



The effect of hypnopressure on length of labor at I-II stage in primigravida, is it possible?

Yeni Rahma Sari^{1*}, Soeharyo Hadisaputro², Sri Achadi Nugraheni³

¹Poltekkes Kemenkes Semarang/ Semarang, Indonesia

²Poltekkes Kemenkes Semarang/ Semarang, Indonesia

³Fakultas Kesehatan Masyarakat Universitas Diponegoro/ Semarang, Indonesia

*Corresponding Author: Yeni Rahma Sari

Email id: yenisari78e@gmail.com

ABSTRACT

Background

The maternal mortality rate in the Central Java area of 0.30% is caused by the incidence of prolonged labor. One of the causes is that in the first stage of labor there are often obstacles or constraints which are caused by irregular contractions and the frequency of uterine contractions as well as the duration of inadequate uterine contractions so that the time of the first and second stages of labor is prolonged.

Objective

To determine the effect of the combination of hypnosis with acupressure at points LI4, SP6 and BL67 on the length of time I and II of labor in primigravida.

Methods

The design of this study used true experiments pretest-posttest with controlled group design. The study population was primigravida mothers inpartu in the area of Semarang City Health Center. The number of samples were 30 primigravida mothers in their mothers with a full-term gestational age, consisting of 15 hypnopressure groups and 15 control groups. Analysis data used Independent t- tests.

Results

There was a significant difference after being given treatment between the experimental groups compared with the control group. The results obtained p-value of 0,000 ($\alpha < 0.05$). Shortening of stage I and II in the hypnopressure group was 320.07 minutes shorter than in the control group 548.20 minutes.

Conclusions and Recommendations

There is an effect of giving hypnopressure to shortening the duration of labor when I-II (p-value < 0.05). Hypnopressure can shorten the length of labor in stage I and II in primigravida. Hypnopressure technique can be used as an alternative intervention for first and second stage of labour process mothers.

Keywords : Old parturition, Hypnopressure, Duration of labor stage I and II

INTRODUCTION

According to the results of the World Health Organization (WHO) report in 2014 the world maternal mortality rate (MMR) amounted to 289,000 people. For Southeast Asia 16,000 people. [1] In 2015 the maternal mortality rate in Indonesia was recorded at 305 mothers per 100 thousand people. [6] The reduction in maternal mortality in Semarang district in the last 3 years has not been achieved as expected. The maternal mortality rate in 2015 was 120.34 / 100,000 live births, in 2016 it was 103.39 / 100,000 live births and in 2017 it was 111.83 / 100,000 live births. [2]

Old parturition is the last phase of a labor that has lasted a long time and did not progress so that complications arise in the mother, fetus, or both. The causes of long-standing parturition are complex, related to supervision during pregnancy and the management of childbirth assistance. The cause of congestion can occur due to his abnormality. The consequences of prolonged labor cause emergencies in the mother and fetus, where management is carried out by labor induction. [3]

Among the side effects of induction are uterine bleeding and tears (Ruptura Uteri), so that other handling efforts are needed to overcome and to minimize side effects, one of the treatments is by hypnopressure method. And the choice is made on primigravida mothers, most cases of old parturition or parturition occur. in primigravida mothers because in primigravida the birth process occurs for the first time so that there will be an adjustment of the fetus to the birth canal, the process of decline (engagement), rotation round to adjust to the middle of the pelvis, to the fetal expulsion process (ekpuls). [4]

Hypnopressure is a combination of giving positive suggestion when uterine relaxation and emphasis on points L14, SP6, BL67 when uterine contractions occur. This is done when the mother has entered the first phase of the active phase which is marked by the opening of the cervix 4 cm until the baby is born. [5]

Hypnosis is a technique or practice in influencing others to enter into hypnotic trance conditions. The state of focus is attention on certain physical objects or mental images that are characterized by increased suggestibility as an effect of cooperative attitude with others. Hypnosis is a condition that resembles sleep, which can be intentionally done to someone. Someone who is

hypnotized can answer the questions asked, and accept suggestions without resistance. Hypnosis is not a way of mastering one's mind, but the art of managing thoughts. [6]

Acupressure is an emphasis on a certain point (known as acupoint) by using the index finger and finger to stimulate the flow of energy in the meridian whose use is very safe and effective, easy to learn and also requires little time to apply it. [7] Acupressure increases hormone release from the hypothalamus in the system the anterior pituitary thus activates the hormone oxytocin to stimulate uterine contractions.(8, 9) So if labor is slow, inadequate contractions or a slowing of the cervix to enlarge, stimulation of the acupoint can help regulate contractions and also restore the balance of labor. This technique uses emphasis, massage, and sorting along the body's meridians or energy flow lines. This acupressure technique can reduce pain and make labor effective. [10]

The technique of administration, acupressure is given with 30 times the pressure at each point alternately when the uterus to contract. Acupressure techniques can cause endorphine release, block pain receptors to the brain, cause cervical dilatation and increase the effectiveness of uterine contractions. The acupressure method is an easy action, giving women strength during childbirth. [9]

In this study, both hypnosis and acupressure were carried out alternately according to the division of when hypnosis was given (when uterine relaxation) and when acupressure was given (when the uterus contracted), for 10 minutes of his observation time. Emphasis is given on the acupoint for 2-3 seconds and then released, repression is repeated up to 30 times or until the end of the uterine contraction phase. Repeated every 30 minutes during the first phase of labor in the active phase and carried out during the second stage until the baby is born. Acupressure increases hormone secretion from the hypothalamus in the anterior pituitary system there by activating the hormone oxytocin to stimulate uterine contractions. [8, 9]

METHODS

This research is a quantitative study with a True Experimental Design Pretest-Posttest with Control Group Design. A sample of 30 primigravida

mothers in labor in the Semarang City Health Center area were divided into two groups, among them 15 mothers were given hypnoprasure (intervention group) and 15 mothers in labor were given Normal Childbirth Care (control group), starting from the mother entering the first phase of active phase until with babies born.

RESULT

Table 1. Analysis of the Effects of Hypnoprasure on Lenght of Labor at I-II Stage in Primigravida after Treatment between Intervention Group versus Control Group

| Variable | Groups | Mean±SD | Mean Diff | Lower | Upper | p-value ^a |
|-------------------------------|--------------|--------------|-----------|--------|---------|----------------------|
| Lenght of labor at I-II stage | Intervention | 360,53±65,4 | -187,67 | -259,9 | -115,41 | 0,000 |
| | Control | 548,20±117,9 | | | | |

^aIndependent t-test

Based on Table 1 shows the results of the analysis of time I-II there were significant differences after being given treatment between the experimental group compared with the control group, the results obtained p-value of 0,000 ($\alpha < 0.05$). This can be proven by the difference in the duration of I-II in the intervention group is lower 360.53 minutes compared to the control group 548.20 minutes. From this analysis, it can be concluded that there is a shortening of the time of labor during the I-II period after being treated in the intervention group rather than the control group.

DISCUSSION

Hypnosis affects the mind where everything the body does is determined by the mind. Research relevant to research conducted by Hanum & Nelwatri (2017) states that, maternity women who are given hypnobirthing experience the second stage of labor which is shorter than those not given hypnobirthing. [11]

Acupressure techniques can cause endorphine release, block pain receptors to the brain, cause

DATA ANALYSIS

Before the bivariate analysis, the analysis prerequisite tests were carried out including normality test and homogeneity test. Bivariate analysis data used Independent t-test, which will be explained in the table below as follows:

cervical dilatation and increase the effectiveness of uterine contractions. This is relevant to the research conducted by this acupressure technique that can reduce pain and make labor effective [10]

CONCLUSIONS

Giving hypnoprasure to primigravida mothers in the first and second stages of the child, proves that there is an effect of hypnoprasure in shortening the time of the first and second stages of labor.

RECOMMENDATION

Hypnoprasure can be given as an alternative initial therapy in the delivery of labor in primigravida mothers in the active phase I and stage II labor to increase the production of oxytocin in labor and can shorten the length of labor in stage I and II. Other researchers can conduct research by starting research earlier, namely since the first stage of the latent phase.

REFERENCES

- [1]. World Health Organization (WHO). *Global Status Report On Alcohol And Health* [database on the Internet]. Unit Whomosa. 2014.
- [2]. Ministry of Health in Indonesia. *Rencana Strategis Kementerian Kesehatan Tahun 2015, 2015-2019*. Jakarta.
- [3]. Prawirohardjo S. *Ilmu Kebidanan*. 2010, 100-1.
- [4]. Mochtar R. *Sinopsis Ostetri fisiologi dan Patologi*. Jakarta: EGC. 2012.

- [5]. Zehner G. *Hypnopunktur-Akupunktur und Akupressur als wertvolle Ergänzung zur Hypnosezahnbehandlung- Ein Bericht aus der Kinderzahnarztpraxis. Deutsche Zeitschrift für Akupunktur.* 49(4), 2006, 10-6.
- [6]. Aprillia Y. *Hipnostetri: GagasMedia;* 2010.
- [7]. F.I.T, P. *Pengaruh Akupresur Pada Titik BL60, LI4, SP6 Terhadap Lamanya Persalinan Kala I dan APGAR Skor Pada Bayi Baru Lahir.* SEMARANG2018.
- [8]. Arifin L. *Teknik Akupresur Pada Persalinan.* 14, 2008.
- [9]. Calik KY KN. *Effects of SP6 Acupuncture Point Stimulation on Labor Pain and Duration of Labor. Iranian Red Crescent Medical Journal.* 16(10), 2014, 164-9.
- [10]. R.W, R. *Pengaruh Pijat Punggung Terhadap Nyeri Persalinan Fase Aktif Lama Kala II dan Perdarahan Persalinan pada Primigravida.* Journal FKM. 8(5), 2013, 206-8.
- [11]. Hanum H, Nelwatri H. *Hubungan Metode Hypnobirthing dengan Lama Persalinan di Bidan Praktek Swasta (BPS) Kabupaten Pasaman.* 2017.

How to cite this article: Dr. Ashwini Dessai, Dr. Neeta Shetty, Dr. Kundabala M. When Less Is More. Int J of Allied Med Sci and Clin Res 2019; 7(3): 921-924.

Source of Support: Nil. **Conflict of Interest:** None declared.