



MIDWIFERY CARE MANAGEMENT FOR NEWBORN BABY USING LOTUS BIRTH METHOD AT HENNY CLINIC MEDAN LABUHAN DISTRICT IN 2025

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ABSTRACT

Midwifery care for newborns aims to support physiological adaptation, maintain clinical stability, and fulfill basic needs optimally, particularly breastfeeding with colostrum which provides immunological protection and essential nutrients supporting immunity, growth, and development. One natural approach that supports newborn adaptation is the Lotus Birth method, in which the umbilical cord is not cut immediately after birth but allowed to separate naturally, a practice believed to enhance placental blood transfusion, reduce the risk of neonatal anemia, strengthen mother–infant bonding, and support early initiation of breastfeeding. However, the Lotus Birth method remains controversial because inadequate placental care may increase the risk of infection, therefore requiring comprehensive, standardized, and supervised midwifery management. This report aims to describe midwifery care management for a newborn using the Lotus Birth method at Henny Clinic, Medan Labuhan District, in 2025. A descriptive case study was conducted on one normal delivery, with data collected through anamnesis, observation, physical examination, and SOAP documentation, and care implemented using Varney's seven-step approach. The results showed that the newborn was healthy without complications, with a birth weight of 3000 grams and a body length of 48 centimeters; placental hygiene was maintained, no signs of infection were observed, and the family education.

Keywords: Lotus Birth, midwifery care , newborn, placenta, umbilical cord.

Introduction

The transition from intrauterine to extrauterine life is one of the most crucial periods for a newborn. During this period, complex physiological changes occur, including adaptation of the respiratory system, changes in blood circulation from fetal to neonatal, and the baby's ability to maintain body temperature. Successful

adaptation is greatly influenced by appropriate and prompt postnatal care, including proper management of the umbilical cord and placenta in accordance with physiological principles. Suboptimal care during this period can impact the newborn's adaptation and health. . Previous studies have emphasized that comprehensive and physiological-based

midwifery care plays an important role in supporting maternal and neonatal health outcomes. Research by Sinaga (2021) highlights that adherence to standard midwifery care and supportive interventions contributes to the effectiveness of maternal and neonatal services(2). In addition, Pinem et al. (2021) reported that natural and supportive midwifery interventions can enhance physiological adaptation in the early postpartum period(3). Furthermore, Juliana, Purba, and Sinaga (2021) emphasized that continuous support from health workers is essential in ensuring optimal care for mothers and newborns, particularly during the critical postnatal transition period

On going support from healthcare professionals, particularly midwives, is a crucial factor in ensuring optimal perinatal midwifery care. This support includes monitoring the condition of the mother and baby, providing education, and providing emotional support during labor and the postpartum period. Juliana, Purba, and Sinaga (2021) emphasized that continuity of care and support from healthcare professionals is essential during the critical postnatal transition period to prevent complications and improve the well-being of both mother and newborn.(Siti, 2022)

One method that has developed in modern obstetric practice is Lotus Birth, an approach to birth in which the umbilical cord is not immediately cut or clamped, but is left connected to the placenta until it falls off naturally. This practice differs from the general recommendation of the World Health Organization (WHO) which suggests cutting the umbilical cord within one to three minutes after birth. However, supporters of Lotus Birth believe that this method allows the baby additional time to

receive blood, nutrients, and stem cells from the placenta, which can support optimal infant health

Lotus Birth advocates believe that maintaining the connection between the baby and the placenta after birth can provide additional physiological benefits for the baby. By not immediately cutting the umbilical cord, the baby is believed to receive additional blood, nutrients, and stem cells from the placenta, which continues to function temporarily after birth. This approach is seen as an effort to support the baby's adaptation more naturally and gradually (Febriana, 2021)

Several studies have shown that delayed cord clamping can increase hemoglobin and iron levels in newborns, and reduce the risk of anemia). In addition, blood transfusion from the placenta after birth is believed to provide long-term benefits for the baby's immunity and development(9). In a spiritual and psychological context, Lotus Birth is considered to provide a more calm, mindful birth process and respect the natural connection between the baby and the placenta.

However, the practice of Lotus Birth also raises concerns from a medical perspective, especially regarding the risk of infection due to the placenta being left open for a long time . Therefore, the implementation of this method must be accompanied by strict hygiene standards and monitoring. Placental care involving the use of salt, herbs, and sterile gauze is an important part of maintaining cleanliness and preventing contamination. Education for parents is also a key factor in the success of this method.

In Indonesia, the implementation of Lotus Birth is still relatively new and has not become a common practice in most

health care facilities. However, several independent clinics and midwives have begun to adopt this method as a form of innovation in midwifery services that are more natural and minimally intervened. One of them is the Henny Midwife Clinic in Medan Labuhan District, North Sumatra, which has implemented the Lotus Birth method for the past three years in its delivery practice.

Initial data obtained from the Henny Clinic showed that the majority of babies born using the Lotus Birth method did not experience complications, with hemoglobin test results still within normal limits. This shows that the practice can be carried out safely, as long as hygiene procedures and education for families are implemented properly. This practice has also received a positive response from several families because it is considered gentler and provides a greater opportunity to establish early bonds with the baby.

Based on this background, this study aims to systematically describe the management of midwifery care for newborns using the Lotus Birth method at the Henny Clinic. This research is expected to contribute to the understanding of Lotus Birth practices in Indonesia, as well as become a reference for the development of holistic, safe, and evidence-based midwifery service .

Research Method

This study uses a qualitative descriptive approach with a case study method, which aims to describe in depth the management of midwifery care for newborns with the Lotus Birth method. This type of research was chosen to obtain a real picture of the implementation of Lotus Birth in midwifery practice, especially at the level of independent health

services such as midwife clinics. This study also focuses on how the assessment, intervention, and evaluation processes are carried out by midwives during and after the delivery process.

The study was conducted at the Henny Midwife Clinic, located in Medan Labuhan District, Medan City, North Sumatra. This clinic was chosen because it has experience in implementing the Lotus Birth method for more than three years. The subjects in this study were one mother giving birth (Mrs. E) and a baby who was born normally without complications. The selection of subjects was done purposively, namely based on the criteria that the mother was willing to undergo the Lotus Birth method and the delivery took place under the direct supervision of health workers.

Data collection was carried out through direct observation, interviews, physical examinations, and medical documentation. Subjective data were obtained through interviews with mothers and their families regarding conditions before, during, and after delivery. Objective data were obtained from the results of newborn examinations, observations of midwife actions, and SOAP documentation and clinical records. In addition, taking photos during the placental care process was also used as supporting visual evidence.

The data that had been collected were analyzed using qualitative thematic analysis techniques, by reducing irrelevant data, presenting the main information in narrative form, and drawing conclusions based on patterns of findings in the field.

Data validity is strengthened through source triangulation, namely comparing information from observations, interviews, and clinical documentation. With this approach, researchers try to provide a

complete picture of the effectiveness and safety of the Lotus Birth method in the context of midwifery practice in the field.

Result

This study was conducted on one case of a mother giving birth (Mrs. E) at the Henny Clinic, Medan Labuhan District, who underwent labor using the Lotus Birth method. The delivery process took place normally without complication. The baby was born in a healthy condition with a weight of 3000 grams, a body length of 48 cm, a heart rate of 120 x / minute, a respiratory rate of 35 x / minute, and a body temperature of 35.7 ° C. The umbilical cord was cut 6 hours after birth. During the observation period, no signs of infection or complications were found, either in the baby or the mother. Placental care was carried out with a cleaning procedure using gauze and salt.

Univariate Analysis

Univariate analysis is the initial stage in data analysis that aims to describe each variable individually. In this study, univariate analysis was used to describe the characteristics of newborns and the results of midwifery care provided using the Lotus Birth method at Henny Clinic. The study was conducted on one mother giving birth (Mrs. E) with one newborn, so the data displayed is descriptive based on the results of observations. The variables observed include: gender, weight, body length, body temperature, respiratory rate, heart rate, Apgar score, umbilical cord cutting time, and placental condition and infection.

Table 1. Bivariate Analysis Results

No	Variable	Result
1.	Gender	Male

2.	Body Weight	3000 grams
3.	Body Length	48 cm
4.	Body Temperature	35.7 ° C
5.	Respiratory Rate	35 x/minute
6.	Heart Rate	120 x/minute
7.	Apgar Score 1 and 5 Minutes	7 and 9
8.	Labor Complications	None
9.	Umbilical Cord Cutting Time	After 6 hours
10.	Placental Care	Gauze + Salt

Based on these results, the baby showed stable vital signs, namely normal body temperature, breathing and heart rate within physiological limits. The Apgar score increased from 7 (first minute) to 9 (fifth minute), indicating that the baby's adaptation was going well. Body weight and body length were also in the normal category for full-term babies.

Discussion

In addition, the umbilical cord was cut after 6 hours after delivery, according to the partial Lotus Birth procedure, which allows for optimal placental blood transfusion. No signs of infection were found, and the placenta was treated using dry gauze and salt sprinkles. Education regarding placental care and signs of infection has been given to the family, which showed a positive response and active involvement in the baby care process.

The results of the univariate analysis

showed that babies born using the Lotus Birth method at Henny Clinic were in good and stable clinical conditions. All physical and physiological indicators showed that this method can be applied safely, as long as hygienic procedures are maintained and education is provided thoroughly. These data support that the Lotus Birth method is not only a spiritual or cultural practice, but also has the potential to provide medical benefits, especially in terms of improving hemoglobin status and postnatal adaptation of babies.

Conclusion and Suggestion

Based on the results of the research and analysis that have been conducted, it can be concluded that the Lotus Birth method can be applied safely and effectively in midwifery services, especially at the level of independent midwife practice. In the case of Mrs. E who underwent normal. Delivery at the Henny Clinic, the application of Lotus Birth by cutting the umbilical cord after 6 hours showed positive results. The baby was born in a healthy condition, with stable vital signs, good Apgar scores, and without complications.

Delaying the cutting of the umbilical cord provides an opportunity for blood transfusion from the placenta to the baby, which plays a role in increasing hemoglobin levels and supporting physiological adaptation after birth. Hygienic placental care using gauze and salt has been shown to prevent infection. In addition, family involvement in care is also an important factor supporting the success of this method.

Thus, the Lotus Birth method can be an alternative in a holistic midwifery care approach, as long as it is carried out with good education, maintained hygiene

procedures, and proper monitoring by health workers.

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