THE EFFECT OF COLD COMPRESS ON PERINEUM PAIN REDUCTION
IN PUBLIC WOMEN

Merinda Sari¹, Anggraini²*, Sunarsih³, Ledy Octaviani Iqmy⁴

¹,²Midwifery DIV Study Program, Malahayati University
³Midwifery DIII Study Program, Malahayati University
⁴Corresponds E-mail: anggraini@malahayati.ac.id

ABSTRAK : PENGARUH KOMPRES DINGIN TERHADAP PENGURANGAN NYERI PERINEUM PADA IBU NIFAS

Latar Belakang : Wilayah Kerja Puskesmas Desa Tri Tunggal Jaya Kec. Banjar Agung dengan melihat data persalinan tahun 2021 didapatkan total persalinan sebanyak 823 ibu bersalin, dan didapat 31 ibu (3.77%) dengan lacerasi perineum dan 2 ibu mengalami infeksi post partum pada perineum akibat tidak baiknya perbaikan luka dan kebersihan perawatan organ perineum ibu. Selanjutnya dilakukan wawancara bebas terpimpin, terhadap 3 ibu bersalin dengan lacerasi perineum ke 3 ibu menyatakan jika tidak menggunakan pengobatan lain, melainkan resep obat yang diberikan oleh bidan saat persiapan pulang dan pemeriksaan yang dilakukan dirumah pada 1 minggu pasca bersalin.


Hasil : Rata-rata nyeri perineum pada ibu nifas sebelum diberi kompres dingin terhadap 30 responden, dengan mean 6,07 standar deviasi 0,907 standar eror 0,166 dan nilai min-max 5-8 sesudah diberi kompres dingin dengan mean 2,83 standar deviasi 1,085 standar eror 0,198 dan nilai min-max 1-5. Hasil uji statistik menggunakan tes-dependen didapat nilai p-value 0.000 (<α<0.05) yang artinya terdapat pengaruh kompres dingin terhadap pengurangan nyeri perineum pada ibu nifas di Desa Tri Tunggal Jaya Kec. Banjar Agung Kab. Tulang Bawang Tahun 2022.

Saran : Dapat memberi informasi bagi perkembangan keperawatan materinis/ kebidanan tentang teknik kompres dingin dengan metode ice pack pada ibu yang mengalami nyeri lacerasi perineum, hingga dapat mengurangi kejadian stress akibat neryi yang ditimbulkan

Kata Kunci : Kompres Dingin, Nyeri Perineum, Ibu Nifas

ABSTRACT

Background : The Working Area of Tri Tunggal Jaya Village Health Center, Kec. Banjar Agung by looking at the delivery data in 2021, a total of 823 mothers gave birth, and 31 mothers (3.77%) with perineal lacerations and 2 women experienced post partum infection in the perineum due to poor wound repair and cleanliness of maternal perineal organ care. After that, free guided interviews were conducted, for 3 mothers who gave birth with perineal laceration, the 3 mothers stated that if they did not use other treatments, they had prescription drugs given by the midwife when preparing to go home and examinations were carried out at home 1 week after giving birth.

Objective: To know the effect of cold compresses on the reduction of perineal pain in postpartum mothers in Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onions 2022.

Research Methods : This type of research is quantitative, the research design is a pre-experimental method with a one group pretest - posttest approach. The population in this study was the average postpartum mother in Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Tulang Bawang, this research was conducted in February-July 2022.

Results: The average perineal pain in postpartum women before being given cold compresses to 30 respondents, with a mean of 6.07 standard deviations of 0.907 standard errors of 0.166 and a min-max value of 5-8 after being given cold compresses with a mean of 2.83 standard deviations of 1.085 standard error 0.198 and min-max value 1-5. The results of statistical tests using dependent tests obtained p-value 0.000 (α<0.05) which means that there is an effect of cold compresses on reducing perineal pain in postpartum mothers in Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onions 2022.

INTRODUCTION

The puerperium or post partum period is the period after labor is completed up to 6 weeks or 42 days. After the puerperium, the reproductive organs will gradually change as before pregnancy. During the puerperium, more attention is needed because the maternal mortality rate of 60% occurs during the puerperium. The maternal mortality rate (MMR) is the cause of many women dying from a cause, namely the lack of attention to post partum women (Maritalia, 2012).

WHO (World Health Organization) defines that maternal death is the death of a woman that occurs during pregnancy, childbirth or within 42 days after delivery from causes that are directly or indirectly related to childbirth. Approximately 60% of maternal deaths occur after delivery and almost 50% of deaths during the puerperium occur in the first 24 hours after delivery, especially in the 2 hours postpartum (2 hours postpartum). Approximately 75% of maternal deaths are caused by severe bleeding (mostly postpartum bleeding) i.e. bleeding that exceeds 500 ml after the baby is born, infection (usually postpartum), high blood pressure during pregnancy (preeclampsia/eclampsia), prolonged labor/traffic jams, unsafe abortions (Endang, 2019).

The success of maternal health programs can be assessed through the main indicator of Maternal Mortality Rate (MMR). Maternal mortality in this indicator is defined as all deaths during the period of pregnancy, childbirth and puerperium caused by pregnancy, childbirth and puerperium or their management but not due to other causes such as accidents or incidents. The maternal mortality rate (MMR) is all deaths within this scope in every 100,000 live births (profile of the Ministry of health of the Republic of Indonesia, 2020).

The number of maternal deaths collected from the recording of family health programs at the Ministry of Health in 2020 showed 4,627 deaths in Indonesia. This number shows an increase compared to 2019 of 4,221 deaths. Based on the causes, most maternal deaths in 2020 were caused by bleeding in 1,330 cases, hypertension in pregnancy in 1,110 cases, and circulatory system disorders in 230 cases (profile of the Ministry of health of the Republic of Indonesia, 2020).

According to the 2020 Basic Health Research, normal or post-partum delivery services in health facilities in 2020 in Indonesia were 79.3% and in 2018 complete KF services in women 10-54 in Lampung Province were about 38.0% more increased than in 2013 (Risksesdas, 2018). According to the Indonesian Ministry of Health in 2020, the three factors of maternal mortality are bleeding 28%, eclampsia 24%, and infection 11% (Ministry of Health, 2020).

Factors causing postpartum infections include low immunity, poor postpartum maternal care, tarak eating behavior, low maternal nutritional status, unclean personal hygiene, anemia and fatigue. Postpartum infection is a complication in the puerperium due to injuries to the birth canal such as the perineum, cervix and also wounds from placental implantation. Injuries to the perineum and cervix can occur due to the fact that the mother before the complete opening has been led to straining, large babies and episiotomy. Episiotomy action is useful to avoid high degrees of tears in the perineum, reduce stretching of the muscles that support the bladder, reduce strong and long stretching of the bladder support muscles (Sriani Timbawa, Rina Kundre, 2015).

About 85% of women who give birth to spontaneous vaginal perineal trauma in the form of 32-33% due to episiotomy and 52% are spontaneous lacerations (Henderson, 2010). Perineal lacerations are mild to severe. Perineal lacerations are divided into degrees of laceration, from 1st degree laceration to 4th degree laceration. Of course, the deeper and wider the perineal laceration will increasingly cause pain (Walyani, 2015).

Laceration of the birth canal during childbirth is something that is considered serious for the community because maternity women who experience rupture mostly feel afraid when perineal suturing is done, according to them the suturing action is more painful than the delivery process itself although no one has expressly rejected the act of suturing the birth canal performed by midwives. To anticipate these problems, people choose to routinely do pregnancy checks and follow the advice of midwives, for example doing perineal massage in the third trimester (Resmawati, 2015).
Suture wounds on the perineum in fact often make postpartum mothers very uncomfortable and even experience fear of early mobilization. Whereas early mobilization is very important to expedite the removal of lochia, reduce infection in the wound, accelerate involution of the uterus, blood circulation, prevent thrombophlebitis and will accelerate wound healing. In addition, perineal suture wound pain will interfere with the mother interacting with her baby, making the mother more susceptible to infection and is likely to cause bleeding if perineal laceration is not monitored properly. Perineal suture pain will obviously cause and affect the well-being of women physically, psychologically and socially in the postnatal period both directly and in the long term. Therefore it would be better if the mother can give birth without experiencing perineal laceration (Saifudin, 2010; Resmawati, 2015).

Pain is highly individualized, subjectively influenced by culture, situation, attention and various psychological variables. There are three psychological factors that affect the dimensions of pain, namely sensory discrimination, motivation and cognitive evaluation that will interact with each other to produce information, perceptions that will affect complex patterns about the character of pain. The method of examination based on the answers of the client directly is the most reliable indicator for the assessment of pain intensity. To assess pain can be used several methods, namely subjectively and objectively. For subjective assessment can be assessed by several measurements based on questions to the client. While objective assessment is an assessment by the assessor of the severity of pain felt by the client or by assessing the client's activities (Suwondo, 2017).

Various methods to treat perineal wound pain can be done either pharmacologically or non-pharmacologically. Pharmacological methods of pain management are more effective than non-pharmacological methods. However, pharmacological methods have the potential to provide side effects for mothers such as giving Mefenamic acid analgesics which can cause pain in the mother's stomach (Firdayanti, 2009; Susilawati, 2019). While non-pharmacological safer to apply because it has a smaller risk, does not cause side effects and uses physiological processes.

There are several ways to reduce pain stimuli. One of them is by using a cold compress, or giving a compress in the form of a cold gel. With the system provides a sense of relaxation and accelerate vasoconstriction so that the blood vessels will spread quickly, so it will reduce the pain (Potter, Perry, 2012). This cold compress works by blocking the transmission of pain stimuli so that fewer pain impulses reach the brain (Potter, Perry, 2012; Susilawati, 2019).

Midwives as one of the health workers in charge of helping childbirth is expected to be able to minimize and even prevent so that maternity mothers do not experience perineal laceration so that during the postnatal period, mothers do not need to feel perineal laceration pain.

Wound healing using these two methods also have differences in healing speed, the drugs used to reduce pain, only last up to 3-4 hours, while the use of cold compresses is effective for stimulating the transfer of maternal pain, in line with a study on the effect of cold compresses in overcoming labor pain in Iran showed the application of cold compresses on, maternal abdomen can reduce pain during labor Phase I of the active phase and the application of cold compresses on the perineum can significantly reduce labor pain Phase II without side effects on the mother and fetus, (Weniarti, 2016).

Based on prasurvey data conducted in the Working Area of the Tri Tunggal Jaya village Health Center, Kec. Banjar Agung by looking at the data on childbirth in 2021, a total of 823 maternity deliveries were obtained, and 31 mothers (3.77%) with perineal lacerations and 2 mothers had postpartum infections in the perineum due to poor wound repair and hygiene care of the mother's perineal organs. Furthermore, free guided interviews were conducted, to 3 maternity mothers with perineal lacerations to 3 mothers stated if they did not use other treatments, but prescription drugs given by midwives when preparing to go home and examinations carried out at home at 1 week postpartum.

**RESEARCH METHODS**

In this study the authors used the type of quantitative research, research design pre-experimental method with one group pretest – posttest approach. The population and sample in this study were postpartum mothers day 1 in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Tulang Bawang as many as 30 respondents in July 022, sampling technique using purposive sampling, univariate and bivariate analysis using t-dependent test. The study was conducted in February-July 2022.
Characteristics Of Respondents

Table 1
Characteristics Of Postpartum Mothers In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Year 2022

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>F</th>
<th>P (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At risk</td>
<td>4</td>
<td>13,3</td>
</tr>
<tr>
<td>Not At Risk</td>
<td>26</td>
<td>86,7</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D3</td>
<td>2</td>
<td>6,7</td>
</tr>
<tr>
<td>S1</td>
<td>4</td>
<td>13,3</td>
</tr>
<tr>
<td>High school</td>
<td>21</td>
<td>70,0</td>
</tr>
<tr>
<td>SMP</td>
<td>3</td>
<td>10,0</td>
</tr>
<tr>
<td>Jobs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housewife</td>
<td>19</td>
<td>63,3</td>
</tr>
<tr>
<td>PNS</td>
<td>4</td>
<td>13,3</td>
</tr>
<tr>
<td>Self-employed</td>
<td>7</td>
<td>23,3</td>
</tr>
<tr>
<td>Parity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multiparous</td>
<td>15</td>
<td>50,0</td>
</tr>
<tr>
<td>Primiparous</td>
<td>15</td>
<td>50,0</td>
</tr>
<tr>
<td>Degree Of Injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade 1</td>
<td>11</td>
<td>36,7</td>
</tr>
</tbody>
</table>

Based on Table 1 above, it is known that the age of the most mothers is not at risk 20-35 years as many as 26 respondents (86.7%), the most high school education as many as 21 respondents (70.0%), housewife work 19 respondents (63.3%), primiparous parity 15 respondents (50.0%), the most Grade 2 injury Degree 19 respondents (63.3%).

Univariate Analysis

Pain Before Intervention

From table 2 above, it can be seen that the average perineal pain in postpartum mothers before being given a cold compress in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Onion Bones Of 2022. to 30 respondents, with mean 6.07 standard deviation 0.907 standard error 0.166 and min-max value 5-8.

Table 2
The Average Perineal Pain In Postpartum Mothers Before Being Given A Cold Compress In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Of 2022

<table>
<thead>
<tr>
<th>Laceration Pain</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
<th>Min-Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pretest</td>
<td>30</td>
<td>6.07</td>
<td>0.907</td>
<td>0.166</td>
<td>5-8</td>
</tr>
</tbody>
</table>

Pain After Intervention

Table 3
The Average Perineal Pain In Postpartum Mothers After Being Given A Cold Compress In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Of 2022

<table>
<thead>
<tr>
<th>Laceration Pain</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
<th>Min-Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postes</td>
<td>30</td>
<td>2.83</td>
<td>1.085</td>
<td>0.198</td>
<td>1-5</td>
</tr>
</tbody>
</table>

From table 3 above it can be seen that the average perineal pain in postpartum mothers after being given a cold compress in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Tulang Bawang in 2022 against 30 respondents, with a mean of 2.83 standard deviation of 1.085 standard error of 0.198 and a min-max value of 1-5.
Bivariate Analysis

Table 4
The Effect Of Cold Compresses On The Reduction Of Perineal Pain In Postpartum Mothers In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Of 2022

<table>
<thead>
<tr>
<th>Laceration Pain</th>
<th>N</th>
<th>Mean</th>
<th>Mean Difference</th>
<th>SD</th>
<th>t</th>
<th>P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pretest</td>
<td>30</td>
<td>6.07</td>
<td></td>
<td>0.907</td>
<td>22.885</td>
<td>0.000</td>
</tr>
<tr>
<td>Postes</td>
<td>30</td>
<td>2.83</td>
<td>3.233</td>
<td>1.085</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The results of statistical tests using test-dependent obtained value (p-value 0.000<α<0.05) which means that there is an effect of cold compresses on the reduction of perineal pain in postpartum women in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Tulang Bawang in 2022, with an average value of pretest pain of 6.07, there was a decrease in the average post-test pain of 2.83 with a mean difference of 3.233

DISCUSSION
Univariate Analysis
The Average Perineal Pain In Postpartum Mothers Before Being Given A Cold Compress In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Of 2022

The average perineal pain in postpartum mothers before being given a cold compress in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Onion Bones Of 2022. to 30 respondents, with mean 6.07 standard deviation 0.870 standard error 0.166 and min-max value 5-8

In line with the theory proposed by (Mc. Caffery, 1979; Zakiyah, 2015) pain is a phenomenon that is difficult to understand, complex and mysterious that affects a person and its existence is known when someone experiences it. Pain is an extremely unpleasant experience that a person feels against a certain stimulus and cannot be shared with others. pain is an unpleasant sensory and emotional experience resulting from both real and potential tissue damage (IAFSP, 2010; Zakiyah, 2015).

This study is in line with research conducted by Weniat (2016) with the title “the effect of Ice Pack therapy on changes in pain scale in post-episiotomy mothers” the results showed that the average post-episiotomy pain scale before and after ice pack therapy amounted to 7.60 ± 1.121 and 4.27 ± 1.486, respectively. Analysis of post episiotomy pain scale after ice pack therapy found that there is a significant difference in post episiotomy pain scale before and after ice pack therapy (p value = 0.001).

According to researchers pain as a condition that affects a person whose existence is known only if the person has experienced it, the pain will get worse if a person is unable to withstand the pain, or divert the pain. Pain experienced in postpartum mothers is different, because pain is an unpleasant emotional feeling that can interfere with activities, this depends on each postpartum mother's emotional and labor history.

The onset of pain is closely related to receptors and the presence of stimuli. The pain receptors in question are nociceptors. Pain receptors can respond to stimuli. Such stimuli can be chemical, thermal or mechanical. Stimulation by chemicals such as histamine and prostaglandins, or stimulation that is released when there is damage to the tissue. Pain due to penile injuries felt by each postpartum mother is different, especially in 2 hours postpartum, it is a burden experienced by the mother. Therefore, as health workers we can distinguish or classify each pain felt by the mother so that it is easier to provide proper care to postpartum mothers.

The Average Perineal Pain In Postpartum Mothers After Being Given A Cold Compress In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Of 2022

The average perineal pain in postpartum mothers after being given a cold compress in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Tulang Bawang in 2022 faced 30 respondents, with a mean of 2.83 standard deviation of 1.085 standard error of 0.198 and a min-max value of 1-5

In line with the theory proposed by (Kozier., Erb, 1983; Zakiyah, 2015) pain is a sensation of discomfort manifested as a sufferer resulting from the perception of real, threatening, and fantasy wounds. Pain is an unpleasant sensory experience, the main element that must be present to be called pain is unpleasant taste. Without that element it cannot be categorized as pain, although otherwise all that is unpleasant cannot be termed as pain (Zakiyah, 2015)

This study is in line with research conducted by Mohamed, H.A., & El-Naggar, N.S. (2012). Effects of self Perineal Care Instructions on Episiotomy Pain and Wound Healing of Postpartum Women. Journal of American Science, stated perineal treatment with the administration of cold therapy is effective against a decrease in the intensity of perineal pain and
edema. Regarding perineal pain score levels, the study showed a statistically significant reduction in perineal pain levels at 4, 24 & 48 hours and seven days postpartum between the two groups.

According to researchers, the handling of pain in the perineal laceration of postpartum mothers is done to provide comfort and reduce postpartum pain, which is expected that mothers can feel comfortable and safe to undergo the postpartum period of 1-2 hours. Pain management can be done in 2 ways that can be by pharmacological means that is by medication and non-pharmacological which consists of various actions, namely physical stimulation and cognitive behavior. Physical treatments include skin stimulation (massage), compresses, contralateral stimulation, reflexology and immobilization, cognitive behavioral interventions include distraction measures, relaxation techniques and therapeutic touch.

A simple method that can be used to reduce pain naturally is by applying a cold compress to the wound, this is a natural and simple alternative option that quickly reduces pain in addition to using drugs. How to use the cold compress method, which gives a feeling of cold to the client by using an ice bag or ice water on the body that feels pain or on the part of the body that needs it. With the provision of this cold compress the mother will feel comfortable, because the analgesic effect of cold compresses that reduce the speed of nerve conduction so that the impulse of pain that reaches the brain is less so as to reduce the sensation of pain felt, in addition to feeling comfortable with the provision of cold compresses will indirectly create a good relationship between patients and health postpartum mothers can live their bodies more safely and comfortably because this cold compress is a simple method that can be used to reduce pain in addition to using drugs.

The decrease in pain in this study was influenced by the presence of cold compresses given by the researchers. Cold compress or cold therapy is a physical therapy modality that uses the physical properties of cold to treat various conditions, including perineal wound pain. Cold compresses work by stimulating the surface of the skin to control pain. The cold therapy given will affect the impulses carried by the A-Beta tactile fibers to dominate more so that the “gate” will close and the pain impulse will be blocked. The pain that is felt will decrease or disappear for a while. The purpose of cold compresses is to reduce inflammation that occurs at the site of pain so that the patient's pain sensation can be reduced.

**Bivariate Analysis**

The Effect Of Cold Compresses On The Reduction Of Perineal Pain In Postpartum Mothers In Tri Tunggal Jaya Village, Kec. Banjar Agung Kab. Onion Bones Of 2022

The results of statistical tests using test-dependent obtained value (p-value 0.000<0.05) which means that there is an effect of cold compresses on the reduction of perineal pain in postpartum women in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Tulang Bawang in 2022, with an average value of pretest pain of 6.07, there was a decrease in the average post-test pain of 2.83 with a mean difference of 3.233.

In line with the theory proposed by (Zakiyah, 2015) cold sensation therapy is usually more effective to reduce pain. Ice massage involves the use of large pieces of ice or small cups filled with water and frozen. The midwife or client can apply ice by applying a strong enough pressure to the skin, followed by a slow massage continuously around the painful area. Each client will respond differently to the area of therapy. Therapy given close to the painful area tends to work better.

This research is in line with the research conducted by Mardliyana (2017) with the title “the effect of Ice Gel compresses on labor pain in the active phase in independent practice midwives in the Surabaya City area” the results showed that there were differences in pain intensity in the intervention and control groups with a p value of 0.000.

According to researchers, treatment of the perineum with the administration of cold therapy is effective against a decrease in the intensity of perineal pain and edema. This is because cold therapy has similarities with ice pack therapy, namely preventing edema and hematoma formation which will increase the pain felt by post-episiotomy mothers. This is also reinforced by Bobak who stated that ice packs can minimize the occurrence of edema by reducing capillary permeability which decreases the pain of post-episiotomy mothers. Pain can be eased because the ice pack reduces prostaglandins that strengthen pain receptors, inhibit inflammatory processes, stimulate the release of endorphins so that pain transmission decreases through the diameter of the C fibers that shrink and activate the A-beta sensory nerve fiber transmits faster and larger (Andamoyo, 2013).

The difference in pain in pretes and posttes is influenced by age and history of childbirth. In postpartum mothers who experience perineal lacerations, it can be assumed that the older the postpartum mother, the perineal pain threshold will be higher compared to the postpartum mother with a younger
age. In this study, postpartum mothers in the age group of 20-35 years who experienced severe pain were 26 people, while those aged > 35 years who experienced moderate-severe pain were 4 people. All respondents experienced mild to moderate pain at the time of perineal laceration. This is in accordance with the theory that the younger a person is, the pain threshold will be lower than at an older age.

Furthermore, the parity and degree of perineal injuries also influence the process of decreasing pain by ice pack therapy. Primiparous parity 15 respondents (50.0%), the highest degree of injury grade 2 19 respondents (63.3%). In primiparous mothers perineal ruptures are often encountered in childbirth with primiparous parity status. Parity can affect perineal rupture due to tissue structure in the perineum in primiparous and multiparous different elasticity. In primiparous who give birth for the first time many found a rigid perineum making it easier and prone to rupture of the perineum while in multiparous who have given birth to a viable baby more than 1 time, the perineum area is elastic because the perineum in multiparous has often passed the baby. Furthermore, this perineal rupture affects perineum wounds that widen to the 2nd degree and cause pain felt by the mother will increase.

Pain measurement by looking at the respondent's pain scale, the pain scale is a subjective assessment to determine how severe the pain felt by an individual, this is due to the perspective of each individual is different, especially in assessing the pain he suffered. This condition can be seen when the treatment given is the same, each person will experience different results. Similarly, in this study, although all respondents had decreased pain scale, in some respondents with the same pain scale before treatment obtained different pain scale after treatment.

A person's experience of pain experienced before will determine the pain threshold that is experienced now. If someone has experienced the same pain, then the person's pain threshold tends to be lower than the pain threshold felt the first time. In postpartum mothers, the experience can be related to the mother's experience in the process of pregnancy, childbirth and postpartum. Multiparous postpartum mothers will certainly have a lower pain threshold than in primiparous postpartum mothers, because multiparous mothers have more experience in adapting to pain than in primiparous mothers.

Endorphins are morphine-like substances produced by the body (including endogenous chemicals) and have strong concentrations in the nervous system. This Endorphin acts as an inhibitor of pain transmission by blocking the transmission of impulses to the brain and spinal cord. Cold compresses are used to relieve pain by slowing the speed of nerve conduction, causing numbness and working as a counterirritant. Administering the action of cold applications can decrease pain and promote healing. The application of cold has to do with the slowing down of the ability of the nervespain nerves in channeling pain stimuli.

**CONCLUSION**

There is the effect of cold compresses on the reduction of perineal pain in postpartum mothers in Tri Tunggal Jaya village, Kec. Banjar Agung Kab. Onion bones in 2022 with a value (p-value = 0.000< α0.05)

**SUGGESTIONS**

Midwives are expected to provide health education to post-episiotomy mothers by introducing ice pack therapy as an effort to overcome post-episiotomy pain, so that mothers can apply independently at home with the help of family. Spontaneous postpartum mothers with perineal injuries are expected to apply the application of cold compresses to reduce pain.

**REFERENCES**

Awards, A. P. (2017) effect of cold compress therapy on ORIF (Open Reduction Internal Fixation) postoperative pain in fracture patients at RSD Dr. H. Koesnadi Bondowoso. Nursing Studies Program University Of Jember.


Istiana, S. (2020). Effect of perineal laceration grade on pain scale perineum in postpartum mothers. Study Program in midwifery, Muhammadiyah University of Semarang-Indonesia

Kristiyan, A. (2019). Effect of cold compresses in the reduction of Post Percutaneous Coronary
Intervention (PCI) patient pain: Literature review. Faculty of Medicine, Diponegoro University, Semarang, Indonesia.


Purnamasari, E. (2014). The effectiveness of cold compresses to reduce pain intensity in fracture patients at Ungaran hospital. Scientific work.


Loyal, D. (2017). The Effect Of Ice Pack Therapy To Decrease Post Episiotomy Pain Scale In Rahma Room Of Rs PKU Muhammadiyah Gombong, MUHAMMADIYAH COLLEGE OF HEALTH SCIENCES GOMBONG.


Weniarti, (2016). Affecttherapiice Pack To Changes In Pain Scale In Post Episiotomy Mothers Faculty Of Medicine, University Of Yogyakarta: South Sumatra.

Zakiya Was. (2015). Concepts And Management In Evidence-Based Nursing Practice.Jakarta: SalembaMedika