

EFFECTIVENESS OF OXYTOCIN MASSAGE ON COLOSTRUM EXCRETION TIME IN POSTPARTUM MOTHERS

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ASBTRAK EFEKTIVITAS PIJAT OXYTOCIN TERHADAP WAKTU EKSKRESI KOLOSTRUM PADA IBU PASCA PERSALINAN

Latar belakang. Kolostrum merupakan cairan yang pertama kali disekresikan oleh kelenjar susu, mengandung sisa-sisa jaringan dan bahan sisa yang terkandung dalam alveoli dan saluran kelenjar susu sebelum dan sesudah masa nifas. Manfaat kolostrum untuk bayi antara lain meningkatkan kekebalan tubuh. Oleh karena itu, perlu adanya upaya pengeluaran Kolostrum bagi sebagian ibu nifas. Dalam upaya memproduksi Kolostrum, ada 2 hal yang mempengaruhi produksi yaitu produksi dan pengeluaran. Produksi Kolostrum dipengaruhi oleh hormon prolaktin sedangkan produksinya dipengaruhi oleh hormon oksitosin. Hormon oksitosin akan keluar melalui rangsangan pada puting susu melalui hisapan mulut bayi atau melalui pemijatan pada tulang belakang bayi ibu, dengan melakukan pemijatan pada tulang belakang ibu maka ibu akan merasa tenang, rileks, meningkatkan ambang nyeri dan menyayangi bayinya, sehingga agar hormon oksitosin keluar dan ASI keluar dengan cepat.

Metode. Dalam penelitian ini desain penelitian yang digunakan adalah Kuantitatif dengan metode penelitian Quasi Eksperimental, dengan desain Static Group Comparison. Desain ini menggunakan kelompok Eksperimen dan Kontrol. Teknik dalam pengambilan sampel ini adalah Nonprobability Sampling karena tidak memberikan peluang yang sama dari setiap populasi yang diambil, dengan jenis Accidental sampling dimana setiap sampel yang ditemukan diambil dan langsung dijadikan sampel utama.

Hasil. Hasil analisis uji bivariat Efektivitas Pijat Oksitosin Terhadap Waktu Keluarnya Kolostrum pada Ibu Nifas dengan uji Chi-Square diperoleh P Value : 0,017 berada dibawah 0,05. Jadi dapat diartikan terdapat efektivitas pijat xcytosine terhadap waktu pengeluaran kolostrum pada ibu nifas.

Kesimpulan. Dari hasil penelitian pijat oksitosin dapat mempercepat waktu pengeluaran kolostrum pada ibu nifas.

Kata Kunci: Pijat Oksitosin, Ekskresi Kolostrum

ABSTRACT

Background. Colostrum is a fluid that is first secreted by the mammary glands, containing tissue debris and residual material contained in the alveoli and ducts of the mammary glands before and after puerperium. The benefits of colostrum for babies include increasing immunity. Therefore, it is necessary to make an effort to remove Colostrum for some postpartum mothers. In efforts to produce Colostrum, there are 2 things that affect production, namely production and expenditure. The production of Colostrum is affected by the hormone prolactin while the production is affected by the hormone oxytocin. The hormone oxytocin will come out through stimulation to the nipple through the baby's mouth suction or through massage on the baby's mother's spine, by doing massage on the mother's spine the mother will feel calm, relaxed, increase the pain threshold and love her baby, so that the hormone oxytocin comes out and breast milk comes out quickly.

Method. In this study, the research design used is Quantitative with the Quasi-Experimental research method, with the Static Group Comparison design. This design uses the Experiment and Control groups. The technique in taking this sample is Nonprobability Sampling because it does not provide the same opportunity from each population taken, with the type of Accidental sampling where each sample found is taken and immediately used as the main sample.

Result. The results of the analysis of the bivariate test of the Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers with the Chi-Square test obtained a P Value: 0.017, which is below 0.05. So it can be interpreted that there is an effectiveness of xcytosine massage on the time of Colostrum Excretion in Postpartum Mothers.

Conclusion. From the results of research on oxytocin massage can accelerate the time of colostrum excretion in postpartum mothers.

Keywords: Oxytocin Massage, Colostrum Excretion

INTRODUCTION

Breast milk (breast milk) is the best food for babies, especially babies aged 0-6 months, whose function cannot be replaced by any food and drink. Breastfeeding is the fulfillment of the rights of every mother and child. It's no secret that children who get exclusive breastfeeding and the right parenting style will grow and develop optimally and not get sick easily. In addition, breastfeeding is able to strengthen the emotional bond between mother and child, so it is hoped that they will become children with personal resilience who are able to be independent ((Lubis and Angraeni 2021).

The World Health Organization (WHO), recommends to mothers around the world to breastfeed their babies exclusively for the first 6 (six) months after the baby is born to achieve optimal growth, development and health. Optimal breastfeeding is so important that it can save the lives of more than 820,000 children under the age of 5 every year (World Health Organization & UNICEF, 2018).

According to 2021 Basic Health Research (RISKESDAS) data, 52.5 percent – or only half of the 2.3 million babies under six months old – are exclusively breastfed in Indonesia, a decrease of 12 percent from the 2019 figure. The early breastfeeding initiation rate (IMD) also decreased from 58.2 percent in 2019 to 48.6 percent in 2021 (Anon n.d.)

Malnutrition is a problem that needs to be dealt with seriously. Various efforts have been made by the government, including through posyandu in increasing the coverage of weighing toddlers, counseling and assistance with healthy food is very important for toddlers who consume it. Malnutrition can occur in all age groups, but what needs to be paid more attention is the infant and toddler group. At the age of 0-2 years is the optimal growth and development *period (golden period)*, especially for fetal growth so that if there is a disturbance during this period, it cannot be satisfied in the next period and will have a negative effect on the quality of the next generation (profil kesehatan , 2016).

According to Cox (2006), it is stated that mothers who do not breastfeed their babies in the first days of breastfeeding are caused by maternal anxiety and fear of lack of milk production and lack of maternal knowledge about the breastfeeding

process. The mother's anxiety and fear caused a decrease in the hormone oxytocin so that the breast milk could not come out immediately after giving birth and finally the mother decided to give formula to the baby. If you don't know how to deal with a decrease in breast milk production, one of them is by massaging oxytocin (Siregar, 2019).

Oxytocin massage is a massage of the spine starting from the spine to the fifth – sixth costae bone and is an effort to stimulate homon, efforts to stimulate the hormones prolactin and oxytocin after childbirth so that oxytocin massage is one of the solutions to overcome the lack of milk production. (Depkes RI, 2007)

This oxytocin massage is done to stimulate the oxytocin reflex or *the letdown* reflex. With this massage, the mother will feel relaxed, fatigue after childbirth will disappear, so that the hormone oxytocin comes out and breast milk comes out quickly (Mardiyaningsih 2010). In addition, to stimulate the *let down reflex*, the benefits of oxytocin massage are to provide comfort to the mother, reduce swelling (*engorgement*), reduce the occurrence of breast milk blockage, stimulate the release of the hormone oxytocin, maintain breast milk production when the mother and baby are sick (Depkes RI 2007).

A preliminary survey has been conducted on 10 postpartum mothers at TPMB Rina, that breast milk production is small and not smooth. With the existence of a preliminary survey, a study was conducted on "The Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers.

RESEARCH METHODS

The research design used in this study is a *Quasi Experiment*, which is a design with an experimental unit given treatment with two measurements, by providing a pretest before the intervention and a posttest after the intervention, which aims to determine the effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers. (Adiputra et al. 2021)

The research venue used for case collection at PMB Rina W. This research was conducted in December 2023 - April 2024

The overall population of the research object or object being studied whose characteristics have

been suspected (Sugiono, 2007). The total population in this study is 30 postpartum mothers at TPMB Rina.

A sample is a portion taken from the entire object being studied and is considered to be representative of the entire population (Notoadmojo, 2005). The sample to be taken is the total population, meaning that all respondents are used as research samples using *accidental sampling techniques*.

- a. The inclusion criteria that will be used in this study are:
 - 1) Postpartum mothers 0-7 days
 - 2) The mother breastfeeds her baby.
 - 3) Breastfed infants
- b. The exclusion criteria in this study are:
 - 1) Mothers who are experiencing psychological disorders
 - 2) Mothers who have problems with the breasts (blisters on the nipples and unprominent nipples). In this study, the data used is primary data of postpartum mothers at TPMB Rina. The data collected was the smooth discharge of breast milk, maternal age and parity, time. **Data Analysis** Univariate *data analysis*, this analysis aims to obtain the frequency distribution of each variable. To analyze the effect of oxytocin massage on breast milk production in postpartum mothers. The statistical test used depends on the results of the normality test.

RESEARCH RESULTS

Based on research that has been conducted on postpartum mothers to find out whether there is an Effectiveness of Oxytocin Massage on Colostrum Excretion Time in Postpartum Mothers. at TPMB Rina, the following results were obtained:

Univariat Results

Univariate analysis was used to describe the data carried out on each variable of the research results. Univariate analysis is presented in the frequency distribution table as follows:

Table 1
Characteristics of postpartum mothers

Characteristic	N	%
Age		
Age 20-35	29	96,6
Age <20 years old and >35 years old	1	3,3
Work		
Work	16	53,3
Not Working	14	46,6
Parity		
Primipara	16	53,3
Multipara	13	43,3
Grande	1	3,3

Based on table 1, it shows that most of the respondents as many as 29 people (96.6%) are classified as 20-25 years old and as many as 1 respondent (3.3%) are classified as <20 years old or >35 years old. A total of 16 respondents (53.3%) were working postpartum mothers and 14 respondents (46.6%) were postpartum mothers who did not work. And as many as 16 respondents (53.3%) were postpartum mothers with Primipara, 13 respondents (43.3%) were postpartum mothers with multiple para, and 1 respondent (3.3%) was postpartum mothers with Grande.

Bivariat Results

Bivariate analysis is used to describe the data carried out on each variable of the research results. Bivariate analysis is presented in the frequency distribution table as follows:

Table 2
Intervention group and control group

Oxytocin Massage	Colostrum Production		%	
	<24 Hours	>24 Hours	<24 Hours	>24 Hours
Done	12	3	63,16%	27,27%
Not Done	7	8	36,84%	72,73%

Table 3
Colostrum output obtained

Oxytocin Massage	Colostrum Production		Frequency	Presented	P Value (Chi Square)
	<24 Hours	>24 Hours			
Done	12	3	15	50%	0,015
Not Done	7	8	15	50%	

Based on tables 2 and 3, the results of the bivariate analysis of the Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers. with the Chi-Square test, the result of P Value: 0.015 was obtained, which is below 0.05. So it can be interpreted that there is an Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers.

DISCUSSION

Characteristics Responden

Most of the respondents as many as 29 people (96.6%) are classified as healthy age, namely 20-25 years old and as many as 1 respondent (3.3%) are classified as unhealthy age, namely <20 years or >35 years. Mature age greatly affects human reproductive health. According to Martadisoebrata (1992) in Hidajati (2012), it is said that the reproductive age is healthy or safe for pregnancy, childbirth, and breastfeeding is 20-35 years. Meanwhile, the age >35 years is included in the age at risk of reproductive age. The best age to do the reproductive system is 20-35 years old. At this age is considered the golden reproductive age because all the functions of the reproductive system are ready and mature.

The age of less than 20 years is considered to be still physically and psychologically immature in dealing with pregnancy, childbirth and breastfeeding of Colostrum. The younger the mother's age, the less likely she is to give breast milk to her baby. Age less than 20 years is a period of growth including reproductive organs (breasts). While the age of more than 35 years the reproductive organs are weak and not optimal in breastfeeding Colostrum, so that a mother's ability to breastfeed is also not optimal due to a decrease in the function of reproductive organs such as breasts.

And a total of 16 respondents (53.3%) are working postpartum mothers and 14 respondents (46.6%) are postpartum mothers who are not working. In addition, according to previous research, the majority of mothers' jobs are housewives so that during the day mothers have time to rest. Where breastfeeding mothers really need enough and effective sleep so that the metabolism in their body runs smoothly. Whether a mother works or not will affect the amount of income in a family. The size of

income affects the attitude and behavior of individuals to do something. An increase in household income can improve nutritional status because an increase in income allows a person to be able to buy food with better quality and quantity.

And as many as 16 respondents (53.3%) were postpartum mothers with Primipara, 13 respondents (43.3%) were postpartum mothers with multiple para, and 1 respondent (3.3%) was postpartum mothers with Grande. Parity is related to the search for information about maternal knowledge in breastfeeding. The experience gained by mothers can expand a person's knowledge in breastfeeding Colostrum.

Physical and psychological readiness of the mother Physical and psychological preparation of the mother must be prepared from the beginning of pregnancy, counseling in providing information about colostrum can be provided during pregnancy examinations. Nipple maintenance and how to massage breasts also need to be taught so that mothers are better prepared to face childbirth and can directly give colostrum breast milk to their babies, anxiety, discomfort and pain during the delivery process greatly affect mothers to breastfeed their babies, so counseling is necessary.

Anxiety from various maternal environmental situations also greatly affects the smooth production of breast milk as research conducted by (Jayanti & Yulianti, 2022) which states that there is an effect of anxiety on the smooth production of breast milk in postpartum mothers with a p-value: $0.000 < \bar{y} < 0.05$, it can be concluded that there is a significant influence of anxiety on the smooth production of breast milk in postpartum mothers during the COVID-19 pandemic on the 2nd floor of PIS Gatot Soebroto Hospital.

Effect of Oxytocin Massage on Colostrum Excretion

The results of the analysis of the bivariate test of the Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers with the Chi-Square test obtained a P Value: 0.015, which is below 0.05. So it can be interpreted that there is an Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers.

Research conducted by Rofi'ah (2016) that the average time of colostrum excretion to oxytocin massage is 8.39 hours with a time range of 4-13 hours so that it has a significant influence on the colostrum excretion time p value: 0.0001 (Rofi'ah et al, 2016)

This is in line with research conducted by Albertina (2020) on the relationship between oxytocin massage and smooth breast milk production in postpartum mothers with cesarean section on days 2 –3. Based on the results of the research from 48 respondents, most of them were massaged according to procedures, as many as 35 respondents (72.9%) of which 24 respondents (50%) had smooth breast milk production and 11 respondents (22.9) did not have smooth milk production. Meanwhile, 13 respondents (27.1%) who were massaged did not follow the procedure, 2 respondents (4.2%) had smooth breast milk production and 11 respondents (22.9%) did not have smooth breast milk production.(Hidayah et al., 2023)

Research conducted by Pani and Tempali on the effectiveness of oxytocin massage on breast milk production. The results of the study using the chi square statistical test found that the p-value was 0.000, so there was a difference between breast milk production in postpartum mothers after receiving an oxytocin massage and those that did not. (Pani & Tempali, 2022)

Oxytocin massage itself is a good and appropriate solution to accelerate or facilitate breast milk production, namely massage along the spine (vertebrae) to the fifth or sixth costae bone. This oxytocin massage can also provide a sense of comfort and relaxation to the mother after experiencing the delivery process so that it does not inhibit the secretion of the hormones prolactin and oxytocin in the mother.

Through massage or stimulation of the spine, neurotransmitters will stimulate the medulla oblongata to directly send a message to the hypothalamus in the posterior hypofise to secrete oxytocin which causes the breasts to secrete their milk. With massage in this area of the spine, it will also relax tension and relieve stress and that way the hormone oxytocin comes out and will help the production of breast milk. Colostrum dripping or coming out is a sign of an active oxytocin reflex.

From the results of the study, it is known that there is a relationship between oxytocin massage treatment and colostrum production in postpartum mothers to the time of colostrum excretion, so it can be concluded that the relationship between oxytocin massage treatment and colostrum excretion can

provide a change in the time of discharge in statistics that Ha is accepted and H0 is rejected.

CONCLUSION

From the results of the study, it is known that there is an Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers Based on the table of the results of the analysis of the bivariate test of the Effectiveness of Oxytocin Massage on the Time of Colostrum Excretion in Postpartum Mothers with the Chi-Square test, the result of P Value: 0.015, which is < 0.05. So it can be interpreted that there is an Effectiveness of Oxytocin Massage on Colostrum Excretion Time in Postpartum Mothers. From the results of the study, it is known that the relationship between oxytocin massage treatment and colostrum excretion can provide changes in the time of colostrum excretion of postpartum mothers.

SUGGESTION

The results of this study can provide additional information and knowledge about oxytocin massage, so that mothers are able to give their first colostrum to their babies. It can be used as a source of information or an overview of the relationship between oxytocin massage and colostrum excretion in postpartum mothers by using different research designs and expanding the variables of subsequent research.

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