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The Influence of Effleurage Massage Techniques in Overcoming Afretpain in the Public Practice of Sulistiawati Pekalongan East Lampung

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^{1,2,3} Faculty of Health, Universitas Aisyah Pringsewu, Lampung Indonesia Eviyuzana@gmail.com **Abstract:** The puerperium often experiences a physiological change, such as uterine contractions, which cause afterpains. Pain during the puerperium can occur in normal labor or with complications, causing discomfort for the mother during the puerperium.

In non-pharmacological therapy, clients are usually given therapy such as massage. Complementary midwifery care with massage effleurage technique is one of the non-pharmacological therapies that can treat postpartum pain. Massage effleurage can provide a feeling of comfort, cause relaxation, and stimulate the release of endorphins which can relieve pain during the puerperium. This study aims to determine the effect of overcoming massage effleurage techniques in postpartum pain. The data collection method of this research uses case studies and descriptive methods using the library and case study techniques, observations, and interviews.

The results showed that there was a decrease in pain intensity in postpartum women before effleurage massage was performed on 2 postpartum mothers with moderate pain to mild pain and 1 postpartum mother with severe pain to moderate pain. From the results of the study, it can be concluded that non-pharmacological therapy through massage effleurage techniques can overcome postpartum pain, thereby reducing discomfort in postpartum mothers.

Key words: non-pharmacological therapy, postpartum pain, massage effleurage.

INTRODUCTION

The pain of contractions is not only experienced during the labor process; pain is also felt during the puerperium, this pain. The postpartum is a period that lasts for about six weeks, starting after the birth

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of the placenta and ending when the uterine devices return to their pre-pregnancy state. One of the physiological changes experienced by postpartum mothers is uterine contractions. Uterine contractions occur physiologically and cause uterine contraction pain, which is called afterpains pain, which can interfere with the comfort of the mother during the postpartum period (Nugroho T. et al., 2014).

Complementary care that is used as an alternative for writers in overcoming or reducing postpartum pain is massage. According to Andarmoyo (2013). Pain can be alleviated through various treatment approaches, including both medication-based and non-medication-based methods. Non-medication-based therapies often involve techniques like massage, which can effectively reduce or eliminate pain without significant side effects. Among these techniques, effleurage massage is commonly used. Effleurage massage offers a soothing experience, promotes relaxation, and triggers the release of endorphins, leading to pain relief. When effleurage massage is performed, there is a pain barrier to uterine contractions because, at that time, The A Delta fibers act to close the "gate," preventing pain messages from reaching the cerebral cortex. Through counter-stimulation massage, these blocked pain messages are effectively stopped, resulting in a shift in the perception of pain. (Paurin, 2014).

Based on the results of a preliminary study conducted in September 2022 on 5 postpartum mothers, both primiparous, nulliparous, or multiparous, on the first day at PMB Sulistiawati. It was found that 3 out of 5 respondents (postpartum mothers) experienced pain on the first day, and 2 other respondents did not experience pain. The nature of the pain on the first day of the 3 respondents was the same, namely heartburn in the lower abdomen. With the NRS scale, 3 respondents experienced different pain intensities, 2 respondents with a score of 4-6 (moderate pain) and 1 respondent with a score of 7-10 (severe pain). This study aims to determine the effect of non-cohomological therapy through the provision of complementary care *massage effleurage* for pain during the puerperium.

Method

The method used in this study was a quasi-experimental design. Data collection in this study used case studies and descriptive methods using literature study techniques and case studies through observation and interviews. Data collection includes data focused on subjective data, namely data obtained based on client/patient perceptions of postpartum pain experienced by respondents (pre-test and post-test sheets), and objective data, namely data obtained from observations, observations, measurements, or physical examinations performed conducted on respondents.

Discussion

Pain is a subjective experience that can vary in intensity and duration. For example, contractions during the postpartum period can cause discomfort for the mother, including afterpains resulting from continuous relaxation of the uterus. These uterine contractions are a natural physiological process and can lead to pain that may disrupt the mother's comfort during the postpartum phase.

Complementary care that is used as an alternative for authors in overcoming or reducing postpartum pain is massage. This is in accordance with the opinion of Erindra Budi Cahyanto (2020) that complementary therapy is a treatment to treat an illness that is carried out as a complement to conventional medical treatment or as an alternative option in treating disease. Apart from conventional medical treatment. Complementary services are an option to minimize medical procedures during pregnancy or childbirth and postpartum. The massage effleurage technique used as a researcher's intervention in dealing with postpartum pain is in accordance with the opinion of Andarmoyo (2013) pain management can be approached through therapeutic measures, including both pharmacological and non-pharmacological interventions.

The intensity of pain during the puerperium (after paint) felt by respondents varied between moderate pain to severe pain. Pain calculations used by researchers use the NRS scale (numeric rating scale) or a

number scale. This is in accordance with Potter's theory (2015) that the NRS is a pain measurement scale that is easily understood by patients; in this study, the NRS pain scale was given different colors. Therefore, this NRS scale will be used as a research instrument.

Before being given non-pharmacological therapeutic interventions with massage effleurage techniques, there were 2 respondents with a score of 4-6 (moderate pain) and 1 respondent with a score of 7-10 (severe pain). Severe pain experienced by one respondent was a multiparous labor with a history of puerperal pain in previous deliveries. This is in accordance with the opinion of Cunningham (1995), who said that the intensity of pain is more severe in parity multiparas due to relaxation and strong contractions that are intermittently repeated periodically, and the elasticity of the uterine muscles begins to decrease with the number of pregnancies and deliveries so that the involution process is longer and cause pain during the puerperium.

The level of intensity of postpartum pain before the intervention was carried out in the original respondents 2 respondents experienced moderate pain with a score of 6; after the massage effleurage technique intervention on the first day, the pain was reduced to a score of 3 (mild pain), and 1 respondent with severe pain a score of 7 after technical intervention massage effleurage pain reduced to a score of 5 (moderate pain). This is in accordance with the results of a study by Parulilian et al. (2014), which stated that massage effleurage could provide a feeling of comfort, cause relaxation, and stimulate the release of endorphins that can relieve pain. When effleurage massage is performed, there is pain inhibition of uterine contractions because, at that time, the A Delta fibers function by closing the gate, preventing pain messages from reaching the cerebral cortex. Through the application of counter-stimulation massage, these blocked pain messages are intercepted, resulting in a potential alteration of pain perception.

Effleurage massage techniques using fingers and palms that touch the body (lower abdomen above the symphysis) can slowly increase muscle relaxation, provide a feeling of comfort, warm the abdominal muscles, and stimulate endorphins so as to reduce postpartum pain. This is in accordance with Parulian's research (2014), the implementation of the effleurage massage technique using the fingers and with a fixed/constant (non-interrupted) frequency. The steps used in doing effleurage massage are:

- a. Position the client sleeping in a supine position and place a pillow under the knees with the aim of keeping the stomach relaxed during the effleurage massage.
- b. Pour 3-4 drops of oil on your palms and smooth it out
- c. Perform massage on the client's abdomen; both palms make light, firm and constant strokes with a circular motion pattern around the abdomen, starting from the lower abdomen above the symphysis pubis, pointing to the side of the mother's abdomen, continuing to the fundus uteri then descending to the umbilicus and returning to the lower abdomen below above the symphysis pubis. The shape of the movement pattern is like a butterfly.
- d. Repeat the movement for 3-5 minutes during the contraction

Conclusion

Based on the results of research on the effect of the effleurage massage technique on reducing the pain scale experienced by postpartum women at BPM Sulistiawati, it can be concluded that midwifery services during the puerperium developed by researchers on respondents Mrs. E, Mrs. H, and Mrs. M are the effleurage massage technique as complementary care in reducing pain caused by uterine contractions (uterus involution).

The intensity of pain felt by respondents varied from moderate pain (in Mrs.E and Mrs.H) to severe pain in (Mrs.M). The effleurage massage technique had a significant effect on 3 respondents in

reducing the postpartum pain scale. The results showed that there was a decrease in pain intensity in respondents before effleurage massage was carried out. From 2 respondents with moderate pain (4-6), after the massage effleurage technique became mild pain (1-3), and 1 respondent with severe pain (7-10) became moderate pain (4-6).

Suggestion

1. For PMB Sulistiawati

It is hoped that it can provide complementary midwifery care with the massage effleurage technique in reducing pain, especially in the delivery room during postpartum observations, and teach this technique to postpartum mothers and their families to carry out therapy independently at home.

2. For the Midwife Profession

So that the entire midwifery profession will be able to develop further comprehensive midwifery care based on the existing evidence base and apply complementary care therapies, the massage efflurage technique is an alternative non-pharmacological therapy that can be used to reduce pain in postpartum women.

3. For postpartum mothers

subject order(postpartum mothers) and the community can add insight and knowledge and provide maximum assistance, provide moral support by playing a role in reducing pain in postpartum mothers through the effleurage massage technique because this effleurage massage technique is safe to do anytime and by anyone, this technique is very effective in reducing pain intensity.

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