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Effects of stress management training affections in reducing blood pressure, heart disease, Pasteur Hospital in Bam city summer of 2014

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ABSTRACT

Topics examined in this study is surveying the effect of stress management instruction on blood pressure reduction in cardiovascular disease, the method of quasi-experimental study is with pretest and posttest two-group, The population of this study were all patients with cardiovascular disease that referring to Pastor hospital city of Bam with high blood pressure. During they was admitted into the hospital April 1393 this study will be available for sampling and cardiac patients admitted to Pastor hospital in the city of Bam who were willing to cooperate and participate in training they were selected as the research sample, The sample size is 24 patients were determined 12 cases and 12 controls. Tools of collect the data, Cooper Smith's stress test, blood pressure measuring device that has been closed method of stress management training. Methods of data analysis using descriptive statistics, mean, standard deviation and t-test was used for independent samples to test the research hypotheses. The main hypothesis of the study was to investigate the impact of stress management on blood pressure in patients with cardiovascular disease that confirmed at the 99 percent confidence level, also the results showed that it is significant effects management stress training period on systolic blood pressure and Diastole. **KEYWORDS:** blood pressure, stress management training, cardiovascular disease

1- INTRODUCTION

In modern life more today than any other time in life we are tension or mental stress and its side effects are. We are all far and near, more or less, wanted and unwanted are faced with numerous psychological stress in throughout his life. Stress in a different every age. Childhood disabilities, issues that arise during adolescence and stresses feels in the aging time is necessary. Most people think they know what stress is, but relatively few have a low understanding of it, they are aware of the effects of stress on your body and know how it could be controlled, Came with it and even use it Sometimes bad events happen in anyone's life he called on both the physical and mental relaxation and generally helps to get rid of this case, methods and solutions. This condition, called Stress Corn due to factors that are causing stress. There are existence that called Stressful and stress there are in each generation and every time. For example, prehistoric humans from wild animals attack or death cause hunger, cold or disease, were tolerance a lot of stress Employees claimed to wear or several ago centuries the stress result of affection to of plague illness that it will eliminate whole people being existence or human being experienced tension but it seems that today, less one who is not familiar with this concept, why are many people who speak from the pressure of work and life and it could be said that stress is part of everyday life and the ordinary man (Khodayarifard 2006: 21). In addition, there is evidence that show problems cause of Stressful events related in the twentieth century, particularly in industrialized countries advanced of West and has increased (Powell and Ann Wright, 2012: 41) Where some experts called our age "era of tension," (Breznytz and Goldbargz, 2013: 72).

The other side the heart diseases are including psychosomatic diseases—that in addition to biological factors, it is influenced by psychosocial factors (Cooper and Adam, 2006: 23) Furthermore, the stress is a risk factor for coronary heart disease, It also could be an attempt to overcome Physiological responses and Psychological Resulting in the creation of health problems in people given with these disorders (Littleton, 2003: 13). The use of methods facing with stress such as stress management it cause reduce confusion and improve public health in cardiac patients. Therefore, by learning how methods of to cope with stress in these patients could thorough reduction of Predisposing disease risk behaviors be help to improve general health of them.

Hypothesis

The main hypotheses:

• method of stress management training have impact in reducing blood pressure of heart patients referred the Pasteur Hospital in the city of Bam.

Alternative hypothesis:

- method of stress management training have impact in reducing systolic blood pressure of heart patients referred the Pasteur Hospital in the city of Bam.
- method of stress management training have impact in reducing diastolic blood pressure of heart patients referred the Pasteur Hospital in the city of Bam.

Internal research

Jabalameli, Heidari, Mostafavi (2011) in a study paid to assess the efficacy of cognitive-behavioral intervention focused on public health, stress management, heart disease, covariance analysis result showed The post-test scores average of the experimental group health compared to then controls group that it has been significantly reduced. The results showed cognitive-behavioral of stress management intervention can use a useful experimental method for heart disease.

Sherinim, Sudani and Shafiabadi (2008) to evaluate the effectiveness of stress management training on increasing students' mental health, the experimental intervention (stress management training) for the experimental group was applied 8 sessions of 75 minutes. The results indicated that teaching stress management skills cause improves mental health and reduces physical symptoms, anxiety, social dysfunction and depression evenly.

Samei Sibni, Alimaradi and Sadeghi (2012) deal with to investigate the effects of modification lifestyle training in the management of anxiety, stress and depression patients for hypertension, The findings were showing statistically significant differences in mean scores related to Stress, anxiety and depression before and after intervention but there are no significant differences in mean systolic and diastolic blood pressure before and after the intervention.

Jabalameli, Neshat doost and molavi (2009) deal with to evaluate the efficacy of stress management intervention on cognitive-behavioral upon quality of life and blood pressure of hypertensive patients. Study findings revealed that Mean of style life quality scores were significantly lower in the experimental group increased compared to the control group.

And blood pressure were significantly higher in the experimental group than the control group. The results demonstrated the effectiveness of group intervention of stress management with aspect of Cognitive-behavioral approaches to improving quality of life and blood pressure in women patients with hypertension.

Tarkhan, Safari niya and khosh sima (2012) evaluated effectiveness of group training of immunization against stress on the systolic and diastolic blood pressure and quality of life in women with high blood pressure. The study shows that learning to stress management can provided cause high blood pressure reducing and enhancing the quality of life of patients with hypertension.

Aminian, farjami, Poor Jacob is sadegh niyat haghighi (2010) In the study deal with to evaluation job stress among drivers of public transport and connection this the stress with factors cardiovascular risk according to this study, it was found that high percentage of vehicles and drivers are with moderate to severe stress but there are significant the relationship between job stress level and risk factors for cardiovascular disease.

Foreign backgrounds

Timmerman et al (1998) deal with survey the effects of educational programs focused on stress management. The results showed this training can be Stress, anxiety, and daily involvement low and to bring more dare and satisfaction.

Halamandarez and Power (1999) also showed that relaxation Behavioral training or muscle relaxation, reduces anxiety students. Mizzeno and et al (1999 quotes nezami, 1386: 74) showed mental health and coping styles of problem-focused have significant relationship and control training and stress management, individual scores on depression, general anxiety disorder and social function reduced significantly.

Hardin and et al (2002) has reported psychological measures cause increased perception of stress, self-efficacy and social support them.

Robbins and colleagues (1994) found in studying quality of life in 315 patients with hypertension The level of cognitive functioning, social activity and sense of general health in these patients is less and physical health status is high such as incidence value of somatic symptoms and sleep disturbances in there.

Muller et al (1994) showed that hypertensive patients have poor mood, more somatic symptoms and lower life satisfaction than others. Due to the quality of life as a conscious cognitive judgment is defined on individual life satisfaction, so when a person is suffering from a chronic disease, physiological symptoms, prognosis, therapy, diet therapy and related topics can crossing severe the impacts on overall understand of life satisfaction (Rejsky, Mehalko, 2001: 19).

Brown and Lucas (2008) examined the effect of muscle relaxation is from SIT Skills is created cause reduces blood pressure and anxiety. In this regard SIT the effectiveness and drug therapy on blood pressure of 51 case of 20 to 55 years were studied for 10 weeks. In this study shoeing both methods lead to decreased blood pressure but medication treatment reduced in comparison SIT method is cause blood pressure more quickly (Sandman and rash, 2001, quoted by Sue, Sue, Sue, 2004: 62). This study investigates the impact of stress

management on lowering blood pressure in heart patients with hypertensive in The Pasteur Hospital in the city of Bam.

2- RESEARCH METHODOLOGY

Method of research is pretest and posttest quasi-experimental study with a control group.

2-1- The population

The population of this study is all patients admitted to hospital of cardiovascular patients with high blood pressure to Pastor hospital of the city of Bam during April 2014 was admitted into center.

2-2 -Sample size and sampling method

Sampling is stage of the process are research scientific interconnected and one of the key elements of the methodology of scientific research and new knowledge. Sampling work nicely as a research tool, facilitating the investigation work. Sampling allows and provides to the researcher to spend less resources, to achieve the intended results. Sample that is representative of the entire population, The main concern is the sampling (saraee, 1393: 10).

sample in this study was The convenience and available and the sample size the number based on of current samples number to cooperate and participate in periods of stress management and also due to limited statistical community patients who go to a place Pasteur Hospital were determined the size of the 24 patients (12 cases and 12 controls) It should be noted sample size of 12 subjects per group has been performed depending on the perspective Safari (2010: 44).

2-3 -Data collection tools

2-3-1-Cooper Smith stress test: This tool consists of 25 questions in response to questions that were 4 options including: Lot 3, lot 2, little one, and will never be given 0 points. Ebrahami and associates in 2007 to evaluate the content validity and reliability of the questionnaire and 95 percent reported a reliability coefficient (Ebrahami et al, 2007: 77).

Cronbach's alpha value in homan research in 1388 the calculated equal to 93% of (Homan, 2009: 19).

2-3-2- blood pressure device: the first of its kind invented by a physiologist primary in the 1700s and gradually was complete during the years 1863, 1898, 1901, 1915 AD. In 1905, Russian surgeon named Krottkof formation the device with stethoscope Markable and analog page that he registered in his name. Different types of analog manometers, mercury, have digital that the most common form of using analog to measure hypertension, prescribed persons (Davison, John, 2000: 63).

2-3-3- Toolkit of stress management method:

This packet based on Maykan bam theory were taken with techniques of problem solving skills, muscle relaxation, self - reinforcing, self - control, positive self-talk, effective communication and assertiveness reasonable and iraniann the population is employed (Mehrabadi, 2010: 18).

In this case the strategies coping with stress to patients have training.

Also try to dysfunctional thoughts and central beliefs have severe emotional and psychological reaction and associated symptoms, are identified and corrected. The first session included the introduction and discussion was about the factors that cause stress.

The role of stress in the onset, exacerbation and perpetuation of heart disease and diaphragmatic breathing and relaxation techniques training. In the second and third sessions about the relationship between thoughts and feelings, Way Irrational thoughts and comments about the cognitive processing errors and training, to reassess their ideas and challenge was speaking as a mechanism to change irrational thoughts. The fourth session of anger management and meditation training, Fifth session of the training methods of problem solving, Sixth session, including communication skills and assertiveness, Seven sessions include training on time management and Eighth session included a general review and practice skills learned in previous sessions. The therapist in every session at first identifies discussion the issues he learn new skills to patients and tasks to run the practices at specified intervals between them . Patients were required to determine the distance between the two sessions and practical exercises to do at home to practice, In each session stated a report on the procedure task process.

2-4- Methods and tools for data analysis:

In this study, using software SPSS, we investigate both the descriptive and inferential data While coding and data entry of mean and standard deviation were used to program and to examine and compare the mean difference between two independent was used sample t test

Table 1: Stress Management Training Package

| - Introduction of the overall impact of stress on the body machines | |
|--|----------------|
| - Effects of physical, psychological and behavioral stress works | Second cession |
| - Intellectual and subjective strategies to matching with stress - Introduction to methods of problem-focused and emotion-focused as coping strategies - Investigate ways of coping in a stressful situation | Third cession |

| - Introduction of coping skills with stress - working on the first step is to work on coping skills, self-awareness of emotions - Study skills, preparation to exam and time management. | fourth session |
|--|-----------------|
| Reinforcement of Confidence, self-esteem and coping with depression and anxiety | Fifth session |
| addressing to the second step in stress management skills and methods for long-term and short-term recall. Neutralize the stress relaxation technique is introduced as a method of therapy and behavioral therapy techniques, in this paper, the method of contraction were used gradual relaxation of 16 muscle groups | Sixth session |
| Physical methods of dealing with stress, physical approach to a healthier life style is concerned, this section contains direct references to having a healthy diet, sufficient sleep and exercise that due to conducive to maintaining and strengthening the immune system and enhance energy levels. | Seventh cession |
| Work on progressive relaxation techniques, exercise and repeat it and eliminate ambiguities and ensure that all students become proficient in applying these methods. - The views of students and getting feedback and further testing of mental health | Eight cession |

2-5- The implementation method of the research:

For implementation of this research, initially after proposal adopted this research and literature provided and theoretical basis with the coordination of the action with The Pasteur Hospital of the city of Bam, after identifying cardiovascular patients with disease high blood pressure, Smith copper stress test was taken from them ,then the study then randomly divided into two groups of 15 (One group as a control group and a test group) were assigned Then proceeded to conduct a stress management training course for the experimental group, After the trial period, both groups were held again stress testing, Then proceed to analyze the data with SPSS statistical software.

Questionnaire prepared after were coded completing a by the participants and in to analyze arrived with the SPSS statistical software. In this chapter we first describe the samples Based on demographic variables (age, sex, education, etc.). Therefore, using descriptive tables to provide some descriptive results there are Statistics need to be dealt with. In order to examine the hypotheses, was used independent samples t-test.

3- Discussion and analysis of data:

3-1- Part I: Description of Respondents

Table 2. Distribution of respondents frequency by gender

| percent | frequency | Gender |
|---------|-----------|--------|
| 41.67 | 10 | man |
| 58.33 | 14 | female |
| 100 | 24 | total |

According to Table 2 Response whole were (24 cases), 10 cases means 41.67% of men means 58.33 per cent women and 14 children, calculated Statistics for these variables are according to the nominal level of measurement mode (the variable that had the highest frequency) is the frequency of the variable, respondents were women, 14 children.

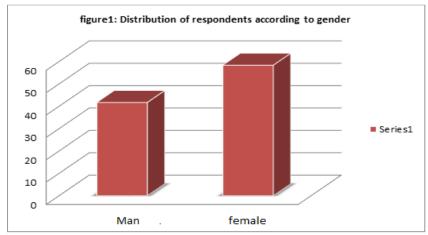


Table 3. Distribution of respondents frequency in terms of age

| | terms or me | ,• | | | | | | | | | | |
|--------------------|-------------|----------------|----------------|---------|-----------|--------------|--|--|--|----|---|--------|
| Standard deviation | Average | Maximum age | Minimum age | percent | Frequency | Aging group | | | | | | |
| | | | | 12.50 | 3 | Less than 40 | | | | | | |
| | | | | | | | | | | 25 | 6 | 41 -50 |
| 9.34 | 52.16 | 66 | 33 | 37.50 | 9 | 51-60 | | | | | | |
| | | | | 25 | 6 | 61 to up | | | | | | |
| | | | | 100 | 24 | totall | | | | | | |

According to Table 3, the total response (24case) 3 case means 12.5% and aged 40 years was less and Number 6 means 25 per cent between 41 and 50 years, 9 case means 37.5% between n = 9, 51 to 60 and Only 6 patients aged 61 years and older was 25 percent, The lowest age between 33 years and maximum age 66 years, respondents has been answered, The mean age of 52.16 years, SD respondents is equal to 9.34 This means that the age of majority in respondents to answer to a higher or lower standard deviation from the average.

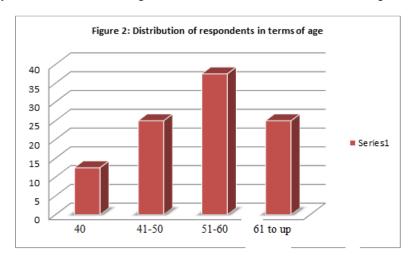


Table4 - Distribution of respondents frequency according to education level

| Percent | Frequency | Education |
|---------|-----------|-----------------|
| 25.00 | 6 | Cycle and lower |
| 33.33 | 8 | Diploma |
| 25.00 | 6 | Resource |
| 16.67 | 4 | BA and above |
| 100 | 24 | Total |

As can be seen in Table 4, of the total respondents, 25% has been cycles and lower levels of education 33.33% of diplomas, 25 percent have an associate's and 16.67 percent bachelor's degree or higher education. Given that the measurement of this variable is nominal, fashion statistic is calculated, the variable with the most education diploma (n = 8), respectively.

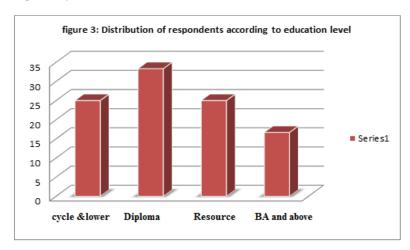


Table5 - Distribution of respondents frequency by state of residence

| percent | frequency | habitat |
|---------|-----------|------------------|
| 41.67 | 10 | personal |
| 29.17 | 7 | mortgage or rent |
| 8.33 | 2 | cooperative |
| 20.83 | 5 | Hereditary |
| 100 | 24 | total |

As can be seen in Table 5, the total respondents 10 number means that 41.67 percent of was home people own their place of residence, 29.17% of the mortgage or rent, 8.3 percent of corporate they inherited a situation where only 20.83. Given that the measurement of this variable is nominal, fashion statistic is calculated in this the person with the highest frequency changing their place of residence (n = 10).

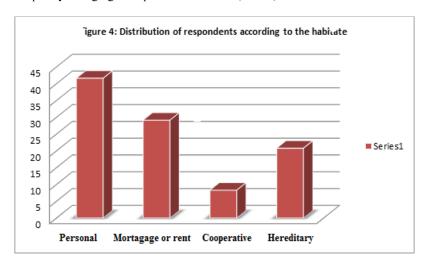


Table 6 - Distribution of Respondents frequency by Marital Status

| percent | frequency | Marital status |
|---------|-----------|------------------------|
| 16.67 | 4 | Single (never married) |
| 12.50 | 3 | Spouse or divorced |
| 70.83 | 17 | Married |
| 100.0 | 24 | Total |

According to table 6 from responding whole (n = 24), N = 4, means, 16.67% were single (never married), 3 people means 12.5 percent lost spouse or divorced and 17 people means 70.83 per cent were married. According to the statistics calculated for this variable is a measure of fashion, The fashion in the married option of changing their number is 17, Most respondents were Married.

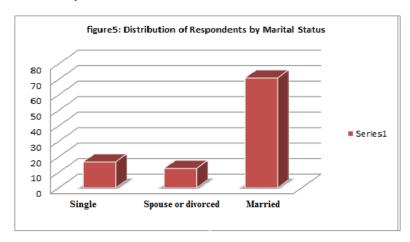
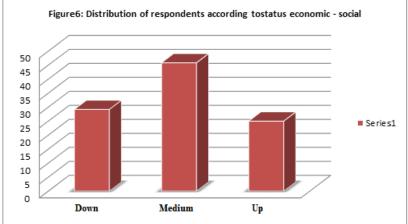


Table7 - Distribution of respondents frequency according to the economic - social base

| | | . v 8 |
|---------|-----------|---------------------|
| percent | frequency | Socio-economic base |
| 29.17 | 7 | Down |
| 45.83 | 11 | Medium |
| 25.00 | 6 | ир |
| 100.00 | 24 | Total |

According to Table 7 from the total respondents (24 case), 7 case means 29.17% of They have low socioeconomic status, 11case means 45.83% of the economic - social base and only 25 percent

had high socioeconomic status. According to the statistics calculated for this variable is measured fashion, so setting this variable fashion in middle bases of which there are 11 persons.



Description of blood pressure variable

Table 8 - Mean and standard deviation of the sample blood pressure scores

| Deviation standard | Average | Statistics | group |
|--------------------|---------|---------------|---------|
| 1.71 | 16.21 | Pre test | control |
| 1.67 | 16.08 | Pre test | Control |
| 2.8 | 16.14 | Pre test | tasting |
| 1.32 | 12.8 | After testing | testing |

in Table 8 in Variable of the control group (pre-test), test (pre-test), control group (post-test) Test (post-test), to the average equal (21/16, 14/16, 08/16, 12/08) respectively and standard deviation is equal to (71/1, 02/08, 67/1, 32/1).

Table 9 - Mean and standard deviation of the sample scores in terms of systolic blood pressure

| Deviation standard | Average | Statistics | group |
|--------------------|---------|---------------|---------|
| 1.41 | 15.17 | Pre test | control |
| 1.8 | 15.88 | Pre test | Control |
| 2.8 | 15.15 | Pre test | testing |
| 1.2 | 12.2 | After testing | testing |

in Table 9 in variable in the control group (pre-test), test (pre-test), control group (post-test) test (post-test), equal to the average (17/15, 15/15, 88/15, 8212) respectively, and standard deviation is equal to (1/41, 8/2, 8/1, 2/1).

Table 10- mean and standard deviation of sample versus diastolic blood pressure

| Deviation standard | Average | Statistics | group |
|--------------------|---------|---------------|----------|
| 1.31 | 15.97 | Pre test | loomtuol |
| 1.21 | 16.12 | Pre test | control |
| 2.8 | 16.11 | Pre test | koatina |
| 1.01 | 12.33 | After testing | testing |

Table 10 in Variable the control group (pre-test), test (pre-test), control group (post-test) and test (post-test) average equal to (97/15, 11/16, 12/16, 31/12) respectably and standard deviation equal to (31/1, 02/08, 21/1, 01/1) respectably

3-2 – survey of research hypothesis (inferential statistics)

In this section for each test each hypothesis and understand the difference existence or lack of difference is used between the two groups of control and test and average the difference.

3-2-1- The main theory: methods of stress management training can reduce blood pressure in patients with cardiovascular disease.

Hypothesis H0: there are no significant difference between blood pressure of the experimental and control groups at post-test patients .

Hypothesis H1: there is not the difference between blood pressure of experimental and control groups at post-test there.

The mean scores obtained in the variable blood pressure by experimental group was 12.8in posttest stage. in This variable equals the mean of the control group was 8.16, T-value obtained for the two groups was 1.65 and a significance level was obtained 0.012, Given the significant amount obtained is less than 0.05, therefore there are the significant difference in blood pressure between the control and experimental groups at posttest, so The main hypothesis is confirmed.

Table 11. t-test indicators related to comparing the mean scores of blood pressure experimental and control groups

| | T-test for equal means | | | Lionel tes | Lionel test for equal variances | | | | | | | | | C | | |
|------------|------------------------|--------------------|---------------------------|----------------------|---------------------------------|-----------------------|-------|--------|---------------------|-------|-------|-------|------|-------|----|---------|
| conclusion | T-value indicates | Degrees of freedom | The calculated value of t | Significant level | F | Deviation standard | mean | number | Group indication | | | | | | | |
| 0.05 4 | 1.07 | 1 | 1.650 | 0.013 | 0.156 | 1.32 | 12.08 | 12 | test | | | | | | | |
| 0.05< p | 1.96 | 1 | 1.658 | 0.012 | 0.012 | 0.012 | 0.012 | 0.012 | 0.012 | 0.012 | 0.012 | 0.176 | 1.67 | 16.08 | 12 | control |

3-2-2- sub-hypothesis survey:

3-2-2-1- The first hypothesis: method of stress management training cause reduced systolic blood pressure in cardiovascular disease.

Hypothesis H0: there are no significant difference between systolic blood pressure the experimental and control groups at post-test.

Hypothesis H1: there are significant d difference systolic blood pressure between the experimental and control groups at posttest.

The mean scores obtained in the range of systolic blood pressure by an experimental group In the post-test was 12.2 this variable equals the mean of the control group that it was 15.88, T-test values obtained for the two groups of 1.59 and a was obtained, significance level of 0.032 Given the significant amount obtained is less than 0.05 there are the significant difference in systolic blood pressure between control and experimental groups At posttest so the result the first hypothesis confirmed.

Table 12. The indices of t-test systolic blood pressure for comparison of experimental and control groups

| conclusion | T-test for equal means | | | Lionel test for equal variances | | Danielia | | | C |
|------------|------------------------|--------------------|---------------------------------|---------------------------------|-------|-----------------------|-------|--------|---------------------|
| | T-value indicates | Degrees of freedom | The calculated value of t | Significant level | F | Deviation standard | mean | number | Group indication |
| 0.05< p | 1.59 | 1 | 1.59 | 0.032 | 0.177 | 1.2 | 12.2 | 12 | test |
| | | | | | | 1.8 | 15.88 | 12 | control |

3-2-2-second hypothesis: stress management training techniques result in reduced blood pressure and cardiovascular disease.

Hypothesis H0: there is no significant difference in diastolic blood pressure between the experimental and control groups at post-test.

Hypothesis H1: there is the difference diastolic blood pressure between experimental and control groups at post-test The mean scores obtained in the diastolic blood pressure variable by experimental group at was 12.31 post-test this variable equals the mean was 16.12the control group,

T-value of 1.44 obtained for the two groups and a significance level of 0.021 was obtained, Given the significant amount obtained is less than 0.05 so the difference between the two groups in terms of blood pressure control and test at posttest there, so the hypothesis is confirmed.

Table 13. t-test indications related to diastolic blood pressure compared to mean scores of the experimental and control groups

| conclusion | T-test for equal means | | | Lionel test for equal variances | | Davistian | | | Cuann |
|---|------------------------|--------------------|---------------------------|---------------------------------|-------|-----------------------|-------|--------|---------------------|
| | T-value indicates | Degrees of freedom | The calculated value of t | Significant level | F | Deviation standard | mean | number | Group indication |
| 0.05 <p< td=""><td rowspan="2">1.44</td><td rowspan="2">1</td><td rowspan="2">1.44</td><td rowspan="2">0.021</td><td rowspan="2">0.181</td><td>1.01</td><td>12.31</td><td>12</td><td>Test</td></p<> | 1.44 | 1 | 1.44 | 0.021 | 0.181 | 1.01 | 12.31 | 12 | Test |
| | | | | | | 1.21 | 16.12 | 12 | Control |

4- Conclusions:

The survey of the main hypothesis of research as a method of stress management training it result in decreased blood pressure and cardiovascular disease, it is confirmed at the 99 percent confidence level, These findings are consistent with results of previous studies These results can be partly know consistent the result of Blumenthal Collaborators (2005: 45)

Steptoe and Trzesynyka (1997: 12) and Belding and Peterson (1997: 32).

The results of this research makes use of stress management techniques one to better deal with stressful situations and to achieve greater control over their physical and emotional state and thus improve his health and ultimately improve their blood pressure. They showed that stress management techniques, even the rate of pressure blood and heart rate and can help patients reduce their stress, They believe that stress management programs,

weight loss,

reducing cholesterol and triglycerides and can cause violent behavior and would-be physical and mental health of individuals. Stress management programs to reduce stress on patients of heart attack patients given effective and can improve their mental health. and self-help in compliance with chronic disease. Findings (Kuntz, 2006: 66) found that psychosocial support including teaching stress management can be effective inheart and bring quality of life, he support for these patients is necessary who have symptoms such as fatigue, edema Activity intolerance and suffering.

In explaining these findings, we can say that the creation stress factors environmental are high effect in creation and exacerbate the symptoms of the disease blood pressure (Walc, 1957: 78) Extreme physiological arousal that occurs in stressful situations cause increased production of the hormones epinephrine and nor epinephrine as well as increases heart rate and blood pressure. The extreme physiological responses ultimately increases the likelihood of hypertension (Walcott, 1957: 54), Using various techniques such as relaxation and diaphragmatic breathing stress management, physical stress and physiological symptoms and also produce hormones epinephrine and nor epinephrine reduced As well as reduced blood pressure in patients with high levels (Walcott, 1957: 44). In fact, by reducing the effects of stress due to the use of effective coping skills with patients also dropped their blood pressure. According to Benson (barley, et al., 2009: 112), relaxation training leads to physiological changes it is integrated from the characteristics of hypothalamic function. These physiological changes are synchronized with the activity of the sympathetic nervous system and thus can reduce the symptoms of anxiety and blood pressure. Stress management techniques involve a one side help to patients to identify their emotions and irrational beliefs and false and learn that high blood pressure stressful caused by attitude, opinion and behavior poor performance in situations of great stress is on the other hand, helps to treat client till take Its difficult to challenge and use them adaptive strategies, creative problem-solving orientation. When these individuals with adaptive methods are solved their problems, Self-efficacy and self-esteem and confidence rises and this, in turn, reduce the fear of dealing with problems, Wishes level up and improve problem-solving ability and analytical thinking

In such circumstances, reality testing systems to their clients Taz·h¬Ay life and in situations of great stress will have a more logical approach (Goldberger and Breznetz, 2005, 58; Coleman, 2005, 56; Cohen, 2003: 96). (Nancy, 2008: 88)they showed in their study That people with high blood pressure when rid of their psychotherapy in the internal pressure of getting sessions and self-expression are found in social relations, Drug therapy is effective in reducing blood pressure. In line with this research showed that in patients with stress-provoking and emotional stresses such as anger, are suffering from essential hypertension, People who are lacking the necessary skills to deal with these situations. These people appear relaxed and are the rage in the roaring of rage within him, the state in is a psychological impasse and creates a special bilateral obstruction.

Because these people cannot express their anger openly nor can it be completely crushed. The conflict and hostile impulses pressure, the central feature of patients with essential hypertension. When these people are in stress management sessions, problem solving, logical expression, role-playing, assertive training, interpersonal skills, positive self-talk and self-control skills to learn in your own life, they naturally situations increases their self-reliance and resilience. In such a situation, the adequacy of cognitive and behavioral competence of individuals to achieve and can better that commensurate with the environmental conditions and show a more rational behavior. This significant in turn causes reduction in emotional stress resulting from situations of great stress, thereby reducing their systolic and diastolic blood pressure Tremblay (Kaufman, Sternberg, 2007,66); (Bouan and Scott, 2008,36); (Azad, 1993: 163). Study by Blumenthal and colleagues (2005; 45), Bryjandr et al (2005: 19), Kryts et al (2007: 124), Dvbnmar et al (2007: 66) have been done also performed to confirm these results stems. They showed that Tknynk¬Hay stress management on blood pressure and heart rate were effective and can they reduce stress. They believe that stress management programs affected on to reduce stress on patients including heart disease and high blood pressure has been effective and can promote their mental health and self-help patient compliance with chronic disease.

In survey of the first and second hypothesis of stress management training cause reduced systolic and diastolic blood pressure and cardiovascular disease result Confirmed at 95 percent, This finding is in line with exploration and elevation of many researchers, such as Brown and Lucas (2008: 36), Sandman, Rush (2001, Fetuses from Sue, Sue, Sue, 2004: 44), and Lloudensger and Mayer (2008: 78), Cohen (2003: 88), Elliott, ezdvorfr (1982, free quotes, 1994: 112) is consistent. In other words, this research and converge in this area show stress management techniques such as tools, skills, problem solving, muscle relaxation, role playing, self-control, positive self-talk was used Systolic and diastolic blood pressure decreased in patients with high blood pressure. Researchers believe the people because of stress from interpersonal situations or threatening situations, it increased Their systolic and diastolic blood pressure, stress management techniques is a good way of helping them to control blood pressure-is.

5- suggestions:

Generally, stress management method advocates believe that this approach can be effective in helping people are suffering from essential hypertension. Because in this way, they learn skills that people in therapy sessions, rid of sense of helplessness and to achieve a sense of hope and control. When people feel control over their environment and can are caused by environmental changes, as nice feeling to find then themselves Blood pressure them put on a more normal level Why is it that the abandonment of a sense of helplessness and control over the environment, and prompted a review of the experiences of successful individuals, increased confidence and self-control situations in life that cause stress. And life will be extended to other aspects and this the positive perception of their inner, mental stress and thereby help to control blood pressure evenly. In general, cognitive - behavioral stress management, a person familiar with stress and deal with it and can to neutralize the effects of stress and stress answers better help to psychological and physiological functioning. However, this intervention is effective in reducing disease and improving health.

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