

# The Effect of Diabetes Mellitus Gymnastics Movement on Decreasing Current Blood Pressure Levels (GDS) in the Elderly

## Bambang Setyawan<sup>1\*</sup>, Rona Febriyona<sup>1</sup>, Rosmin Ilham<sup>1</sup>

<sup>1</sup>Study Program of Nursing, Faculty of Health Science, Universitas Muhammadiyah Gorontalo, Gorontalo, Indonesia

Article Info	Abstract
Article History: Received: 22-07-2024 Revised: 26-07-2024 Accepted: 27-07-2024	<b>Background:</b> Diabetes mellitus is a disease with increased levels of sugar (glucose) in the body, there is a therapy for diabetes, namely diabetes mellitus gymnastics therapy <b>Objective:</b> The purpose of the study was to determine the effect of diabetes mellitus
*Corresponding Author: Bambang Setyawan, Study Program of	gymnastics movements on reducing blood pressure levels during (GDS) in the elderly <b>Methods:</b> Research design using pre-experimental methods <i>with</i> a one-group pre-post test design <i>approach</i>
Nursing, Faculty of Health Science, Universitas Muhammadiyah Gorontalo Email:	<b>Results:</b> The results showed an average blood sugar level when not controlled as much as 9 before being given exercise and blood sugar levels when controlled as many as 8 people after being given diabetic exercise, the results of data analysis showed a value of pValue = 0.040<0.05.
setvawanbambang278 @gmail.com	<b>Conclusion:</b> Conclusion there is an influence of diabetes mellitus gymnastics movements on reducing current blood gulah levels (GDS) in the elderly at the Mootilango Health Center. Advice for the elderly to remain diligent in controlling blood sugar in health facilities.
	Keywords: Elderly; Current Blood Pressure Level (GDS); Diabetes Mellitus Gymnastics

## Introduction

Diabetes mellitus or known as diabetes by the wider community is a long-term disease characterized by increased levels of sugar (glucose) in the body, this occurs due to a disorder in the body so that the body is unable to glucose blood into cells in the body so that glucose accumulates. Targets with good diabetes assessment standards include blood glucose 80-200 mg / dL, triglycerides < 150 mg / dL, BMI 18.5-22.9 kg / m2 and blood pressure 130 / 80 mmHg(1).

Based on data from the World Health Organization (2020), the global prevalence of diabetes in adults over 18 years rose from 4.7% to 8.5% in 2014. Compared to developed countries, the prevalence of diabetes is increasing faster. In 2016, 1.6 million people died directly from diabetes. The World Health Organization estimates that diabetes was the seventh leading cause of death in the world in 2016. From data from the International Diabetes Federation (IDF) (2020), there are around 463 million adults (20-79 years) with diabetes, causing as many as 4.2 million deaths in 2019. In addition, the number of diabetic patients is expected to continue to increase to 700 million by 2045(2).

Ministry of Health of the Republic of Indonesia Ministry of Health, RI (2018) the prevalence of diabetes mellitus in Indonesia based on a doctor's diagnosis at the age of >15 increased to 2%. Where the highest prevalence of diabetes mellitus is found in DKI Jakarta Province with a prevalence of 3.4%.while for Gorontalo Province ranks 6th out of 34 provinces with a total prevalence of 2.4%. Based on data from the Gorontalo Provincial Health Office in October (2020), the largest number of diabetes mellitus patients was 3,638 people. The number of people with diabetes mellitus in the working area of the Mootilango Health Center in 2021 reached 72 people(3).

Diabetes mellitus gymnastics or gymnastics for people with diabetes mellitus whose emphasis is on rhythmic movements of muscles, joints, vascular and nerves in the form of stretching and relaxation, there are several goals of DM gymnastics is to lose weight, provide psychological benefits, improve musculoskeletal symptoms of muscles, bones, joints and inhibit and improve risk factors for cardiovascular disease that occur in many people with diabetes mellitus and control blood sugar. With controlled blood glucose levels, it will prevent one of them, namely diabetic ulcers (4).

Aerobic movements in diabetic gymnastics are a series of movements that are chosen deliberately by following the rhythm of music so as to give birth to certain rhythmic provisions, continuity and duration

to achieve certain goals. Diabetes exercise will be better done within 45 minutes with a frequency of 3-5 times per week. At the time of exercise, the muscles contract and then experience relaxation. Sugar will be used or burned for energy. For energy needs, sugar will be moved from the blood to the muscles during and after exercise. Thus, blood sugar will drop. In addition, exercise makes insulin more sensitive. Insulin will work better to open the entrance for sugar into cells(5).

The movement of diabetes mellitus gymnastics consists of the initial movement, namely the initial posture of standing upright, facing forward, both hands straight on the sides of the body, straight palms facing inward, fingers tightly attached to the thighs, both feet opened shoulder-width straight ahead. Warm-up movement that aims to prepare the joint muscles to be able to perform movements properly and not injured. Transitional movements, before getting into the core movement to prepare the muscles of the body before going into the previous movement. Core movement, for muscle strength and body strength, agility and coordinating the movement of body muscles and joints. Cooling movement, to reduce the increased heart rate in core movements and relax muscles gradually(4).

Preliminary study by observation at the Mootilango Health Center there were 72 elderly people with diabetes mellitus. From the results of interviews conducted on 5 elderly people with diabetes mellitus, it is known that routine treatment is only with drugs given by the local puskesmas without therapy such as special gymnastics for people with diabetes mellitus, diabetes mellitus treatment only with drugs will require a long time in the healing process so treatment needs to be balanced with therapy such as diabetes mellitus exercises. In addition to interviewing the elderly, researchers also interviewed one of the health workers, it is known that diabetes mellitus gymnastics is rarely used as an intervention in the management of diabetes mellitus, especially in the elderly, causing an increase in the number of people with diabetes, a decrease in blood flow when in the elderly only depends on the drugs given and also the lifestyle of the elderly themselves, at the Mootilango Health Center. Based on the results of observations and interviews, it can be concluded that diabetes exercises, especially in the elderly, have not been used as an intervention or alternative treatment in the management of diabetes mellitus. Based on the results of the background of the problem and the results of observations and interviews above, the researcher is interested in conducting a study "The effect of diabetes mellitus gymnastics movements on reducing blood levels during (GDS) in the elderly at the Mootilango Health Center".

## Methods

#### Study Design

The research design used in this study was pre-experimental with a one-group pre-post test design approach. The characteristic of this type of research is to use causal relationships by involving one group of subjects

#### Samples/Participants

State who the sample is, how many samples the author involved in this study with justification calculations. In addition, describe the sampling technique for recruiting samples. And explain the inclusion and exclusion criteria for selecting samples.

#### Instruments

The sampling technique used in this study is non-probality sampling type accidental sampling, which is taking cases or samples that happen to exist or are available somewhere according to the research context, the number of samples in this study was 13 elderly people

#### Interventions

Observations were made before and after the subjects were given the intervention. In this study, the elderly who observed initial blood glucose (pre-test), then given diabetes mellitus gymnastics intervention. After the intervention, observe blood glucose again (post-test) to determine blood glucose levels.

#### **Data Collection**

Data collection through documents such as data archives from Puskesmas Mootilango. Before the researcher conducts the study, the researcher coordinates with the doctor as the person in charge of elderly activities, namely prolanist activities to obtain information on respondents who will be sampled in the study, then the researcher explains to correspondents who meet the inclusion criteria about the research to be conducted, asks the correspondent whether he is willing to be a respondent in the study or not. As well as distributing consent sheets to become respondents in research (Informed Consent), researchers distribute questionnaires to respondents and respondents fill out questionnaires. The questionnaire was taken again 30 minutes later, observing blood sugar levels in Diabetes Mellitus patients

before being given gymnastics, after the examination respondents were directed to follow gymnastics for 45 minutes after doing gymnastics researchers checked blood sugar on respondents and recorded the results, after the examination was completed the researcher contracted time with respondents to do diabetes exercises, Diabetes gymnastics is carried out for 1 week as much as 3x with an interval of 2 days.

#### **Data Analysis**

Univariate analysis is carried out to describe the variables that exist descriptively, both independent variables and dependent variables. The independent variable in this study was diabetes mellitus gymnastics. And the dependent variable in this study is changes in blood glucose levels at any time. Bivariate data analysis in this study was to analyze blood glucose levels before and after intervening using the paired t-est test with a = 0.05, if the results of data analysis obtained a probability value of p < 0.05 then Ho was rejected and Ha was accepted which means there is an influence of diabetes mellitus gymnastics movements on changes in blood glucose levels when in the elderly at the Mootilangp Health Center, Gorontalo Regency.

#### **Ethical Considerations**

Research ethics was obtained from the ethics committee of the Faculty of Health Sciences, University of Muhammadiyah Gorontalo Indonesia. Before the research was conducted, a consent sheet was given to become a respondent. The purpose of informed consent is for the subject to understand the purpose and purpose of the study, knowing its impact. If the respondent is willing then the respondent must sign a consent sheet. But if the respondent is not willing, then the researcher must respect the respondent's rights. The researcher applied for permission to the head of the Mootilango Health Center, Gorontalo Regency first, then after obtaining approval, the researcher conducted research.

## Results

Characteristics Of Distribution Of Respondents

l able 1	
ncy Distribution Of Re	espondents
n	%
8	61.5
5	38.5
13	100.0
	ncy Distribution Of Re n 8 5

Source: Data Primer, 2022

	Table 2	
Frequency Dist	ribution Of Respond	ents' Sex
Gender	Ν	%
Man	4	30.8
Woman	9	69.2
Total	13	100.0

Source: Data Primer, 2022

	Tabel 3			
Distribution of Respondents' Education Frequency				
Education	Ν	%		
SD	7	53.8		
SMP	4	30.8		
SMA	2	15.4		
Sum	13	100.0		

Source: Data Primer, 2022

Frequency distribution of bloc	d sugar levels before	e diabetes mellitus exercise		
Kadar Gula Darah	Ν	%		
Sewaktu				
Terkontrol	4	30.8		
Tidak terkontrol	9	69.2		
Jumlah	13	100.0		

Frequency distribution of blood sugar levels before diabetes mellitus exercise

Sumber : Data Primer, 2022

Frequency distribution of blood sugar levels after diabetes mellitus exercise

Frequency distribution of blood sugar levels after diabetes mellitus exercise				
Current Blood Sugar	Ν	%		
Levels				
Controlled	8	61.5		
Uncontrolled	5	38.5		
Sum	13	100.0		

Source: Data Primer, 2022

Distribution of the Effect of Diabetes Mellitus Gymnastics Movement on Decreasing Blood Pressure Levels During Table 6

Distribution of the Effect of Diabetes Mellitus Gymnastics Movement on Decreasing Blood Pressure
Levels During

Levels During						
Decrease in Current Blood Flow Levels (GDS)	Mean	Correlation	t	Sig	Sig. (2-tailed)	95% CI
Before- After	3.077	.507	2.309	0,077	0,040	.174 5.980
Devene De la minera 0000						

Source: Data primer 2022

### Discussion

The results of this study show that the average age of respondents aged 60 years and over proves that age affects blood glucose levels because aging can decrease insulin sensitivity so that it affects glucose levels in the blood cannot be metabolized optimally, besides that the elderly who enter the age of 60 years will experience reduced physical activity as a result of limited body ability causes the elderly at risk of suffering from obesity so as not to close is likely to have diabetes mellitus.

According to Tiurma (2021) with increasing age, intolerance to glucose also increases. Glucose intolerance in the elderly is often associated with obesity, lack of physical activity, reduced muscle mass, the presence of comorbidities and drug use, in addition to that in elderly people there has been a decrease in insulin secretion and insulin resistance. The risk of developing blood sugar levels will increase with aging, experts agree from the age of 45 years and above(6).

Based on the description above, researchers assume that the age group at risk for suffering from diabetes mellitus is the age of 46-65 years because at that age there is glucose intolerance, so that the average elderly suffer from diabetes mellitus in addition to glucose intolerance in the elderly physical activity has been reduced so it is very vulnerable to diabetes mellitus because physical activity plays a role in controlling the body's blood sugar by converting glucose into energy, All body movements that burn calories such as sweeping, going up and down stairs, ironing, gardening, leisurely walking and exercising.

According to Tiurma (2021) one of the risk factors for diabetes mellitus is gender. In Nezhad's study, there was a difference in the percentage of people with diabetes mellitus between men and women. The percentage of diabetics in men as much as 5.1% while in women as much as 5.8%. Various studies have

found that women suffer more from diabetes mellitus than men. This is associated with physical activity, where women have less physical activity than men, especially housewives.

Blood sugar levels before diabetes mellitus exercise was given to the elderly in the work area of the Mootilango Health Center the most, namely blood sugar levels when not controlled as many as 9 respondents (69.2%) and blood sugar levels when controlled as many as 4 respondents (30.8%).

Before diabetes exercise was carried out, researchers had told respondents not to take drugs, not to eat sweet foods or drinks, not to think too much, not to smoke and to eat breakfast from home. Based on the results of the interview, it is known that respondents have never done diabetes mellitus gymnastics in maintaining their blood sugar levels. All that is done is to maintain a diet and always take drugs from the doctor to regulate blood sugar before and after eating.

In this study there were 9 respondents whose blood sugar levels were not controlled, from the interview results obtained that respondent had never done diabetes mellitus gymnastics in maintaining their blood sugar levels, while the actions taken to maintain blood sugar levels of respondents only regulated eating diets and consumed drugs from doctors causing respondents to become dependent on doctors' drugs. In addition, respondents rarely follow the elderly posyandu so they are less likely to receive information about keeping blood sugar levels up.

While there were 4 respondents with blood sugar levels when controlled, from the interview results obtained that although respondents had never done diabetes mellitus gymnastics in maintaining their blood sugar levels, respondents often followed the elderly posyandu so that the latest information about the prevention of rising blood sugar levels when known by respondents such as in addition to maintaining a diet and always taking blood sugar regulating drugs before and after eating prevention What can be done by respondents independently at home is by consuming traditional medicines and herbal medicines that have been proven to reduce blood sugar levels such as aloe vera, cinnamon, bitter melon, ginger and gingseng. The importance of providing information to respondents about the prevention of rising blood sugar levels at any time.

Uncontrolled Diabetes Mellitus will cause various complications. About 20-40% of diabetic patients will develop diabetic nephropathy which is the most major cause of end-stage renal failure. One million adults in the Southeast Asia Regional region in 2015 died from kidney disease as a result of one of the causes of diabetes mellitus complications and ranks first as a cause of death due to complications(7).

The results showed that after participating in diabetes exercises, blood sugar levels were controlled as many as 8 respondents, from the interview results obtained that in addition to participating in diabetes mellitus exercises, respondents often participated in the elderly posyandu so that the latest information about preventing rising blood sugar levels when known by respondents such as consuming traditional medicines and herbal medicines that have been proven to reduce blood sugar levels when like aloe vera, cinnamon, bitter melon, ginger and ginseng In addition, respondents followed the advice of doctors, namely maintaining a eating diet. So that by holding diabetes mellitus gymnastics can increase respondents' knowledge in preventing rising blood sugar levels while in the form of exercise or physical activity.

Diabetes mellitus is one of the chronic diseases that requires long treatment time, very expensive treatment financing, besides that the prevalence of diabetes mellitus also continues to increase. Lifestyle changes such as eating, reduced physical activity and obesity are considered as the most important causative factors so that uncontrolled blood sugar levels that make us exposed. If not vigilant, not only us but our children can also become victims of it. Therefore, diabetes mellitus can arise in people without a history of diabetes mellitus in the family, where the process of disease takes years and mostly takes place without symptoms(8).

Diabetic gymnastics is aerobic physical exercise for diabetics with a series of movements that are chosen deliberately by following the rhythm of music so as to give birth to certain rhythmic provisions, continuity and duration to achieve certain goals. Diabetes exercise will be better done within 45 minutes with a frequency of 3-5 times per week(9).

Diabetic gymnastics can cause a decrease in blood glucose, this is because when doing physical exercise there is an increase in glucose use by muscles. Furthermore, there is an increase in blood flow which causes more capillary meshes to open, so that insulin receptors are more available and more active to lower blood glucose, after being given diabetic exercise interventions found almost all diabetics experience a decrease in blood sugar levels, this is because when doing gymnastics there is an increase in glucose use by muscles, gymnastics is also to burn body calories so that blood glucose can be used for energy(10,11).

The results showed a decrease in blood sugar levels after diabetes mellitus exercises, where before gymnastics was given there were only 4 respondents with blood sugar levels when controlled and there were 8 respondents with blood sugar levels when controlled after being given gymnastics, it can be seen that there was a decrease in blood sugar levels before and after gymnastics in 4 respondents, besides

that the average blood sugar levels of respondents before participating in gymnastics were at 171 mg / dL to 189 mg / dL, after participating in gymnastics on average there was a decrease in blood sugar levels to 163 mg / dL to 153 mg / dL which means there was a decrease of 8 to 36 mg / dL, from the interview results obtained that in addition to participating in diabetes mellitus gymnastics respondents often follow the elderly posyandu so that the latest information about preventing rising blood sugar levels when known by respondents such as consuming traditional medicines and herbal medicines that have been proven to reduce levels Current blood sugar such as aloe vera, cinnamon, bitter melon, ginger and ginseng In addition, respondents follow the advice of the doctor, namely maintaining a eating diet. So that by holding diabetes mellitus gymnastics can increase respondents' knowledge in preventing rising blood sugar levels while in the form of exercise or physical activity(12,13).

Based on the description above, researchers concluded that diabetic gymnastics is one of the most effective physical activities if done regularly. Aerobic exercise that follows a series of sequential movements will strengthen and develop muscles and all parts of the body. Regular exercise will provide more benefits, blood sugar and blood fats are controlled, blood circulation is better, blood pressure is stable and weight loss. This diabetic exercise is done 3 times a week, but there are still many. Respondents who did not comply with the implementation of diabetic gymnastics resulted in the non-achievement of the effect of gymnastics, namely a decrease in fasting blood glucose(14,15)

## Conclusion

The characteristics of respondents who are in the working area of the Mootilango Health Center based on the age of the elderly, namely the age of 60-65 years, as many as 8 respondents. The highest gender of the elderly is the female gender as many as 9 respondents. The most elderly education is elementary school as many as 7 respondents. Blood sugar levels before diabetes mellitus gymnastics were given to the elderly in the work area of the Mootilango Health Center, the most were blood sugar levels when uncontrolled as many as 9 respondents and the lowest was blood sugar levels when controlled as many as 4 respondents. Blood sugar levels after being given diabetes mellitus exercises to the elderly in the work area of the Mootilango Health Center were the most blood sugar levels when controlled as many as 8 respondents and the lowest was blood sugar levels when not controlled as many as 5 respondents. There is an influence of diabetes mellitus gymnastics movement on reducing current blood gulah levels (GDS) in the elderly at the Mootilango Health Center, Gorontalo regency with a value of Pvalue = 0.040>0.05.

# Acknowledgment (if any)

I would like to express my gratitude to the University of Muhammadiyah Gorontalo, and the community.

# References

- 1. EvangeLine, Jatnika G, Nurhartini S. Pengaruh Senam Aerobik Low Impact Terhadap Gula Darah Puasa Pada Klien Diabetes Melitus. Pinlitamas 1. 2018;1(1):275–83.
- 2. IDF. IDF Diabetes Atlas. 2015. 140 p.
- 3. Dinas kesehatan Gorontalo. Profil Kesehatan Gorontalo 2021. Tinjauan-Pustaka-Kesehatan-Adalah. 2022;3:103–11.
- 4. Prasetyorini DA. Pengaruh Latihan Senam Diabetes melitus Terhadap Risiko Terjadinya Ulkus Diabetik pada Pasien Diabetes Melitus Tipe 2 Di Desa Rambipuji Kecamatan Rambipuji Kabupaten Jember. 2015;1–148.
- 5. Tandra H. Segala Sesuatu Yang Harus Anda Ketahui Tentang Diabetes. Jakarta: PT Gramedia Pustaka Utama; 2017.
- 6. Tiurma RJ, Syahrizal. Obesitas Sentral dengan Kejadian Hiperglikemia pada Pegawai Satuan Kerja Perangkat Daerah. Higeia J Public Heal Res Dev. 2021;5(3):227–38.
- 7. Soelistijo SA, Lindarto D, Decroli E, Permana H, Sucipto KW, Kusnadi Y, et al. Pengelolaan Dan Pencegahan Diabetes Melitus Tipe 2 Dewasa di Indonesia. PB Perkeni. 2019;133.
- Mustofa EE, Purwono J, Ludiana. Penerapan Senam Kaki Terhasap Kadar Glukosa Darah Pada Pasien Diabetes Melitus Di WIlayah Kerja Puskesmas Purwosari Kec. Metro Utara. J Cendikia Muda. 2022;2(1):78–86.
- 9. Yeni Ferawati Sitanggang, Sanny Frisca, Riama Marlyn Sihombing, Dheni Koerniawan, Pegy Sara Tahulending, Cory Febrina, Deasy Handayani Purba, Bima Adi Saputra, Dian Yuniar Syanti Rahayu, Veronica Paula, Lilik Pranata YS. Keperawatan Gerontik. 2021. 174 p.

- 10. Meilani N, Azis WOA, Saputra R. Faktor Resiko Kejadian Diabetes Mellitus Pada Lansia. Poltekita J Ilmu Kesehat. 2022;15(4):346–54.
- 11. Milita F, Handayani S, Setiaji B. Kejadian Diabetes Mellitus Tipe II pada Lanjut Usia di Indonesia (Analisis Riskesdas 2018). J Kedokt dan Kesehat. 2021;17(1):9.
- 12. Rosita R, Kusumaningtiar DA, Irfandi A, Ayu IM. Hubungan Antara Jenis Kelamin, Umur, Dan Aktivitas Fisik Dengan Diabetes Melitus Tipe 2 Pada Lansia Di Puskesmas Balaraja Kabupaten Tangerang. J Kesehat Masy. 2022;10(3):364–71.
- 13. Arini HN, Anggorowati A, Pujiastuti RSE. Dukungan keluarga pada lansia dengan Diabetes Melitus Tipe II: Literature review. NURSCOPE J Penelit dan Pemikir IIm Keperawatan. 2022;7(2):172.
- 14. Rahayu É. Faktor-faktor yang Berhubungan dengan Diabetes Melitus Pada Lansia Di Puskesmas Binangun Kabupaten Cilacap. Univ Muhammadiyah Gombong. 2023;4(1):88–100.
- 15. Kurdi F, Abidin Z, Surya VC, Anggraeni NC, Alyani DS, Riskiyanti V. Angka Kejadian Diabetes Mellitus Pada Lansia Middle Age Di Masa Pandemi Covid-19. J Ilm Keperawatan (Scientific J Nursing). 2021;7(2):282–8.