COMPREHENSIVE MIDWIFERY CARE FOR A PRIMIGRAVIDA WITH BACK PAIN

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ABSTRACT

During the third trimester of pregnancy, a woman will usually experience changes that will cause a lot of discomfort, one of which is back pain. This complaint can be overcome with nonpharmacological treatment, one of which is endorphin massage. Based on data at PMB "N" in 2023. out of 82 third trimester pregnant women, 73.58% experienced back pain discomfort. This study aims to determine midwifery care to reduce the intensity of back pain in third trimester pregnant women. Data collection methods with interviews, observations, and documentation studies. The subject of this midwifery care is Mrs. "A" G1P0A0 37 weeks gestation with complaints of back pain discomfort. The results showed that the comprehensive midwifery care carried out took place normally without any complication. During pregnancy, Mrs. "A" experienced back pain discomfort in the third trimester and was given endorphin massage care to relieve back pain. After the intervention was carried out 5 times, namely with the frequency of endorphin massage starting on the first day of the visit to the PMB and carried out again on day 3, day 5, day 6 and day 7 after the visit to the PMB, the back pain in Mrs. "A" decreased and she said she felt comfortable and more relaxed. It can be concluded comprehensive midwifery care in Mrs. "A" runs normally and effectively to overcome the discomfort experienced. This comprehensive midwifery care is expected to be applied to minimize complications that may occur during pregnancy, childbirth, newborn, postpartum to contraceptive services

Keywords: Back Pain, Endorphin Massage, Use of Video

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INTRODUCTION

Pregnancy is a sequence of events that normally consists of conception, implantation, embryo growth, fetal growth, and ends in pregnancy. When spermatozoa meet the ovum, then the beginning of pregnancy begins. Every pregnancy always begins with conception and nidation of these results. The normal length of pregnancy is 280 days or 9 months and 7 days which is calculated from the first day of the last menstruation.[1]

According to research, according to data from the World Health Organization (WHO), the prevalence of data on pregnant women with low back pain in Australia is reported to be 70%. The prevalence of low back pain in pregnant women, at more than 21 weeks of gestation, while in Malaysia there are 36.5% with mild pain, 46% for moderate pain, and 17.5% for severe pain. And in the UK there are 50% of pregnant women with complaints of low back pain. Meanwhile, the number of pregnant women in Indonesia in 2019 according to the Indonesian Ministry of Health reached 5,256,483 people. [2]

Predisposing factors that affect back pain in pregnant women are uterine growth which causes changes in posture and can suppress pain impulses, weight gain, the effect of relaxation hormone on ligaments, previous history of back pain, parity and activity. The growth of the uterus in line with the development of pregnancy results in the stretching of the supporting ligaments, which is usually felt by the mother as a very painful stabbing spasm (pressing the pain implicit) called ligament pain. In line with weight gain gradually during pregnancy changes the posture so that the body's center of gravity shifts forward.[3]

How to overcome discomfort in pregnant women with complaints of back pain in the third trimester is by doing endorphin massage Endorphin Massage is a touch therapy or light massage that is quite important to be given to pregnant women in the run-up to the time of delivery. This massage can stimulate the body to release endorphin compounds which are pain relievers and can create a feeling of comfort. So far, endorphins have been known as substances with many benefits. Some of them are regulating the production of growth hormone and sex, controlling persistent aches and pains, controlling feelings of stress, and appearing through various activities, such as deep breathing and relaxation, and meditation. Benefit

Endorphin Massage, among others, aids in relaxation and lowers pain awareness by increasing blood flow to the affected area, stimulating sensory receptors in the skin and brain underneath, transforming the skin, providing a general sense of well-being associated with human proximity, improving local circulation, stimulation of endorphin release, decreasing endogenous catecholamin stimulation of efferent fibers resulting in blockages against pain stimuli. [4]

Based on research by Purnamasari (2019), back pain discomfort is experienced by 50% to 80% of pregnant women in the third trimester [4]. Based on research conducted by Nirwana Marsanda (2023) The purpose of this study is to determine the effect of Endorphin massage on back pain in pregnant women in the third trimester, the study shows that back pain in pregnant women in the third trimester is affected both before and after the endhorphin massage technique.[5] Research conducted by Diah Ayu Handayani (2020) in the work area of the Putri Ayu Health Center about endhorphin massage shows that the impact of endhorphin massage is a type of massage with a light touch that has an impact on providing a sense of comfort and relaxation to back pain discomfort.[4]

The purpose of this case study is to be able to provide comprehensive obstetric care for Mrs. "A" 1P0A0 G1P0A0 with back pain discomfort in PMB "N" Bandung Regency in 2024.

METHOD

The research method used is a case study by conducting assessments and providing care starting from 37 weeks of gestation, childbirth, postpartum, newborns and family planning. The subject of this research was Mrs. "A" with discomfort in the third trimester, namely back pain. In this midwifery care, the preparations carried out are carrying out direct interviews with mothers and husbands at the first contact with the patient as an initial information assessment including biodata, maternal complaints, maternal and family health history, marital history, family planning history, habitual patterns, and psychosocial history as well as culture. Observations are carried out at each visit in the form of examining the mother through inspection, palpation, auscultation and percussion and at the second pregnancy visit it is supported by supporting examinations, namely laboratory examinations such as checking Hb levels. The tools used in this research were an assessment format, a mother's MCH book, a complete pregnancy examination tool and a progress record sheet. The results of the examination in the third trimester of pregnancy showed that the mother had back pain and the general condition of the mother looked grimacing and was shown on a pain scale of 3. This case study was carried out at the first meeting, giving an explanation before the research to Mrs. A and then after Mrs. A. " understand and are willing to be provided with care, then an informed consent is signed, then an examination was carried out and the mother explained that she experienced discomfort in the third trimester of pregnancy, especially regarding the mother's complaint, namely lower back pain, then the mother was willing to be given endorphin massage treatment to reduce lower back pain. The equipment used in this research is an assessment format, KIA book, complete pregnancy checking equipment and growth record sheets. Support optimal observation results, so that researchers use supporting documents. Documents are records of past events. This supporting document is in the form of information obtained from the KIA book. The research location taken was PMB "N" Bandung Regency. This research was conducted in January 2024 until the mother used contraception in March 2024.

Before conducting the research, an application for a research permit has been approved from STIKes Budi Luhur Cimahi which will be shown to the research site and has received an Ethical Eligibility letter with number.153/D/KEPK-STIKes/IV/2024.

RESULT

During the third trimester, Mrs. "A" experienced discomfort due to back pain, which is common during this stage of pregnancy. To address this, a series of endorphin massage interventions were initiated, starting from her first visit to PMB. These interventions were administered five times, specifically on the 1st, 3rd, 5th, 6th, and 7th days following her initial visit.

The repeated endorphin massages were carefully monitored over the course of a week. Each session was aimed at reducing the intensity of her back pain and enhancing her overall comfort during pregnancy. By maintaining this consistent schedule, the care provided allowed for close observation of any changes in her symptoms.

By the end of the week, Mrs. "A" reported a significant reduction in her back pain. The consistent application of endorphin massage not only alleviated her discomfort but also left her feeling more comfortable and relaxed. The success of this intervention highlights the effectiveness of comprehensive midwifery care in managing common pregnancy-related discomforts.

DISCUSSION

During pregnancy, Mrs. A experienced back pain in the third trimester, but it did not interfere with her daily activities. Theoretically, back pain is a physiological condition that affects all pregnant women, however, if left untreated, it can also pose risks to the mother. The discomfort of back pain can be caused by hormonal changes, weight gain, baby growth, and changes in body posture. According to the understanding of the effects of back pain on pregnant women, they may experience sleep problems during pregnancy, which will make them tired, irritable, and uncomfortable when carrying out daily tasks. This will cause the fetus to experience fetal distress and asphyxia, where the mother's condition will affect the condition of the fetus she is carrying, hampering mobility, and for mothers who already have children, it will hinder caring for their child. [10] In this case, the author then suggested an endorphin massage intervention to relieve back pain. This endorphin massage is carried out 5 times within 1 week with a duration of ±10 minutes. starting from 37-38 weeks of gestation. The care provided by contact (at PMB) was carried out 2 times and 3 times was carried out directly to the house with massage assisted by the husband who had previously been given a video on how to do endorphin massage. After 5 interventions, namely with the frequency of endorphin massage starting on the first day of the visit to PMB and carried out again on the 3rd, 5th, 6th and 7th days after the visit to PMB. After the intervention of endorphin massage for back pain in Mrs." A" decreased and the mother said she felt comfortable and more relaxed. In addition to reducing back pain, endorphin massage can also relax muscles and can improve sleep quality. The results of the study entitled "The Effect of Endorphin Massage on the Reduction of Back Pain in Pregnant Women" Research conducted by Handayani (2020) in the work area of the Putri Ayu Health Center about endhorphin massage shows that the impact of endhorphin massage is a type of massage with a light touch that has an impact on providing a sense of comfort and relaxation to back pain discomfort [12].

CONCLUSIONS

Pregnancy midwifery care was carried out by a midwife health worker with the result that there was a problem of discomfort in the third trimester with back pain, so it was given an edorphin massage intervention for one week which was done 1 time a day by giving a light massage to help in relaxation by increasing blood flow to the affected area for 15-30 minutes, Repeat 2 times either morning, afternoon or night a day. It was found that the complaint experienced by Mrs. A gradually improved. It is recommended for midwives to carry out endorphin massage care for pregnant women as a management of discomfort in pregnant women in the third trimester of back pain.

RECOMMENDATIONS

Based on the findings of this study, it is recommended that midwives incorporate endorphin massage as a routine non-pharmacological intervention to alleviate back pain in third trimester pregnant women. Given the positive outcomes observed in reducing discomfort and improving patient comfort, further research should explore the broader application of this technique across different populations and settings. Additionally, studies comparing the effectiveness of endorphin massage with other non-pharmacological methods could provide deeper insights into best practices for managing pregnancy-related discomfort. Expanding

education and training for midwives on the use of endorphin massage may also enhance the quality of care and patient satisfaction during pregnancy.

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