

The Relationship of Massage the Perineum with Ruptur Perineum

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ABSTRACT

Backgrounds: The cause of maternal mortality can directly or indirectly. (1) The number of maternal mortality in DIY years 2014 (40 mothers) decline compared with the years 2013 (46 mothers). In 2015 maternal mortality very significant a decrease in the number of cases to 29. However in 2016 return to 39 cases and 34 in 2017 (2). The cause of Maternal Mortality is most commonly found in DIY is because the heart (10 cases), embolism (1 cases), shock (3 cases), sepsis/infection (5 cases), bleeding (5 cases), eclampsia (1 cases), preeclampsia (3 cases), pneumonia (2 cases), hyperthyroid (2 cases), a seizure hypoxia (1 cases), unknown (1 cases) (3). Still a lot of cases as bleeding one of the bleedings is the birth canal mother her apart (3). Based on research from Lestari, 2016 in Yogyakarta 50% happen rips the perineum on the number of spontaneous delivery (4). Rips the perineum could be problematic because of increased morbidities and mortality postpartum mother.

Objectives: To influence massage the perineum for pregnant women with the perineum rupture.

Methods: Research methodology true-experiment using posttest only control design in community health center Yogyakarta city. The sample is pregnant women 37-42 week gestational age.

Results: Research pregnant women IRT the largest 56 people (70%), Education is high school 51 people (63,8%), had a massage the perineum 56 people (70%) and 42,5 people had not to massage the perineum.

Conclusions: No relationship massage perineum with rupture perineum.

Keywords: *Massage the Perineum, Rupture the Perineum*

INTRODUCTION

Pregnancy is a physiological process for a woman to breed. Pregnancy to be prepared well before delivery. Preparation labor is very important as an undesirable occurrence it is possible that at the time of labor and postpartum. Postpartum can complications like placenta left behind, the rest of the placenta, atonia uteri, and rupture perineum. Rupture perineum is the birth canal mother ruptures when the issuance of the baby either intentionally as well as it not been for the less elastic the birth canal mother who has just given.

Rupture perineum can happen to all the mother in labor, can primipara or a multiparous of degrees I to IV. The factor that affects rupture perineum very much among others of the mother and fetus. Factor the mother of parity, consisting of a distance of the birth of, a way that does not exactly and mother age. A factor of a fetus that consists of weight for newborn infants and presentation. Factor labor of extraction forceps, extraction, vacuum tools, and episiotomy, trauma there the helper labor is the leader of a bad (1).

The mortality rate in Indonesia is still very high. According to WHO years 2015 every day there are 830 cases of maternal mortality. Audit trails maternal perinatal (AMP) found the cause of maternal mortality in 2015 was heavy pre-eclampsia (PEB) as much as 36% (4 cause), case the bleeding as much as 36% (4 cases), case pulmonary tuberculosis 18% (2 cases), embolism water 9% (1 case). Case the fallout death maternal was 50% postpartum, at the time one of the perinea on number increase morbidity and mortality postpartum (3).

Rupture the perineum can be minimize by through preventive measures during pregnancy and showed you kindness and the act of massage the perineum that could be done by for pregnant women began to get a bit pregnancy 34 week or of pregnant women and between the ages of pregnancy 37-42 week pregnant mother and not suffered in the genital and perineum. Based on the research from Demirel and Golbasi in 2015, a decrease episiotomy if do massage the perineum (5).

The number of above high in maternal and child health problems because rupture perineum can improve infection and promote maternal mortality. The city of Yogyakarta in public health has a population density and use antenatal for pregnancy and baby labor so this reason wit researchers interesting of research education pregnant women

to performs massage the perineum. This background of the matter over and found how important this issue be examined with expect to minimize the risk the perineum rupture during labor.

MATERIALS AND METHODS

Design of research that is used is identification pre-experiment using posttest only a fair compensation including on the instrument types academicians as well as national about massage the perineum for pregnant women in the long term the done posttest for pregnant women performs massage the perineum or not. As well as true-experiment by the use of posttest only control group (6) the data used the primary data was need is questionnaire sheets was the implementation of massage the perineum and observation rupture the perineum. While secondary data from the medical record to completeness of the identity of pregnant women, gymnastic activities massage the perineum and observation rupture the perineum using the test and been approved Mann-Whitney and Wilcoxon.

RESULTS AND DISCUSSION

Result Univariate Test

Research is pregnant women more than 36 weeks in the Yogyakarta can be seen several characteristic of such as education and work.

Table 1. A frequency distribution of pregnant women in the city of Yogyakarta

Job	f	%
No job	56	70.0
Corporate	15	18.8
Employee	9	11,2

Based on **table 1**. The majority of respondents as a housewife or not a job with 56 people (70,0%). On the households, many spent time in a house so many spare time to learn, especially the provision of education us to pregnant women about massage the perineum.

Table 2. A frequency distribution education pregnant women the city of Yogyakarta

Education	f	%
Primary School	6	7.5
Junior High School	13	16.3
High School	51	63.8
College	10	12.5

In **Table 2**. The education in the highest presents is pregnant women with the education level high schools as many as the 51 people (63.8%). Senior secondary education is the easiest to receive information than primary schools or to schools junior high school. With college sometimes had smart and to new receive information. Inline by research Anggaeni most high school graduates study of a number pregnant women.

Table 3. Frequency distribution in order of pregnant women or new in the implementation of the massage the perineum

Massage Perineum	f	%
No massage	24	30
Massage	56	70
Total	80	100

In **table 3**. Pregnant women who perform massage the perineum through education about the perineum highest massage known for pregnant women who performs massage the one as many as 56 people (70%) and perform massage the perineum as many as 24 one pregnant women (30%). the reason does not perform massage pregnant women because they felt fear if the perineum massage will happen contraction and pain on the perineum massage done by pregnant women own the perineum and tone done by her husband from pregnancy more than 36 weeks.

Table 4. Frequency distribution pregnant women that experienced the perineum immediately after giving birth

Rupture Level	f	%
No Rupture	34	42.5
Degree I	19	23.8
Degree II	15	18.8
Degree III	12	15.0

Based on **table 4**. Respondents no highest rupture degrees as many as 34 people (42,5%). This

file with Natami research, most research did not rupture 60% (7).

The results of the analysis bivariate

Table 5. The massage of perineum with ruptur perineum

	Level Ruptur perineum
Mann-Whitney U	670.000
Wilcoxon W	1265.000
Z	-1.373
Asymp. Sig. (2-tailed)	-0.170

Based on **Table 5** result statistic use Mann-Whitney test is significant result -0.170, it's mean no connection implementation of the massage perineum with rupture perineum. Reason this because researches can't control pregnancy women to implementation massage perineum or not. Although was according to the theory massage the perineum can improve elasticity perineum and increase confident mother. This research inconsistent with Damirel that massage the perineum this had an impact on rupture the perineum. From the research Damirel, etc there are 99 participant was only 13 the proportion experienced laceration (4.2%) (4). The result of this research also with the research by Dartiwen about massage perineum primigravida deals with the incident when the town laceration the perineum time of postpartum (13).

Mother doesn't massage the perineum risk a laceration or rupture as much as 11.2227 times (95% CI) compared massage perineum. This research consistent Anggaeni and Martini which is there a connection massage the perineum with rupture the birth canal the research result he declared that mother do not a massage the perineum risk 10,280 times compared with a mother who carried out the massage during pregnancy (15). In addition, the research of any impact Natami, etc also massages the perineum with level rupture perineum. The research was conducted massage of 10 respondents 6 is the perineum (60%) to rupture the perineum and there are 3 (30%) to rupture perineum. level 1(10%) where one respondents who experienced rupture the perineum is level two or two degrees (7). The result of this research not accordance with Kusuwawati, etc, relationship the antenatal visit with perineal massage for primigravida in labour process and was reduce using tolls as vacuum for easy baby labour.

This research result not accordance with Karacam (2016), the massage the perineum decrease the action episiotomy or cutting perineum when baby will born (12) who supported the research

from Savitri, etc in years 2015 which the perineum a massage for pregnant women who first or primigravida leverage with the inscident rupture perineum when will baby born (13).

CONCLUSION AND RECOMMENDATION

The research result from 80 respondents with a job as mother biggest not job or in home 56 orang (70%), in terms of education most high school education 51 people (63,8) and most of them not subjected to rupture the perineum as much massage the perineum to rupture the perineum.

For the health and professional obstetrics is emphasized the massage perineum for pregnant women especially in the examination antenatal care to reduce rupture the perineum and trained him to cadres.

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