



---

## The Effectiveness of Back Totok as a Natural Labor Induction in Third Trimester Pregnant Women at PMB Afah Fahmi, Amd.Keb

---

<sup>K</sup>Miftakhul Khairoh<sup>1</sup>, Arkha Rosyaria<sup>2</sup>

<sup>1,2</sup>, Universitas Dr. Soetomo Surabaya

Email Author Correspondence (<sup>K</sup>): miftakhairoh34@gmail.com

---

### ABSTRACT

Background : Acupressure is a very important therapy in Chinese medicine which was developed more than 5,000 years ago in Asia. Acupressure therapy is one of the therapeutic procedures for pregnant women for natural labor induction.

Purpose: for natural labor induction, it is done by pressing the Ciliao point located in the lower back, between the back dimples and the lumbar spine which functions to induce labor, reduce pain during labor, and help lower the baby's position. Methods: The research design used was pre-experimental with a pretest and posttest without control group with the population in this study being third trimester pregnant women who did not feel contractions at PMB Afah Fahmi, Amd.Keb as many as 30 third trimester pregnant women.

Results: Based on the results of statistical analysis using the McNemar test, the results obtained = 0.000 with a level of 0.05 which means = 0.000 < 0.05 then there is a relationship between giving full-blooded back to contractions in third trimester pregnant women, which means H1 is accepted and H0 is rejected. .

Conclusion: The results showed that the contractions of pregnant women in the third trimester prior to acupressure therapy were all 30 (100%) respondents did not experience contractions. Then in the third trimester of pregnancy contractions after acupressure therapy, almost all of them experienced contractions, namely 25 (83%) respondents

Keywords: Natural Labor Induction

---

### *Article history :*

*Received: 9 Februari 2022*

*Received in revised form: 11 Maret 2022*

*Accepted: 22 April 2022*

*Available online: 1 Juni 2022*



Licensed by [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/).

---

---

## INTRODUCTION

Pregnant women usually need adjustments to carry out new activities. A woman is expected to change her habits that can endanger her pregnancy from an early age, namely by knowing the early symptoms of pregnancy. (Princess, 2014).

Maternal mortality and morbidity is still a serious health problem in developing countries. According to the 2014 WHO report, the Maternal Mortality Rate (MMR) in the world is 289,000 people. Some countries have a fairly high MMR, such as Sub-Saharan Africa with 179,000, South Asia with 69,000, and Southeast Asia with 16,000. The maternal mortality rate in Southeast Asian countries is Indonesia 190 per 100,000 live births, Vietnam 49 per 100,000 live births, Thailand 26 per 100,000 live births, Brunei 27 per 100,000 live births, and Malaysia 29 per 100,000 live births (WHO, 2014) .

In Indonesia, it is 359 per 100,000 people per year. From January to September 2016 the Maternal Mortality Rate (MMR) increased when compared to the target of AKI in Indonesia in 2015 which was 102 deaths per 100,000 live births. The infant mortality rate (IMR) in the world is 10,000,000 people per year. and based on the preliminary results of the 2015 Intercensus Population Survey (SUPAS). The Infant Mortality Rate (IMR) in Indonesia reached 22 per 1000 live births. (Ministry of Health RI, 2017) The Maternal Mortality Rate in East Java tends to increase in the last two years according to Supas in 2016, the target for MMR is 305 per 100,000 live births. In 2017, the MMR in East Java Province reached 91.92 per 100,000 live births. This figure has increased compared to 2016 which reached 91 per 100,000 live births. (Profile of the Surabaya City Health Office, 2017).

The third trimester of pregnancy is often called the waiting or alert period because at that time the mother feels impatient waiting for the birth of her baby. The movement of the baby and the enlargement of the stomach are 2 things that remind the mother of her baby. Sometimes mothers feel worried that their baby will be born at any time, this causes mothers to increase their awareness of the signs and symptoms that will occur, mothers often feel worried or if the baby to be born is not normal. (Ina, 2014) Acupressure is a very important therapy in Chinese medicine that was developed more than 5,000 years ago in Asia. This method is done by placing the fingers in certain locations and applying pressure to important points throughout the body. All related pressure points to induce labor should only be administered to women who are more than 36 weeks' gestation. Applying pressure to the points that work to induce labor too early can cause health problems. (Hartanto. 2014)

Acupressure therapy is one of the therapeutic procedures for pregnant women for natural labor induction. This therapy can be done by pressing the Ciliao point, which is located in the lower back, between the dimples in the back and the lumbar spine. This point serves to induce labor, reduce pain during labor, and help lower the baby's position.(Adelia. 2018) From the initial preliminary study of data obtained from PMB Mrs Afah Asem Rowo 3 on March 4, 2018 to March 14, 2019, there were 215 pregnant women from December 2018 to February 2019 there. Of the 125 pregnant women, there were 50 pregnant women in the third trimester and 20 pregnant women who did not feel contractions.

Based on the data above, the authors are interested in conducting a full-blooded study as a natural labor induction in third trimester pregnant women at BPM Ny Afah Asem Rowo 3 Surabaya 2019

### METHOD

This type of research is quantitative, experimental which aims to determine the effectiveness of full-blooded back as a natural labor induction in third trimester pregnant women. This study used a pre-experimental research design with a pretest and posttest without control group, which means that the researcher only intervened in one group without a comparison. The effectiveness of the treatment can be assessed by comparing the pretest and posttest scores (Heriyanto, 2017: 80). Pre-Experimental with Pretest And Posttest Without Control

### RESULTS

#### A. Overview of Research Sites

The general description of the place of this research is PMB Afah Fahmi, Amd.Keb whose address is at Jl. Asem III No. 8 Surabaya City with a practice permit. No. 503. 446/0276/SIPB/IP. BD/436. 6. 3/2014 and No. Tel 085852320023. PMB Afah Fahmi Building, Amd.Keb is a permanent building with ceramic floors and ceramic walls, the building consists of one waiting room, one registration room, one examination room consisting of two beds, one delivery room consisting of three beds , and one postpartum room which consists of four beds. The family room is on the top floor where the family exit is separated from the PMB.

Midwifery services provided in the form of antenatal care, 24-hour delivery, postpartum, family planning, IVA and Pap smear, and IMCI and MTBM services. Midwives who work at PMB Afah Fahmi, Amd.Keb are midwives who have received STR and have attended several midwifery trainings and seminars.

#### B. Research Results

##### 1. General Data

##### a. Frequency distribution of respondent's age

Table 4.1 Frequency distribution of respondents' age

Ages	Frekuensi ( f )	Presentase ( % )
<20 years	4	13
20 – 35 years	16	54
>35years	10	33
Total	30	100

(Sumber : Data primer 2019)

Based on Table 4.1 above, it shows that most of the pregnant women in PMB Afah are aged 20-35 years, as many as 16 (54%).

b. Frequency distribution of respondents by occupation

Table 4.4 Frequency distribution of respondents by occupation

Occupation	Frekuensi ( f )	Presentase ( % )
IRT	21	70
Swasta	36	20
Wiraswasta	3	10
Total	30	100

(Sumber : Data primer 2019)

Based on Table 4.4 above, it shows that most of the pregnant women in PMB Afah work as IRT, as many as 21 (70%)

2. Special Data

a. Distribution of Contraction Frequency in Third Trimester Pregnant Women before acupressure therapy

Table 4.5 Distribution of contraction frequency in third trimester pregnant women before being given acupressure therapy with a questionnaire

Contraction	Frekuensi ( f )	Presentase ( % )
Uncontraction	30	100
Contraction	0	0
Total	15	100

(Sumber : Data primer 2019)

Based on Table 4.5 Distribution of Contraction Frequency in Third Trimester Pregnant Women prior to acupressure therapy, as many as 30 (100%) respondents did not experience contractions.

b. Distribution of Contraction Frequency after acupressure therapy

Table 4.5 Distribution of the frequency of contractions in third trimester pregnant women after being given acupressure therapy with questionnaires

Contraction	Frekuensi ( f )	Presentase ( % )
Uncontraction	5	17
Contraction	25	83
Total	30	100

(Sumber : Data primer 2019)

Based on Table 4.6 Distribution of Contraction Frequency in Third Trimester Pregnant Women after acupressure therapy almost all experienced contractions, namely as many as 25 (83%) respondents.

c. Cross tabulation of contraction frequency before and after acupressure therapy

Table 4.7 Distribution of Frequency Cross tabulation of contractions in third trimester pregnant women before being given acupressure therapy with questionnaires.

acupressure therapy contraction	Uncontractio		contraction		Total
	n				
	f	%	f	%	%
Before	30	100	0	0	100
After	5	17	25	83	100

(Sumber : Data primer 2019)

Based on Table 4.7 Distribution of Contraction Frequency in Third Trimester Pregnant Women after acupressure therapy, almost all of them experienced contractions, as many as 25 (83%) respondents. Based on the results of statistical analysis using the McNemar test, the results obtained = 0.000 with a level of 0.05 which means = 0.000 < 0.05 then there is a relationship between giving full-blooded back to contractions in third trimester pregnant women, which means H1 is accepted and H0 is rejected.

**DISCUSSION**

1. Distribution of Contraction Frequency in Third Trimester Pregnant Women before acupressure therapy

Based on Table 4.5 Distribution of Contraction Frequency in Third Trimester Pregnant Women prior to acupressure therapy, all 30 (100%) respondents did not experience contractions.

According to Adelia 2018 This therapy can be done by pressing the Ciliao point, which is located in the lower back, between the dimples in the back and the lumbar spine. This point serves to induce labor, reduce pain during labor, and help lower the baby's position (Adelia. 2018). Acupressure is the development of massage therapy that goes hand in hand with the development of acupuncture because massage techniques Acupressure is a derivative of technical acupuncture. The technique in this therapy uses fingers instead of needles but is carried out at the same points as those used in acupuncture therapy. (Hartanto, 2012: 4)

Based on the opinion of researchers, Acupressure means a massage technique that is carried out at certain points on the body, to stimulate energy points. These points are acupuncture points. The goal is that all the organs of the body get enough 'chi' so that there is a balance of body chi. 'chi' is the

energy that flows through the tissues in the various meridians of the body and its branches. While Acupressure does the same thing with finger pressure and massage.

2. Distribution of Contraction Frequency in Third Trimester Pregnant Women after acupressure therapy  
Then in Table 4.6 Contraction Frequency Distribution of Third Trimester Pregnant Women after acupressure therapy almost all experienced contractions, namely 25 (83%) respondents. Tables 4.5 and 4.6 can explain the effectiveness of acupressure therapy in third trimester pregnant women, as many as 25 (83%) respondents experienced contractions after being treated.

The goal of acupressure is to stimulate the body's ability to heal itself. The therapist will hold or press various points on the body or muscle system to stimulate energy from the body itself. This stimulation removes energy blockages and fatigue. When all energy pathways are open and the flow of energy is no longer blocked by muscle tension or other obstacles, the body's energy will be balanced. Balance brings good health and a feeling of well-being. If one of the pathways is blocked/blocked, it is necessary to apply with the right pressure using the fingers to relax muscle tension, make blood circulation smooth, and stimulate or balance the flow of energy (hartanto, 2014).

Acupressure therapy is one of the therapeutic procedures for pregnant women for natural labor induction. This therapy can be done by pressing the Ciliao point, which is located in the lower back, between the dimples in the back and the lumbar spine. This point serves to induce labor, reduce pain during labor, and help lower the baby's position.

Acupressure therapy was carried out for 7 days, carried out at the ciliary point located in the lower back, between the back dimples and the lumbar spine. In a day the effectiveness is carried out 1 time in a row for 7 days with a length of 5-10 minutes (Adelia. 2018).

## CONCLUSION

1. The results showed that the contractions of pregnant women in the third trimester prior to acupressure therapy were all 30 (100%) respondents did not experience contractions.
2. The results showed that the contractions of pregnant women in the third trimester after acupressure therapy almost all experienced contractions, namely 25 (83%) respondents
3. Based on the results of statistical analysis using the McNemar test, the results obtained = 0.000 with a level of 0.05, which means =  $0.003 < 0.05$ , then there is a relationship between giving back acupuncture and contractions in third trimester pregnant women, which means  $H_1$  is accepted and  $H_0$  is rejected. This can explain the effectiveness of acupressure therapy in third trimester pregnant women, namely as many as 25 (83%) respondents who experienced contractions after being given treatment.

### B. Suggestion

1. For pregnant women

It is hoped that the next acupressure therapy can be applied if the mother feels the contract signal is lacking, so that at least the problems experienced by pregnant women in the third trimester can be resolved by asking for help from their husbands or family

2. For institutions

The results of this research can be a new reference for the campus library and can be continued by younger classmates by further perfecting research

3. Share the research site

Midwives at PMB Afah Fahmi, Amd.Keb can apply acupressure therapy to pregnant women who have not felt contractions during the third trimester

4. For the next researcher

This research cannot be perfect if there are no other studies that continue it, for that, it is necessary to have more similar research samples and new methods so that the results can be continued as a reference for further research.

## REFERENCES

- A, Tamsuri. *Konsep dan Penatalaksanaan Nyeri*. Jakarta: EGC, 2007.
- Danutmaja, B. "40 Hari Pasca Persalinan." Jakarta: Puspa Swara, 2015.
- Febi S, Elli H, Sitti N. "Asuhan Kebidanan Masa Nifas." *Fakultas kedokteran dan Kesehatan Universitas Muhammadiyah* (2017).
- H, Wiknijoastro. *Ilmu Bedah Kebidanan*. Jakarta: Bina Pustaka, 2017.
- Handayani, L. *Tanaman Obat Untuk Masa Kehamilan dan Pasca Kehamilan*. Jakarta: Penebaran Swadaya, 2017.
- Jatim, Dinkes. *Dinkes Jatim*. 2020. 2020.
- Juda, M. *Teori Pengukuiran Nyeri dan Nyeri Persalinan*. Yogyakarta: Nuha Medika, 2012.
- Latifin. *Panduan Dasar Klinik Keperawatan*. Malang: Penerbit Gunung Samudera, 2016.
- Marsito. *Sehat di Usia Lanjut dengan Ramuan Herbal*. Jakarta: Swadaya Penerbit, 2010.
- Sitti, Saleh. *Ashan kebidanan Pada Masa Nifas* . Jakarta: Salemba Medika, 2016.
- Sulistyawati. *Asuhan Kebidanan Pada Masa Nifas*. Yogyakarta: Penerbit Andi, 2019.
- WUlandari, A. <https://media.neleti.com/media/publication/217380-herbal-untuk-perawatan-masa-nifas-penggu.pd>. 2017. 20 06 2020.
- Yulizawati, Ayunda Aldina, El Lusiana, Adriani Feni. *Buku Ajaran Asuhan Kebidanan Pada Persalinan*. Sidoarjo: Indomedia Pustaka, 2019.