

# The Effect of Al Quran Verses on Labor Pain: Systematic Review

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Maternal Health workers can provide support by providing non-pharmacological therapy during the first stage of labour to reduce labour pain. One of the non-pharmacological therapies includes audio analgesia using the Holy Quran recitation therapy to reduce pain. At present, the Qur'an verses therapy is widely developed for Muslims to manage labour pain. This systematic review aims to find out the various Surahs in the Qur'an that are used and their effects in managing labour pain during the active phase. The method used is a systematic review conducted by searching using electronic databases, for articles, namely Google Scholar, Science Direct, Pubmed, and Sprott. The keywords used for Indonesian are "Quran", "Pain", "Childbirth", while the keywords in English are "Quran", "Labour Pain". Google Scholar searches that matched keywords in 2009-2019 were 197 articles, Science Direct was 0, Pubmed 1 article and Sprott were 5 articles. Criteria for inclusion of articles are published in journals or proceedings, at least for bachelor, quantitative research, spontaneous labour, there are instruments and full-text articles. After the criteria are determined, there are 10 articles. Materials sourced from Google Scholar - 8 Articles, Science Direct - 0 Articles, Pubmed - 0 Articles, and Sprott as many as 2 articles. The results of this study All articles are reviewed restaurant roommates state that there is a significant effect with the therapy of reading the Holy Qur'an, with decreased pain in the first maternity mother. As much as 60% of the letters read are AR Rahman, and the therapy is given for 11-60 minutes.

**Key words:** *Quran, Labour Pain, Therapy.*

## Introduction

Support for women during childbirth and pain management as a basic component of obstetric care is continuous (Vebriyanti, 2018). Women who receive continuous support are more likely to give birth normally, with fewer painkillers, slightly shorter labour, and more satisfaction with their birth experience than women who did not receive support (Qiftiyah 2018; King, 2019).

Pain during the first stage of labour is generally believed to be due to lower uterine segment distension, dilation of the cervix, and uterine muscle as a result of recurrent uterine contractions (Sianipar, 2018; Yohanna, 2016). The sympathetic nervous system releases hormones associated with stress such as cortisol, catecholamines (norepinephrine and epinephrine), and cytokines (Irawati, Susanti, and Haryono 2019). At the same time, levels of angiotensin II, antidiuretic hormone, growth hormone, and glucagon increase. Epinephrine is known as tocolytic and increased proportionally more than that of norepinephrine during labour. The pain can lead to anxiety and fear, which in turn stimulates the hypothalamic-pituitary axis and exacerbates the stress response, leading to the release of more lagikatekolamin and cytokines (King, 2019).

Labour pain is felt in three general physical locations. Almost all women in childbirth experience lower abdominal pain, approximately 74% have back pain associated with contraction, and about 33% had lower back pain continuously (Juniartati & Widyawati, 2018; Puspitasari & Astuti, 2017). Generally, nulliparous women reported an average pain intensity higher than multiparous women. Many women reported during the period of active labour where the pain is not increased or when it declined for a short time (King, 2019).

General labour pain can be influenced by physical, psychological, and behavioural factors. Psychological preparation, expectations, experience of painful childbirth, fear of childbirth, and emotional support during labour are some of the factors that influence the level of pain felt by a woman during labour. Hope seems to play a significant role in a woman's perception and ability of a woman to carry out the pain during childbirth (King, 2019).

Mothers can choose many methods to reduce the pain of childbirth. Although an epidural to help mothers reduce anxiety, some non-pharmacological methods can help such as immersion in water, breathing techniques, position changes, mental strategies, touch and massage, birth ball, the use of heat and cold, environmental changes such as music and bath (King, 2019; Werdiningsih & Sofiani, 2016; Yuliyani & Patemah, 2014).

Audioanalgesia is one of the methods of distraction that use sound as a stimulus, which helps lower a person's perception of pain (Monsey & Eisner, 1963). This therapy stimulates the delta waves that induce a state of calm, peace and comfortableness, so the hypothalamus secretes  $\beta$ -Endorphin as a natural analgesic (Alyensi, 2018; Kartini, Fratidhina, & Kurniyati, 2017).

In the study by Abbas (2016) and Deswita (2013), spiritual interventions by listening to the recitation of the Quran as additional therapy in the postoperative period is a non-pharmacological technique that is inexpensive, non-invasive and has no side effects. Listening to the reading of the Quran elicits a relaxation response of calm, attention, and peace in Muslims (Transyah, 2019; Joseph & Wekke, 2017).



Prayer therapy produces ideal harmonization, which improves spiritual, social, psychological, and physical health status. (Trianingsih, 2019; Turlina, 2018).

The use of therapeutic reading of the verses of the Koran today has been widely used to reduce labor pain. Therefore it is necessary to have a systematic review of Al Qur'an verse therapy to find out the methods used in reducing labor pain. This systematic review method aims to find out the various Surahs in the Koran that are used and their influence in managing labor pain during the active phase.

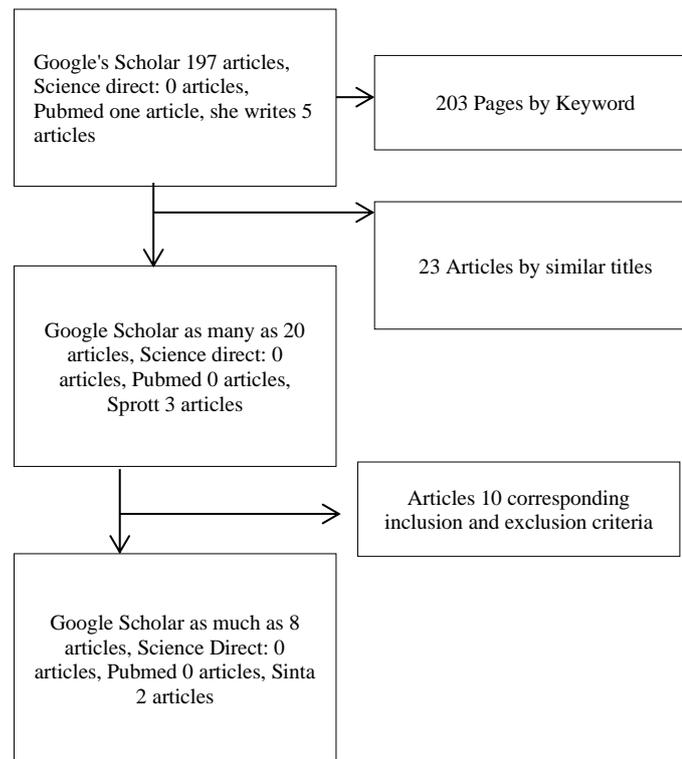
Murotal Therapy (Qur'an Reading) can accelerate healing, this has been demonstrated by different experts as has been finished by Ahmad Al-Khadi listening to the holy verses of Qur'an has a critical impact in decreasing the pressure reflective nerves.

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## **Methods**

The research method is a systematic review, by using the search tool in the database Google Scholar electronics, Science Direct, Pubmed, and Sinta, which can be seen in Figure 1. The search method by typing the keywords on search tools are "Quran", "labour Pain", "Delivery" in English. The result based on a keyword found from Google Scholar during 2009-2019, there were 197 articles, Science Direct as much as 0, Pubmed 1 article, and SINTA as much as 5 articles. Based on a similar title, those found from Google Scholar were 20 articles, Science Direct 0, Pubmed 0, SINTA - 3 articles. Moreover, based on the criteria of inclusion and exclusion published in the journal or proceeding, minimum bachelor degree, quantitative research, spontaneous labour, full-text instruments, articles found 10 articles were from Google Scholar - 8 articles, Science Direct was 0 article, SINTA were 2 articles.

The article proposed the Quran-focussed therapy can reduce labour pain. This research also viewed which verses of the Quran were used in therapy and the instrument used to measure the pain scale. Articles reviewed then assessed study feasibility and extracted the data into Tables with titles that have been determined. The results are then analysed to see the article's suitability for the research results.



**Figure 1. A diagram of the search method and process criteria**

## Results and Discussion

Of the number of articles selected by quantitative research design from the year 2009-2019, systematic review results of the analysis are shown in Table 1.

In the first study, entitled *The influence of the Holy Murottal Therapy Against Pain Intensity Phase I Stage of Labour Active In Practising Independent Midwives (BPM) Ernita Pekanbaru City Year 2017*, the result showed average pain intensity before treatment was 6.75 (1.41), the mean average pain intensity after treatment is 4.80 (1.24). Statistical test results showed an average reduction of 1.95 p-value (0.000) <  $\alpha$  (0:05). There is contrast in the power of work torment in the the first phase of the active phase before and after being given murottal Quran therapy (Alyensi & Arifin, 2018).

In this study in line with the nine other studies which stated there were differences in the decrease in the intensity of labor pain before and after the study. The Qur'an is the Muslim holy book which speaks to the expressions of God and the laws that shape Muslim life. Therefore, praying and perusing refrains from the Qur'an is an everyday practice that is beneficial for most Muslims. Muslims are also considered a method of overcoming and healing spiritually. Recitation of the Qur'an can be a method for creating harmony and solace for patients (EL Hady, 2017).

In this article, ten conditions identify the first stage as the active phase of labour. This is consistent with the theory of King (2019) who stated that the first stage of labour is generally an active phase for the mechanical opening process that takes place quickly.

Based on the results, ten articles showed that reading the Qur'an therapy can significantly reduce pain during childbirth. However, there are differences with when Surat Al Qur'an is used, and the duration of its use.

This article uses a recording of ten verses of the Qur'an as a medium. There are differences in Surah in the Qur'an that are used for pain therapy. Six of the ten studies that Alyensi (2017), Bayrami (2014), Suhita (2018), Trianingsih (2019), Wahida (2015), Yana (2015) use are therapeutic Surat Ar Rahman. Treatment time varies from 11 minutes - 60 minutes. Two studies are Chunaeni (2016) and Turlina (2001) using a Quran reading a letter at random. In Hand (2014), the Qur'an that is played in this study is a letter Ar-Ra'du verse 28, Surah Al-Baqarah verse 289 and Surat ash Syu'ara paragraph 80. Surat Ar-Ra'du paragraph 28 on Faridah (2017) it is not described Surat Al Quran that was played.

According to Potter & Perry (2005), in Chunnaeni (2016), therapy in the form of music or sound must be heard at least 15 minutes to provide a therapeutic effect, while according Yuanitasari (2008) in Chunnaeni (2016), duration of music therapy or sound for 10-15 minutes has been able to provide a relaxing effect.

Of the six articles, none explain why the letter in the Qur'an used is mostly Surat Ar Rahman for labour pain therapy. Nevertheless, on four other articles where the Quran letter that was played was not shown, the same pain relief is displayed during labour. It can be concluded that any Quran Surat played for labour pain therapy works equally well in dealing with labour pain.

Voice of the Qur'an or 'murattal' is a type of music treatment with a strict way to deal with Islamic culture. Al-Quran is the Muslim holy book and a lifestyle for Muslims. Sound waves from the blessed Quran are changed over as electrical implications by conference procedure. The electrical pulse at that point continues to the cerebral cortex in the initiated limbic framework beta endorphin neurotransmitters This hormone has a significant restraining job excitatory torment. Beta endorphins can inhibit the adjustment procedure so the reaction is gentle torment (Aisha, 2019; Aziz, Nooryanto, and Andarini 2015).

The instrument used to measure decreased pain in nine out of ten in this study is a numerical rating scale, except in research Turlina (2017) uses the measurement of the level of pain. In nine out of ten data analysis research using the bivariate analysis showed a significant difference in therapeutic use verses of the Quran against a decrease in pain.



The consequences of this review are likewise upheld by Abusaikha's examination (2007) utilizing profound adapting, for example, prayer, perusing the Quran, and having faith in God. The tradition of Jordanian culture, Muslims typically pick strict practices and ceremonies in the midst of trouble, torment isn't viewed as a heavenly discipline for sins however a trial of faith. Along these lines, Muslims are required to have tolerance and suffer torment, as an indication of solid confidence, as an award for Allah's benevolence and pardoning.

### **Conclusion**

Therapy of the Quran reading can be to reduce labour pain. The reading scripture most widely used is the letter Ar-Rahman. The duration of therapy is 11-60 minutes to provide a relaxing effect.

Further studies related to the Holy Quran verse therapy can be done to explore further the types of letters and how to read verses in the Qur'an, as to which one can be more effective in reducing labour pain. A program approach can be labour selection service providers because most of the great Indonesian people are Muslims.

**Table 1. Results of Analysis Systematic Review**

No.	Name, Year	Title	The place	Method	samples	Sampling techniques	criteria Included	Letter Used	Result	Conclusion	Instrument
1	Alyensi, Arifin, 2017	Therapeutic Effect of Intensity Against the Holy Murottal Phase I Stage of Labour Pain Active In Midwife Practice Mandiri (Bpm) Ernita Pekanbaru City Year 2017	<i>Independent Midwifery Practice</i> Ernita Pekanbaru City	pre-experiment	20 maternal active phase of the first stage	<i>purposive sampling</i>	Criteria for inclusion in the this research is mothers willing to become respondents with signed informed consent, Islamic religion, pregnancy term, and not using pain relievers. Exclusion criteria set researchers are mothers who experienced complications during the first stage of active labour phase and induction of labour	Letter Arrahman for 30 minutes. Using the voice recording Qori 'with Headset	The average intensity of pain before therapy was 6.75 (1.41), the average pain intensity after treatment of 4.80 (1.24). Statistical analysis showed the average pain reduction amounting to 1.95 p-value (0.000) < a (0.05).	No difference in pain intensity in the first stage of active labour phase before and after therapy is given murottal <i>Quran</i>	<i>Description Verbal Scale (VDS) Comparative Pain Scale and Wong Baker Pain Rating Scale</i>
2	Bayrami, Ebrahimipo 2014	Effect of the Quran sound on labour pain and other maternal and neonatal factors in nulliparous women	Ghamar-Bani-Hashem hospital in Khoy city, Iran	quasy Experiment	60 maternal, consisting of 30 people and a control group of 30 people treated group	<i>Random Control Trial</i>	Study inclusion criteria were: being primiparas in a phase of active labour (Dilated 4 cm), no history of childbirth or the operation, and no history of addiction, chronic pain or sensory disturbances 5	Letter Arrahman for 30 minutes. Using the voice recording Qori with Walkman headset	The average pain in the treatment groups at baseline $1.04 \pm 6.4$ , whereas in the control group $6.2 \pm 1:09$ . At the opening of six treatment groups: $5.3 \pm 0.71$ , $0.93 \pm 8.1$ control group, the complete opening of $6.2 \pm 1.005$ treatment group, the control	There was a significant effect of the sound of the Quran to the decline in labour pain	<i>the numerical scale of 0 to 10</i>

								group $9.4 \pm 0.18$ . P values in both groups were 0.001.			
3	Chunaeni, Lusiana, Handayani 2016	Murottal therapeutic effectiveness against a decline of the active phase of the first stage	<i>Independent Midwifery Practice</i> The working area of Puskesmas Mungkid Magelang District 2016	<i>pre-experiment</i>	49 maternal when in one of the active phases	<i>purposive sampling</i>	-	all letter in the CD recording qori voice 'Muhammad Taha Al-Junaid for 60 minutes	A decline in the intensity pain before and after treatment at a scale of 3, on the pain scale 5.22 into a pain scale 2.47. In view of statistical tests acquired p-value of 0.001 ( $p < \alpha$ ), This outcome implies that there a critical distinction between the intensity of pain before and after murattal therapy	These results imply the expression there are significant differences between the median pain intensity before and after murattal therapy.	<i>numeric Rating Scale</i>
4	Faridah, Yefrida, Masmura, 2017	The influence of the Qur'an murottal therapy to decrease in intensity Maternal pain when I active phase in the delivery room hospital South Solok District General 2017	Hospital South Solok District General	<i>Pre-Experiment One Group Pre and Posttest Design</i>	13 maternal	<i>Accidental Sampling</i>	Not explained	Not explained	average pain scale before murottal therapy Qur'an is 8.307 (1.601), the average scale pain therapy mother after being given the murottal Qur'an was 6.615 (1.709) The results of non-parametric statistical tests Wilcoxon Signed <i>Ranks test</i> acquired p-value = 0.001 small at (0.05)	there is influence Murottal Qur'an therapy against decrease in maternal pain intensity scale of the first stage active phase in the delivery room Hospital South Solok 2017	<i>numeric rating scale</i>

5	Hand, Fajasari, Asih, Rohmah 2014	The leverage of the Qur'an murottal treatment to decrease labour pain and anxiety in maternal When I active phase	HOSPITA L. Prof. dr. Margono Soekardjo Purwokert o	<i>quasi experiment two comparison group pretest-posttest design</i>	20 maternal respondents	<i>consecutive sampling</i>	Normal birth mothers	Surat Al-Qur'an that is played in this study is a letter Ar-Ra'du verse 28, Surah Al-Baqarah verse 289 and Surat ash Syu'ara paragraph 80. Surat Ar-Ra'du paragraph 28	pain intensity before murottal therapy was done with a pain scale interval of 4 - 10. The intensity of pain after murottal therapy has a scale interval pain 2-8, smaller than the interval before murottal therapy. Based on the analysis using t-test indicated the pair test p = 0.000	There a difference in pain intensity of the active phase of the first stage after a normal delivery murottal therapy in which the intensity of pain of the active phase of the first stage decreased after the murottal therapy	<i>numeric rating scale</i>
6	Suhita, Mufida, 2018	Decrease of Anxiety and Pain Delivery of Mother Inpartu Primiparas on First Phase Active by Giving of Murottal Al Quran Arrahman in Midwifery Private Clinic Endang	Endang clinic Sumaning dyah Kediri	<i>Pre-Experiment al with one group pre-test Post-Test Design</i>	38 mother in labour	<i>Accidental Sampling</i>	Inclusion criteria: primiparous mothers, the active phase, normal childbirth	Qur'an Surah Ar-Rahman listened to recordings	Statistical analysis showed an average pain reduction of 1.33 with significant value 0.002 pain which can be summed H0 is rejected	There was a decrease pain in labour primipara mother when in the active phase by providing murottal Qur'sura from Ar-Rahman	<i>Numeric Rating Scale (NRS)</i>

Sumaningdya h City of Kediri											
7	Trianingsih, 2019	Influence murottal Qur'an and dhikr to the first stage of labour pain intensity	<i>Independent Midwifery Practice</i> Lia Maria Sukerame Bandar Lampung	<i>pre- experiment</i>	42 maternal	Not explained	Not explained	Qur'an letter Ar Rahman and remembrance for 11-15 minutes	Average 7.5 and after administration of the combination murottal Qur'an Surat Ar Rahman and dhikr of the pain intensity of the first stage standard delivery is reduced to 5.9. <i>p-value</i> 0.000 ( <i>p</i> <0.05), so it can be concluded that Ha received	From the analysis in above it can be found that their combined effect Murottal Al Qur'an Surah Ar- Rahman and dhikr against Kala Pain Intensity I labour normal.	<i>numeric rating scale</i>
8	Turlina, Nurhayati 2017	Therapeutic Effect of murottal Qur'an to Decrease Intensity Phase I Stage of active labour pain	<i>Independent Midwifery Practice</i> Yumamik, Amd.Keb. Waru Kulon, Pucuk District Lamongan	<i>pre- experimental design</i> to draft one group pretest- posttest design	20 maternal	<i>consecutive sampling</i>	Inclusion criteria: all mothers of normal birth	Quran which uses footage	60% pain medium, and 0% severe aches and pains very heavy. Before the study 5% of mild maternal pain, moderate pain 55%, 30% severe pain, 10% very severe pain: after research experience reduction painful 40% pain light and 60% pain moderate	nearly all mothers maternity decreased intensity pain becomes moderate pain	Measuring the level of pain
9	Wahida, Nooryanto, Andarini, 2015	Murottal therapy Qur'an Surat Arrahman β- Endorphin levels	The hospital Abunawas Kendari and Laboratory of Medical	<i>Quasi- Experimental approach</i> Pre Experiment	30 maternal	<i>purposive sampling</i>	Inclusion criteria mother in the active phase of the first stage, especially in the type μ. The bonding causes interaction willing to	Murottal Qur, an Ar-Rahman letter for 25 minutes with footage	Research result showed no significant decrease in pain intensity before (6.80 ± 1.52) than after (3.37 ± 1.79)	It can be concluded that the therapy of murottal Qur'an may decrease	<i>Bourbannis pain scale</i>

		increase and decrease pain intensity on Mother Maternity Kala Active Phase I	Faculty of Hasanuddi n	<i>Design One-group pre-test-post-test</i>			become respondents and Muslims. Researcher inhibition of the release of tachyki establishes the following exclusion criteria: pregnant women <i>peptide substance</i> , an essential protein involved in the gemelli, disease (diabetes, hypertension, heart), mother pain transmission. In the peripheral nervous system opioid- $\mu$ diagnosed with preeclampsia or eclampsia, and mother. There along the peripheral nerves and the central nervous system had abnormal hearing		murottal therapy Qur, an Ar-Rahman letter for 25 minutes (p = 0.000).	pain intensity	
10	Yana, Utami, Saftri, 2015	Therapeutic effectiveness Murottal Qur'an Against Pain Intensity	Hospital Petala Earth	quasi experiment with the study design Non-Equivalent	30 respondents in maternal	<i>purposive sampling</i>	Not explained	Murottal Qur'an for 15 minutes consists of reading Al-Fatiha for 1 minutes, letters Ar-	<i>mean</i> The pain intensity post-test group Experimentation is 6.40 while the mean post <i>Test</i> in the control group higher at	Labour pain intensity difference the active phase of the first stage between the	<i>Numeric Rating Scale (NRS)</i>



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Phase I stage of active labour	Control Group	Rahman for 12 minutes, Surah Al- Ikhlas, Al- Falaq, and An-Naas for 2 minutes. Reading the letter recited by Mishary Rashid Al- aphasia an imam of Al-Kabir in Kuwait. Murottal Qur'an heard through headset connected to MP3	7.40. Statistical test results obtained p- value 0.018 (p <a).	experimental group and the control group after the given murottal Qur'an therapy
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