

The effect of the combination of acupressure therapy and breast care on the duration of smooth breastfeeding in postpartum women in the PMB working area of Pujokerto Trimurjo health center, Central Lampung

Pengaruh Kombinasi Terapi Akupresur dan Perawatan Payudara terhadap Lamanya Kelancaran Menyusui pada Ibu Nifas di Wilayah Kerja PMB Puskesmas Pujokerto Trimurjo, Lampung Tengah

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Article Info

Received December 12, 2024,

Revised December 20, 2024,,

Accepted December 24, 2024

Keywords:

Acupressure Therapy and
Breast care, Smooth
breastfeeding

Keywords:

Akupresure, Perawatan
Payudara, Kelancaran
Menyusui

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Abstract

Introduciton: Insufficient breast milk is one of the main obstacles to the success of exclusive breastfeeding. Data from the Pujokerto Health Center work area shows that 61% of postpartum mothers experience insufficient breast milk. **Objective:** The study aims to determine the effect of a combination of acupressure and breast care therapy on the duration of smooth breast milk in postpartum mothers. **Method:** Quantitative research with a quasi-experimental pretest-posttest group design. The sample consisted of 14 respondents, divided into two groups: intervention (acupressure + breast care) and control (only breast care). Data analysis used the dependent T test. **Results:** The average number of days of smooth breast milk in the intervention group was 3.14 days and the control group was 3.42 days. The bivariate test showed a p-value = 0.414 (≥ 0.05), meaning that there was no significant effect between the combination of therapies on the duration of smooth breast milk. **Conclusion:** There was no significant effect of the combination of therapies on the duration of smooth breast milk.

Abstrak

Pendahuluan: Pemberian ASI yang tidak berkesinambungan merupakan salah satu hambatan utama keberhasilan pemberian ASI eksklusif. Data wilayah kerja Puskesmas Pujokerto menunjukkan 61% ibu nifas mengalami ASI tidak lancar. **Tujuan:** Penelitian ini bertujuan untuk mengetahui pengaruh kombinasi terapi akupresur dan perawatan payudara terhadap lama keluarnya ASI saat ini pada ibu nifas. **Metode:** Penelitian kuantitatif dengan desain quasi experiment pretest-posttest group design. Sampel penelitian sebanyak 14 responden, dibagi menjadi dua kelompok yaitu kelompok intervensi (akupresur + perawatan payudara) dan kelompok kontrol (hanya perawatan payudara). Analisis data menggunakan uji T dependen. **Hasil:** Rata-rata lama keluarnya ASI lancar pada kelompok intervensi adalah 3,14 hari dan 3,42 hari pada kelompok kontrol. Uji bivariat menunjukkan nilai $p = 0,414 (\geq 0,05)$ yang berarti tidak terdapat pengaruh yang signifikan antara kombinasi terapi terhadap lama keluarnya ASI. **Simpulan:** Tidak terdapat pengaruh yang signifikan dari kombinasi terapi terhadap lamanya ASI saat ini.

Introduction

Breast milk (ASI) plays a vital role in supporting infant growth and development, but the coverage rate of exclusive breastfeeding in Indonesia has not yet reached the national target. Based on Riskesdas 2018, the coverage of exclusive breastfeeding was only 37.3%, far from the national target of 80%. One of the factors causing the low coverage is the length of time that breast milk is not smooth in postpartum mothers (Kementerian Kesehatan RI 2018).

Insufficient breast milk production can be treated through non-pharmacological approaches, such as acupressure therapy and breast care. Both techniques are believed to stimulate the production of prolactin and oxytocin hormones that play a role in the lactation process. Several previous studies have shown that acupressure and breast care can separately

How to cite:



Rahmawati, Mega, Ima Lestari. (2024). The effect of the combination of acupressure therapy and breast care on the duration of smooth breastfeeding in postpartum women in the PMB working area of Pujokerto Trimurjo health center, Central Lampung. Jurnal Kesehatan Metro Sai Wawai. 17(2), 90-94. DOI: <https://doi.org/10.26630/jkmsw.v17i2.4980>
Published by Tanjung Karang Health Polytechnic, Indonesia. Copyright Holder ©Author(s)(20xx).
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accelerate breast milk production. However, there have not been many studies that have examined the combination of the two therapies simultaneously (Anggraini, 2020; Sari & Rahmawati, 2023; Lestari et al., 2020; Andoli & Rismayani, 2024).

This study aims to analyze the effect of a combination of acupressure therapy and breast care on the duration of smooth breast milk supply in postpartum mothers in the working area of Pujokerto Health Center, Central Lampung.

Method

This study used a quasi-experimental design with a pretest-posttest with control group design approach. The study was conducted at the Independent Midwife Practice (PMB) in the Pujokerto Health Center, Central Lampung in March 2020.

The population in this study were all postpartum mothers who experienced delays in the smooth flow of breast milk. The sampling technique was carried out by accidental sampling, with a sample size of 14 people, who were divided into two groups: the intervention group ($n = 7$) who received acupressure and breast care therapy, and the control group ($n = 7$) who were only given breast care therapy. Data were analyzed using a dependent T test to determine the difference in the duration of smooth breastfeeding in the two groups.

Results

Univariate Analysis

The results of the univariate analysis showed that the average number of days of smooth breastfeeding in the intervention group was 3.14 days (days 2 to 4), while the control group reached an average of 3.42 days (days 3 to 4). This shows that both groups experienced smooth breastfeeding in a relatively short time.

Bivariate Analysis

The results of the dependent T statistical test showed a p value = 0.414 (≥ 0.05). Thus, there is no significant effect between the combination of acupressure therapy and breast care on the duration of smooth breast milk in postpartum mothers.

Respondent Characteristics / Research Subject Demographics

It was concluded that from 7 respondents, the age category with the most was >26 years old, 8 people (57.1%), while for the education category, the parity education was the 1st child, namely 7 people (50.0%), and the baby weight category with the most was >2700 grams (71.4%), and the education category with the most was elementary school, 6 people (42.9%).

Table 1.

Characteristics of Respondents to Acupressure Therapy and Breast Care on the Length of Smooth Breast Milk Supply in Postpartum Mothers

Respondent Characteristics	Amount	Percentage
Age		
<24 years	6	42.9%
>26 years	8	57.1%
Parity		
1st child	7	50.0%
2nd child	7	
Baby weight		
<2600 grams	4	28.6%
>2700 grams	10	71.4%
Education		
SD	6	42.9%
Junior High School c. Senior	5	35.7
High School	3	21.4

Analysis Results

Table 2.

Average duration of smooth breast milk flow after acupressure and breast care therapy

How Long Does Breast Milk Flow?	N	Mean	SD	Min & mom
TherapyAcupressure and breast care	7	3.14	6.90	2 & 4

Table 3.

Average duration of breast milk production after breast care

Duration of Breast Milk Production	N	Mean	SD	Min & mom
Breast care massage therapy	7	3.42	5.35	3 & 4

Discussion

This study aims to determine the effect of a combination of acupressure and breast care therapy on the duration of smooth breast milk flow in postpartum mothers. The results of the analysis showed that there was no significant difference between the intervention group and the control group in terms of accelerating smooth breast milk flow. The p value of 0.414 ($p \geq 0.05$) indicates that the alternative hypothesis is rejected, meaning that the combination of therapies does not have a significant effect on the duration of smooth breast milk.

These results are in line with several previous studies that stated that the success of non-pharmacological therapies such as acupressure and breast care is greatly influenced by many factors, such as the mother's physiological and psychological conditions, breastfeeding knowledge, correct breastfeeding techniques, social support, and endogenous hormones that play a role in the lactation reflex (prolactin and oxytocin). Although in theory acupressure therapy stimulates milk production points and breast care increases mechanical stimulation of the breast, this intervention may not be statistically strong enough in a small sample and short intervention time (6 hours after delivery) (Agustina et al., 2024; Aliah et al, 2024; Nugraheni & Heryati, 2017; Rahayu et al., Rochkmana et al., 2024; Siregar, 2024) .

In addition, it is important to note that the let down reflex and prolactin reflex are highly dependent on the mother's emotional state. In this study, psychological factors such as stress levels, maternal self-confidence, and sleep quality were not explicitly controlled. In fact, stress can increase the adrenaline hormone which inhibits the work of oxytocin, so that the milk ejection reflex can also

be disrupted. This may explain why there was no significant difference between the two groups (Andayani & Hidayati, 2022; Cholifah & Maret, 2015; Djanah & Muslihatun, 2017; Lestari, 2022).

From a technical perspective, the therapy is performed twice a day for the first 6 hours after delivery. In fact, some literature states that the peak of lactation stimulation occurs on the 3rd to 4th day after delivery. Therefore, the duration of the intervention may be too short to provide a significant physiological effect on the production and smoothness of breast milk.

Another factor that influenced the results was the relatively small sample size ($n=14$). With a limited sample size, statistical power is low, making it difficult to detect even small effects. Research with a larger number of respondents would provide stronger and more reliable results.

However, although not statistically significant, the average intervention group showed a slightly earlier time to breastfeeding (3.14 days) compared to the control group (3.42 days). This suggests a potential benefit from the combination of therapies, although it has not yet reached significance. Therefore, these results are still important to be the basis for further research with a stronger design and considering other external factors.

Conclusion

Based on the results of the research that has been conducted, it can be concluded that the combination of acupressure therapy and breast care does not have a significant effect on the duration of smooth breast milk in postpartum mothers in the Pujokerto Health Center, Trimurjo, Central Lampung. Although there was a difference in the average duration of smooth breast milk between the intervention group (3.14 days) and the control group (3.42 days), the difference was not statistically significant ($p = 0.414$).

These findings indicate that the effectiveness of the combination therapy may be influenced by other factors such as the mother's psychological condition, breastfeeding techniques, family support, and the duration or frequency of therapy, which is still limited.

For further researchers, it is recommended to conduct research with a larger sample size and a longer intervention period, in order to evaluate the effectiveness of the combination therapy more optimally.

For health workers, especially midwives and nurses, it is hoped that they will continue to consider acupressure therapy and breast care as alternative approaches to increasing the flow of breast milk, especially if done consistently and supported by comprehensive education for postpartum mothers.

For postpartum mothers, it is recommended to maintain the correct breastfeeding pattern, pay attention to psychological conditions, and utilize non-pharmacological therapies such as breast care and acupressure as independent efforts to support smooth breast milk flow.

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