POSTPARTUM MIDWIFERY CARE FOR MRS. "H" WITH BREAST MILK DAM PROBLEM AT SORAWOLIO HEALTH CENTER

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ABSTRACT

Breast engorgement is a condition that occurs due to the accumulation of breast milk in the breasts, caused by the narrowing of the milk ducts or inadequate emptying of the milk glands during breastfeeding. Contributing factors include insufficient sucking by the baby, improper positioning and attachment, and a lack of knowledge about breast care. This study aims to provide midwifery care to Mrs. "H," who is experiencing breast engorgement issues at Sorawilio Health Center. The method used in this study is a case report with a midwifery management approach, and the documentation follows the SOAP format (Subjective, Objective, Analysis, and Management). Data were collected through interviews, observations, and documentation studies. The assessment results show that the patient experiences swelling, redness, breast pain, and an increase in body temperature. The management provided includes on-demand breastfeeding and waking the baby every two hours. The results of the intervention showed significant improvement on the second day, with the issue of breast engorgement resolved. This study recommends enhancing health education regarding breast care and the implementation of effective breastfeeding patterns for clients and their families. With appropriate care, it was found that Mrs. "H" was able to breastfeed more effectively, contributing to the emptying of her breasts and the reduction of symptoms experienced. Recommendations are provided for healthcare professionals to increase educational efforts and information for mothers regarding proper breastfeeding techniques and breast care to prevent future occurrences of breast engorgement.

INTRODUCTION

Breast milk dam is a physiological condition characterized by the accumulation of venous and lymphatic blood in the breast tissue, which occurs in preparation for the lactation process, rather than as a result of overdistension of the ducts of the lactation system itself. This phenomenon is generally caused by excessive accumulation in the lymphatic and venous systems before the start of lactation. (Walyani & Puwoastuti, 2020). To prevent and overcome breast milk dams, it is important for pregnant and postpartum women to undergo breast care that can stimulate milk production. Breast care consists of a series of actions aimed at maintaining breast health, especially during the breastfeeding period, to ensure the smooth flow of milk. It also plays an important role in maintaining breast hygiene and improving the condition of flat or inward nipples. (Mardiaturrahmi, 2019).

Breast milk has a complete nutritional composition and is easily digested by the baby's digestive system, giving it a significant advantage over formula milk. The advantage of breast milk lies in the content of antibodies, including Antistapilococcus, Lysozyme, Immunoglobulin, as well as other components such as Complements C3 and C4, Lactobacillus, Bifidus, and Lactoferrin, which effectively protect babies from various infections . In addition, breast milk has the potential to reduce the risk of allergies in infants, as it does not contain beta-lactoglobulin, which is often identified as the cause of allergies (Suciati, 2020)

Infant growth and development is greatly influenced by the amount of breastmilk received, including energy content and other nutrients. Lack of knowledge about lactation management, such as improper pumping and storage techniques, can lead to disruptions in the breastfeeding process, leading some mothers to prefer formula or bottle-feeding their infants. This choice can increase the risk of morbidity, including diarrhea due to microbial contamination and oral moniliasis caused by inadequate sterilization practices, as well as the risk of marasmus due to feeding errors. (Sari, D. P., & Wijayanti, 2020)

Although the importance of breastfeeding is widely recognized, there are still significant challenges in the practice of breastfeeding, one of which is the phenomenon of breast milk dams in the

postpartum period. This condition is often caused by a delay in the release of breastmilk and can result in various complications, including mastitis. (Khaerunnisa, N., 2021). Therefore, more intensive efforts are needed to improve understanding and proper lactation management, in order to reduce the incidence of breast milk dams. Physiologically, breast care involving massage techniques can stimulate the pituitary to increase the production of progesterone, estrogen, and oxytocin hormones, which in turn will stimulate the mammary glands to facilitate reflex milk ejection. Research shows that breast massage has a positive effect in reducing the incidence of breast milk dams, with the observation that before the massage, about 81.3% of postpartum mothers experienced the condition, but after the intervention, the rate decreased to 18.8%. (Taqiyah, 2019).

Data from the World Health Organization (WHO, 2020) shows that only 44% of newborns worldwide are breastfed within the first hour after birth, and the prevalence of exclusively breastfed infants under six months of age remains very low. In South Asia, exclusive breastfeeding coverage is 47%, in Latin America and the Caribbean 32%, East Asia 30%, and Central Africa 25%, while globally, less than 40% of children under six months of age are exclusively breastfed.

Further studies have shown that primiparous mothers tend to have a higher risk of breastmilk dam incidence, due to their lack of breastfeeding experience and understanding of proper techniques to prevent milk accumulation in the breast alveolus.

Empirical reports from Sorawolio Health Center show that in 2022, there were five cases of breast milk dams among postpartum mothers. This figure increased in the period January to May 2023, when seven additional cases were identified, including one significant case of breast milk dam. One of the cases of concern was that of Mrs. "H," who experienced anxiety due to breast engorgement. Based on the medical evaluation, interventions such as breast care therapy with warm compresses and increased frequency of breastfeeding were suggested as treatments. Furthermore, clinical discussion with Mrs. "H" revealed several main causative factors, such as fatigue, stress, and lack of adequate understanding of lactation management. (Khaerunnisa, N., 2021) .Based on the description above, the researcher is interested in taking research with the title "midwifery care for postpartum women with breast milk dam problems" in the Sorawolio Health Center work area.

METHODOLOGY

The method used in this study used Varney's seven steps and the SOAP method. The research was conducted at Puskesmas Sorawolio Baubau City from May to June 2023 with the main subject Mrs. H, with the problem of breast milk dam. The data collection process was completed with direct observation and in-depth interview techniques to obtain comprehensive information about the subject's health condition. Data analysis used Varney's seven-step approach and SOAP principles to organize findings, determine interventions, and evaluate the results of midwifery care provided. The results of this process showed the importance of breast care. Research ethics were followed by obtaining informed consent from the subjects, maintaining anonymity, and applying confidentiality to protect the subjects' personal information. All these ethical measures were designed to ensure that the research was conducted with the rights and welfare of the research subjects in mind.

RESULTS AND DISCUSSION

Subjective Data

On February 13, 2023. Mrs. "H" stated that she experienced main symptoms in the form of breasts that felt swollen, reddish, painful, and hard since February 13, 2023. These symptoms are generally in accordance with the characteristics of mastitis, which is an inflammatory condition that often occurs in breast tissue during the postpartum period or during breastfeeding (Nugraha, 2022). In addition, the patient also experienced an increase in body temperature and revealed that her baby, who was born on February 12, 2023 at 18:55 WITA, seemed reluctant to suckle. This phenomenon suggested a possible problem with the lactation process, which may have been caused by discomfort and pain in the patient's breast area. The patient's medical history showed that she had no chronic diseases.

Objective Data

From the examination, the patient weighed 60 kg and was 158 cm tall, resulting in a Body Mass Index (BMI) of approximately 24 kg/m², indicating a normal weight category. The patient's vital signs were within normal limits, although there was a low-grade fever (temperature 38.7°C), which could be an indication of an infection or inflammatory condition in the breasts Breast examination revealed redness

and swelling, as well as tenderness, which could indicate conditions such as mastitis or problems with breastfeeding.

Analysis
Mrs. "H" P1 A0 second day post partum with the problem of breast milk dam.

Management
Midwifery care provided to Mrs. "H", a postpartum mother who experienced breast milk dam problems, was carried out with a structured approach (Minarti, 2023). At the first visit, the initial assessment showed that the mother had swelling, redness, and pain in the breasts, as well as fever. This is in line with research showing that breast milk dams can occur due to inadequate breastfeeding frequency and can cause complications such as mastitis (Pratiwi & Setiawan 2022). Education about this condition was delivered to Mrs. "H" to improve her understanding, which resulted in an agreement to breastfeed regularly every 2-3 hours or according to the baby's request.

DISCUSSION

Subjective Data

The case of Mrs. "H" was a 23-year-old woman who developed symptoms of mastitis after childbirth. The patient's social, economic and cultural background plays an important role in determining access to health services and the postpartum recovery process. As a married couple from the Buton tribe and Muslims, they may have norms and practices that influence reproductive health and postpartum care. (Wahyuni, 2022).

Mrs. "H" complained of swollen, reddish, painful and hard breasts, suggesting mastitis, an inflammatory condition of the breast tissue often experienced by breastfeeding mothers. This condition can trigger an increase in body temperature and pain, which results in the baby's inability to suckle well. (Nugraha, 2022). A decrease in the frequency of breastfeeding can lead to a buildup of breastmilk that worsens the condition of mastitis.

From her medical history, Mrs. "H" had no chronic diseases, which is an important factor for postpartum recovery. Menarche occurring at the age of 12 years and regular menstrual cycles indicated hormonal stability that could support reproductive health. Her first pregnancy was accompanied by the birth of a baby boy with a normal weight of 2,700 grams, indicating that despite postpartum complications, Mrs. "H"'s health status was good.(Sari, D. P., & Wijayanti, 2020)..

During the postpartum period, Mrs. "H"'s frequency of eating decreased from 2-3 times a day to 1-2 times, which could affect her physical recovery due to insufficient nutritional intake. (Susanti & Pramono, 2022). However, Mrs. "H" maintained good personal hygiene, which shows her awareness of the importance of personal health during this period.

Although Mrs. "H" was happy with the birth of her first child, she also felt the anxiety commonly experienced by new mothers after childbirth. This anxiety is related to the new experience of motherhood as well as the physical changes experienced by new mothers. (Suryani, R., & Fauzan, 2022).. Social support and appropriate information about breastfeeding can help reduce anxiety levels and increase breastfeeding success.

Physical examination showed that Mrs. "H" had an elevated body temperature of 38.7°C, indicating inflammation or infection. Breast findings, such as redness, swelling, and pain, suggested postpartum mastitis, which required treatment to prevent further complications. In addition, the physiological changes seen in Mrs. "H," such as striae alba and linea nigra, are normal and do not indicate a serious problem. (Cahyaningrum, 2022). Examination of the genitalia showed a lochia rubra discharge as well as a suture wound that was in the process of healing, and no signs of infection were found in the area.

Objective Data

The case of Mrs. "H" illustrates a mother who has just given birth through normal labor without complications, which reflects a good health condition before childbirth. Based on her previous medical history, there were no chronic diseases or hereditary history that could affect the health of the mother and baby, which is important as optimal maternal health before and during pregnancy contributes to a better recovery process after delivery. Although the physical examination revealed a good general condition, complaints of breast tenderness are common among breastfeeding mothers. This pain is often

associated with breastfeeding and can interfere with the comfort and success of breastfeeding. (Fathiah, 2020).

With a body weight of 60 kg and height of 158 cm, the patient's BMI is about 24 kg/m², indicating that she is in the normal weight category. However, the presence of a low-grade fever with a temperature of 38.7°C could be an indicator of infection or inflammation, especially in the breast tissue. (Yulianti, 2019). In this context, a breast examination showing redness, swelling, and tenderness is particularly relevant, as these symptoms may indicate conditions such as mastitis, which require medical attention to avoid further complications. (Astuti, 2022)

Psychological aspects also played an important role in Mrs. "H's" recovery. Despite experiencing anxiety related to insufficient milk production, the patient showed happiness as well as good social support from her family, which is a protective factor against postpartum psychological conditions. (Sari, D. P., & Wijayanti, 2020).. This support can help reduce anxiety and increase confidence in the breastfeeding process.

Adequate nutrition before and during the puerperium is essential for recovery. (Risnawati, 2020). Decreased appetite postpartum is common and should be addressed with an appropriate nutritional approach to ensure adequate nutrient intake for the mother, which in turn supports breast milk production. (Wulandari, et al., 2020). With stable economic support and good access to health services, Mrs. "H" was in a conducive environment for postpartum recovery and care of her baby, demonstrating the importance of social and economic factors in the success of this process.

Analysis

Based on the subjective and objective data obtained from the history, medical history, and physical examination, a comprehensive picture of Mrs. "H."'s condition was provided. This analysis identified several key areas that needed to be managed to improve postpartum recovery and breastfeeding success.

Subjective data revealed that Mrs. "H" experienced symptoms of breast milk dam, such as swollen, painful, and reddish breasts, and a fever that reached 38.7°C. This was supported by objective data which showed vital signs within normal limits, except for an increase in body temperature which indicated an inflammatory or infectious process in the breast. Milk dams that are not treated effectively can develop into mastitis, a condition that requires further medical intervention. (Astuti, 2022). Based on the description, the diagnosis for this case is Mrs. "H" age 23 years P1A0 second day post partum with the problem of breast milk dam.

Management

Based on the objective and subjective evaluation of Mrs. "H's" breast milk dam case, a systematic approach was applied to treat the condition. At the initial stage, Mrs. "H" was given education about choosing the right bra, which aims to provide optimal support for the breasts, so as to prevent health problems such as swelling and pain and provide comfort during breastfeeding. (Pratiwi & Setiawan 2022) As an initial step in the intervention, Mrs. "H" was taught how to compress the breasts with a wet cloth to relieve swelling and pain. In addition, breast massage is done with a technique that starts from the base towards the nipple, aiming to clean the milk ducts and ensure smooth milk flow. This process not only speeds up breast emptying, but also increases milk production, supporting more optimal lactation. (Salamah, 2021).

In the next intervention, Mrs. "H" received information on oxytocin massage techniques, which serves to stimulate the important oxytocin hormone in helping relaxation and increasing the let-down reflex, so that breast milk can flow more smoothly. The correct breastfeeding technique and position was also explained, with emphasis on the importance of the baby latching onto the entire areola. Mothers are instructed to remain calm and choose a comfortable position, whether sitting or lying down. This combination of techniques, along with regular breastfeeding every 2-3 hours, aims to prevent further milk dams and ensure both breasts are used alternately to maintain stable milk production. (Dewi, S., & Nugroho, 2023). .

The management also includes emptying the breasts using a hand pump technique to prevent obstruction of the milk ducts. After breastfeeding, mothers are encouraged to apply breastmilk to the nipples and let them dry to prevent chafing, and it is important to let the baby burp after breastfeeding to avoid bloating and vomiting. This is done according to the principles of good hygiene, where mothers are reminded to wash their hands before and after breastfeeding to prevent breast infections. (Salamah, 2021).

At the next evaluation, Mrs. "H"'s condition showed significant improvement, with reduced swelling and pain in the breasts, and a baby who began to suckle more actively. This finding supports the research of (Dewi, S., & Nugroho, 2023) which emphasizes the importance of early intervention and psychological support in successful lactation for postpartum mothers. Therefore, Mrs. "H" is advised to continue regular breast care and provide exclusive breastfeeding for the first six months according to the guidelines of the World Health Organization (WHO, 2020).

At the first visit, the initial assessment showed that Mrs. "H" had breast swelling, redness, and pain, as well as fever. This is in line with the findings that breast milk dams can occur due to inadequate breastfeeding frequency, which can lead to complications such as mastitis (Pratiwi & Setiawan, 2022). Education about this condition was delivered to Mrs. "H" to increase understanding, which led to an agreement to breastfeed regularly every 2-3 hours or according to the baby's request.

During the second visit, an evaluation was made of the mother's condition who was still experiencing breast milk dams. Stable vital signs indicated that although there were still symptoms of fever, Mrs. "H" was in good condition. The mother was reminded to maintain hygiene in accordance with the recommendations (Salamah, 2021) which emphasizes the importance of hygiene to prevent infection. In addition, the advice to consume nutritious food is expected to help the healing process and lactation recovery. At the third visit, it was reported that the symptoms of breast swelling and pain began to decrease, and the baby began to suckle more actively. Research by (Dewi, S., & Nugroho, 2023)showed that early intervention and psychological support can improve lactation success in postpartum mothers. At the last visit, Mrs. "H"'s condition showed significant improvement, with no complaints and the baby actively breastfeeding well. The mother was given advice to continue to provide exclusive breastfeeding for six months, in line with the health guidelines recommended by the World Health Organization (WHO, 2020).

CONCLUSION

This study can be concluded at Sorawolio Health Center, basic data identification, actual diagnoses /problems, potential diagnoses / problems, as well as planning, implementation, and evaluation of midwifery care actions for Mrs. "H" who experienced breast milk dam.

The baseline data of Mrs. "H" who experienced breast milk dam at Sorawolio Health Center was identified on the second day of the study. Furthermore, the actual and potential diagnoses/problems in Mrs. "H" with this condition were also identified on the same day. After that, a plan of action and potential collaboration was developed to overcome the problems faced by Mrs. "H". In the next stage, the specific care action plan was implemented, followed by the implementation of the planned actions. Finally, an evaluation of all the actions taken on Mrs. "H" was conducted to assess the effectiveness and progress of the management of breast milk dam at Puskesmas Sorawolio.

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