



Butter, Olive Oil, Coconut Oil, and Baby Oil to Prevent Damming of Mother's Milk Water

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Abstract

Background: Exclusive breastfeeding is an effort to reduce infant mortality in Indonesia. The lack of production of mother's milk will result in the process of breastfeeding being disrupted so that it is one of the factors that the mother does not give breast milk exclusively. According to Data Survey Lampung Province Demographic and Health, data from obtained 17.672 people from 21,347 post-partum mothers (from the Demographic Survey of Lampung, 2013) postpartum mothers who had breast milk damming.

Methods: This research method uses a quasi-experimental design. This study compared groups that were treated and the control group. Treatment group 1 was treated with breast care using butter, group 2 breast care using olive oil, group 3 breast care using coconut oil and a control group without treatment using baby oil. The research sample of respondents was 100. Data collection was carried out by breast care for four days, two times per day, then assessed two times on the fourth and fifth day. Data were processed and analyzed by independent T-test.

Result: The results of the assessment of complaints and damages to breast milk after treatment were as follows: butter (1.40), olive oil (1.20), coconut oil (1.48) and baby oil (4.44). Statistical results of the ingredients of butter and baby oil, olive oil and baby oil, as well as coconut oil and baby oil, obtained p-value = 0.001, meaning that it can be concluded that there are differences in the results of assessment of complaints and damaging signs of breast milk among the three ingredients breast care used. The results of this study prove that baby oil is not the only ingredient for breast care but can also use olive oil, butter, coconut oil. Further analysis found that the common complaint of damaging the lowest milk was found in breast care with olive oil, followed by butter, coconut oil, and baby oil.

Conclusion: From these results, health service providers can provide booklets and health workers should be able to socialize the steps and alternatives for materials breast care by including instructions for breast care.

Keyword: Lactation, breastfeeding, mother's milk, breast care.

Introduction

Infant mortality in Indonesia based on the results of the Indonesian demographic and health survey (IDHS) in the 2014 IDHS shows that IMB is 32 deaths per 1,000 live births, this figure is lower

than the planned MMR for the SDG's target of 24 per 1,000 live births (MOH, 2016).

Research conducted by Kumalasari (2014) shows that exclusive breastfeeding is influenced by various factors including breast milk not

immediately exiting after childbirth, lack of breast milk production, difficulty in sucking the baby, the condition of the mother's nipple that does not support, mother work, and influence/promotion of substitute for breast milk.

Damming breast milk caused by spending milk which is not smooth because the baby does not feed the mother often enough. This disorder can become more severe if the mother rarely feeds the baby. As a result, the baby does not get breast milk *exclusively* and when not immediately handled it will cause damaging the mother's milk on the breast. Damage to breast milk can occur due to narrowing of the lactoferrin duct or by glands not emptied completely or because of abnormalities in the nipples resulting in swelling of the breast due to increased venous and lymph flow resulting in damming mother's milk and pain accompanied by an increase in body temperature (Sholicah, 2012).

In the area of South Lampung Regency in 2015, the local health office succeeded in collecting data on postpartum women including physiological postpartum women as many as 3000 people. Postpartum mothers with problems such as postpartum mothers 445 people experiencing blockage of breast milk, 100 postpartum mothers who had dizziness, 25 postpartum mothers who experienced an increase in body temperature and 66 postpartum mothers who had *mastitis*.

Methods

This research method uses a *quasi-experimental design*. This study compared groups that were treated and the control group. The treatment group 1 was given treatment *Breast Care* using the Butter uses olive oil group 2, group 3 using coconut oil, as well as group control *Breast Care* using the *Baby Oil*.

The sample of this study was postpartum mothers who had their health checked into a community health center in South Lampung Regency, based on the calculations obtained a total of 25 respondents per group, with a ratio of 1: 1, so that the overall respondents amounted to 100

respondents. The data analysis used in this study is descriptive statistics and data analysis with inferential statistics.

Results

Based on the research it was seen that the average results of the complaints and dam signs after *breast care* with butter were 1,40. *Breast care* with olive oil averaged the results of complaints assessment and dam signs breast milk 1,20. *Breast care* with coconut oil the average results of the evaluation of complaints and dam signs were 1.48. *Breast care* with *baby oil* averaged the results of complaints assessment and ASI dam signs 4.44.

Based on the research, it can be seen that the common complaint of breast milk carried out by breast care with butter is 1.40 with a standard deviation of 1.384, whereas for the common complaint of breast milk carried out by breast care with baby oil ingredients is 4.44 with a standard deviation of 3.489. The statistical test results obtained $p\text{-value} = 0.001$, meaning that it can be concluded that there is a significant influence on the average dam damages complaints between using breast care butter ingredients and baby breast oil ingredients.

The average complaint of breast milk carried out by breast care with olive oil is 1.20 with a standard deviation of 1.354, whereas for the average complaint of breast milk carried out by *breast care* with ingredients *baby oil* is 4.44 with a standard deviation of 3.489. The statistical test results obtained $p\text{-value} = 0.001$, meaning that it can be concluded that there is a significant influence on the average dam complaints between using the ingredients of olive oil breast care with ingredients *breast care baby oil*.

The average complaint of breast milk carried out by breast care with coconut oil is 1.48 with a standard deviation of 1.2222, while for the average complaint of breast milk carried out by breast care with baby oil ingredients is 4.44 with a standard deviation of 3.489. The statistical test results obtained $p\text{-value} = 0.001$, meaning that it can be concluded that there is a significant effect

of the average dam complaints between using breast care coconut oil and baby oil ingredients.

Discussion

The results of statistical tests show that there is a significant influence on the average incidence of complaints of damaging breast milk between breast care using butter and breast care ingredients using baby oil.

Butter contains natural fats and contains nutrients that are rich in benefits. Butter for skin health benefits. Saturated fat in butter can help maintain healthy skin. Even natural ingredients in butter can help overcome various facial skin problems such as pimples, blackheads, black spots on the surface of the face, and cracks on the lips. Overcome issues in the breast skin by helping to soften the breasts and nipples so that they are not irritated and abrasion during breastfeeding. Butter can be used to treat skin for example with *body butter* which is currently trending in the world of beauty (Silalahi,2012).

Butter which is commonly used for cooking can be used as a beauty care product. Because it is made of cream containing nutrients moisturizer and softening milk, butter has properties *deep moisturizing* for the skin and body. Softening the skin, the content of vitamin A in butter can help soften and soften the skin.

This study also supports the research conducted by Meiharti (2012), which is the primary treatment for damaging breast milk is restoring the condition and preventing complications, namely mastitis, and abscess (festering) and sepsis that can occur if treatment is late and less effective. Lactation is still recommended to continue breast emptying is very important for the success of therapy. Therapy such as bed rest, administration of adequate fluids, anti-pain and anti-inflammation is highly recommended. For prevention, it is recommended that good breast care and cleaning the remaining milk in the skin of the breast.

The results of statistical tests showed that there was a significant influence on the average

incidence of complaints of breast milk between breast care using olive oil and breast care ingredients using *baby oil*. When you have to breastfeed, sometimes there are some problems in the nipple area. Symptoms such as burning, itching and dry sensation are often found among nursing mothers. As a result, the nipple may experience blisters. By using olive oil, the dryness in the area will be overcome. According to page Antonopoulos(2006), besides using pure milk and lanolin, olive oil can be used to reduce skin dryness.

According to Boskou (2006), the content of olive oil is complete. This oil contains at least various kinds of vitamins including vitamins A, B1, B2, C, D, E, and K. The high content of vitamin E in this oil is effective in maintaining healthy skin and makes skin softer free from dryness. Applying olive oil to the nipple area can prevent the nipple from blisters due to dehydration or because of activities breastfeeding. One of the unique features of olive oil is that it can lift dead cells on the skin. Therefore, by applying olive oil on the surface of the breast, it will function to remove dead skin, so that it will clean your breasts from the dirt. 3). Brighten the surface of the breast, in olive oil, and there are antioxidant compounds and vitamin E which function to remove and replace damaged skin cells. Therefore the use of olive oil in the breast will always keep the cells and beautify and brighten the skin on the breast. 4). Helps Tighten the Breasts, When women have given birth and breastfed, the breast muscles will also relax. 5). Helping to Streamline Breast Milk in Breastfeeding Mothers, If you experience problems with the smooth operation of breast milk, then there is no harm in trying to facilitate your milk by using olive oil. Based on research, the use of olive oil, both taken directly or topped in the breast can help facilitate breastfeeding in pregnant women (Victoria,2012).

The results of statistical tests showed that there was a significant effect on the average incidence of complaints of breast milk among breast care using coconut oil and using baby oil. The benefits

of coconut oil are very good for consumption for both pregnant, childbirth and breastfeeding mothers because it can facilitate breastfeeding. Drinking one teaspoon of coconut oil can facilitate breastfeeding. The smoothness of breast milk provides benefits to the baby's immune system contained in coconut oil.

Around the third or fourth day after giving birth, the breast often feels full, tense, and painful. Such conditions are called *engorgement* (swollen breasts) caused by the presence of *static* in *veins* and transparent blood vessels.

This is a sign that milk is starting to be secreted a lot. If in this situation the mother avoids breastfeeding for reasons of pain then gives pre-lacteal feeding (additional food) to the baby, the condition will continue. If this continues, the maternal milk secreted builds up in the breast and causes the areola (the black part that encircles the nipple) is more prominent, the nipple becomes flattered and is difficult for the baby to suck. When the situation has arrived like this, the skin in the breast will appear shiny red, very painful and the mother feels a fever like influenza and so on (McInness, 1998).

The results of this study are in line with what was conveyed by Lombano (2008), that milk dams can occur on the 3rd or 4th day when the breasts have produced milk. Dams are caused by discharging milk that is not smooth because babies are not enough to breastfeed, production increases, late breastfeeding, bounding with babies (bounding) is not good, and can also be due to restrictions on breastfeeding time.

Whenever possible, mother recommended doing lactation exercise (breastfeeding exercise), namely move the arm in a spin so that the shoulder joint moves in the same direction. This movement will help facilitate the circulation of blood and lymph in the breast area so that static can be avoided which means reducing the possibility of *abscesses* breast (Dewey, 1984).

The results of this study indicate that if all postpartum mothers get breast care twice a day for five days, it will significantly reduce complaints

and signs of mother's milk damming. It is strongly recommended to use ingredients, olive oil, butter, coconut oil, and baby oil as ingredients in carrying out *breast care*. The implementation of breast care requires an effort to provide information and care for midwifery at an adequate and routine period of childbirth to raise awareness until adopting healthy lifestyle needs a long time and in other factors, both internal and external including the family environment, the community and interactions of health worker behavior.

Conclusion

The results of statistical tests showed a significant effect on the average complaints of damaging mother's milk between using breast care butter ingredients and baby breast oil ingredients. The analytical test results showed a substantial impact on the average dam complaints about using olive oil breast care ingredients with baby breast oil ingredients. The results of the statistical test showed a significant effect on the average dam complaints between using breast care coconut oil and baby oil ingredients.

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