Contents lists available at IOCS

Science Midwifery

journal homepage: www.midwifery.iocspublisher.org

The effect of hypnobreastfeeding on breast milk expenditure in postpartum mothers primiparous days 4-7 in TPMB Heni Nurhaeni Bandung city year 2024

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ARTICLE INFO

Article history:

Received Feb 22, 2024
Revised Feb 23, 2024
Accepted Feb 27, 2024

Keywords:

Breast Milk Production
Hypnobreasfeeding
Puerperium
Primipara

ABSTRACT

Decreased breast milk expenditure caused by physical and emotional stress, stressful events are very vulnerable to be experienced by primiparous mothers because of the first experience in caring for and providing exclusive breastfeeding. One of the nonpharmacological efforts to deal with disorders in breast milk production is hypnobreastfeeding, by giving positive suggestions when the mother is in a relaxed state. The purpose of this study is to determine the effect of hypnobreastfeeding on breast milk expenditure in postpartum mothers Primipara days 4-7 at TPMB Heni Nurhaeni Bandung City in 2024. The type of research used is pre-experimental designs with one group pretest-posttest design. The sample of this study was 34 postpartum mothers primipara days 4-7 in January 2024 at TPMB Heni Bandung City. Data collection using observation sheets of breast milk expenditure, data analysis using univariate analysis and bivariate analysis namely Wilcoxon Test. The results of the study stated that before the intervention, the average milk expenditure was 60 ml and after the intervention was 95 ml, and there was an influence of hypnobreastfeeding techniques on breast milk expenditure in primiparous postpartum mothers days 4-7 (p value 0.000). The conclusion of this study is that there is an effect of hypnobreastfeeding on breast milk expenditure in postpartum mothers primiparous days 4-7 at TPMB Heni Nurhaeni in Bandung City in 2024. Advice for midwives, hypnobreastfeeding can be used as a natural effort to increase breast milk expenditure in postpartum mothers.

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INTRODUCTION

Breast milk (ASI) is the best natural nutrition for babies because it contains energy needs and substances needed during the first 6 months of the baby's life (Anggraeni et al., 2022; Aritonang et al., 2021; Maheni & Oktova, 2021). A mother often experiences problems in exclusive breastfeeding,

one of the main obstacles is the production of milk that is not smooth (Mgongo et al., 2019). Exclusive breastfeeding can meet the nutritional needs of infants, insufficient breastfeeding expenditure will have an impact on exclusive breastfeeding coverage (Abdulahi et al., 2021; Bhattacharjee et al., 2021; Patil et al., 2020).

In World Breastfeeding Week (WBW) 2023 organized by the World Health Organization (WHO) and UNICEF, highlighting the decline in the number of exclusive breastfeeding in Indonesia, this is according to LAKIP data in 2022, the achievement of the indicator of infants aged less than 6 months receiving exclusive breastfeeding by 67.96%, down from 69.7% in 2021 (LAKIP, 2022). The target achievement of the indicator of infants aged less than 6 months receiving exclusive breastfeeding is stated in the Ministry of Health's Strategic Plan for 2020-2024, namely the percentage of infants aged less than 6 months who receive exclusive breastfeeding of 80% (Kemenkes, 2020).

The coverage of exclusive breastfeeding in West Java in 2022 of 69.9% increased by 5.7% compared to 2021 of 64.2% (Wardhana et al., 2022). The coverage of exclusive breastfeeding in the City in 2022 is 74.06% obtained by 6,205 infants from 8,378 infants 0-6 months, one of the districts that is still relatively low, namely in Kiaracondong District at 33.53% (Yumna et al., 2022). In postpartum mothers, 4-10 days is transitional breast milk, the normal milk expenditure is around 400-700 cc per day (Sudargo et al., 2019).

The decrease in breast milk expenditure is caused by stress, both emotional stress and physical stress. Emotional stress has an impact on decreasing the release of oxytocin, a hormone that plays a role in the production and production of breast milk. Physical stress includes fatigue, lack of sleep, and lack of nutritional intake whereas, physical stress that can directly make breast milk expenditure a little is an injury or surgery on the breast that causes damage to the breast gland, so that breast milk expenditure is disrupted (Risyanti et al., 2021). According to the results of research conducted by (Hasnah et al., 2023) that stressful events are very vulnerable to be experienced by primiparous mothers, this is because they have just entered their role as a mother and are the first experience in caring for and providing exclusive breastfeeding.

This study has high urgency as it highlights a significant problem in exclusive breastfeeding to infants, especially in primiparous postpartum mothers. Insufficient milk production is one of the main obstacles that can hinder exclusive breastfeeding, which in turn can negatively affect the health and growth of the baby. With a decrease in breast milk production caused by various factors, such as physical and emotional stress, as well as lack of support in breastfeeding, the need for research on the effectiveness of hypnobreastfeeding as an alternative method to increase breast milk production in primiparous postpartum mothers is very important.

Hypnobreastfeeding is one branch of hypnotherapy techniques, this technique is very easy, fast, effective and efficient and can be done independently in reaching the subconscious mind to reduce and heal negative thoughts that will inhibit the process of milk production. The subconscious mind is 88% very instrumental and influential for each individual (Gunawan, 2005; Paung, 2017; Richter, 1933).

The state of mind of a puerperal mother is affected by lactation, especially the let-down reflex. Stress, anxiety and fatigue can hinder milk supply, so relaxation exercises can be very beneficial both physically and psychologically for both mother and baby. Stress experienced by mothers shortly after the baby is born, as well as lack of support for breastfeeding, increase the secretion of the hormone cortisol (a hormone that affects stress) which causes breast milk not to come out smoothly (Virgian, 2022; Virgian & Setiawati, 2022).

The results of a preliminary study in 2023 that received exclusive breastfeeding in the TPMB Heni Nurhaeni work area there were 35 babies out of 60 babies who were not exclusively breastfed for 6 months because since 1 week of the postpartum period, mothers complain that breast milk is small, one of which is influenced by the mother's work so that it does not maximize exclusive breastfeeding and there is self-confidence and concern, especially in mothers who give

birth to their first child with complaints that mothers feel Her milk expenditure is not smooth. The purpose of this study is to determine the effect of hypnobreastfeeding on breast milk expenditure in postpartum mothers Primipara days 4-7 at TPMB Heni Nurhaeni Bandung City in 2024

RESEARCH METHOD

This study used a pre-experimental designs method that aims to determine the causal influence of a treatment, namely hypnobreastfeeding on breast milk expenditure in primiparous postpartum mothers. The form of research design used is one group pretest-posttest design, starting with a pretest in the form of measuring breast milk expenditure using a breast pump, then the final measurement or posttest to see the amount of breast milk expenditure after 4 days of intervention.

The population in this study was all primiparous postpartum mothers from days 4-7 in January 2024 who made postpartum visits and gave birth at TPMB Heni Nurhaeni as many as 34 respondents. The sampling technique in this study was total sampling.

Data collection used primary data in the form of observation sheets to determine the amount of breast milk expenditure before and after the intervention. The statistical test used is the Wilcoxon Test.

RESULTS AND DISCUSSIONS

Univariate Analysis

a. Total Breast Milk Expenditure for Postpartum Primipara Mothers Day 4 Before Hypnobreastfeeding Intervention at TPMB Heni Nurhaeni Bandung City 2024

Table 1. Removal of breast milk before hypnobreastfeeding intervention

Variable	n	Min	Max	Mean	SD
Breast milk dispensing	34	40	70	60	8.627

Based on table 1, it is known that from 34 respondents breast milk expenditure before hypnobreastfeeding with an average value of 60 ml (SD 8,627) with a minimum value of 40 ml and a maximum value of 70 ml.

b. Total Breast Milk Expenditure for Nifas Primipara Mothers Day 7 After Hypnobreastfeeding Intervention at TPMB Heni Nurhaeni Bandung City 2024

Table 2. Breastfeeding Expenditure After Hypnobreastfeeding Intervention

Variable	n	Min	Max	Mean	SD
Breast milk dispensing	34	75	105	95	8.724

Based on table 2, it is known that from 34 samples after hypnobreastfeeding with an average value of 95 ml (SD 8,724) with a minimum value of 75 ml and a maximum value of 105 ml.

Bivariate Analysis

Table 3. The effect of hypnobreastfeeding on breast milk production in nifas primipara mothers day 4-7 at TPMB Heni Nurhaeni Bandung City 2024

Breast milk dispensing	n	Mean	Z	p-value
Before-	34	60	-5.754	.000
after		95		

Based on table 3 From the results of non-parametric statistical tests using Wilcoxon, a Z value of -5,754 and a p-value of 0.000 (<0.05) were obtained that Ha was accepted, which means

that there is an influence of hypnobreastfeeding on breast milk expenditure in postpartum mothers primiparous days 4-7 at TPMB Heni Nurhaeni Bandung City 2024.

Discussion

Breast Milk Expenditure in Postpartum Primipara Mothers Day 4-7 Before Being Given Hypnobreastfeeding Techniques at TPMB Heni Nurhaeni

The results of this study showed breast milk expenditure in primiparous postpartum mothers on day 4 before hypnobreastfeeding techniques were carried out, namely breast milk expenditure with the lowest yield of 40 ml and the highest result of 70 ml so that the average value of breast milk expenditure in 34 respondents was 60 ml which was an abnormal result, in line with IDAI theory (2020) stating that breast milk expenditure every 1 breastfeeding is 90-120 mL / time, resulting on 2 breasts.

In line with the results of the study (Hanum, 2021), breast milk expenditure in postpartum mothers before hypnobreastfeeding techniques were carried out on 30 respondents, the majority of which were abnormal breastfeeding, namely 27 people and normal breast milk as many as 3 people.

The results, before the hypnobreastfeeding technique was carried out from 34 respondents of postpartum mothers primipara days 4-7 there were postpartum mothers aged >20 by 88.2% and postpartum mothers aged <20 years by 11.8%, seen from the results of breast milk expenditure that both resulted in abnormal breast milk expenditure. In line with the results of the study (Subekti &; Faidah, 2019), a p-value of 0.414 (>0.05) was obtained, which means there is no relationship between maternal age and smooth milk production in normal postpartum mothers.

Researchers took samples of puerperal mothers with primiparous and the results of breast milk expenditure were abnormal because primiparous and multiparity mothers had different experiences from lactation. Multiparity mothers have experience from previous lactation, this makes mothers become more prepared for breastfeeding so that breastfeeding becomes more effective. Previous lactation experiences also help mothers relieve anxiety in breastfeeding their babies while primiparous mothers have no previous lactation experience so it can cause stress. Stress experienced by primiparous mothers can increase cortisol hormone levels in the blood. This increase in cortisol hormone will cause a decrease in oxytocin hormone levels which results in a delay in the onset of lactation (Tompunuh & Sujawaty, 2023). This is in line with research (Chen et al., 2006) that there is a relationship between parity and breast milk expenditure, a correlation value of p = 0.005.

Researchers also obtained the results of a sample of 34 postpartum mothers, there were 35.3% working and non-working postpartum mothers by 64.7%, judging from breast milk expenditure that postpartum mothers who worked slightly lower the amount of breast milk expenditure than postpartum mothers who did not work. In line with research (Hardiani, 2017) most primiparous mothers with working status milk expenditure is not smooth, the results of researchers concluded that lack of breast milk due to maternal fatigue which will trigger a decrease in milk production continues, mothers experience stress, there will be blockade of the letdown reflex, this is due to the release of adrenaline (epinephrine) which causes vasoconstriction of alveoli blood vessels so that it will inhibit oxytocin to be able to reaching the target of myoepithelial organs, an imperfect letdown reflex will cause a buildup of milk in the alveoli which clinically appear to enlarge breasts (Suarca et al., 2016).

Breast Milk Expenditure for Postpartum Primipara Mothers Day 4-7 After Being Given Hypnobreastfeeding Techniques at TPMB Heni Nurhaeni

The results of this study obtained breast milk expenditure in postpartum mothers after hypnobreastfeeding techniques were carried out on 34 primiparous postpartum mothers, on the 7th day observations were made to determine the amount of breast milk expenditure obtained the lowest milk expenditure of 75 ml and the highest breast milk expenditure of 105 ml with an

average milk expenditure in 34 respondents of 95 ml which is a normal result, in line with the theory of IDAI (2020) states that milk expenditure every 1 breastfeeding is 90-120 mL / time, which is produced in 2 breasts.

In line with the results of the study (Rangkuti, 2022) showed that the milk expenditure of postpartum mothers after hypnobreastfeeding was carried out, most of the breastfeeding was good >7-123 ml as many as 12 people (48%) and a small part of <7-123 ml breastfeeding contests as many as 6 people (24%). In line with the results of the study (Adnyanawati et al., 2023; Rangkuti et al., 2022).

The results of this study showed that after the hypnobreastfeeding technique was carried out on postpartum mothers on day 7 there was an increase in milk expenditure by making the mother become calmer and relaxed so as to increase the hormone oxytocin which can increase milk expenditure. Hypnobrastfeeding can increase breast milk expenditure because the relaxing effect, physical calm, mind, and comfort that arise during breastfeeding can physiologically stimulate endorphins so that there is a positive feedback mechanism in the form of an increased response to the release of oxytocin and prolactin by the pituitary. The hormone prolactin plays a role in stimulating nutrients for the synthesis of milk in the secretory cells of the alveoli. Oxytocin causes myoepithelial contraction around the alveolus and releases milk (milk ejection) (Pratiwi et al., 2018).

Researchers also found that of the 34 primiparous postpartum mothers, there were 12 who worked and 22 postpartum mothers who did not work, judging from the release of breast milk after hypnobreastfeeding, it was found that primiparous postpartum mothers who worked had abnormal values compared to primiparous postpartum mothers who did not work. In line with research (Niar et al., 2021), it was found that mothers with good rest patterns had sufficient breast milk expenditure (94.5%) so that there was a significant relationship between rest patterns and breast milk expenditure.

The Effect of Health Education with Booklet on IUD Contraception

In this study using the Wilcoxon test, a Z value of -5.754 and a p-value of 0.000 (<0.05) can be concluded that Ha is accepted, so that there is a significant effect of breast milk expenditure on hypnobreastfeeding, it can be concluded that there is an influence of hypnobreastfeeding on breast milk expenditure in postpartum mothers primiparous days 4-7 at TPMB Heni Nurhaeni Bandung City 2024.

In line with the results of research conducted by (Ruslinawati, 2020) in the intervention group day 1 (postpartum day 4) and day 7 (postpartum day 10) obtained an average of 28,867 ml and the results of the T-Test p-value test 0.000 ($p < 0.05$) so that the administration of hypnobreastfeeding therapy has more influence on breast milk expenditure. In research conducted by (Sofiyanti, 2019) it was found that there were differences in prolactin hormone levels before and after the application of hypnobreastfeeding in breastfeeding mothers with a p-value = 0.018 (<0.05). In the study (Hasanuddin, 2022) breast milk production before hypnobreastfeeding techniques was carried out on puerperal mothers mostly less than 7-123 ml as much as 12 (48%) and after hypnobreastfeeding in puerperal mothers in BPM Atikah mostly good >7-123 ml as much as 12 (48 %). There is an effect of hypnobreastfeeding technique on milk production with a p-value of 0.001 (<0.05).

The implementation of hypnobreastfeeding techniques by researchers in the first stage of respondents entered the process of deep breath relaxation where respondents seemed to become more relaxed characterized by slowed breathing frequency. In line with the theory (Purba Handayani et al., 2020) states that if the body suppresses high relaxation, it can reduce excess oxygen and have an impact on stretching the muscles in the body so as to reduce cortisol levels in the body whose benefits include overcoming anxiety problems.

When respondents enter the core stage, namely the suggestion stage, respondents do not respond to sounds other than the researcher's voice, then this stage enters the brain wave region is

in alpha and theta conditions characterized by external sounds that cannot be heard properly, respondents seem to fall asleep and the respondent's expression looks smiling. In line with terori (Gunawan, 2005) the alpha and theta brain wave regions will physiologically release endorphins so that there is a positive feedback mechanism in the form of an increased response to oxytocin and prolactin.

Researchers do hypnobreastfeeding in the morning, because this time is closest to the subconscious and when the subconscious mind is most active. In the morning the conscious mind is still not fully active while at night the subconscious mind is a little tired due to the activities it has to do during work activities during the day, this makes dialogue with the subconscious mind easier and well connected (Gunawan, 2005). In line with the results of the researcher's observation at the time of the intervention in the morning, researchers more easily make the repondent enter the subconscious area and in a short time this makes respondents easily accept positive suggestions.

Hypnobreastfeeding technique is a deep and regular relaxation technique that makes the endocrine system, blood flow, nerves and other systems in the body will function better. A positive attitude is very important as is feeling calm and relaxed during breastfeeding. When the mother relaxes while breastfeeding, the endorphin hormone produced by the mother will flow to the baby through breast milk, and this makes the baby will feel comfort, tranquility that the mother feels. Hypnobreastfeeding can help mothers who have difficulty while breastfeeding can also make mothers able to relactate. Thus, breast milk production is sufficient for the needs of babies up to 6 months of age (Sri Wahyuni Sundari & Melsa Sagita Imaniar, 2021).

CONCLUSION

Based on the data and results of research that has been done, researchers conclude as follows: (a). Breast milk expenditure before hypnobreastfeeding technique was carried out on primiparous postpartum mothers days 4-7 at TPMB Heni Nurhaeni obtained an average milk expenditure before hypnobreastfeeding of 60 ml. (b). Breast milk expenditure after hypnobreastfeeding on postpartum mothers primiparous days 4-7 at TPMB Heni Nurhaeni obtained an average milk expenditure after hypnobreastfeeding of 95 ml. (c). There is an effect of hypnobreastfeed techniques on breast milk expenditure in postpartum mothers primiparous days 4-7 at TPMB Heni Nurhaeni with a p-value of 0.000 (< 0.05). The limitation of this study is to focus on the effect of hypnobreastfeeding techniques on breast milk production in primiparous postpartum mothers on day 4 to day 7 at TPMB Heni Nurhaeni. Measurement of breast milk volume before and after the application of hypnobreastfeeding techniques, with the results of an average milk output of 60 ml before and 95 ml after hypnobreastfeeding. This study has limitations in terms of sample size, duration of observation, and variations in other factors that can affect breast milk production. Suggestions for future research development are to expand the scope of the study by involving more TPMB or other mother and baby care centers, and to consider additional factors such as maternal age, nutritional status, or medical conditions that may affect milk production. In addition, future research could attempt to understand the mechanisms behind the effects of hypnobreastfeeding on milk production in more depth through a more controlled research design, including measurement of hormones related to lactation and psychological evaluation of mothers related to the hypnobreastfeeding technique.

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