



## Midwifery Care for Mothers with Hemorrhoids

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### ABSTRACT

Women die from complications during pregnancy, childbirth and the puerperium. Most of these complications develop during pregnancy. Other complications may be present before pregnancy but worsen during pregnancy. The main complications that cause 80% of all maternal deaths are severe bleeding, postpartum infection, high blood pressure during pregnancy (preeclampsia and eclampsia), and unsafe abortion (WHO, 2019). The purpose of this study was to determine the possibility that occurs if pregnant women with grade IV hemorrhoids give birth vaginally. The method used in this research is descriptive research in the form of case study. Results: based on data collection, it was found that respondents suffered from grade IV hemorrhoids where in most cases pregnant women with grade IV hemorrhoids would have sectio caesarea surgery to reduce pressure pain when the mother pushes. Conclusion: Hemorrhoids are not too dangerous, both for the mother and the fetus, but when the doctor has entered the fourth degree, it is more advisable to do a cesarean section to reduce pressure pain when the mother pushes.

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### Kata kunci:

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### ABSTRAK

Wanita meninggal akibat komplikasi selama kehamilan, persalinan dan nifas. Sebagian besar komplikasi ini berkembang selama kehamilan. Komplikasi lain mungkin ada sebelum kehamilan tetapi memburuk selama kehamilan. Komplikasi utama yang menyebabkan 80% dari semua kematian ibu adalah Pendarahan hebat, infeksi pasca melahirkan, tekanan darah tinggi selama kehamilan (preeklamsia dan eklamsia), dan aborsi tidak aman (WHO, 2019). Tujuan dilakukannya penelitian ini adalah untuk mengetahui kemungkinan yang terjadi jika ibu hamil dengan hemoroid derajat IV melahirkan secara pervaginam. Metode yang digunakan dalam penelitian ini yaitu penelitian deskriptif berupa penelaan kasus (case study). Hasil: berdasarkan pengumpulan data yang ditemukan responden menderita hemoroid derajat IV dimana pada kebanyakan kasus ibu hamil dengan hemoroid derajat IV akan dilakukan operasi sectio caesarea untuk mengurangi nyeri tekanan pada saat ibu mengejan. Kesimpulan: Hemoroid tidak terlalu membahayakan, baik bagi ibu maupun janinnya, namun ketika sudah masuk derajat IV dokter lebih menyarankan untuk dilakukan operasi sectio caesarea untuk mengurangi nyeri tekanan pada saat ibu mengejan.

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## INTRODUCTION

The high MMR in several regions of the world reflects inequities in access to health services, and highlights the gap between rich and poor. Nearly all maternal deaths (94%) occur in low- and lower-middle income countries, and nearly two-thirds (65%) occur in the African Region (WHO, 2019). Women die from complications during pregnancy, childbirth and the puerperium. Most of these complications develop during pregnancy. Other complications may be present before pregnancy but worsen during pregnancy. The main complications that cause 80% of all maternal deaths are severe bleeding, postpartum infection, high blood pressure during pregnancy (preeclampsia and eclampsia), and unsafe abortion (WHO, 2019). Therefore, it is important to overcome various problems and detect early the risk of complications in mother and baby which is the basis for doing care.

One of the risk factors that prevent pregnant women from giving birth vaginally is caused by hemorrhoids. The number of sufferers of hemorrhoids or (hemorrhoids) worldwide is about 230 million people. It is stated that hemorrhoids suffer from 5% of the world's population. Even on rectal examination it was found that 2/3 of the healthy population suffer from symptomatic hemorrhoids. Hemorrhoids (hemorrhoids) are also found in 50% of people over 50 years of age. Hemorrhoids (hemorrhoids) are common in both men and women (Layla Fadhila Rangkuti, 2020). Hemorrhoids are not too dangerous, both for the mother and the fetus. Although often bleeding from the rectum, it will not transmit disease to the fetus because hemorrhoids are not directly related to the fetus coming out of the vagina. The mother will experience discomfort so that daily activities will be disrupted and will not carry out her pregnancy comfortably due to the pain she feels. The danger of hemorrhoids in pregnant women is the occurrence of bleeding which can lead to anemia. But hemorrhoids are not a barrier for pregnant women who want to give birth normally even though they are in the third degree, but when they have entered the fourth degree, doctors prefer to do sectio caesarea surgery to reduce pressure pain when the mother pushes. In most women, hemorrhoids caused by pregnancy are temporary, meaning they will disappear sometime after delivery (Carolina et al., 2018)

## METHOD

This study uses a descriptive research method, just a case study.

## RESULTS AND DISCUSSION

### Result

In the case of Mrs. L.I. Based on data collection, it was found that respondents suffered from grade IV hemorrhoids where in most cases pregnant women with grade IV hemorrhoids would have sectio caesarea surgery to reduce pressure pain when the mother pushes. This is in line with research conducted by (Carolina et al., 2018) that mothers who have hemorrhoids experience discomfort so that daily activities are disrupted and do not carry out their pregnancy comfortably due to the pain they feel. Although hemorrhoids

are not too dangerous, both for the mother and the fetus, pregnant women who already have a history of hemorrhoids choose to perform a caesarean section so that the hemorrhoidal condition they suffer does not interfere with the delivery process later. Therefore, delivery by cesarean section is an option in the delivery procedure to prevent complications, both maternal and neonatal.

## Discussions

### Definition of Hemorrhoids

Hemorrhoids or better known as hemorrhoids or piles, are not a pathological condition (abnormal), but if they start to cause complaints, immediate action must be taken to overcome them. Hemorrhoids from the words "haima" and "rheo". In medical terms, it means dilation of the veins (veins) in the hemorrhoidal plexus in the anal area (Suprijono, 2019). Hemorrhoids are classified into external hemorrhoids, internal hemorrhoids, and a combination of external and internal or mixed hemorrhoids (Carolina et al., 2018).

### Etiology and risk factors

The exact cause of hemorrhoids is unknown, chronic constipation and straining to defecate can play an important role. Continuous straining and hard bowel movements cause enlargement and secondary prolapse of the hemorrhoidal vascular bed. With continued straining, the blood vessels become progressively dilated and the submucosal tissue loses its normal attachment to the underlying internal sphincter, leading to the classic, bleeding hemorrhoidal prolapse. Other factors that because hemorrhoids are: pregnancy, obesity, low-fiber diet, and venous congestion caused by impaired backflow from the hemorrhoidal veins (Carolina et al., 2018).

### Classification of hemorrhoids

#### 1. External Hemorrhoids

External hemorrhoids are classified into acute and chronic forms, namely:

- a. Acute external hemorrhoids. The acute form is a round, bluish swelling at the anal margin and is actually a hematoma.
- b. Chronic external hemorrhoids. Also called skin tags, in the form of one or more skin folds consisting of connective tissue a few blood vessels. Often a continuation of thrombosed external hemorrhoids.

#### 2. Internal hemorrhoids

Internal hemorrhoids may prolapse and bleed, sometimes becoming very painful if they progress to thrombosis and necrosis (usually severe prolapse, incarceration and/or strangulation). Internal hemorrhoids according to the degree of prolapse are classified into 4 degrees, including:

- a. Degree I
  - 1) There is fresh red bleeding in the rectum after defecation
  - 2) Without pain
  - 3) There is no prolapse

- 4) On anoscopy examination, seen the beginning of hemorrhoidal lumps that protrude into the lumen.
- b. Grade II
  - 1) There is bleeding or no bleeding after defecation
  - 2) Hemorrhoidal prolapse occurs which can enter itself (spontaneous repositioning).
- c. Grade III
  - 1) There is bleeding or no bleeding after defecation
  - 2) Hemorrhoidal prolapse occurs that cannot enter itself, so it must be pushed with a finger (manual repositioning).
- d. Grade IV
  - 1) There is bleeding after defecation
  - 2) Hemorrhoidal prolapse occurs that cannot be pushed in, even though it has been repositioned and will come out again.

#### Effect of hemorrhoids on pregnancy

In pregnancy, due to the influence of increased sex hormones and increased blood volume, causing dilation of the veins in the rectal area. The increase in the hormone progesterone in pregnant women will cause peristalsis of the digestive tract to slow down and the muscles to relax, as well as relaxation of the anorectal venous valves, which will result in constipation which will aggravate the venous system. Likewise, due to the suppression of the fetus in the uterus on the veins in the pelvic area will result in damming. Coupled with straining to defecate that often occurs in pregnant women because constipation will cause hemorrhoidal prolapse (Carolina et al., 2018).

#### Hemorrhoid Management

Hemorrhoids that do not because complaints do not require special treatment, except for the preventive measures mentioned above. After delivery, uncomplicated hemorrhoids will shrink on their own. The management of hemorrhoids consists of non-surgical therapy and surgical therapy (Carolina et al., 2018). Hemorrhoids can be prevented by drinking enough water, eating lots of vegetables, and lots of fruits, so that the stool does not harden. If you eat a lot of foods that contain fiber and drink lots of water, it can facilitate defecation, besides that your kidneys will be healthy. In addition, hemorrhoids can be prevented by doing enough exercise, sitting not too long and not standing too long (Suprijono, 2019).

#### CONCLUSIONS

Hemorrhoids are not too dangerous, both for the mother and the fetus, but when the doctor has entered the fourth degree, it is more advisable to do a cesarean section to reduce pressure pain when the mother pushes.

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