

INTERVENTION OF 5-FINGER HYPNOTIC RELAXATION TECHNIQUE IN COMPREHENSIVE MIDWIFERY CARE FOR FOR A MULTIPAROUS WOMAN WITH PREGNANCY-RELATED ANXIETY

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ABSTRACT

During the third trimester of pregnancy, women often experience various discomforts, including anxiety. One non-pharmacological treatment to alleviate this anxiety is the Five-Finger Hypnosis technique. At Clinic "A" in 2023, out of 143 pregnant women, 50 in the third trimester reported experiencing anxiety. This study aims to evaluate the effectiveness of midwifery care using the Five-Finger Hypnosis technique to reduce anxiety in third-trimester pregnant women. Data collection methods included interviews, observations, and documentation review. The subject of this study was Mrs. "L," a G1P0A0 patient at 35 weeks and 6 days of gestation, who reported anxiety during pregnancy. The results showed that comprehensive midwifery care was conducted normally without complications. Mrs. "L" received the Five-Finger Hypnosis intervention six times: on the first day of her clinic visit and again on the 3rd, 6th, 8th, 11th, and 14th days following her initial visit. After these sessions, her anxiety significantly decreased, and she reported feeling more comfortable and relaxed. This study concludes that comprehensive midwifery care, including the Five-Finger Hypnosis technique, was effective in reducing anxiety for Mrs. "L." Such care can be beneficial in minimizing potential complications during pregnancy, childbirth, the newborn period, postpartum, and contraceptive services.

Keywords: Anxiety, 5 finger hypnosis, Midwifery care

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INTRODUCTION

Pregnancy is a process that begins with meeting ovum cells and cells Sperm in the uterus, specifically in the fallopian tubes. After That the process of conception occurs and occurs nidation, later happen implantation in the uterine wall, specifically the lining edometrium that occurs on the day sixth and seventh after conception [1]. Pregnancy is an exciting and eagerly anticipated time, but it can also lead to feelings of restlessness and concern. Anxiety and stress are common issues that many women experience during pregnancy, which can have consequences for both the pregnancy itself and the child's development after birth [2].

Anxiety is one of the most common psychiatric disturbances during pregnancy, affecting more than 50% of pregnant women. Clinical anxiety can significantly increase the risk of postpartum depression. Various methods are available to evaluate anxiety, including the Hamilton Rating Scale for Anxiety (HARS), Visual Analog Scale for Anxiety (VAS-A), Zung Self-rating Anxiety Scale (ZSAS), State-Trait Anxiety Inventory (STAI), and the Face Scale. These tools assess anxiety levels through direct questioning and observation of facial expressions. Anxiety during pregnancy can have serious negative impacts on both the mother and the fetus. It can lead to elevated blood pressure, increasing the risk of preeclampsia and miscarriage, as well as low birth weight, premature birth, extreme fatigue, and uterine contractions. Anxiety can also intensify the pain experienced during childbirth, disrupt the psychological well-being of both the mother and baby, and, in severe cases, contribute to maternal mortality [3].

Globally, the World Health Organization reports that 10% of pregnant women and 13% of new mothers experience mental health issues like depression. In Indonesia, a survey conducted in West Java revealed that 21% of pregnant women showed signs of psychiatric disorders, including anxiety. Data from the Afifah Banjaran Clinic in 2023 indicated that out of 143 deliveries, around 50 mothers experienced anxiety during the third trimester of pregnancy. If left untreated, anxiety can have serious consequences during pregnancy, childbirth, and the postpartum period, including hemorrhagic shock, which remains a leading cause of maternal mortality in high-population countries. Various methods can help reduce anxiety, such as distraction, biofeedback, yoga, acupressure, aromatherapy, steam therapy, and hypnosis. Techniques like deep breathing, muscle relaxation, and laughter therapy can also be effective. Hypnosis, including the five-finger hypnosis technique, is a natural method to alleviate fear, panic, and tension. The five-finger hypnosis technique focuses on relaxation by embedding positive affirmations into the subconscious while combining deep breathing to reduce anxiety. This technique can stabilize hemodynamics, reduce sympathetic nervous responses, and help patients manage mild to moderate anxiety.

Five-finger hypnosis is a non-pharmacological therapy that helps patients reduce stress and improve their ability to relax in response to specific stressors. Studies, such as those by Marbun and Ranida (2024), have shown that five-finger hypnosis effectively reduces anxiety in pregnant women, with significant improvements in anxiety levels following the intervention. Based on data from Clinic "A," where 6 out of 10 pregnant women experienced anxiety during childbirth, the author decided to implement the five-finger hypnosis relaxation technique as part of comprehensive midwifery care for Mrs. L (G2P1A0) with pregnancy-related anxiety. This intervention is relatively new and has not yet been widely used in Clinic "A" to reduce anxiety during pregnancy.

METHOD

The research method employed is a case study, involving a comprehensive assessment and care plan that began when the pregnancy was at 35 weeks and 6 days and continued through to postnatal care. This case study approach was used to closely monitor and provide tailored care throughout the later stages of pregnancy. The research specifically focused on Mrs. "L," using a detailed case study design to understand and address her unique needs during this period. This approach allowed for a thorough evaluation of her condition and the implementation of appropriate midwifery care.

RESULT

During the third trimester, Mrs. "L" experienced anxiety-related discomfort in her pregnancy. To address this, she received a 5-finger hypnosis relaxation intervention, carried out six times over two weeks, starting at 38 weeks and 1 day of pregnancy. The intervention included lower pelvic muscle tightening exercises, performed for 3-5 seconds and repeated 10 times, with sessions held in the morning, afternoon, or evening each day. Care was initially provided in person, followed by continued exercises at home, with monitoring via WhatsApp. After two weeks of monitoring, Mrs. "L" reported a gradual improvement in her symptoms.

DISCUSSION

Mrs. "L" experienced discomfort and anxiety during the third trimester and was provided with counseling and the five-finger hypnosis technique, administered six times over 14 days. As a result, she reported reduced anxiety and increased comfort. During the first stage of labor, particularly in the latent phase, the five-finger hypnosis technique was again used to help Mrs. "L" feel more comfortable and less anxious. Throughout the labor process, when she felt the urge to push, she was guided on proper breathing techniques and encouraged to drink sweet tea between contractions, with her husband by her side for support. The second stage of labor progressed smoothly, as Mrs. "L" cooperated well with the midwife's instructions. However, despite these efforts, she experienced anxiety, leading to a first-degree perineal rupture that caused injury to the vaginal mucosa and perineal skin, requiring suturing under anesthesia.

The study also noted that Mrs. "L" rarely engaged in sexual intercourse with her husband during pregnancy. According to Mochtar, even though her age was within the normal range for pregnancy, a lack of regular exercise and sexual activity can increase the risk of perineal rupture. Additionally, a thin and less flexible perineum can contribute to this, making the birth canal more prone to tearing. Hastuti also suggests that anxiety and tension during childbirth, often driven by fear, can exacerbate the risk of perineal rupture.

CONCLUSIONS

Midwifery care for Mrs. "L" during her pregnancy was managed by a labor health midwife. She experienced discomfort and anxiety during the third trimester, which led to the implementation of a 5-finger hypnosis relaxation technique. This intervention was carried out twice daily over two weeks, involving pelvic muscle tightening exercises for 3-5 seconds, repeated 10 times in the morning, afternoon, or evening. The results indicated that Mrs. "L"'s symptoms gradually improved.

RECOMMENDATION

It is recommended that midwives incorporate Kegel exercises into their care plans for pregnant women, particularly to manage discomfort and issues such as frequent urination during the third trimester.

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