

Case Study on Postpartum Mothers with Milk Duct Obstruction at the Health Facility in Padurungan, Work Area of Tanah Merah Community Health Center, Bangkalan.

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Submitted: 12/07/2024
Accepted: 25/09/2024
Terbit: 25/09/2024

Kata Kunci:

Masa nifas, menyusui, ASI, bendungan ASI

Keywords:

Postpartum period, breastfeeding, breast milk, milk duct obstruction

ABSTRAK

Masa nifas adalah masa setelah keluarnya plasenta hingga alat reproduksi kembali seperti sebelum hamil selama 42 hari. Masa nifas erat dengan proses menyusui yang merupakan proses panjang dan harus diketahui serta disiapkan oleh ibu nifas terkait perawatan payudara, kondisi puting susu, teknik menyusui dan pola pemberian ASI. Apabila hal ini tidak dipersiapkan sejak kehamilan, maka dapat terjadi masalah di masa nifas, salah satunya yakni bendungan ASI. Bendungan ASI jika tidak diatasi dapat menyebabkan komplikasi yang berkelanjutan. Tujuan dari studi kasus ini adalah untuk mengetahui faktor resiko dan penatalaksanaan bendungan ASI yang telah dilakukan oleh tenaga kesehatan di fasilitas kesehatan wilayah kerja Puskesmas Tanah Merah Bangkalan. Studi kasus ini menggunakan metode *multiple case design*, dilakukan sejak bulan Januari hingga Mei tahun 2024. Subjek dalam studi kasus ini yaitu ibu nifas dengan persalinan pertama, sejumlah 2 orang, nifas hari ke 3-7. Pengambilan data dilakukan dengan wawancara yang menggunakan instrumen kuisioner dan observasi untuk mendapat data umum dari studi kasus. Analisa data menggunakan tabel dan dinarasikan. Hasil studi kasus menunjukkan penyebab utama dari bendungan ASI pada subjek 1 yaitu teknik menyusui, sedangkan pada subjek 2 yaitu perawatan payudara dan teknik menyusui yang baik dan benar. Penatalaksanaan yang didapat subjek 1 yaitu teknik menyusui, sedangkan subjek 2 yaitu perawatan payudara dan teknik menyusui. Untuk mencegah terjadinya bendungan ASI diharapkan adanya pendidikan kesehatan tentang masalah yang terjadi pada ibu nifas terutama bendungan ASI yang meliputi perawatan payudara, identifikasi puting susu sejak kehamilan dan teknik menyusui yang baik dan benar sehingga masalah bendungan ASI tidak terjadi.

ABSTARCT

The postpartum period is a process after the release of placenta until the reproductive organs return to the same way as before pregnancy. The postpartum period is closely related to the breastfeeding process, the breastfeeding process is a long process that must be known and prepared by postpartum mothers related to breast care, nipple conditions, breastfeeding techniques and breastfeeding patterns. If this not prepared since pregnancy, problems can occur during the postpartum period, one of which is the breast milk dam. Breast milk dams if left untreated can lead to ongoing complications. The purpose of this case study is to find out the risk factors and management of breast milk dams that have been carried out by health workers in health facilities in the working area of the Tanah Merah Bangkalan Health Center. This case study uses the multiple case design method, conducted from January to May 2024. The subjects in this case study are postpartum mothers with the first delivery, a total of 2 people, postpartum on days 3-7. Data collection was carried out by interviews using questionnaire and observation instruments to obtain general data from case studies. Data analysis using tables and narration. The results of the case study showed that the main

cause of breast milk dams in subject 1 was breastfeeding techniques, while in subject 2 was breast care and good and correct breastfeeding techniques. The management obtained by subject 1 is breastfeeding techniques, while subject 2 is breast care and breastfeeding techniques. To prevent the occurrence of breast milk dams, it is hoped that there will be health education about problems that occur in postpartum mothers, especially breast milk dams which include breast care, identification of milk nipples since pregnancy and good and correct breastfeeding techniques so that breast milk dam problems do not occur.

Introduction

The postpartum period, defined as the time from the delivery of the placenta until the reproductive organs return to their pre-pregnancy state, lasts for 42 days (6 weeks). During this recovery period, mothers undergo various psychological and physiological changes, which can lead to discomfort and potential pathological issues if not managed properly (Yuliana & Hakim, 2020).

The postpartum phase is divided into three stages: immediate puerperium, early puerperium, and late puerperium. A crucial aspect of this period is the exclusive breastfeeding (ASI) for infants, which is essential for their nutritional needs for the first 6 months without additional food (Walyani et al., 2015).

The goals of postpartum care include restoring the mother's health, maintaining physical and psychological well-being, preventing infections and complications, promoting milk production, providing health education, and teaching self-care until the end of the postpartum period (Iverson & Dervan, n.d.).

Monitoring during the postpartum period must be continuous for 6 weeks to prevent potential issues that could affect both mother and baby, such as insufficient milk supply and breast engorgement, commonly occurring between days 3-7 postpartum (Suparyanto & Rosad, 2022). Research indicates that milk duct obstruction is most prevalent among working mothers, affecting approximately 16% of breastfeeding mothers. According to the WHO (2019), 46.6% of breastfeeding women in Indonesia experience milk duct obstruction, and the Indonesian Demographic and Health Survey (SDKI) (2019) reports that 24.22% of postpartum mothers face this issues.

A preliminary study at the Padurungan Polindes in January 2024 found that out of 10 postpartum mothers, 1 experienced breast engorgement and 1 had mastitis, while 8 did not face any issues. The main causes of milk duct obstruction included insufficient knowledge about breast care, improper breastfeeding techniques, body image issues, and the importance of psychological support during the postpartum period (Indraswari et



al., 2021).

If left unaddressed, milk duct obstruction can lead to complications such as mastitis and breast abscesses, characterized by redness, swelling, pain, and fever, typically occurring 1-3 weeks postpartum (Khaerunnisa et al., 2021).

Preventive measures include breast care starting in the late pregnancy trimester to stimulate milk glands, strengthen nipples, and prepare for lactation. Other preventive strategies involve managing stress, ensuring adequate rest, maintaining proper nutrition, and using oxytocin massage if needed.

Furthermore, the government has implemented programs in accordance with Government Regulation No. 33 of 2012, which mandates early breastfeeding initiation (IMD) within the first hour after birth, placing the baby skin-to-skin with the mother to promote early breastfeeding and prevent milk duct obstruction (Atang Setiawan, 2012).

Method

This case study uses a multiple case design with two respondents, specifically postpartum mothers on day 7 who are experiencing milk duct obstruction. Both respondents are located in the Laok Songai hamlet of Tanah Merah, Bangkalan. Data

collection methods include interviews and documentation studies. Interviews were recorded using a questionnaire that covers risk factors and management of milk duct obstruction. Documentation was obtained from maternal and child health records and registers. The results of the case study will be presented in a matrix table and analyzed descriptively.

Results

This case study was conducted with two respondents who are postpartum primipara mothers, specifically on days 3-7 after delivery, experiencing milk duct obstruction. The study took place in each respondent's home, with Respondent 1 and Respondent 2 residing in the Laok Sungai hamlet of Padurungan, Tanah Merah. Primary data was obtained through interviews and observations, while secondary data was collected from patient registration documentation at the health facility, as described below.

For Respondent 1, data collection occurred on April 19, 2024. The results indicated she is a P1A1 postpartum mother on day 7, aged 29, with her highest education being elementary school. She is a housewife, while her husband is self-employed. The mother previously

experienced an abortion at 10 weeks during her first pregnancy.

Data collection included a physical examination, revealing her weight to be 61.90 kg and blood pressure 110/70 mmHg. Breast examination showed that both nipples were sore, and her breasts were swollen and hard. Palpation of the abdomen revealed a fundal height of 2 fingers above the symphysis, with lochia discharge measuring half a pad in yellowish-brown color.

For Respondent 2, data collection was conducted on April 23, 2024. The findings showed she is a P1A0 postpartum mother on day 7, aged 28, with her highest education also being elementary school. She is a housewife, and her husband works in the private sector. The examination revealed her weight to be 57.9 kg and blood pressure 100/60 mmHg. Examination of the breasts indicated that the right nipple was sore and inverted, while the breast was hard and swollen. The left breast was soft with a prominent nipple. Abdominal examination showed a fundal height of 2 fingers above the symphysis, with lochia discharge measuring half a pad in brown color.

Discussion

1. Education

Based on the data collected, Respondent 1, Mrs. M, is 29 years old, and Respondent 2, Mrs. F, is 28 years old. Both respondents have completed elementary school, which is considered basic education. The research indicates that both respondents, with elementary school education, experienced milk duct obstruction.

2. Knowledge of Milk Duct Obstruction

The data shows that both Respondent 1, Mrs. M, and Respondent 2, Mrs. F, are aware of what milk duct obstruction is, having learned about it from a midwife after giving birth. The research findings indicate that both respondents, despite knowing about milk duct obstruction, experienced the condition.

3. Knowledge of Breast Care

The data reveals that Respondent 1, Mrs. M, has received counseling regarding breast care from the local midwife during her last trimester of pregnancy. In contrast, Respondent 2, Mrs. F, has never received such counseling. This lack of knowledge about breast care may be a risk factor for developing milk duct obstruction. The study shows that despite one respondent knowing about breast care and the other not, both experienced milk duct obstruction.

4. Condition of the Nipples

The findings indicate that Respondent 1, Mrs. M, has sore nipples on both sides, while Respondent 2, Mrs. F, has a sore and inverted left nipple. The research demonstrates that having sore or inverted nipples in both respondents is associated with experiencing milk duct obstruction.

5. Breastfeeding Pattern

According to the data, Respondent 1, Mrs. M, frequently breastfeeds her baby, alternating sides but breastfeeding for less than 30 minutes without emptying her breasts, which led to milk duct obstruction. Respondent 2, Mrs. F, also breastfeeds often, usually for more than 30 minutes until her breast feels empty. However, she tends to breastfeed more frequently from the left breast, where she feels more comfortable, leading to obstruction in the right breast. The study indicates that improper breastfeeding patterns contributed to both respondents experiencing milk duct obstruction.

6. Breastfeeding Technique

The data indicates that neither Respondent 1, Mrs. M nor Respondent 2, Mrs. F, received information or counseling about breastfeeding techniques during pregnancy; they learned about it only after giving birth. Respondent 1 noted that her baby's mouth covers the entire areola during

breastfeeding, with the baby's abdomen positioned against her. In contrast, Respondent 2 reported that her baby's mouth does not fully cover the areola during feeding. The case study shows that regardless of their knowledge of breastfeeding techniques, both respondents experienced milk duct obstruction.

Conclusion

Based on the results and discussion of the case study on postpartum mothers with milk stasis at the Padurungan Health Facility in the working area of the Tanah Merah Health Center, the following conclusions were drawn:

1. There are risk factors for milk stasis in both postpartum mothers, with the first mother having issues related to breastfeeding technique, while the second mother had issues related to breast care and breastfeeding technique.
2. The management provided at the health facility in the working area of the Tanah Merah Health Center in Bangkalan for the first mother included the correct breastfeeding technique, while for the second mother, it involved both breast care and the correct breastfeeding technique.

Abbreviation



ASI : Air Susu Ibu

WHO : *World Health Organization*

SDKI : Survei Demografi Kesehatan
Indonesia

PP : PostPartum

IMD : Inisiasi Menyusu Dini

ANC : *Antenatal Care*

PNC : *Postnatal Care*

Ethics Approval and Consent to Participate

NoEA/ 2693 /KEPK-Poltekkes_Sby/V/2024

Acknowledgment

Family, supervising lecturer, head of the health department, head of the health center, coordinating midwife, village midwife, and friends.

References

1. Amalia, F. N. (2020). Pendidikan Kesehatan Tentang Teknik Menyusui yang Benar Terhadap Perilaku Menyusui pada Ibu Nifas Primipara. *Jurnal Keperawatan*, 6(2), 61–68.
2. Andriyani, A. (2018). Hubungan Bentuk Puting Susu Dengan Kejadian Bendungan ASI Pada ibu Nifas di BPM Ny. Atik Ramadhan Desa Wunud Kecamatan Porong Kabupaten Sidoarjo Tahun 2018. *Health Sciences Journal*, 4(2).
3. Atang Setiawan. (2012). No Title PP no 33 ttg Pemberian ASI. *ЭКОНОМИКА Региона*, 32.
4. Fau, T. (2019). *Hubungan frekuensi dan durasi menyusui dengan kejadian bendungan asi pada ibu nifas di praktek bidan mandiri romauli silalahi tahun 2019*.
5. Gustirini, R. (2021). Perawatan Payudara Untuk Mencegah Bendungan Asi Pada Ibu Post Partum. *Midwifery Care Journal*, 2(1), 9–14. <https://doi.org/10.31983/micajo.v2i1.6653>
6. Hartati, D., Yulizar, & Turiyani. (2019). Hubungan Posisi Menyusui, Kelainan Puting Susu, Perawatan Payudara Terhadap Terjadinya Bendungan ASi Di Rumah Sakit Umum Daerah Banyuasin. *SMARTANkes Jurnal Ilmiah Kesehatan Masyarakat*, 3(2), 31–39.
7. Indraswari, N., Sari, A. N., & Susanti, A. I. (2021). Pengaruh Perawatan Payudara Terhadap Bendungan ASI pada Ibu Nifas. *Jurnal Menara Medika*, 3(2), 66–73.
8. Iverson, B. L., & Dervan, P. B. (n.d.). *No Covariance Structure Analysis of Health-Related Indicators in Elderly People Living at Home with a Focus on Subjective Health Perception*Title. 2,



- 7823–7830.
9. Khaerunnisa, N., Saleha, H. S., & Inayah Sari, J. (2021). Manajemen Asuhan Kebidanan Pada Ibu Nifas Dengan Bendungan Asi. *Jurnal Midwifery*, 3(1), 16–24. <https://doi.org/10.24252/jmw.v3i1.2099>
 10. Mujenah, M., Wahyutri, E., & Noorma, N. (2023). HUBUNGAN TEKNIK MENYUSUI DENGAN KEJADIAN PUTING LECET PADA IBU POST PARTUM DI RSD dr. H. SOEMARNO SOSROATMODJO TANJUNG SELOR. *Aspiration of Health Journal*, 1(1), 135–145. <https://doi.org/10.55681/aojh.v1i1.94>
 11. Murniati, R. (2015). Hubungan Pengetahuan Ibu Nifas Tentang Bendungan Asi Dengan Praktik Pencegahan Bendungan Asi (Breast Care) Di Rb Nur Hikmah Kwaron Gubug. *Jurnal Unismus*, 17.
 12. Rambe, kumala sari. (2023). *Teknik Menyusui*. 1, 225–233.
 13. Septiani, P. E. (2019). Faktor Bendungan ASI. *Dinamisia : Jurnal Pengabdian Kepada Masyarakat*, 3(1), 105–111. <https://doi.org/10.31849/dinamisia.v3i1>
 14. Suparyanto dan Rosad. (2022). Asuhan kebidanan berkesinambungan pada Ny. M usia 25 tahun G1P1A0 uk 37 Minggu di PMB UMU Hani Kasihan Bantul. *Suparyanto Dan Rosad*, 5(3), 248–253.
 15. Supriaten. (2021). Pengaruh Perawatan Payudara Terhadap Bendungan ASI Pada Ibu Nifas. *Jurnal Menara Medika*, 3(2), 1–7.
 16. Walyani, Elisabeth Siwi, Purwoastuti, T. E. (2015). *Asuhan Kebidanan Masa Nifas & Menyusui*. Pustaka Baru Press.
 17. Wardani, K. (2023). Hubungan Tingkat Pengetahuan Ibu Nifas Tentang Perawatan Payudara Dan Teknik Menyusui Dengan Kejadian Bendungan Asi Di Pmb Martini Bandar Lampung. *Jurnal Maternitas Aisyah (JAMAN AISYAH)*, 4(2), 193–2020. <https://doi.org/10.30604/jaman.v4i2.1275>
 18. Yuliana, W., & Hakim, B. (2020). *Emodemo Asuhan Kebidanan Masa Nifas* (Yayasan Ahmar Cendekia Indonesia (ed.); 1st ed., pp. 2–4). Yayasan Ahmar Cendekia Indonesia.