The Relationship Of Breast Care During Antenatal Care With The Following Of Breast Milk In Breastfeeding Mothers In The Clinic Self Practice Of Indah Suryawati Midwifery Binjai Timur Binjai City 2020

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Abstract. Breast care is a necessity for mothers who have just given birth and a very important action to facilitate the release of breast milk. Breast care, often called Breast Care, aims to maintain breast hygiene, increase or facilitate the release of breast milk so that there is difficulty in breastfeeding the baby. Breast care is done by massage. Expenditure of breast milk is said to be smooth if excessive milk production is marked by the milk will drip and will radiate profusely when sucked by the baby. The type of research used is a chis-square test with a cross-sectional study design. Sampling was carried out by Total Sampling with a total of 30 people. In sampling, inclusion and exclusion criteria are needed to reduce the risk of bias. Based on the results of the chi-square test (p.value) showing the chi-square count which is smaller than the chi-square table, it can be concluded that Ho is rejected and Ha is accepted at a 5% significance level. So there is a relationship between breast care during antenatal care on smooth breastfeeding in breastfeeding mothers at the Kuala Subdistrict Clinic, which is significant with a significance level of $(\acute{\alpha})$ 5% degrees of freedom (df) 2 and n=30. It is recommended to the public, especially pregnant and lactating women, to carry out breast care to increase the smooth flow of breast milk and to follow counseling and advice from health workers.

Keywords: Breast Care, Smooth Breastfeeding

INTRODUCTION

Breast care is a necessity mother who had just given birth and a very important action to facilitate breastfeeding expenditure. (Anonymous, 2011). The main change that occurs on the second day after giving birth is that milk production begins to peak, so that breast enlargement will occur. The problem that often arises is breast swelling, if not treated immediately, it will result in inflammation or mastitis (Jenny, 2010).

According to WHO (World Health Organization) as a world health organization, explains that the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) in Indonesia are still high compared to ASEAN countries. The average maternal mortality rate in the world reaches 400,000 per 100,000 live births. Globally, the rate of exclusive breastfeeding for infants 0-6 months is still low (WHO, 2013)

According to the Minister of Health, in 2012 the coverage of exclusive breastfeeding in India reached 46%, in the Philippines 34%, in Vietnam 27% and in Myanmar 24%. In 2006, WHO issued Child Growth Standards which emphasized the importance of breastfeeding for infants from birth to 6 months of age. In Indonesia, breastfeeding without other food for babies is called exclusive breastfeeding in 2011 which is 61.5%. Meanwhile, in 2012 there was a decrease of 48.6% (Kemenkes RI 2012).

According to data from the Indonesian Health Profile in 2012, the percentage of breastfeeding coverage in Indonesia was 48.6%. Giving percentageThe highest breastfeeding rate was in the province of West Nusa Tenggara at 69.84% and Central Java was the 6th lowest at 34.38% (Dinkes, 2013).



Mother's Milk (ASI) is the best food for babies which has three aspects that play an important role in brain development and intelligence, including nutritional aspects, immune aspects and psychological aspects. However, nowadays the milk produced by breastfeeding mothers, especially for mothers who are experiencing it for the first time (primiparous mothers) tends to be little or no. This is due to a lot of breast milk that fills the breast so that the production speed will decrease.

The decrease in breast milk production in the first days after giving birth can be caused by a lack of stimulation of the hormones prolactin and oxytocin which play a very important role in the smooth production of breast milk. Similarly, research conducted by Blair (2003) showed that in 95 postpartum mothers who breastfeed their babies, it was found that their milk production decreased if the baby's sucking stimulation decreased (Suherni, Widyasih, &Rahmawati, 2009).

The results of research conducted by Sholichah in 2011 with the title "The relationship between breast care in post partum mothers and the smooth production of breast milk in Karang Duren Village, Southeast District, Semarang Regency" that the results of this study indicate a relationship between breast care in post partum mothers and the smooth discharge of breast milk. IN Karang Duren Village, Southeast District, Semarang Regency with P = 0.007 (Sholichah, 2011).

Considering that there have been many behavioral changes in society, especially mothers who tend to refuse to breastfeed their own babies, especially working mothers on the grounds that little or no milk comes out, this situation has a negative impact on health status, nutrition, and intelligence level. child. Therefore, to overcome the above problems, it is necessary to carry out preventive and promotive efforts in increasing the use of breast milk by providing health education about breast care for breastfeeding mothers, thus helping to express breast milk. smoothly (Prasetyono, 2009).

Breast care, often called Breast Care, aims to maintain breast hygiene, increase or facilitate the release of breast milk so that there is difficulty in breastfeeding the baby. Breast care is done by massage (Anggraini Y, 2010).

Based on the results of a preliminary study in March 2016 at the Independent Practice Clinic of Midwife Indah Suryawati, East Binjai District, Binjai Municipality, there were 30 breastfeeding mothers. There are 60% of them do not do breast care. Based on the above phenomenon accompanied by available data and facts, the researcher is interested in conducting research with the title "the relationship of breast care during antenatal care to smooth breastfeeding in breastfeeding mothers at the Independent Practice Clinic of Midwife Indah Suryawati, East Binjai District, Binjai Municipality in 2020.

METHOD

The type of research used is a chis-square test with a cross-sectional study design. The purpose of the research is to determine the relationship between breast care during antenatal care and the smoothness of breastfeeding in breastfeeding mothers at the Independent Practice Clinic of Midwife Indah Suryawati, East Binjai District, Binjai Municipality in 2020.

The study was carried out in a clinic with the consideration that the Kuala Subdistrict clinic had the number of samples desired by the researcher. The time of the study was carried out in March 2020 - July 2020. The population in this study were all breastfeeding mothers at the Independent Practice Clinic of Midwives Indah Suryawati, totaling 30 people. Sampling was done by Total Sampling with a total of 30 people. The data collection method used in this study is to use a questionnaire or questionnaire. The data that has been obtained is then analyzed with univariate data in the form of a frequency distribution and to find the relationship between the two variables using the chi-square test with a 95% confidence level and presented in the form of tables and narratives.



RESULT

The results of the study on the relationship of breast care during antenatal care to smooth breastfeeding in breastfeeding mothers at the Midwife Indah Suryawati Independent Practice Clinic, East Binjai District, Binjai Municipality in 2020. Categorical data were analyzed and the results were in the form of percentages. Table 1 follows:

Univariate Analysis

Table 1. Frequency Distribution of Respondents Based on Breast Care at the Independent Practice Clinic of Midwife Indah Suryawati, East Binjai District, Binjai Municipality in 2020 (n = 30)

N	Breast Care	f	Persentase
0			(%)
1	Good	5	16.7
2	Enough	13	43.3
3	Not Enough	12	40.0
	Total	30	100.0

Based on table 4.2 the majority of breast care is sufficient as many as 13 (43.3%), and the minority of good breast care is 5 people (16.7%)

Table 2. Frequency Distribution of Respondents Based on Smooth Breastfeeding at the Independent Practice Clinic of Midwife Indah Suryawati, East Binjai District, Binjai Municipality in 2020 (n = 30)

No	Smooth Breastfeeding	f	Persentase
			(%)
1	Smooth Breastfeeding	5	16.7
2	Non-Current Breastfeeding	25	83.3
	Total	30	100.0

Based on table 4.3 The majority of smooth breastfeeding, 25 non-current breastfeeding (83.3%), and the minority of smooth breastfeeding as many as 5 people (16.7%)

Bivariate Analysis

From table 4.3. it is known that, from 30 people with good breast care and smooth breast milk, as many as 5 people (16.7%), adequate breast care and not smooth breast milk, as many as 13 people (43.3%), lack of breast care and not smooth breast milk, as many as 12 people. (40.0%).

Based on the results of the chi-square test (p.value) showing the calculated chi-square (sig-2 tailed) = 0.017 which is smaller than = 0.05, it can be concluded that Ho is rejected and Ha is accepted at a 5% significance level. So there is a relationship between breast care during antenatal care on smooth breastfeeding in breastfeeding mothers at the Independent Practice Clinic of Midwife Indah Suryawati, East Binjai District, Binjai Municipality in 2020 which is significant with a significance level of ($\acute{\alpha}$) 5% degrees of freedom (df) 2 and n=30.

DISCUSSION

From the results of the study, it showed that breast care was adequate and breast milk was not smooth, as many as 13 people (43.3%) had non-fluent breast milk. So it can be concluded that mothers who do breast care lack the smooth flow of their milk that is not smooth, greater than the smooth flow of breast milk. This is because many mothers complain that their babies don't want to breastfeed, this



can also be caused by technical factors, breast milk is also affected by nutritional intake, which can be met with an additional 500 kcal per day of calorie intake, especially protein-rich nutrients (fish, eggs, liver), calcium (milk) and vitamins (milk, fruit). Also, drink lots of water. While psychological factors by creating a relaxed and comfortable atmosphere, not in a hurry and not stressed when feeding a baby (Saryono and Pramitasari, 2008).

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Some of the causes of breast milk do not want to come out mostly because of psychological factors. If it was originally intended and believed to give breast milk, surely milk will also come out. Lack of preparation, stress on the mind, or unwillingness for various reasons, will hinder the release of milk. But, in general, the problem of not coming out or the inhibition of milk is due to two things: the milk is full and the milk ducts are blocked. This can be seen from the question item compressing both nipples with soap and using a bra that supports the breasts.

According to Saryono and Pramitasari (2008), during pregnancy, breast size increases due to the increase in milk ducts, as a preparation for lactation. The condition of the breasts will usually change after three days after giving birth. But that does not mean there is no way to make the breasts still look beautiful and firm. Especially after childbirth and while breastfeeding. Besides looking beautiful, breast care that is done properly and regularly will make it easier for your little one to consume breast milk. This maintenance can also stimulate the release of breast milk and reduce the risk of injury while breastfeeding. The wrong breastfeeding technique will affect the shape of the breast. Physiologically, breast care by stimulating the breasts will affect the pituitary to secrete more progesterone and estrogen hormones and the oxytocin hormone by stimulating the milk glands through massage (Ambarwati and Wulandari, 2006).

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SUGGESTION

1. For mother

The community, especially pregnant and lactating women, should carry out breast care to increase the smooth flow of breast milk and follow counseling and advice from health workers.

2. For Health Workers

To prepare postpartum mothers during breastfeeding, a good effort is needed, it is hoped that

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