

CONTINUOUS MIDWIFERY CARE FOR MRS. H WITH BREAST MILK DAM At PMB RONI BARUS, PERCUT SEI TUAN DISTRICT, DELI SERDANG REGENCY 2024

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ABSTRACT

Continuity of care (COC) is a midwifery service through a continuous service model to mothers during pregnancy, labor, newborn, postpartum and family planning. Breast milk dam in postpartum women is a narrowing of the ducts or lactiferous glands that are not completely emptied and can be caused by abnormalities in the nipples. The purpose of this study was to provide integrated care starting from pregnancy, labor, postpartum, newborn, and family planning and how to care for the breasts of postpartum women who experience breast milk dams. The type of research used is descriptive, which describes the problems that occur now, the actions taken such as action research which includes providing in order to improve the ability and quality of service so as to solve the problems that occur. Continuity of Care (COC) or continuous care on Mrs. H starting from pregnancy, childbirth, postpartum, newborn and family planning and has been given comprehensive care using Helen Varney's seven-step management. There is an effect of breast care on post partum mothers who experience breast milk dams, care that is done properly and regularly can reduce the occurrence of breast milk dams in post partum mothers and can facilitate milk production, so it is necessary to increase breast care to prevent breast milk dams.

Keywords: *Bendungan Asi, Post partum, Action research*

INTRODUCTION

Health development is to increase awareness, willingness and ability to live healthy for everyone in order to realize the highest degree of public health as an investment for the development of socially and economically productive human resources. The Maternal Mortality Rate (MMR) is one of the targets of *Sustainable Development Goals* (SDGs) to reduce the

MMR to 70/100,000 live births by 2030 and to reduce the infant mortality rate to 12 per 1000 live births.

Maternal Mortality Rate (MMR) is an important indicator of the quality and accessibility of health services. The Maternal Mortality Rate (MMR) in ASEAN is 235 per 100,000 live births (ASEAN Secretariat, 2020).

Based on data from The North Sumatar Health Office 2022 Maternal Mortality Rate is caused by the low health/nutritional status of mothers during pregnancy, where maternal services have not been achieved. Continuity of Care (COC) is a continuous care starting from pregnancy, labor, postpartum, newborn and comprehensive family planning.

Milk Dam is a dam that occurs due to narrowing of the lactiferous ducts and glands that are not completely emptied and also due to abnormalities in the nipples, this Milk Dam causes the baby not to get exclusive milk.

METHOD

This study was conducted to provide continuous care starting from pregnancy, childbirth, postpartum, newborn and family planning. The research used is a descriptive method that describes the problems that occur now, with the action of action research which includes providing, providing and improving the ability in services so as to solve the problems that occur. Data collection methods through interviews, assessment format, MCH book, and documentation results.

The research location is at the Independent Practice of Midwife Roni BARus Jl. Swadaya No. 10 Pasar 7 Tembung Kec. Percut Sei Tuan

RESULT AND DISCUSSION

On December 11, an early pregnancy visit was conducted Mrs. H, 29 years old, complained of frequent urination at night, then the care given was to reduce drinking at night and increase during the day in order to reduce the patient's complaints. From the results of research that has been carried out during pregnancy the mother is routine in

From the results of the research that has been done during pregnancy, the mother is routine in conducting pregnancy checks and where the complaints experienced by the mother during pregnancy are normal during pregnancy, and there is no gap between theory and practice.

On February 08, Mrs. H came to PMB Roni Barus with complaints of abdominal pain radiating to the waist. Then after monitoring Stage I lasted for 9 hours which is normal for Primigravida mothers. And continued with monitoring of labor in Stage II with complete opening and given care in accordance with 58 steps of APN, and it was seen that there was no gap between theory and practice.

On February 15, 2024, the second visit was carried out, the mother said that her milk output was not there. Then the results of the examination that the mother's breasts were palpable tense, painful. Then oxytocin massage was done to facilitate the mother's milk production. And at the visit when the visit was again carried out and the mother said that the milk had come out, and there were no other complaints.

On February 09, 2024 the first newborn visit was conducted where no problems were found and all were within normal limits.

At the family planning visit Mrs. H was explained several contraceptives and the mother chose to use MAL contraceptives which were easier to use, the mother said that she had not menstruated and gave exclusive breastfeeding regularly

CONCLUSION

After comprehensive care and documentation using SOAP and Helen Varney's 7 Steps, it can be concluded as follows:

1. **Pregnancy** : Pregnancy care in NY H has been carried out in accordance with the theory and has been documented with the Varney form, where the mother is routine in conducting ANC checks for six times and in this pregnancy it goes well, there are no abnormal complaints.
2. **Labor** : Midwifery care at the time of delivery of Mrs. H which has been adjusted to the theory and procedures in the field, as well as documented in the form of SOAP, Mrs.H which has been done / undergone the process of delivery on February 09, 2024 at: 00.10 Wib normally without having complications and complications until the management has been carried out according to 58 APN steps.
3. **Postpartum** : Midwifery care for postpartum women at the second visit on : February 15, 2024 the mother experienced breast milk dam. Then the researcher advised the mother and family to do oxytocin massage and breast care to facilitate milk production. And at the third visit third visit on the date of : February 25, 2024 the mother said the milk had come out. And the care provided went normally. And the postpartum period went well without complications and received support by the family so that Mrs. H could take good care of her baby and the mother was more excited in facing her postpartum period.
4. **Newborn** : Obstetric care of newborns (BBL) has been carried out in theory and procedures in the field, and documented in the form of SOAP baby Mrs. H General condition is good, crying strongly, sucking reflexes are good, the umbilical cord is treated with sterile gauze, already BAK and BAB smoothly and at the second visit on the seventh day the baby's umbilical cord has been broken Babies are routinely given exclusive breastfeeding every 2 hours or according to the baby's needs.
5. **Family Planning** : Family planning midwifery care on Mrs. H has been carried out by explaining what types of contraceptives are, the uses and side effects of using contraceptives. And the mother chose to use contraception with the Lactational Amenorrhea Method (MAL) after giving birth in accordance with the theory and documentation in the form of SOAP. where MAL is a contraceptive that is easy to use and does not require costs.

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