

The Application of Oxytocin Massage to Increase Breast Milk Production in Postpartum Mothers in the Mawar Room of Kardinah Regional General Hospital, Tegal City

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ABSTRACT

Background & Objective: Breastfeeding is very important for a mother for the development and growth of her child. Breastfeeding problems often occur in mothers due to low milk production in the first few days *postpartum*, which becomes an obstacle in providing exclusive breastfeeding to their babies. This case study aims to determine the application of oxytocin massage in increasing milk production in *postpartum* mothers. **Method:** The research design used in this study is descriptive with a case study method. The subject of the case study is Mrs. N, a *postpartum* mother on her first day in the Mawar Ward of Kardinah General Hospital in Tegal City. **Result:** The results of the case study conducted over three days showed an increase in breast milk production in Mrs. N, as evidenced by: the client stating that her breast milk flowed smoothly after the oxytocin massage. **Conclusion:** The application of oxytocin massage as a nursing intervention for Mrs. N, who was experiencing breastfeeding issues, was proven to be effective in increasing breast milk production. This intervention was conducted over three days and showed positive results on the third day, indicating that oxytocin massage could serve as an effective alternative intervention to address insufficient breast milk supply.

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Introduction

The *postpartum* period, also known as the puerperium, is the period between the birth of the baby and the placenta detaching from the uterus, or when the reproductive organs return to their normal state as before giving birth. During the postpartum period, mothers will experience various changes, one of which is in the breasts. The

breasts will enlarge, feel harder, and the area around the nipples will appear darker. These changes indicate that the process of breastfeeding has begun (Nova & Zagoto, 2020).

Breastfeeding is extremely important for a mother's child's development and growth. Breast milk contains high-quality nutrients that are beneficial for the baby's growth and cognitive development (Nurita, 2022). Breast milk is believed to meet the baby's nutritional needs for the first six months, as all the nutrients and fluids the baby needs are already present in breast milk (Yusari, 2017).

Breastfeeding issues often arise for mothers due to low breast milk production in the first few days postpartum, which poses a challenge in providing exclusive breastfeeding to their babies (Vidayanti & Wahyuningsih, 2017). Additionally, during the breastfeeding process, other issues may arise, such as swollen breasts, mastitis, inverted nipples, milk not flowing properly, and incorrect breastfeeding techniques, all of which can contribute to breastfeeding failure (Handayani & Rustiana, 2020).

The effects of these issues on mothers include breast distension, mastitis, etc. Meanwhile, the effects on infants include inadequate fulfillment of nutritional needs, which can affect growth and development, as well as unmet needs such as a sense of security, the warmth of the mother's embrace, and the mother's touch (Handayani & Rustiana, 2020).

According to the *World Health Organization and the United Nations International Children's Emergency Fund*, in 2022, the global coverage of exclusive breastfeeding reached 48%. In Indonesia, the coverage of exclusive breastfeeding in 2022 was recorded at only 67.96%, down from 69.7% in 2021 (WHO, 2023). In Central Java Province, the exclusive breastfeeding coverage rate, according to the Central Java Health Department (2021), was 72.5% in 2021, an increase compared to 67.3% in 2020 (Central Java Provincial Health Department, 2021). Meanwhile, the exclusive breastfeeding coverage in Tegal City in 2022 was 65.9% (Tegal City Health Department, 2022).

Based on existing theoretical studies, several factors influencing the effectiveness of breastfeeding include: maternal factors and infant factors. Maternal factors affecting breastfeeding effectiveness include the mother's diet, mental and emotional well-being, use of contraceptives, breast care, breast anatomy, physiological factors, and sleep patterns. Infant factors affecting breastfeeding effectiveness include the infant's sucking reflex, breastfeeding frequency, birth weight, and gestational age at birth.

The main cause of ineffective breastfeeding in Central Java is that breast milk does not flow. Factors influencing the smooth production of breast milk include massage, breast care, and consumption of foods that can increase breast milk production (Astutik, 2017). One massage technique commonly performed on *postpartum* mothers is oxytocin massage. This massage is believed to stimulate the nipples and is one method used to increase breast milk production.

Oxytocin massage is a non-pharmacological method to help stimulate the release of oxytocin hormone (Febriani et al., 2025). This massage technique is performed along the vertebral spine up to the fifth and sixth ribs to stimulate the release of prolactin and oxytocin hormones after childbirth (Mintaningtyas & Isnaini, 2022). Oxytocin massage can be easily performed as the movements are simple and the time required is relatively short. This oxytocin massage can provide comfort to the mother, reduce engorgement, and alleviate milk duct blockages.

A study conducted by Sudiar & Kristiana (2024) on the Effect of Oxytocin Massage on Breast Milk Production in *Postpartum* Mothers at PMB Eka Rini, Kalirejo District, Central Lampung, showed that there is an effect between oxytocin massage and breast milk production, with a p-value < 0.05. This is evidenced by the fact that 83.3% of mothers who received oxytocin massage had sufficient breast milk production.

The administration of oxytocin massage is part of the nurse's role as a caregiver in providing nursing care. Through this oxytocin massage, nurses provide support and comfort to postpartum mothers, which ultimately helps increase breast milk production and improve breastfeeding effectiveness. Nurses also provide health education and demonstrate the proper technique for oxytocin massage to the client's spouse or family.

Based on the above issues, the author is interested in developing a Final Nursing Thesis titled "The Application of Oxytocin Massage to Increase Breast Milk Production in Postpartum Mothers in the Mawar Ward of Kardinah General Hospital, Tegal City."

Objective

Based on this, the researcher was interested in conducting this study with the aim of determining the application of oxytocin massage in increasing milk production in *postpartum* mothers in the Mawar Room of Kardinah Regional General Hospital in Tegal City.

Method

The research design used in this study is a descriptive method. The study design employed is a case study design. The case study was conducted by collecting data in accordance with the nursing process, which includes interviews, physical examinations, observations, and documentation. The research subjects in this study were *postpartum* mothers on the first day of spontaneous labor in the Mawar Ward of Kardinah General Hospital in Tegal City.

Results

Mrs. N is a 19-year-old mother with a high school education. Her husband, Mr. R (20 years old), also has a high school education and works as an entrepreneur. P1A0 spontaneous delivery on January 2, 2025, at 08:05 a.m., baby gender male, birth weight 3100 grams, and baby length 50 cm. Based on the assessment conducted on January 2, 2025, the mother reported postpartum pain in the perineum. The pain worsened with activity but improved with rest. The client described the pain as feeling like being cut by a sharp object, with pain in the perineal area, rated at a pain scale of 5. The pain comes and goes; the client grimaces when moving and stated she is still afraid to walk. The client also mentioned that breast milk flow is not smooth; only a small amount of milk was produced on the first day postpartum, and upon palpation, only a few drops of milk were observed. The client stated that this was her first childbirth. She had never undergone breast care before. She also stated that she had not had a bowel movement due to fear. BP: 137/87 mmHg, HR: 108 beats per minute, RR: 22 breaths per minute, T: 36.1°C.

Nursing interventions that can be implemented to address ineffective breastfeeding include breastfeeding education, starting with observation, therapeutic

measures, and education. The following actions were taken: identifying breastfeeding goals and desires, supporting the mother in building confidence in breastfeeding, providing oxytocin massage, recommending fiber-rich foods to facilitate milk flow, explaining the benefits of breastfeeding for both mother and baby, teaching self-care for the breasts (oxytocin massage), and encouraging continued breastfeeding even if milk flow is minimal.

The application of oxytocin massage on Mrs. N was conducted for three consecutive days, with one session of oxytocin massage per day lasting approximately 15 minutes.

The actions taken were aligned with the plan designed to address ineffective breastfeeding, with the intervention focus being the application of oxytocin massage on Mrs. N in the Mawar Room at Kardinah General Hospital in Tegal City. Following this, her milk production was monitored daily for three days. The implementation carried out on January 2–4, 2025, was as follows:

The nursing interventions performed on Mrs. N on the first day (Thursday, January 2, 2025) were: identifying breastfeeding goals and desires, supporting the mother in building confidence in breastfeeding, performing oxytocin massage, explaining the benefits of breastfeeding for the mother and baby, and recommending fiber-rich foods to help improve milk flow. The response received after the implementation was that the client stated that milk flow was not smooth, the client stated that only a small amount of milk was being produced, the client understood and comprehended the benefits of breastfeeding, upon palpation only a small amount of milk was being produced, and the client was advised to consume fiber-rich foods to help improve milk flow.

The nursing interventions implemented on the second day (Friday, January 3, 2025) were: administering an oxytocin massage and advising the mother to continue breastfeeding her baby despite the small amount of milk being produced. The response received was that the client felt more relaxed and comfortable, the client stated that breast milk was flowing but not yet in large quantities, the client appeared relaxed, the client was seen breastfeeding her baby, and the baby's sucking reflex was very strong.

The nursing interventions implemented on the third day (Saturday, January 4, 2025) included: administering an oxytocin massage, encouraging the client to breastfeed her baby more frequently, and teaching breast care (oxytocin massage) to the husband/family. The response obtained was that the client reported feeling comfortable and relaxed after the oxytocin massage, the client reported that breast milk flow was smooth after the oxytocin massage, the client appeared relaxed, the client was seen breastfeeding her baby again, and the husband understood how to perform the oxytocin massage.

The evaluation results on the first day (Thursday, January 2, 2025) yielded the following data. Subjective: the client reported that breast milk flow was not smooth, the client reported that only a small amount of breast milk was flowing, Objective: upon palpation, only a small amount of breast milk was flowing, the client was advised to consume fiber-rich foods to help improve breast milk flow, Assessment: the issue has not been resolved, Plan: The intervention will continue with oxytocin massage, and the mother will be advised to continue breastfeeding her baby even though the milk flow is minimal.

The results of the evaluation on the second day (Friday, January 3, 2025) yielded the following data. Subjective: the client reported feeling more relaxed and comfortable, and stated that breast milk had begun to flow but not in significant quantities. Objective: The client appeared relaxed, the client was seen breastfeeding her baby, the baby's sucking reflex was very strong, Assessment: The issue was partially resolved, Plan: Intervention continued with administering oxytocin massage again, advising the mother to breastfeed her baby more frequently, teaching the husband and family how to care for the breasts (oxytocin massage).

Evaluation results on the third day (Saturday, January 4, 2025) yielded the following data. Subjective: The client reported feeling comfortable and relaxed after the oxytocin massage, and stated that her breast milk flow was now smooth after the oxytocin massage. Objective: The client appears relaxed, the client has resumed breastfeeding her baby, the husband has understood how to perform the oxytocin massage. Assessment: The issue is resolved. Plan: Intervention is discontinued (the client is discharged and prescribed medication).

The evaluation conducted over three days showed an increase in breast milk production in Mrs. N, as evidenced by: the client reported that her breast milk flow was now smooth after the oxytocin massage.

Discussion

This case study will discuss the results of applying oxytocin massage to Mrs. N in the Mawar Room at Kardinah Regional General Hospital in Tegal City. The case study found that there was an increase in breast milk production after oxytocin massage was performed regularly once every three days.

Oxytocin massage is a massage performed along the spine (vertebrae) up to the fifth to sixth ribs, aimed at increasing the production of prolactin and oxytocin hormones after childbirth to enhance breast milk production (Rahayu et al., 2015) According to Nurhasanah (2025), through massage on the spine, neurotransmitters stimulate the medulla oblongata to directly send signals to the hypothalamus to release oxytocin. This massage also helps relax tension, reduce stress, and enhance comfort (Zubaedah et al., 2021).

Oxytocin massage is one of the massage techniques commonly performed on postpartum mothers or those who have recently given birth. This massage is believed to stimulate the nipples and is one of the methods used to increase breast milk production. This aligns with a study conducted by Sitepu (2025) titled "The Effect of Oxytocin Massage on the Smoothness of Breast Milk Production in Postpartum Mothers at the Kasih Ibu Primary Clinic in Deli Tua in 2024," which found that the majority of mothers (65%) who received oxytocin massage experienced increased and smooth breast milk production.

The next step is to determine the nursing diagnosis. The nursing diagnosis identified in this case study is Ineffective Breastfeeding. This aligns with the opinion of the SDKI DPP PPNI Task Force (2017), which states that potential diagnoses for *postpartum* mothers include acute pain, ineffective breastfeeding, risk of infection, sleep pattern disturbances, risk of attachment issues, knowledge deficit, and postpartum discomfort.

Nursing interventions that can be implemented to address ineffective breastfeeding include breastfeeding education, starting with observation, therapeutic measures, and education. The following actions are performed: identifying readiness

and ability to receive information, identifying breastfeeding goals and desires, supporting the mother in building confidence in breastfeeding, providing oxytocin massage, recommending fiber-rich foods to facilitate milk flow, explaining the benefits of breastfeeding for the mother and baby, teaching breast care (oxytocin massage), and encouraging continued breastfeeding even if milk flow is minimal.

The implementation conducted on the client over three days yielded the following results: after the oxytocin massage on day 1, milk flow was not yet smooth. On day 2, milk began to flow but not in large quantities. On day 3, after the oxytocin massage, milk flow was smooth, and the client felt comfortable and relaxed after the oxytocin massage.

This aligns with the study conducted by Sulaeman (2019) titled "The Effect of Oxytocin Massage on Breast Milk Production in *Postpartum* Primiparous Mothers," which found an increase in breast milk production after oxytocin massage, averaging 5.37 times, compared to before the massage, averaging 0.97 times.

According to a journal written by Susilawati (2024) titled "The Effect of Oxytocin Massage on Breast Milk Production in *Postpartum* Mothers at the Watampone Public Health Center, Bone District, in 2024," it was found that there was an increase in breast milk production in mothers after oxytocin massage.

The three journals above align with the application conducted by the author. After the nursing intervention of oxytocin massage, an increase in breast milk production was observed in Mrs. N in the Mawar Room of Kardinah General Hospital in Tegal City. Thus, it can be concluded that oxytocin massage has been proven to increase breast milk production in postpartum mothers, especially those with ineffective breastfeeding issues.

Conclusion

Based on the nursing care process, an assessment was conducted through observation and physical examination, as well as data collection and classification in accordance with the nursing problems that had been identified. For Mrs. N, the main diagnosis was ineffective breastfeeding related to inadequate milk supply. In the nursing care plan, the primary intervention was the application of oxytocin massage aimed at increasing breast milk production. The oxytocin massage was performed over 3 days, with 1 session per day lasting approximately 15 minutes. The results showed an increase in breast milk production on the 3rd day following the oxytocin massage administered to Mrs. N in the Mawar Room at Kardinah General Hospital in Tegal City.

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