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The Effect of Hypnotherapy on Coronary Heart Disease Patients' Treatment Compliance in the Heart Clinic of Batang Regional Hospital

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A B S T R A C T
This study aims to evaluate the effect of hypnotherapy on medication adherence among CHD patients at the Heart Clinic of RSUD Batang. The study employed a quasi-experimental method with a pre-post test design. The sample consisted of 52 patients divided into two groups: an intervention group (hypnotherapy) and a control group. The research instrument included a medication adherence questionnaire based on the Health Belief Model, which has been tested for validity and reliability. This analysis was conducted to test the difference in mean ranking from the results of two measurements in the same group, so the test used was the Mann Whitney test with an ethical test with the number 445/039/KEPRSUDBTG/IX/2024. The analysis revealed a significant increase in patient adherence after receiving hypnotherapy compared to the control group. Hypnotherapy positively influences patient behavior, including increased motivation to consistently take medications and attend health check-ups. Hypnotherapy is effective in enhancing medication adherence among CHD patients.

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INTRODUCTION

Coronary heart disease (CHD) is an abnormal phenomenon in the coronary blood vessels accompanied by the presence of stones that interfere with blood flow to the heart muscle which leads to damage to heart function. CHD occurs due to narrowing of the blood vessels that carry oxygen to the brain. Narrowing occurs due to stones in all arteries. The composition of these stones can accompany genetic factors and lifestyle (Rafidah, 2020).

The first position as the cause of death in the world is cardiovascular disease. Mortality rates due to cardiovascular disease in 2016 were 17.9 million cases. Indonesia is in third place in ASEAN after Laos and the Philippines, cardiovascular disease has caused 36.33% of total morality in 2016 in Indonesia. Coronary heart disease in Indonesia is the second highest cause of mortality after stroke seen from the 2014 Sample Registration System (SRS) data, which is 12.9%. The high death rate due to CHD is found in low and middle income countries (Puspita & Shomad, 2018).

The World Health Organization (WHO) said that one of the health cases in the cardiovascular system that has increased rapidly with a mortality rate of 6.7 million cases is CHD. Based on WHO predictions, in 2030 the world's population deaths due to CHD will reach 23.3 million cases (Daniati & Erawati, 2018). According to Riskesdas Indonesia (2018) based on a doctor's diagnosis, the prevalence of heart disease is 1.5% of all ages in Indonesia. According to BPJS in 2016 the total cost of health services and referrals for CHD was IDR 7.9 trillion (Ministry of Health of the Republic of Indonesia, 2018).

Based on 2023 data, the number of CHD patients was 730 patients at Batang Regional Hospital. Until now, CHD is still a concern for the government and health workers. Risk factors for coronary heart disease consist of age, gender, and family history are factors that cannot be changed, while diabetes mellitus, dyslipidemia, obesity, lack of physical activity, habits of eating fatty foods, hypertension, smoking, compliance with taking medication and stress are factors that cannot be changed (Stem, 2021).

Treatment compliance including taking daily medication has an impact on the quality of life and recurrence of CHD patients. Previous studies have found that there is a significant relationship between medication compliance and the quality of life of heart failure patients. Medication compliance in patients who are compliant is 3 times better than those who are not compliant in taking medication. Conversely, non-compliant patients cause the risk of recurrent hospitalization. This is reinforced by previous findings that patients who are not compliant in taking medication with several hospitalizations are as many as 64.7% (Siallagan et al., 2023).

Arimurti's research (2019) at RSUP dr. M.Jamil Padang found that all respondents experienced recurrent coronary heart disease, where some respondents had experienced re-hospitalization 1 time or low recurrent coronary heart disease and some respondents had experienced re-hospitalization more than 2 times or high recurrent coronary heart disease at RSUP dr. M.Djamil Padang in 2018. Based on the report of the Heart Clinic of Batang Hospital in February 2024, it was reported that there were 60 cases of CHD patients.

According toWiseva et al (2023)Recurrence of coronary heart disease and readmission to hospital occurs because patients do not comply with recommended therapy and the treatment therapy is inappropriate.

Compliance with medical therapy must be instilled in patients with coronary heart disease. Compliance in taking medication is a major aspect in the management of chronic diseases. Data from the World Health Organization shows that around 50% of patients with chronic diseases living in developed countries follow treatment recommendations. However, it is different from developing countries, including Indonesia. The phenomenon of medication compliance in patients in Indonesia looks quite concerning. This can be seen from several studies on compliance with taking heart medication in hospitals in Indonesia which were found to be still relatively low. A study conducted at Hospital X, Kediri City found that the level of medication compliance in heart patients was relatively low at 80.6%.

StudySiallagan et al. (2023)also found more heart patients were non-compliant with their medication The National Institute for Health and Care Excellence (NICE) divides medication non-adherence into two categories: deliberate and unintentional. Medication non-adherence can be deliberate, unintentional, or both. In deliberate medication non-adherence, patients actively decide not to follow the treatment recommendations given due to related beliefs and perceptions, skipping doses to avoid side effects, the opinions of friends and family or because of the cost of treatment. Considerable research has been conducted to understand the causes of deliberate non-adherence to medication for various diseases, the results of which indicate similar causes. In addition, it has been shown that about half of cases of medication non-adherence are deliberate (Alalaqi, 2019).

Likewise, research conducted (Sambodo et al., 2014), shows the influence of positive affirmation on medication compliance, namely internal and external factors, such as the patient's psychological condition in the form of stress due to routine treatment over a long period of time, causing anxiety for the patient. Positive affirmation is one method of stress management for individuals to improve the individual's ability to manage stress cognitively.

Patient data in 2023 there were 730 patients with an average of 60 patients in February. The results of the researcher's preliminary study of 5 respondents found that 3 respondents were not compliant with taking medication and 2 were compliant with taking medication. The results of the study of respondents who were not compliant with taking medication said that respondents thought heart disease was a terminal disease so they had to be treated for life, patients also explained that patients felt bored taking medication continuously and sometimes there were effects on the patient's body. Of the 2 compliant patients, it was explained that patients still had families they loved very much so they wanted to continue to be healthy and accompany them. The possible impact if hypnotherapy is not carried out on the compliance of coronary heart patients is the possibility of interrupting medication because patients are not compliant with check-ups. Interventions that can be given to overcome the problem of non-compliance and so that patients can be compliant again, one of which is

hypnotherapy. Of the 5 respondents, none have ever been given hypnotherapy. From the description above, the researcher is interested in taking this title because compliance with treatment in coronary heart disease patients is very important, because the heart is a vital human organ that circulates blood throughout the body if the patient does not routinely take heart medication, the supply of oxygen and blood from the heart will decrease resulting in a heart attack. Based on the description of the data above, the author is interested in conducting a study entitled "The Effect of Hypnotherapy on Compliance with Treatment of Coronary Heart Disease Patients at the Heart Clinic of Batang Hospital.". The purpose of this study is to determine the effect of hypnotherapy on compliance with treatment of coronary heart disease patients at the Heart Clinic of Batang Hospital.

LITERATURE REVIEW

Medication adherence can be defined as the extent to which a patient's behavior conforms to the prescribed medication dosage regimen, including the time, dose and interval of drug intake. Adherence is a multifactorial phenomenon that can be influenced by a variety of factors. Factors that can influence medication adherence include socioeconomic factors, health care system factors, therapy-related factors, medical condition-related factors and patient-specific factors (Puspita & Shomad, 2018).

Patient factors themselves consist of physical factors, psychological factors and behavior Ardiana et al (2022) also reported that factors related to compliance consist of patient factors, treatment factors and health system factors. Compliance with taking medication is a manifestation of patient behavior in following the prescribed treatment therapy to be taken. Compliance with taking medication for CHD patients will determine the health and quality of life of the patient. This is reinforced by Green's theory (1980) quoted in Notoadmodjo 2018 which states that a person's behavior has an impact on their health and quality of life. This behavior is influenced by predisposing, driving and reinforcing factors. Along with the development of an integrative and holistic approach in the medical world, hypnosis is one of the methods widely used in handling and treating cases of disease. Hypnosis intervention is included in self-modification assistance known as hypnotherapy.

Interventions or ways to improve compliance through several methods including educational interventions (educational intervention) which can be given through leaflets, brochures or counseling. Other interventions include efforts to change behavior (behavior intervention) namely providing ways or instruments to improve compliance can be in the form of reminders for patients to take their medication according to schedule. One therapy that can overcome the problem of non-compliance so that patients can be compliant again is with improvements known as hypnotherapy. Hypnotherapy has been applied for a long time and has been proven to have various uses to overcome various problems related to emotions and behavior (Permatasari, 2020). Even in dealing with some types of serious medical illnesses. There are several methods of clinical hypnotherapy, one of which is the affirmation method. Even in dealing with

some types of serious medical illnesses. Affirmations are positive words used to give affirmation to oneself. These positive words can be digested by the brain directly. Then instruct the brain so that our perspective and thoughts change to be better and always positive. This affirmation can change a person's life so that the patient becomes obedient to treatment (Tiram Media, 2023).

METHODOLOGY

This study used a quasi-experimental design with a Pre-Post Test Design approach that aims to determine the effect of hypnotherapy on medication adherence in patients with coronary heart disease. Respondents in this study were selected using a purposive sampling method, with certain inclusion criteria, namely patients undergoing treatment at the Heart Clinic of Batang Hospital in a certain period. The sample used was 52 respondents, who were divided into two groups, namely the intervention group that received hypnotherapy and the control group that did not receive intervention.

The research instrument consisted of a questionnaire of respondent characteristics and a measuring instrument for medication adherence. The intervention given in this study was in the form of hypnotherapy, which aims to improve patient compliance in undergoing treatment. Medication adherence was measured before and after the intervention, according to the research design used.

Data analysis was performed using statistical software, which included univariate analysis to see the frequency distribution and percentage of each variable, as well as bivariate analysis to determine the effect of hypnotherapy on patient compliance. Hypothesis testing was performed by determining Ho, which states that there is no effect of hypnotherapy on medication compliance, and Ha, which states that there is an effect of hypnotherapy on patient compliance in undergoing treatment.

RESEARCH RESULT

Univariate Analysis

a. Respondent Characteristics Based On Age

Table 1 Description of age at the Heart Clinic of Batang Regional Hospital October

Age characteristics	(f)	(%)
Early Adulthood	7	13.5
Late Adulthood	17	32.7
Early Elderly	16	30.8
Late Elderly	12	23.1
Total	52	100.0

The results of the study showed that the characteristics of the patient's age were spread across several categories. Most patients were in the Late Adult category, as many as 17 people (32.7%). The Early Elderly group was in second place with 16 people (30.8%), followed by the Late Elderly with 12 people (23.1%). Meanwhile, the Early Adult category had the smallest

number, which was 7 people (13.5%). The total sample in this study was 52 people (100%).

b. Respondent Characteristics Based On Gender

Table 2 Description of Gender at the Heart Clinic of Batang October Regional Hospital

Gender Characteristics	(f)	(%)
Man	26	50.0
Woman	26	50.0
Total	52	100.0

The results showed that the characteristics of the patient's gender had the same proportion between men and women. Male patients numbered 26 people (50.0%), as well as female patients as many as 26 people (50.0%). The total sample in this study was 52 people (100%).

c. Respondent Characteristics Based On Education

Table 3 Description of education at the Heart Clinic of Batang October Regional Hospital

Characteristics of Education	(f)	(%)
Not school	1	1.9
Elementary School	11	21.2
JUNIOR HIGH SCHOOL	15	28.8
SENIOR HIGH SCHOOL	13	25.0
College	12	23.1
Total	52	100.0

The results showed that the education level of the patients varied. Most of the patients were junior high school graduates as many as 15 people (28.8%), followed by high school graduates as many as 13 people (25.0%). Patients who had a college education were 12 people (23.1%), while elementary school graduates were 11 people (21.2%). Only 1 patient (1.9%) had never attended school. The total sample in this study was 52 people (100%).

d. Characteristics of job respondents

Table 4 Job description at the Heart Clinic of Batang October Regional Hospital (n = 52)

Job Characteristics	(f)	(%)
Work	30	57.7
Doesn't work	22	42.3
Total	52	100.0

The results of the study showed that most patients had employment status, which was 30 people (57.7%). Meanwhile, patients who were

unemployed were 22 people (42.3%). The total sample in this study was 52 people (100%).

e. Respondent characteristics based on duration of treatment

Table 5 Description of the length of treatment at the Heart Clinic of Batang Regional Hospital in October (n = 52)

Characteristics of Treatment Duration	(f)	(%)
Long > 6 months	30	57.7
Not Long < 6 months	22	42.3
Total	52	100.0

The results showed that most patients had been in the condition for more than 6 months, which was 30 people (57.7%). Meanwhile, patients with a duration of less than 6 months were 22 people (42.3%). The total sample in this study was 52 people (100%).

f. Level of Compliance with Treatment of Coronary Heart Disease Patients at the Heart Clinic of Batang Regional Hospital before Hypnotherapy

Table 6 Description of the Level of Compliance with Treatment of Coronary Heart Disease Patients at the Heart Clinic of Batang Regional Hospital before Hypnotherapy in October 2024 (n = 52)

Compliance Level	(F)	(%)
Not obey	26	50.0
Obedient	26	50.0
Total	52	100.0

The results of the study showed that most patients were included in the category of "Non-Compliant" to stress management, which was 26 people (50.0%). While patients who were in the category of "Compliant" were 26 people (50.0%) out of a total of 52 patients (100%).

g. Level of Compliance with Treatment of Coronary Heart Disease Patients at the Heart Clinic of Batang Regional Hospital after Hypnotherapy

Table 7 Description of the Level of Compliance with Treatment of Coronary Heart Disease Patients at the Heart Clinic of Batang Hospital after Hypnotherapy in October 2024 (n = 52)

Compliance Level	Frequency (F)	(%)
Not obey	20	38.5
Obedient	32	61.5
Total	52	100.0

The results of the study showed that most patients were in the "Compliant" category of compliance levels, which were 32 people (61.5%). While patients in the "Non-Compliant" category were 20 people (38.5%) out of a total of 52 patients (100%).

Bivariate Analysis

The Effect of Hypnotherapy on Treatment Compliance of Coronary Heart Disease Patients at the Heart Clinic of Batang Regional Hospital

Table 8 The Effect of Hypnotherapy on Treatment Compliance of Coronary Heart Disease Patients at the Heart Clinic of Batang Regional Hospital October 2024 (n = 52)

	GROUP	N	Mean Rank	Sum of Ranks	P value
POST	INTERVENTION	26	30.50	793.00	.024
	CONTROL	26	22.50	585.00	
PRE	INTERVENTION	26	30.50	793.00	.028
	CONTROL	26	22.50	585.00	
	Total		52		

Based on table 8, the Mann-Whitney test analysis of the two research groups (intervention group and control group), the results of the study showed a significant difference between the intervention group and the control group in the change values before and after the intervention (post-pre) based on the Mann-Whitney test with a p value = 0.024.

In the pre-intervention (PRE) measurement, the intervention group had a mean rank of 30.50 with a sum of ranks of 793.00, while the control group had a mean rank of 22.50 with a sum of ranks of 585.00. The results of the statistical test showed that the difference was significant with a p value = 0.028.

After the intervention (POST), the intervention group showed better results than the control group. In the intervention group, there were 6 patients who experienced an increase in positive changes (positive ranks), while no patients were found with negative changes (negative ranks). Most patients, as many as 46 people, were included in the category of not experiencing significant changes (ties).

DISCUSSION

Univariate Analysis

1. Respondent Characteristics

a. Age

The study found that most respondents were aged between 32 and 52 years, indicating that coronary heart disease (CHD) patients are generally in the productive to elderly age group. Age plays an important role in medication adherence, as revealed in a study byMinistry of Health of the Republic of Indonesia (2021), which shows that age is closely related to general health

conditions, as well as the patient's understanding and ability to care for themselves. According to Annisya and Murtisiwi (2024) also noted that adulthood tends to present unique challenges for patients, such as workload and family responsibilities, which may impact adherence to long-term treatment. This suggests that coronary heart disease (CHD) does not only occur in the elderly but also in productive age groups. Age is closely related to the incidence of CHD due to degenerative factors and unhealthy lifestyles, such as high-fat diets, stress, and lack of physical activity.

b. Gender

Respondents in this study were evenly divided between men and women, each numbering 26 people or 50%. This distribution provides a balanced view of perceptions and levels of compliance based on gender. According toSiswati et al. (2023), in several studies, gender has been associated with medication adherence, with men often having a lower tendency to adhere to medication than women, who are generally more aware of the importance of long-term health management.

Other characteristics, such as gender, also play a role. The equal proportion of male and female respondents indicates that CHD is not limited to one gender, although the American Heart Association (AHA, 2022) states that men have a higher risk of developing CHD at a younger age while women's risk increases after menopause due to decreased estrogen levels. after menopause, women's risk increases significantly. In this study, if the proportion of men is higher, then risk factors such as smoking, alcohol consumption, and work stress could be more dominant causative factors.

c. Level of education

Education is also an important factor in patient compliance, with most respondents having junior high school (28.8%) and high school (25.0%). Education level plays an important role in patient understanding of their disease and compliance with treatment.Puspita and Shomad (2018) emphasized that higher levels of education are often associated with better ability to understand medical information, which ultimately supports medication adherence. In another study, Indryana (2023) found that patients with low education were less likely to understand the importance of routine medication and were at higher risk of non-adherence.

Education level is also a factor that influences CHD management. Most respondents have junior high school (28.8%) and high school (25%) education, which indicates the potential for limited understanding of health information. This is in line with research by Sari et al. (2021), which found that education level is related to patient compliance in undergoing treatment therapy, especially because education affects the ability to understand disease risks and the importance of treatment.

d. Work

Most of the respondents in this study were workers, with 57.7% of patients having active jobs. Irawan (2022) showed that work conditions often affect the

treatment patterns of chronic disease patients due to limited time and difficulties in arranging treatment schedules. Patients who have full-time jobs may have difficulty attending appointments or adhering to treatment routines.

Employment status also plays an important role. Most respondents were employed (57.7%), which may have an impact on stress levels, physical activity patterns, and time available to comply with medication schedules. According to Smith et al. (2020), high-pressure jobs contribute to chronic stress, which is a risk factor for CHD.

e. Duration of Disease

The majority of patients had a disease duration of more than 6 months.Annisya and Murtisiwi (2024) stated that patients with chronic conditions often experience "fatigue" or exhaustion in undergoing treatment, which affects their level of compliance. In coronary heart patients, long disease duration without adequate stress management can lead to low compliance, especially due to the feeling of being burdened by ongoing treatment.

Disease duration is also relevant in the management of CHD. Most respondents had experienced the condition for more than 6 months (57.7%), reflecting the need for a long-term disease management approach. A study by Brown and Taylor (2021) showed that longer disease duration is often associated with higher levels of physical and emotional fatigue, which can affect patient adherence to treatment and a healthy lifestyle.

2. Level of Treatment Compliance Before Hypnotherapy

The results of the study showed that before being given hypnotherapy, most patients (50.0%) were in the category of "Non-Compliant" with their medication management. Factors that influence this non-compliance can include high levels of stress, fear of drug side effects, or lack of understanding of the importance of compliance (Tanita et al., 2019). Prasetya and Kusumawati (2021) identified that adherence to chronic medication is one of the major challenges in the management of cardiovascular disease globally, where non-adherence can increase the risk of serious complications.

According to Ananda et al. (2024), hypnotherapy-based therapy has been shown to be effective in reducing anxiety and improving stress management in patients with chronic illness. This therapy combines relaxation and suggestion to change the way patients think and behave towards their illness, so that they are better able to manage stress and are more motivated to adhere to treatment.

Compliance with treatment in CHD patients is very important to control risk factors that can worsen their condition, such as hypertension, hyperlipidemia, and diabetes, and to prevent further coronary heart episodes.Asyrofy, et al (2021) stated that adherence to treatment has a significant impact on preventing complications and improving the quality of life of coronary heart patients. In this case, interventions such as hypnotherapy can be an effective approach in reducing stress and increasing patient awareness of the importance of adherence to their treatment.

3. Level of Treatment Compliance After Hypnotherapy

After hypnotherapy, there was an increase in compliance, with 61.5% of patients in the "Compliant" category. This increase in compliance suggests that hypnotherapy can have a positive impact on patient behavior in managing their treatment, especially in patients with coronary heart disease (CHD). Hypnotherapy plays a role in influencing the patient's subconscious, which helps them build a positive mindset towards health and treatment. This is particularly relevant in the context of managing coronary heart disease, where compliance with treatment and lifestyle changes play a very important role in preventing further complications. According toThe Last Supper (2021), hypnotherapy is useful in improving patient attitudes and behaviors by reducing anxiety, increasing self-efficacy, and reducing feelings of fear of illness. In CHD patients, high anxiety and fear of drug side effects are often major barriers to adherence to treatment. Hypnotherapy can help patients overcome this anxiety and increase their belief that the treatment and lifestyle changes they are undergoing are important steps in improving their health. By increasing self-efficacy, patients become more confident and motivated to comply with treatment, follow the recommended diet, and carry out the recommended physical activity.

Tanita et al (2019) also explained that hypnotherapy can improve patient compliance by increasing their awareness and discipline in taking care of themselves. In CHD patients, awareness of health and treatment is very important, considering that this disease requires ongoing management, including management of risk factors such as hypertension, high cholesterol, and diabetes. With increased compliance with treatment and more disciplined lifestyle changes, patients can reduce the risk of long-term complications, such as heart failure, myocardial infarction, and stroke, which often occur due to non-compliance with treatment.

Overall, these results suggest that hypnotherapy has the potential to improve patient adherence to coronary heart disease treatment, which in turn may contribute to improved quality of life and prevention of more serious complications. This approach not only provides emotional support, but also reinforces a positive attitude towards long-term health management.

Bivariate Analysis

The Effect of Hypnotherapy on Treatment Compliance

The results of the Mann-Whitney test analysis of two research groups (intervention group and control group), The results of the study showed a significant difference between the intervention group and the control group in the change values before and after the intervention (post-pre) based on the Mann-Whitney test with a p value = 0.024.

In the pre-intervention (PRE) measurement, the intervention group had a mean rank of 30.50 with a sum of ranks of 793.00, while the control group had a mean rank of 22.50 with a sum of ranks of 585.00. The results of the statistical test showed that the difference was significant with a p value = 0.028.

After the intervention (POST), the intervention group showed better results than the control group. In the intervention group, there were 6 patients who experienced an increase in positive changes (positive ranks), while no

patients were found with negative changes (negative ranks). Most patients, as many as 46 people, were included in the category of not experiencing significant changes (ties). According to research byPujiati and W, (2022), patients who received hypnotherapy showed significant improvements in their levels of compliance with long-term treatment.

Ties occur when the pre- and post-therapy scores are the same for a particular respondent, indicating that the therapy given did not affect a significant change in the score. In the data presented, there were 46 respondents who showed ties, meaning that the patient's pre- and post-scores were the same, indicating that no changes were detected. There are several factors that may cause this tie result to appear. First, some respondents may have been in optimal condition before therapy began, so there was no measurable change after therapy was given. In this case, therapy was unable to produce significant improvements because the respondent's condition was already good.

Second, the therapy itself may not have a significant enough effect on most respondents. This could be due to individual factors such as differences in psychological, physical, or physiological response to therapy. Some individuals may not feel the benefits of therapy within the given time frame. Third, the duration of therapy or intervention may not be sufficient to produce detectable changes within a limited time. If the time allocated for therapy is too short, the expected changes may not be measurable. Fourth, it is possible that the type of therapy provided is not appropriate for the individual needs of the respondents. Therapy that is less relevant to the specific conditions or problems experienced by the respondents can explain why there is no significant change in scores.

The higher sum of ranks in the intervention group, namely 793 compared to 585 in the control group, supports the indication that hypnotherapy has a positive influence on increasing patient compliance. In comparison, a study byAdiningtya and Prasetyorini (2024)found that interventions focused on emotional management and stress reduction can increase adherence by up to 25% in patients with chronic diseases. This study strengthens the finding that hypnotherapy plays a role in optimizing chronic disease management.

With a p-value of 0.024, which is less than 0.05, this result indicates that the difference between the intervention and control groups is statistically significant. Hypnotherapy can effectively be part of the management of coronary heart disease, improving medication adherence which is crucial for reducing the risk of cardiac complications. The study byTanita et al (2019)supports this finding, where hypnotherapy intervention in chronic disease patients showed significant results in increasing self-control, which is directly related to medication compliance. This finding indicates that hypnotherapy has succeeded in providing a significantly different impact compared to the control group. InEny Pujiati (2022)Hypnotherapy is concluded as one of the effective alternative methods to improve compliance, because of its in-depth nature and focus on changing the patient's mindset. Hypnotherapy has the potential to improve compliance by increasing the patient's perception of the importance of health and disease management.

CONCLUSIONS AND RECOMMENDATIONS

The results showed a significant difference between the intervention group receiving hypnotherapy and the control group (p=0.024). The results of the analysis showed that no patients experienced a decrease in compliance after hypnotherapy (negative ranks = 0), while there were 6 patients who experienced an increase in compliance (positive ranks = 6). Most patients, namely 46 people, were included in the category of not experiencing significant changes (ties = 46). These findings indicate that hypnotherapy effectively improves patient compliance with long-term treatment for coronary heart disease.

ADVANCED RESEARCH

The findings of this study provide compelling evidence that hypnotherapy can serve as an effective complementary intervention to enhance patient compliance in long-term treatment regimens for coronary heart disease. The statistically significant difference observed between the intervention and control groups (p=0.024), combined with the absence of any decrease in compliance among hypnotherapy recipients and the presence of increased compliance in several individuals, underscores hypnotherapy's potential to positively influence patient behavior. While the majority of patients did not exhibit marked changes, the targeted improvement in a subset of participants suggests that hypnotherapy may be particularly beneficial for patients with moderate adherence challenges. These results highlight the importance of integrating behavioral and psychological strategies into conventional medical treatment plans, supporting a more holistic and patient-centered approach in chronic disease management.

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