

Original Research Article

Analysis of Complementary Therapy Acupresure Points for Lactation on Breastfeeding Success in Aceh Besar Regency

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Abstract: The low coverage of exclusive breastfeeding in Aceh Besar regency is a serious problem for child survival. One of the non-morphological natural methods that can be used to help expedite milk production is acupresure points for lactation therapy. Acupresure points for lactation therapy are one of the solutions to overcome the uneven production of breast milk. Acupresure points for lactation therapy help maximize prolactin and oxytocin receptors and minimize side effects from delayed breastfeeding by the baby. This research method is quasi-experimental with a pre-test and post-test research design. This research was conducted at the Midwives' Independent Practice in Aceh Besar Regency from April to October 2022. The population in this study were primiparous mothers who gave birth at the Independent Midwife Practice (PMB) in Aceh Besar Regency. The total sample of 60 respondents consisted of the intervention group of 30 respondents and the control group of 30 respondents. Data analysis using univariate and bivariate with T-Test Dependent and T-Test Independent. The results showed that there was a significant difference in milk production before and after giving acupresure therapy to breastfeeding mothers with a p-value of 0.000. There is a significant difference in breastfeeding success before and after giving routine care to breastfeeding mothers p-value 0.000. Complementary Therapy Acupresure Points For Lactation is effective in helping to facilitate breastfeeding and increase milk production in primiparous mothers in Aceh Besar Regency.

Keywords: Breastfeeding, Complementary, Therapy Acupresure.

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INTRODUCTION

According to the 2021 Basic Health Research (RISKESDAS) data, 52.5 percent – or only half of the 2.3 million babies aged less than six months – are receiving exclusive breastfeeding in Indonesia, or a decrease of 12 percent from the figure in 2019 [1]. The early breastfeeding initiation rate (IMD) has also decreased from 58.2 percent in 2019 to 48.6 percent in 2021. The coverage of exclusive breastfeeding in Aceh 2021 was recorded at 66.6 percent which is still below the national target of 80 percent. Meanwhile, in the Aceh Besar regency, exclusive breastfeeding has not reached the target, namely 47% [3]. The low coverage of exclusive breastfeeding in Aceh Besar regency is a serious problem for child survival. Early and exclusive breastfeeding is crucial to protect against various susceptible diseases such as diarrhea and pneumonia [4]. The emergence of several problems, both problems in the mother and in the baby often causes failure in the breastfeeding process.

Problems in the mother that arise during breastfeeding can start before delivery (antenatal period), in the early postpartum period, and in the late postpartum period. Breastfeeding problems can also result from special circumstances. The mother complains that her baby often cries or refuses to breastfeed, which then means that the milk is not enough or not good enough, causing the decision to stop breastfeeding. Breastfeeding knowledge can be obtained either through formal or non-formal education, such as breastfeeding counseling or outreach. Socialization or breastfeeding counseling is one of the factors that influence the implementation of exclusive breastfeeding. A study conducted in Ethiopia stated that mothers who receive breastfeeding counseling have a 5.2 times greater chance of exclusive breastfeeding than mothers who do not receive counseling [5].

The cause of the failure of the breastfeeding process can be caused by anxiety and fear. Anxiety

causes the release of the hormone adrenaline which causes vasoconstriction of blood vessels. As a result, the hormone oxytocin reaches the myoepithelial organs of the mammary glands a little so that the milk ejection reflex is inhibited which will reduce milk production [6, 7]. One of the non-morphological natural methods that can be used to help expedite milk production is acupressure therapy. Acupressure is a type of traditional Chinese medicine that is based on applying pressure to specific acupuncture points in the body [8, 9]. One of the advantages of using acupressure is low cost, ease of learning, and non-invasive [10]. Acupressure therapy gives a signal to the pituitary to produce the hormones prolactin and oxytocin in the body so that milk production is smooth and the mother is successful in the breastfeeding process [11, 12].

Acupressure therapy increases feelings of relaxation in postpartum mothers, reduces discomfort, increases endorphin levels in the blood. Stimulation of multiple points in the body can cause a balance in blood circulation, hormone secretion, and other factors which can increase the predication and secretion of breast milk. stimulation at some other point can increase prolactin and oxytocin and, consequently, produce better breast milk [13, 14]. An introductory survey conducted on Postpartum Mothers in Independent Midwife Practices (PMB) in the work area of the Aceh Besar Regency Health Office, out of 10 mothers interviewed 4 mothers complained that it was difficult to give breast milk to their babies on the grounds that the milk had not come out at all, while 2 other mothers answered that the baby kept crying because the milk was not smooth, and 4 other mothers said that there were no problems and obstacles that they could breastfeed well and the baby could also suck well. Based on the background above, the researcher wanted to conduct research on the Analysis of Acupressure Point For Lactation Complementary Therapy on Breastfeeding Success in Aceh Besar Regency.

The expected implication is that Acupressure Point For Lactation therapy becomes one of the mandatory care (SOP) for midwives when providing postnatal or breastfeeding maternal care in supporting the success of exclusive breastfeeding with the indicators of the Assesment Tool Lactation Advice Through Texting Can Help (LATCH). This study aims to determine the LATCH score before and after being given acupressure therapy to primiparous breastfeeding mothers in Aceh Besar Regency and to determine the comparison of breastfeeding success in the intervention

group with the control group in primiparous mothers in Aceh Besar Regency.

RESEARCH METHODS

This type of research is an experimental Equation research with a pre-test and post-test research design. This research was conducted at the Independent Midwife Practices in Aceh Besar Regency from April to October 2022. The population in this study were primiparous mothers who gave birth at the Independent Midwives Practices (PMB) in Aceh Besar Regency. sampling using purposive sampling technique using inclusion and exclusion criteria total sample of 60 respondents consisted of the intervention group of 30 respondents and the control group of 30 respondents. Inclusion criteria Willing to be a respondent Infants were not given formula milk at the time of the study Infants were full-term and healthy (BB> 2500 grams, good sucking reflexes) Mother and baby were cared for in one room Tools and materials used Oil or baby oil, Questionnaire/observation sheet, hand sanitizer, hand washing soap.

Exclusion criteria include; Mothers with delivery complications (such as bleeding, and puerperal infection.), Postpartum mothers with anatomic disorders of the breast (eg inverted nipples, flat nipples). The stages of the research (research procedure) included collecting data on postpartum mothers, dividing groups of postpartum mothers who were willing to do acupressure therapy, mothers were divided into 2 groups, namely the control group and the intervention group. the control group was given routine postpartum care in the form of counseling about exclusive breastfeeding. In the intervention group, acupressure therapy was given. Data analysis using univariate and bivariate with T-Test Dependent and T-Test Independent.

RESULTS

Research on Analysis of Acupressure Points For Lactation Complementary Therapy for Breastfeeding Success in Aceh Besar Regency, has been carried out from April to September in 2022. The following are the results of the Normality test (Kolmogorov-Smirnov) in breastfeeding mothers in the treatment group in Independent Practice Aceh Besar regency midwife.

The results of the normality test using the Kolmogorov Smirnov showed that the data were not normally distributed ($p < 0.05$).

Table 1: Test results Normality (Kolmogorov-Smirnov) in breastfeeding mothers in the control group at the Aceh Besar Regency Midwife Independent Practice

Group	Mean ± SD	Kolmogorov Smirnov		
		Statistics	df	Sig.
Pretest	7.47 – 1.525	0.270	30	0.000
Posttest	8.40 – 1.632	0.243	30	0.000

The results of the normality test using the Kolmogorov Smirnov showed that the data were not normally distributed ($p < 0.05$).

Table 2: Statistical Test (Wilcoxon Test) the effectiveness of acupressure therapy on the success of pretest and posttest breastfeeding in the intervention group

Group	n	Mean±sb	Median		p.s
			min	max	
Pretest	30	5.93 – 1.143	4	8	0.000
Posttest	30	9.57 – 0.679	8	10	

The results of the Wilcoxon test showed a p-value of 0.000, this indicated that there was a significant difference in breastfeeding success between

before and after giving acupressure therapy to breastfeeding mothers.

Table 3: Statistical Test (Wilcoxon Test) the effectiveness of providing routine postpartum care on the success of pretest and posttest breastfeeding in the control group

Group	n	Mean±sb	Median		p.s
			min	max	
Pretest	30	7.47 – 1.525	4	10	0.000
Posttest	30	8.40 – 1.632	5	10	

The results of the Wilcoxon test showed a p-value of 0.000, this indicated that there was a significant difference in breastfeeding success between

before and after giving routine care to breastfeeding mothers.

Table 4: Statistical test results (Mann-Withney test) differences in breastfeeding success in the postpartum routine care group and the acupressure group

Group	n	MeanRanking	p.s
Control	30	39.55	0.000
Intervention	30	23.70	

Based on Table 4, the results of the Mann Withy test show a p-value of 0.000 indicating that there is a difference in giving acupressure and routine postpartum care to the success of breastfeeding in breastfeeding mothers with a p-value of 0.000. meaning that there is a significant difference in giving acupressure to the routine care of postpartum mothers.

relieve tension and can cause relaxation of the body's muscles so that mothers who experience psychological problems will feel relaxed and bring positive emotions. The state of relaxation felt by the mother will increase the comfort of the mother so that it will further increase the hormones prolactin and oxytocin. The hormones prolactin and oxytocin play an important role in fulfilling milk production in nursing mothers. This technique can be given to nursing mothers who have problems with lactation. The results of the study also showed that there was a significant difference in breastfeeding success before and after giving routine care to breastfeeding mothers p-value 0.000. The acupressure point for the lactation technique signals the pituitary to produce the hormones prolactin and oxytocin so that milk production increases [18]. By doing massage at local points on the breast area it aims to increase the production of the hormone prolactin and the hormone oxytocin and to increase the absorption of nutrients which are the basic ingredients for the formation of breast milk [19]. Acupressure points for lactation every 2 days for 2 weeks (6 times of action) can expedite milk production. In addition to the points on the breast, the point under the knee (ST 36 point) will also help facilitate milk flow. all respondents in this study experienced an increase in milk production after acupressure points for lactation, although the increase was different. This difference can be caused by differences in the age of the baby, where mothers who

DISCUSSION

The results of the study in these two groups showed that there was a significant difference in milk production before and after giving acupressure therapy to breastfeeding mothers with a p-value of 0.000. acupressure methods and general education are effective in breastfeeding mothers' milk volume. On the other hand, the acupressure method is more effective than other methods. So the application of acupressure as an alternative treatment method to increase breast milk is recommended. several studies revealed positive effects of acupuncture on prolactin levels and milk volume [15]. The acupressure points for the lactation technique can help maximize prolactin and oxytocin receptors and minimize the side effects of delayed breastfeeding by the baby [16]. Stimulation Several points in the body can cause the balance of blood circulation, and hormone secretion [17]. The effect of acupressure points for lactation on breastfeeding mothers' milk production is because acupressure will

have babies at a younger age also have less milk production.

CONCLUSION

Complementary Therapy Acupressure Points For Lactation is effective in helping to facilitate breastfeeding and increase milk production in primiparous mothers in Aceh Besar Regency. This is evidenced by the results of statistical tests which show that there are significant differences in milk production between before and after administration of acupressure therapy to nursing mothers with a p-value of 0.000. There is a significant difference in breastfeeding success between before and after giving routine care to breastfeeding mothers p-value 0.000.

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