

Relationship of Postpartum Mother's Knowledge about Perineal Care with Belief in Healing Perineal Sutures in Lima Puluh Village, Lima Puluh Subdistrict, Batu Bara Regency in 2021

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ARTICLE INFO

Keywords:

Knowledge,
Post Partum,
Perineal Wound Healing .

ABSTRACT

In the puerperium, there are usually wounds in the birth canal which are also called perineal wounds. Perineal wound healing if there is no infection will heal within 6-7 days. Based on the results of interviews, it was found that 7 out of 11 postpartum mothers had less knowledge about perineal care and wound healing took a long time. This research aims to find out the relationship between mother's knowledge about perineal wound care and Perineal wound healing belief in Lima Puluh Village, Lima Puluh Subdistrict in 2021. This research is an analytic survey with a cross sectional approach, data collection is carried out using a questionnaire, the research population is all postpartum mothers in the Lima Puluh sub-district in July to September 2021, namely 47 mothers. The sampling technique in this study was carried out with a total sampling technique of the entire population as a sample. The results of the study found that from 47 respondents (100%) the majority of respondents' knowledge about perineal wound care was sufficient, namely 17 people (36.2%), fast wound healing as many as 29 people (61.7%). The results of the Chi-Square test (Pearson Chi-Square) at the 95% confidence level resulted in a P value of 0.000 ($P < 0.05$) where H_0 was rejected and H_a was accepted. This shows that there is a statistically significant relationship between mother's knowledge about perineal wound care and perineal wound healing in Lima Puluh Village, Lima Puluh Subdistrict in 2021. There is a relationship between mother's knowledge about perineal wound care and perineal wound healing in Lima Puluh Subdistrict, Lima Puluh Tahun 2021. Therefore, it is recommended for mothers to increase knowledge about proper perineal wound care.

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1. Introduction

Mothers and children are family members who need to get priority in the implementation of health efforts, because mothers and children are a vulnerable group to family conditions and their surroundings in general. So that an assessment of the health status and performance of maternal and child health efforts is important to do. The success of maternal health efforts can be seen from the indicators of the Maternal Mortality Rate (MMR) per 100,000 live births and the Infant Mortality Rate per 1,000 live births. (Ministry of Health, 2016). The postpartum period (puerperium) is the period after the placenta is born and ends when the uterine organs return to their pre-pregnancy state. The puerperium lasts approximately 6 weeks. In the puerperium, there are usually wounds in the birth canal which are also called perineal wounds.

Based on According to World Health Organization data, in 2015 the world's MMR is estimated at 216 maternal deaths per 100,000 live births that occur due to complications of pregnancy and childbirth. Almost all of these deaths occur due to factors that could have been prevented through good service arrangements. One of the distinguishing features between developed and developing countries is the infant and maternal mortality rate. In developed countries, infant and maternal mortality rates are generally low. On the other hand, in developing countries, infant and maternal mortality rates are

relatively high. This is because the population cannot afford nutritious food, cannot afford adequate health services and medicines, because their income is low.

Based on Indonesia's 2015 health profile data, it can be seen that the Maternal Mortality Rate (MMR) pregnant in Indonesia is still high at 305/100,000 live births. The cause of the highest maternal mortality rate (MMR) in pregnancy is infection during the puerperium, infection of the genitals is a complication of the puerperium. Post partum mothers who experience perineal wounds are very susceptible to infection, because perineal wounds that are not maintained properly will greatly affect the healing of perineal wounds. (Ministry of Health, 2016). Based on data obtained from the health profile of the province of Aceh, it is known that the MMR in Aceh in 2015 was 134 per 100,000 live births. The proportion of maternal deaths is currently dominated by postpartum maternal deaths, which are 70 mothers (52%) which are mostly caused by postpartum hemorrhage and infection, followed by maternal deaths as many as 34 mothers (25%) and maternal deaths in pregnancy as many as 30 mothers. (23%).

Based on data obtained from the North Sumatra Health Office in 2016, MMR and IMR in North Sumatra were compared with every 1,000 or 100,000 live births, namely AKI in North Sumatra, namely 91 maternal deaths per 100,000 live births or 3 maternal deaths out of a total of 3,291 births. . And 1 in 3 cases are caused by infection during the puerperium. Based on data obtained from the Lima Pulu Public Health Center, Batubara Regency, it is known that the number of MMR in the Lima Puluh Puskesmas working area in 2016 was 1 case of death caused by bleeding that occurred due to uterine atony or the uterus did not contract properly after the birth of the baby/placenta. One of the biggest direct causes of maternal death besides eclampsia and postpartum complications is infection. Among the infections during the puerperium are infections that occur due to injury to the birth canal. Injury to the birth canal can occur due to errors during delivery but can also occur due to lacerations or episiotomy. Episiotomy is carried out because it has several benefits including preventing perineal tears, reducing the strain of the bladder or rectum supporting muscles that are too strong and prolonged and reducing the length of the stage. (Rina, 2014)

Tear of the birth canal is the second cause of bleeding after uterine atony which occurs in almost the first labor and not infrequently also in subsequent deliveries. Perineal tears generally occur in the midline and can become extensive if the fetal head is born too quickly, the angle of the pubic arch is smaller than usual, so that the fetal head is forced to deliver more backward than usual, the fetal head passes through the pelvic inlet with a larger size than the sub-occipito-regmantic circumference or the child is delivered vaginally. Injuries are usually minor but sometimes extensive and dangerous injuries occur. As a result of primary labor in a primiparous, it is usual to develop sores on the vulva around the vaginal introitus which are usually not deep, but sometimes profuse bleeding may occur. Perineal tears occur in almost all first deliveries and are not uncommon in subsequent deliveries. Perineal tears generally occur in the midline and usually become widespread when the fetal head is born too quickly, the angle of the pubic arch is smaller than usual, the fetal head passes through the lower pelvic inlet with a larger size than the circumferia suboccipito brekmatika.

The principle of action of episiotomy is to prevent more severe damage to soft tissues due to tensile strength that exceeds the adaptive capacity or elasticity of the tissue. Therefore, the consideration for performing an episiotomy must refer to appropriate clinical considerations and the most appropriate technique for the condition being faced. An episiotomy wound is an area that is difficult to keep clean and dry. Special observations and care are needed to ensure the area heals quickly and inspections must always be carried out to find out if there are signs of infection or inflammation in the area (Imam, 2014). To avoid infection of the perineum, it is necessary to take care of the vulva, which is called cleaning the external female genitalia. Vulva hygiene is cleaning the vulva and the surrounding area in women who are postpartum. Vulva hygiene also aims to prevent infection, to heal perineal sutures and to clean the perineum. The benefits of vulvar hygiene are to keep the vagina and the surrounding area clean and comfortable, prevent the appearance of vaginal discharge, unpleasant odor and itching and keep the vaginal pH normal. The emergence of perineal infections can propagate in the bladder tract or in the birth canal, the infection not only inhibits the wound healing process but can also cause damage to supporting cells, so that it will increase the size of the wound itself, both the length and depth of the wound (Siti, 2014). for healing perineal sutures and for perineal hygiene. The benefits of vulvar hygiene are to keep the vagina and the surrounding area clean and comfortable, prevent the appearance of vaginal discharge, unpleasant odor and itching and keep the vaginal pH normal. The emergence of perineal infections can propagate in the bladder tract or in the birth canal, the infection not only inhibits the wound healing process but can also cause damage to supporting cells, so that it will increase the size of the wound itself, both the length and depth of the wound (Siti, 2014). for healing perineal sutures and

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There are several factors that influence wound healing. Factors that influence the healing of perineal wounds include proper wound care, nutritional status, rest, stress, infection, smoking, medical conditions and medication and obesity. The results of research conducted by Jolie SWB and Moloku F (2013), it was found that maternal knowledge about treatment with episiotomy wound healing with good knowledge was proven by 31 respondents (79.5%) and good wound healing was proven by 29 respondents (74, 4%). The conclusion is that there is a relationship between knowledge about episiotomy wound care and healing in postpartum mothers. The results of direct interviews conducted by researchers on 7 normal post partum mothers who were present at the time of initial data collection, found 3 mothers said they did not clean the perineum with warm water, 2 mothers said they rarely changed sanitary napkins so they felt uncomfortable and had an unpleasant vaginal odor, while 2 other mothers said they did not wash their hands before cleaning the perineal sutures, which often caused itching. Then after being interviewed about the condition of the perineal wound on the third day, they said that the wound looked wet and felt sore.

2. Method

This research is an analytic survey with a cross sectional approach, data collection is carried out using a questionnaire, the research population is all postpartum mothers in kelurahan fifty sub-districts fifty from July to September 2021, namely 47 mothers. The sampling technique in this study was carried out with a total sampling technique of the entire population as a sample.

3. Results and Analysis

3.1 Overview of Research Site

Kelurahan Limapuluh is in Limapuluh Subdistrict, the area of Kelurahan Limapuluh is about 32 HA, which consists of three hamlets, namely Giat hamlet with an area of 7.2 HA, Sadar hamlet with an area of 8.1 HA, and Amal hamlet 16.7 HA. Village boundaries can be described as follows:

- To the north it is bordered by a river (Kp. Jawa Baru)
- To the east, it is bordered by the villages of Sidorejo and Merande.
- To the south it is bordered by PTP 1.
- To the west it is bordered by Pondok Factory.

The total population in Limapuluh Village is 1,385 male and 1,361 female, which is divided into 735 families, in Environment 1 there are 80 families, Environment II there are 79 families, Environment III has 73 families, Environment IV has 75 families, Environmental V there are 80 families, Environment VI has 70 families, Environment VII has 68 families, Environment VIII has 70 families, Environment IX has 70 families, Environment X has 70 families. The health facilities in Kelurahan Fifty have 1 main health center, 1 Poskesdes and 7 independent midwife practices and are managed by 1 village midwife. And other complete facilities. The research was conducted from July to September 2021 in the Kelurahan Fifty. The number of respondents studied was 47 people. The research results are as in the following tables:

3.2 Univariate Analysis

a. Mother's Knowledge of Perineal Wound Care

Table 1

Frequency Distribution of Postpartum Mother's Knowledge About Perineal Wound Care in Lima Puluh Village in 2021.

No	Knowledge	Amount	
		f	%
1	Good	16	34.0
2	Enough	17	36.2
3	Not enough	14	29.8

No	Knowledge	Amount	
		f	%
	Amount	47	100

Source: Primary Data (Processed in 2021)

From table 1 above, it shows that of 47 respondents (100%) the majority of respondents' knowledge about perineal wound care is sufficient, namely 17 people (36.2%) and the minority of respondents' knowledge about perineal wound care is less, namely 14 people (29, 8%).

b. Perineal Wound Healing Belief

Table 2

Perineal Suture Wound Healing Confidence Frequency Distribution For Postpartum Mothers in Fifty Villages, Fifty Districts in 2021.

No	Wound healing	Amount	
		f	%
1	Dry (1-7)	29	61.7
2	Wet (> 7 days)	18	38.3
	Amount	47	100

Source: Primary Data (processed in 2021)

Table 2 above shows that of the 47 (100%) postpartum mothers who experienced perineal injuries, the majority of respondents' perineal wound healing was fast, as many as 29 respondents (61.7%) and only 18 people (38.3%) had long perineal wound healing.

3.3 Bivariate Analysis and Hypothesis Testing

a. The Relationship of Postpartum Mother's Knowledge About Perineal Wound Care with Belief in Perineal Suture Wound Healing in Fifty Districts Fifty in 2021

Table 3

Frequency Distribution of Mother's Knowledge of Perineal Wound Care with Belief in Perineal Suture Wound Healing in Lima Twenty Districts Fifty Years 2021

No	Knowledge of Perineal Wound Care	Wound Healing Belief				Amount		P Value
		Fast		Long		f	%	
		F	%	f	%			
1	Good	14	87.5	2	12.5	16	100	0.000
2	Enough	14	82.4	3	17.6	17	100	
3	Not enough	1	7.1	13	92.9	14	100	
	Total	29	61.7	18	38.3	47	100	

Df = 2

P < 0.05

p = 0.000

From table 3 above, it shows that out of 16 people (100%) who have good knowledge the majority of perineal wound healing is fast, namely as many as 14 people (87.5%), of 17 people (100%) who have sufficient knowledge the majority of perineal wound healing is fast as many as 14 people (82.4%) and from 14 people (100%) with less knowledge, the majority of perineal wound healing is long, as many as 13 people (92.9%).

The results of the Chi-Square test (Pearson Chi-Square) at the 95% confidence level resulted in a P value of 0.000 (P < 0.05) where Ho was rejected and Ha was accepted. This shows that there is a statistically significant relationship between maternal knowledge about Perineal wound care trust and perineal wound healing in Fifty Years 2021.

3.4 Discussion

a. Mother's Knowledge About Perineal Wound Care

Based on the univariate analysis, it is known that from 47 respondents (100%) the majority of respondents' knowledge about perineal wound care is sufficient, namely 17 people (36.2%) and the minority of respondents' knowledge about perineal wound care is less, namely 14 people (29.8%). The results of the research conducted by postpartum mothers regarding perineal wound care were classified as having good knowledge as many as 13 respondents (41.9%). While the results of the research conducted, it was found that the knowledge of mothers about treatment with episiotomy wound healing with good knowledge was proven by the presence of 31 respondents (79.5%).

Knowledge is the result of knowing and this occurs after people have sensed a certain object, sensing occurs through the post-human senses, namely the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained from the eyes and ears (Notoadmojo, 2012). A person's

educational background is one of the important elements that can affect knowledge or information about health for the better. Often health problems arise due to ignorance or lack of adequate health information. The education level factor also determines whether or not a person easily absorbs and understands the health knowledge they acquire. This can be used as a basis for distinguishing appropriate extension methods. In the interests of the family,

An episiotomy wound is an area that is difficult to keep clean and dry. Special observations and care are needed to ensure the area can heal quickly and inspections must always be carried out to find out if there are signs of infection or inflammation in the area (Heryani, 2016). The goals of perineal care are to prevent contamination from the rectum, gently treat the traumatized tissue and clean any discharge that is a source of bacteria and odors. The goal of perineal care, according to Hamilton (2014), is to prevent infection in connection with tissue healing.

There are several factors that affect wound healing. Factors that affect the healing of perineal wounds include proper wound care, nutritional status, rest, stress, infection, smoking, medical conditions and medication and obesity (Imam, 2012). The researcher assumes that the mother's knowledge about perineal wound care is influenced by several factors such as education, information sources such as electronics and family. Mother's knowledge about proper wound care needs to be improved. As for how to find as much information as possible, information can come from the internet, health workers and their own families. Health workers should provide counseling on how to properly care for wounds in the IV stage (during the first 2 hours of postpartum supervision) or precisely before the health workers leave the mother.

From the results of the research that has been carried out, it is known that from 47 postpartum mothers who experienced perineal injuries, there were only 16 mothers (34.0%) who had good knowledge about perineal wound care, meaning that less than half of the mothers who experienced perineal injuries understood the correct way to treat perineal wounds. For this reason, effective health education is needed for all postpartum mothers in order to prevent infection due to improper wound care and so that wound healing can run optimally.

b. Perineal Wound Healing

Based on the results of univariate analysis, it can be seen that from 47 (100%) postpartum mothers who experienced perineal injuries, the majority of respondents' perineal wound healing was fast, as many as 29 people (61.7%) and only 18 respondents (38.3%) had long perineal wound healing. The results of research conducted by Harjanti found that Perineal wound healing in postpartum women, perineal wound that healed completely as many as 19 respondents (61.3%). Meanwhile, the results of Jolie and Moloku's research showed good wound healing as evidenced by 29 respondents (74.4%).

The postpartum period (puerperium) is the period after the placenta is born and ends when the uterine organs return to their pre-pregnancy state. The puerperium lasts approximately 6 weeks. In the puerperium, there are usually wounds in the birth canal which are also called perineal wounds. Perineal wound healing if there is no infection will heal within 6-7 days (Sari, 2014). Perineal tears occur in almost all first deliveries and are not uncommon in subsequent deliveries. Perineal tears generally occur in the midline and usually become extensive when the fetal head is born too quickly, the angle of the pubic arch is smaller than usual, the fetal head passes through the lower pelvic inlet with a larger size than the circumferia suboccipito brekmatika (Priest, 2012).

Nursing is the process of fulfilling basic human needs (biological, psychological, social and spiritual) in the range of illness to health. The perineum is the area between the thighs that is bounded by the vulva and anus. Postpartum is the time between the birth of the placenta and the return of genetic organs as before pregnancy. Perineal care is the fulfillment of the need to nourish the area between the thighs which is limited to the vulva and anus in mothers who are in the period between the birth of the placenta and the return of genetic organs as before pregnancy (Heriyani, 2013). Among the infections during the puerperium are infections that occur due to injury to the birth canal. Injury to the birth canal can occur due to errors during delivery but can also occur due to lacerations or episiotomy. Episiotomy is carried out because it has several benefits including preventing perineal tears, reducing the strain of the bladder or sectum supporting muscles that are too strong and prolonged and reducing the length of the stage. (Sari, 2014). According to Harry, the stitches would normally dry and heal in less than a week. If dirty blood comes out with a foul smell from the birth canal, the mother is hot, and the stitches are swollen with redness that is very painful or the stitches are festering.

The researcher assumes that although the frequency of perineal wound healing is fast, the minority frequency should not be ignored. Because infection is the second cause after bleeding that makes

maternal mortality high. The number of mothers who do not understand how to care for these wounds makes the wound heal longer and if not treated properly it is feared that it will become infected. In addition to wound care that is carried out incorrectly, the duration of wound healing can also occur due to improper nutrition, for example, because many mothers avoid consuming eggs and fish for fear that the condition of the wound will worsen, on the contrary, protein consumption will actually help regenerate new skin so healing wound will be faster. Therefore, the duration of wound healing can be said to be very dependent on the knowledge possessed by the mother. Mothers who understand how to treat wounds well, the wound healing will be fast. For this reason, every postpartum mother and family needs to get sufficient and appropriate information regarding the care of this perineal wound so that it can avoid infection and the wound will heal faster.

c. The Relationship of Postpartum Mother's Knowledge About Perineal Care Belief with Perineal Suture Wound Healing

Based on the results of the bivariate analysis above, it is known that of the 16 respondents (100%) who have good knowledge, the majority of perineal wound healing is fast, namely 14 people (87.5%), of 37 respondents (100%) who have sufficient knowledge, the majority of perineal wound healing is as many as 14 people (82.4%) and from 14 respondents (100%) who had less knowledge, the majority of perineal wound healing was long, namely 13 people (92.9%). The results of the Chi-Square test (Pearson Chi-Square) at the 95% confidence level resulted in a P value of 0.000 ($P < 0.05$) where H_0 was rejected and H_a was accepted. This shows that there is a statistically significant relationship between mother's knowledge about perineal wound care and Perineal wound healing belief in Lima Puluh Tahun 2021. A total of 14 mothers (29, 8%) postpartum mothers have less knowledge about perineal wound care. This will affect the length of the wound healing that the mother experiences, in addition to the wrong treatment and being left unattended, unwanted things such as infection can occur. For this reason, appropriate efforts are needed so that every postpartum mother and family understands proper wound care.

According to the researcher, there is a relationship between mother's knowledge about postpartum and perineal wound healing because mothers who understand how to treat wounds properly will treat them properly so that the wound will dry up quickly. For example, a mother who understands that wound healing requires proper nutrition will not abstain from eating and the nutritional needs that are useful for helping wound healing will be optimal and consequently the wound will heal faster than a mother who does not understand. From the results of the analysis, the researcher can state that the healing of perineal wounds is very dependent on the knowledge that the mother has. Mothers who understand how to treat wounds well, the wound healing will be fast.

The results of this study are also in accordance with research conducted by Jolie and Moloku which concluded that there was a relationship between knowledge about episiotomy wound care and healing in post-partum mothers where it was found that maternal knowledge about treatment with episiotomy wound healing with good knowledge was proven by the presence of 31 respondents (79.5%) and good wound healing in proved by 29 respondents (74.4%). The postpartum period begins after giving birth and ends when the uterine organs return to their pre-pregnancy state. The puerperium lasts for about 6 weeks or 42 days, but will completely recover within 3 months. There are several factors that influence wound healing. Factors that affect the healing of perineal wounds include proper wound care, nutritional status, rest, stress, infection, smoking, medical conditions and medication and obesity.

To avoid infection of the perineum, it is necessary to take care of the vulva, which is called cleaning the external female genitalia. Vulva hygiene is cleaning the vulva and the surrounding area in women who are postpartum. Vulva hygiene also aims to prevent infection, for healing perineal sutures and for perineal hygiene. The benefits of vulvar hygiene are to keep the vagina and the surrounding area clean and comfortable, prevent the appearance of vaginal discharge, unpleasant odor and itching and keep the vaginal pH normal. The appearance of a perineal infection can propagate in the bladder tract or in the birth canal, the infection not only inhibits the wound healing process but can also cause damage to supporting cells, so that it will increase the size of the wound itself, both length and depth of the wound.

Perineal wound care needs to be done properly, in addition to avoiding infection, proper care will also affect the duration of wound healing. The number of postpartum mothers who do not understand how to properly care for wounds requires more attention. In addition, there are habits in society that can worsen the condition of postpartum mothers, such as avoiding egg consumption and the habit of sitting on heated sand, which will also slow down the healing of maternal perineal wounds.

4. Conclusion

- a. The results showed that from 47 respondents (100%) the majority of respondents' knowledge about perineal wound care was sufficient, namely 17 people (36.2%).
- b. The results showed that of 47 (100%) postpartum mothers who experienced perineal injuries, the majority of respondents' perineal wound healing was fast, as many as 29 people (61.7%).
- c. The results of the study showed that there was a statistically significant relationship between mother's knowledge about perineal wound care and perineal wound healing in Limapuluh Subdistrict, Lima Puluh Tahun 2021. Where the results of the Chi-Square (Pearson Chi-Square) test at a 95% confidence level resulted in P value 0.000 ($P < 0.05$) where H_0 is rejected and H_a is accepted.

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