patients is needed both through pharmacological and non-pharmacological therapy (15). Pharmacological methods used as pain management are analgesic (anti-pain), which are divided into two groups, namely non-narcotic analgesics. For example: Paracetamol, side effects if used excessively will cause fever, sore throat, weak body, cloudy or bleeding urine and narcotics for example: Morphine, side effects that occur after consuming morphine drowsiness, itching, sweating, nausea, vomiting, constipation, sleep disorders (16). At present, non-pharmacological methods are an effective alternative for controlling postoperative pain. Non-pharmacological methods vary widely that can be applied to help reduce postoperative pain such as post-laparotomy, post-org, and labor pain. Nonpharmacologic there are several types including distraction, music therapy, acupressure, deep breathing relaxation (17). Of the various types of methods available in nonpharmacology that are easily applied and have a lot of effect to reduce pain, namely audio / auditory distraction therapy, also called Murrotal Al-Qur'an therapy (18).

Music is a collection of sounds that are arranged to produce rhythm or songs, which are produced from musical instruments that can produce rhythm (10). Music has benefits for treating and curing ailments. Music has been proven to reduce the frequency of heartbeats, reduce anxiety and eliminate pain (19). Music can reduce pain, depression, and increase relaxation (20). Harmonization in beautiful music will enter the ear in the form of sound, drum the eardrum, vibrate the hair cells in the cochlea to further through the

cochlear nerve to the brain and create an imagination of beauty in the right brain and left brain which will have an impact in the form of comfort and change feeling. This change of feeling, because music can reach the left region of the cortex (4). Music has several types including classical music therapy, mozart music therapy, keroncong music therapy, campursari music therapy, gamelan music therapy and murrotal music therapy (21). One therapy that is part of music therapy and spiritual therapy is the Murrotal Al-Qur'an therapy.

Murrotal Al-Qur'an therapy becomes part of music therapy (22), because the Murrotal Al-Qur'an can be interpreted as a recording of the Al-Qur'an's voice which is in doubt by a Qori (23). Murrotal Al-Qur'an is also a spirituality therapy because it makes individuals remember Allah SWT. Therefore, the Murrotal Al-Qur'an therapy becomes a combination between music therapy and spirituality therapy. Murrotal Al-Qur'an effective distraction technique, which can reduce physiological pain, stress, and anxiety by diverting one's attention from pain (24). Murrotal Al-Qur'an is one of music with an intensity of 50 decibels which has a positive influence on the listener (25).

Al-Qur'an Sounds are sounds with a certain frequency and length. Coordination that will affect the mental and psychological state of humans thereby increasing defense against disease (26). Al-Qur'an reading is a collection of sound frequencies that reach the ears, then spread to brain cells and exert influence in them through the gaps in the flow of electricity that are born in the cells. The cells also react along with this flow and vibrate in rhythm with it (27). From research conducted by Heny & Ummi (2017) shows that reading the verses of the Qur'an can influence the occurrence of physiological and

psychological changes that are very large when listened with focus. With as much as 97% results listening to the verses of the Qur'an can provide calm and reduce pain (28). This literature review aims to determine the effectiveness of Al-Qur'an murrotal therapy on pain relief in postoperative patients.

METHODS

This study is a systematic review of the existing literature to evaluate the subjective response of patients after the application of murrotal therapy to the reduction in postoperative pain.

Searching strategies

The search strategy aims to find articles that have been published. Data from this review literature was obtained through an online search process. The search was carried out through Google Scholar because journals about murrotal therapy were only found in the search application. The keywords used are a combination of Murrotal Therapy and Post Surgery Pain. The search focused on journals that used murrotal therapy in postoperative patients who published from 2014 to 2019. The articles used in this discussion were articles in Indonesian and English.

Inclusion criteria for the search are studies conducted in postoperative patients, adulthood, with postoperative wounds, interventions by listening to the Murrotal Al-Qur'an, with outcomes focused on pain reduction on a medium scale (4-6 scale), and the type of research is experimentation. Exclusion criteria for this search were post cessaria.

Screening Article

Article screening is carried out through the initial title and then abstract screening is carried out to identify which articles have the potential to meet the desired criteria. After that a review of all articles considered

significant at initial screening was conducted. Additional articles not found in the initial literature search were obtained by reviewing the references in the study. Two reviewers reviewed each abstract based on inclusion criteria. The first reviewer checks all the titles and abstracts the aim is to avoid repeating the article. Separately, the second reviewer rated the title and abstract samples according to the same criteria to be chosen. Furthermore, the two reviewers agreed on which articles met the inclusion criteria.

Data Extraction

Each article is processed data by making a summary of each article which includes, author, year, country of origin of the study, type of study, sample (including the number of samples and inclusion criteria), interventions, results, and research limitations.

Assessment of Study's quality

Assessment of the quality of each article is carried out using the standard format of The Critical Appraisals Skill Program (CASP), which is already in Indonesian. The criteria used to evaluate whether each study is of good quality and a minimum risk of bias consists of 3, namely whether the results of the study are valid, what are the results, will the research results help locally. There are a total of 11 checklist items that are used to do the assessment with answer choices yes / not reported.

RESULTS

Search Results

From the results of searches conducted through Google Scholar A total of 300 journals were obtained using a combination of keywords Murrotal Therapy and Post Surgery Pain. Then as many as 79 journals were obtained using a combination of keywords Murrotal Therapy and Post Surgery Pain and

wound care. Filtration articles are only for articles from 2014 to 2019. So only 9 articles met all search criteria. Published from 2014 as many as 1 journal, in research (Eldessa), in 2015 as much as 1 journal, in research (Nurul Khashinah), in 2018 as many as 4 journals, in research (Marliyana, Bahari, Yuda, Nanik Puji), 2019 is about 3 research (Nani, Susi, Noor).

Research Characteristics

The method used was quasi-experimental using One Group pre-test post-test design design of 5 journals. The number of samples used ranged from 10 to 40. The intervention conducted by Marliyana (2018) was given a Murrotal Al-Qur'an to measure the scale of pain before and after murrotal therapy, the author did not explain what surah was used and there was no time for giving murrotal therapy (29). A study of Nani (2019) the intervention was measured in pain scale twice before and after given murrotal therapy, murrotal therapy using surah Ar-Rahman was given for 15 and 25 minutes (34). Jurnal Nurul (2015) giving murrotal therapy using juz'amma, the author does not explain the time of therapy. Eldessa Journal (2014) interventions carried out by each group before and after the administration of pain levels were assessed using the Numeric Rating Scale (NRS) 0-10 and examined blood pressure, the number of pulses per minute, breathing frequency per minute and measurement of body temperature, the authors did not explain the surah used and the timing of therapy. Jurnal Bahari (2018) there are several tools used in this intervention, namely, questionnaires, SOP (Standard Operational Procedures) giving Qur'anic total therapy, the author does not explain what surah is used, is not explained when the murrotal therapy is, and does not explain sop used. The instrument used in the majority of study was Numeric

Rating Scale (NRS), consist of 11 numbers with 5 categories: 0 no pain, 1-3 mild pain, 4-6 moderate pain, 7-9 severe pain, 10 severe pain.

Yuda' study (2018) was given the intervention of deep breathing relaxation techniques and the Murrotal Al-Qur'an of Al-Fatihah and Ar-Rahman letters, given for 3 days and 5 meetings with 15-20 minutes of therapy time. Journal of Nanik (2018) was given murrotal quran therapy for 15 minutes, the author did not explain the surah used for therapy. Journal of Susi (2019) the intervention uses the pain scale observation sheet, the murrotal therapy uses the Surah Ar-Rahman and uses a tool to measure the intensity of the pain of the Bourbanis Scale, the authors do not explain the time of administration of the murrotal therapy. Journal of Noor (2019) the intervention uses the Murrotal Al-Qur'an therapy, the author does not explain what surah is used and the time of murrotal therapy.

Main Findings

A total of 9 journals that discuss murrotal therapy can reduce postoperative pain. Marliyana's study (2018) on murrotal therapy for postoperative pain reduction reported that the average pain scale of patients after being given murrotal therapy was mild pain, whereas before administration of murrotal the average pain scale was moderate. The results of Nani's study (2019) stated there were differences in pain after being given murrotal therapy. Nurul's research results (2015) reported that there was an effect of murrotal juz'amma therapy on reducing the level of pain in post op patients. In the study of Eldessa (2014) murrotal therapy is better in reducing pain compared with music therapy. Bahari's research results (2018) reported that there was an effect of murrotal administration on decreasing pain level.

Yuda research results (2018) states that the average pain scale before given murrotal therapy is 6 and decreased to 3 after being given murrotal therapy. In the journal Nanik (2018) 40 respondents before doing murrotal quran therapy were mostly moderate pain 24 (60.0) and after doing murrotal quran therapy most of the 24 pain respondents were mild (60.0%). Susi's study (2019) after being given murrotal therapy, pain was reduced by pain scale 3 with a total of 4 people (50.0%), whereas before being given therapy experienced moderate pain with a pain scale of 5 with a total of 3 people (37.5%) and a scale pain 6 with a total of 3 people (37.5%).

Noor's research (2019) after the Qur'anic murrotal therapy there was a change in moderate to mild pain totaling 18 people (90%) of respondents and 2 people (10%) of respondents experienced moderate pain.

From the results of a summary of the systematic review found 9 researchs. this article can be concluded that the Murrotal Al-Qur'an therapy is effective for reducing pain in postoperative patients and the average pain scale before being given the Murrotal Al-Qur'an therapy that is a moderate pain scale, after being given therapy murrotal Al-Qur'an decreases to mild pain scale.

Table. 1
Characteristics of Included Studies and Main Findings

Author (Year), place	Sample	Method	Instrument	Intervention	Results
Marliyana, (2018), Lampung.	Samples: 30 post-Laparatomy patients. Sample Technique: The author does not explain the sample technique used.	Quasi Experiment Using One group pretest posttest design.	The author does not explain what instruments are used.	Perform murrotal al-Qur'an to measure the scale of pain before and after therapy. The author does not explain what surah is used and does not explain the time of giving total therapy.	Bivariate analysis is known to have an effect of giving a murrotal quran therapy to the pain scale of post op patients when wound care is performed.
Nani Sri Mulyani, Iwan Purnawan, Arif Setyo Upoyo, (2019), Purwokerto.	Sampel: 30 responden. Sample Techniques: <i>consecutive sampling</i> .	Quasi experimental dengan rancangan non- randomized pre-test post- test with control group design.	Numeric Rating Scale (NRS).	Murrotal therapy using the Ar-Rahman chapter is given for 15-25 minutes.	There were differences in the pain scale before and after being given murrotal therapy in the 15-minute group and the 25-minute group and the difference in pain scale reduction in the 15 minute group and 25 minute group.
Nurul Khashinah, (2015), Yogyakarta.	Sample: 10 patients post orif. Sample Techniques: <i>porposive sampling</i> .	Pre-experiment with one group pre-test post-test design.	Numeric Rating Scale (NRS).	Administration of murrotal therapy using juz'amma, the authors do not explain the time of administration of therapy.	There is an effect of juz'amma murrotal therapy on reducing the level of pain of post orif patients in PKU Muhammadiyah Hospital Yogyakarta p = 0,000: p <0.05.
Eldessa Vava Rilla, Helwiyah Ropi, Aat Sriati, (2014), Jawa Barat.	Sample: 36 respondents. Sample Technique: The author does not explain the sample technique used.	Quasi-experimental through a pretest-posttest control group design approach.	Numeric Rating Scale (NRS).	The author does not describe the sura used and the time of the therapy.	Murrotal therapy is better at reducing pain levels compared to music therapy (table 2). Based on the calculation results, the value of p = 0.287 is obtained. The examiner will reject ho if p <a .05. When compared with a significant level.
Bahari Yan Syah, Dwi Budi P, Khodijah (2018), Tegal.	Sample: 10 people Sample Technique: accidental sampling.	Queasy-experiments with pre-test and post-test designs of two groups.	Numeric Rating Scale.	The author did not explain the surah used, did not explain the time of therapy and did not explain the sop used.	Using the Wilcoxon signed rank test test shows the p-value (0,000) <a (0.05) which indicates ho is rejected and ha is accepted or contained the effect of giving Murrotal Al-Qur'an therapy to the

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Yuda, Hendri Tamara, Palupi, Indraswari Ratna, (2018), Purwokerto.	Sample: 1 patient post fracture surgery. Sample Technique: The author does not explain the sample technique used.	Queasy-experiments with pre-test and post-test designs of two groups..	Numeric Rating Scale.	Intervention of breathing techniques breathing deep and murrotal Al-Qur'Aan Surah Al-Fatihah and Ar-Rahman, given for 3 days and 5 meetings with 15-20 minutes of therapy time.	decrease in pain level in post orif patients in Soesilo Slawi Regional Hospital. After being given the application of deep breathing relaxation techniques and murrotal therapy to reduce the intensity of pain in post op fracture patients on day 2, the level of pain intensity of the patient decreased from scale 6 (moderate pain) to scale 3 (mild pain).
Rochmawati, Nanik Puji, Darsini, Ita ni'matuz,(2018). Paviliun Asoka RSUD Jombang.	The population in this study were all postoperative pain patients. Total: 242 postoperative pain patients. Sample: 40 respondents. Sample technique: accidental sampling.	Pre-experiment with one group pre-test post-test approach.	The instrument is a Checklist sheet.	Given murrotal quran therapy for 15 minutes, the author does not explain the surah used.	Of the 40 respondents before doing the total qur'an therapy, the majority of moderate pain was 24 respondents (60.0%) and after doing the total qur'an therapy the majority of mild pain was 24 respondents (60.0%).
Susi Susanti, Yuli Widyastuti, Siti Sarifah, (2019). RS PKU Muhammadiyah Karanganyar.	Sample: 8 respondents. Sample Technique: purposive sampling.	Pre-Experiments using the One Group pretest-posttest approach.	Pain Scale Bourbanis	Using pain scale observation sheet, Bourbanis Scale is a tool to measure pain intensity, murrotal therapy using Surah Ar-Rahman, the authors do not explain when giving murrotal therapy.	8 respondents were known that before being given treatment the majority of respondents experienced moderate pain with a pain scale of 5 with a total of 3 people (37.5%) and a pain scale of 6 with a total of 3 people (37.5%). Results After being treated the majority of pain was reduced by a pain scale of 3 by a total of 4 people (50.0%).
Noor Khalilati, Muhammad Humaidi, (2019). RSUD Ulin Banjarmasin.	The population in this study were all patients who suffered head injuries. Sample: 20 respondents. Sample technique: purposive sampling.	Quasi eksperimen dengan one group pretest posttest design.	Numeric Rating Scale (NRS).	Given Murrotal Al-Qur'an listening therapy. The author does not explain the surah used and the timing of the murrotal therapy.	After conducting the Murrotal Al-Qur'an therapy there was a change in the response to moderate to mild pain totaling 18 people (90%) of respondents, and 2 people (10%) of respondents who experienced moderate pain.

DISCUSSION

The results of a systematic review study of 9 of these articles indicate that the Murrotal Al-Qur'an therapy is effective for reducing postoperative pain. Marliyana's research results (2018) show that before the administration of murrotal quran therapy, the pain scale is moderate and after giving the murrotal quran therapy, the pain scale decreases to a mild pain scale (29). The results of this study are the same as the research of Hendri Yuda (2018) study conducted in a population of patient's post-fracture surgery, murrotal therapy techniques can reduce the intensity of pain in postoperative patients, the level of pain intensity has decreased from scale 6 (moderate pain) to scale 3 (pain light) (35). In addition, the study of Noor Khalilati (2019) showed that after the Qur'an murrotal therapy there was a change in the scale of moderate to mild pain totaling 18 people (90%) respondents, and 2 people (10%) respondents who experienced moderate pain (31).

Murrotal Al-Qur'an therapy is proven to be able to activate body cells by changing sound vibrations into waves that are captured by the body, decreasing pain receptor stimuli (36). According to Tunner's research (2013) found that music containing Al-Qur'an readings can reduce postoperative pain (37). Reading the Qur'an as a healer of physical and spiritual illness through sound, and intonation. Murrotal sounds can activate natural endorphins, increase feelings of relaxation, and distract attention from anxiety, tension and pain. The relaxed situation is able to distract pain so that the pain is felt to be reduced (38).

The effectiveness of inter-Qur'an murrotal therapy interventions is easier to do or apply, using Numeric Rating Scale (NRS) measuring instruments that are carried out before and

after the Murrotal Al-Qur'an listening therapy. The Numeric scale is used instead of the word description tool. Assess pain with a scale of 0-10, scale 0 (no pain), 1-3 (mild pain), 4-6 (moderate pain), 7-10 (severe pain). The most widely used instrument, the Numeric Rating Scale (NRS), is widely used as a measurement tool to facilitate the measurement of pain scales for respondents who will be given Murrotal Al-Qur'an therapy. The tools used in the Qur'an murrotal therapy are the Music Player (MP3), Player (murrotal music) in a cellphone, headset. The findings of this study are proven by another systematic review conducted at Ulin Hospital Banjarmasin (31).

Therapy with strains of recitation of the Qur'an can be used as a new alternative therapy as a distraction therapy even better than other audio therapies (39). Al-Qur'an reading therapy will give effect to sound waves and subsequently this sound vibration will be able to give changes to body cells, skin cells and heart. This vibration will enter the body and change the resonant changes in both particles, body fluids. Resonant vibrations stimulate brain waves and activate the pain pressure pathway. This pathway will provide a blockade of pain neurotransmitters that will provide a calming effect and reduce acute pain and relaxation (41).

But in reality, at the hospital, health workers only provide interventions using drugs and deep breathing relaxation techniques to reduce pain in postoperative patients. Difficulties in implementation in this murrotal therapy, when the respondent is experiencing pain, but the respondent experiences hearing loss and when the respondent experiences a severe pain scale, murrotal therapy is less effective to administer. The ease in the Murrotal Al-Qur'an therapy is that the method of applying the intervention is easy to do,

without the expense, the tools or instruments used are easy to obtain and only take 15-20 minutes for each of these murrotal therapies. Weaknesses of several articles in this review are, the author does not explain in detail the number of samples used, the sampling technique used, the surah used for murrotal therapy, the instruments used, the interventions carried out, and the time taken for murrotal Al-therapy.

Murrotal Al-Qur'an therapy can be a complementary therapeutic choice to serve as one of the nursing interventions in the clinical realm in addressing the reduction in pain scale in postoperative patients. Al-Qur'an murrotal therapy techniques can be applied as one of the non-pharmacological therapies, because this therapy does not require any costs, therapies that are easily carried out by respondents and therapies that do not cause side effects. In its implementation, the Murrotal Al-Qur'an therapy uses Numeric Rating Scale measuring instruments, instruments used such as Music Players (MP3), Players (murrotal music on mobile phones), and headsets.

CONCLUSION

Based on the literature review results of these 9 articles, it can be concluded that the Murrotal Al-Qur'an therapy has been proven to have a positive effect on reducing pain scale in postoperative patients. The results provide tangible evidence that Murrotal Al-Qur'an therapy is effective for reducing pain in postoperative patients, compared to standard hospital therapy. Murrotal therapy can use the surah contained in the Qur'an and is carried out for 15-20 minutes. The results of this literature review study are expected to be one of the non-pharmacological interventions besides relaxation and distraction techniques in reducing

postoperative pain. The results of this literature review study provide experience and additional knowledge about the effectiveness of the Murrotal Al-Qur'an on reducing pain scales in postoperative patients.

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