

Conference Paper

The Influence of Oketani Massage on Increasing Breast Milk Production in Post Partum Women in The Working Area of The Tanjung Uncang Community Health Center

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ABSTRACT

Breast milk is a mixture of fat within a solution of protein, lactose, and inorganic salts produced by the mother's mammary glands post-delivery as nourishment for the baby. According to the scientific perspective, exclusive breastfeeding helps prevent infant mortality, decrease the incidence of illness, boost immunity, lower allergy risks, promote growth and development, enhance cognitive skills, and offer emotional bonding. Breastfeeding is regularly ruined by different issues experienced by the mother, such as deficient breast drain generation, breast boil, mastitis, breast engorgement, areola issues, and blocked drain channels. The Effect of Oke Tani Massage on Increasing Breast Milk Production in Postpartum Women in the Tanjung Uncang Community Health Center. This type of research is Quasi-Experimental Research with a Pretest post-test nonequivalent Control Group Design, namely by comparing breast milk production in 12 postpartum mothers in the experimental group and 12 postpartum mothers in the control group. In the experimental group, oke tani massage treatment will be given. The results of the independent sample T-test statistical test show a Sig value. (2-tailed) $0.001 < 0.05$ means that there is an influence of Oke Tani Massage on increasing breast milk in postpartum mothers in the Tanjung Uncang Community Health Center working area, Batam City. The recommendations from this study offer a safe and effective option for boosting breast milk supply in postpartum mothers and can be explored by anyone.

Keywords: Postpartum mother, oketani massage, breast milk production

Introduction

Breast drain could be a blend of fat in a fluid containing protein, lactose, and inorganic salts created by the mother's mammary organs postpartum for newborn child nourishment (Cho et al., 2012). Breast milk offers defense against chronic infections and contributes to the development of cognitive, sensory, and motor skills (Machmudah & Nikmatul Khayati, 2014). In addition, babies are exclusively fed breast milk, without being given any other type of food or drink. Exclusive breastfeeding, starting from newborns until 6 months old (Sudargo & Kusmayanti, 2021). The scientific view is that exclusive breastfeeding helps prevent children from dying from diseases, reduces the risk of illness, increases immunity, reduces the risk of allergies, and increases growth and development. Children's development, improving cognitive and emotional abilities. Exclusive breastfeeding benefits mothers by decreasing maternal body fat, preventing cancer, being more cost-effective and emotionally rewarding, guarding against osteoporosis, decreasing bleeding, and acting as a natural form of contraception (Sudargo & Kusmayanti, 2021). Factors influencing breast milk production encompass nutrition, mental and spiritual well-being, contraceptive use, breast maintenance, breast structure, physiological aspects, sleep habits, infant's weight at birth, gestational age, smoking, and alcohol intake (Rini & Kumala, 2016).

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Psychological factors to consider involve the postpartum woman's adaptation to physical changes which can impact lactation (Sembiring, 2019).

Breast care is done to enhance blood flow and avoid obstructions in the milk ducts, helping with the flow of breast milk. Lactation massage, such as oxytocin massage, arugaan massage, market massage, and oketani massage, is a method for boosting breast milk production (Sari & Syahda, 2020). Oketani massage triggers the release of prolactin and oxytocin hormones. Prolactin hormone is in charge of producing breast milk, whereas oxytocin hormone is responsible for releasing breast milk. Oketani massage will help the mammary glands mature and expand, leading to an increase in the number of milk glands and the production of breast milk. During an oketani massage, the breasts will become softer and more flexible while the areola and nipples will become firmer and more elastic. The whole breast becomes more pliable, resulting in improved quality of breast milk, as a result of increases in solids content, fat concentration, and gross energy (Academy of Breastfeeding Medicine, 2004).

Material and Methods

This type of research is Quasi-Experimental Research or quasi-experimental research. Quasi-Experimental Design used in this research is the Pretest Posttest Nonequivalent Control Group Design, namely design that provides a pretest before being subjected to treatment, as well as a posttest after being subjected to treatment in each group. The sampling technique used in this research is a non-probability Sampling technique Purposive Sampling is a technique for determining samples using certain considerations with a sample size of 24 postpartum mothers. The measuring instrument used in this research is a pump Breast milk, watch, SOP, and observation sheet containing age, address, and the results of measuring breast milk production before and after it was carried out oketani massage.

Results and Discussion

Table 1. Frequency distribution of breast milk production in postpartum mothers before the oketani massage

No	Oketani Group		
	Produksi ASI	Before	
		<i>F</i>	%
1	Less (<250 ml)	5	33,3
2	Normal (250-400 ml)	9	60,0
3	More (>400 ml)	1	6,7
	Total	15	100

Based on table 1, shows that the majority of breast milk production of postpartum mothers in the Oketani massage was normal (250-400 ml) in as many as 9 postpartum mothers (60%) and a small portion was more (>400 ml) as many as 1 postpartum mother (6.7%).

Table 2 Frequency distribution of breast milk production in postpartum mothers after oketani massage

No	Oketani Group		
	Produksi ASI	After	
		<i>F</i>	%
1	Less (<250 ml)	0	0,0
2	Normal (250-400 ml)	12	80
3	More (>400 ml)	3	20
	Total	15	100

Based on Table 2, it shows that the majority of postpartum mothers' breast milk production after being given an oketani massage was normal (250-400 ml) as many as 12 postpartum mothers (80%) and a small portion was more (>400 ml) as many as 3 postpartum mothers (20%).

Table 3. The influence of oke tani massage on increasing breast Milk Production in Public Women

Variable Dependent	Variable Independent	Mean	N	Std. Deviation	t	Sig. (2-tailed)	Lower	Upper
Produksi ASI	Oketani	351,33	15	65,451	3,634	0,001	32.291	115.709
	Kontrol	277,33	15	43,991				

The results of the independent sample T-test statistical test show that the Sig. (2-tailed) 0.001 < 0.05. There is a difference in the average breast milk production in the group oketani massage (351.33) and the group control (277.33) in postpartum mothers. Analysis results in the data obtained p-value 0.000 < α (0.05), this concludes that there is a significant increase in the volume of breast milk production before and after the intervention. The results showed that the pre-test results showed that there were 5 (33.3%) postpartum mothers with breast milk production <250 ml, after treatment there were no postpartum mothers with breast milk production <250ml (0%). The results of the independent sample T-test statistical test show a Sig value. (2-tailed) 0.001 < 0.05 means that there is an influence of Oke Tani Massage on increasing breast milk in postpartum mothers in the Tanjung Uncang Community Health Center, Batam City.

The findings align with the study conducted (Yasni & Sasmita, 2020) on the effects of coconut massage on postpartum mothers' breast milk production. According to Machmudah and Khayati, (2014), oketani massage is more effective than other breast massages, particularly for postpartum mothers. Oketani can enhance the pectoralis muscle's strength, which results in increased breast milk production and softer, more elastic breasts, facilitating easier breastfeeding for babies. Oketani massage can enhance overall comfort and relief in individuals, boosting breast milk quality, preventing sore nipples and mastitis, and addressing lactation issues from flat or inverted nipples.

Conclusion

The results showed that the pre-test results showed that there were 5 (33.3%) postpartum mothers with breast milk production <250 ml, after treatment there were no postpartum mothers with breast milk production <250ml (0%). There's an impact of oketani massage on breast drain volume in postpartum mothers.

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