

## BREAST CARE FOR POSTPARTUM TO OVERCOME BREAST ENGORGEMENT

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### ABSTRAK

**Latar Belakang:** Pelayanan masa nifas adalah hal yang penting karena pada fase ini rentan terhadap komplikasi, sehingga pelayanan kesehatan pada ibu nifas memiliki peran krusial dalam mendeteksi dini dan mencegah terjadinya komplikasi. Di Jawa Timur sendiri telah terjadi penurunan kunjungan nifas sejak 3 tahun terakhir. Pada tahun 2024 Kabupaten Kediri menduduki peringkat 2 terbawah cakupan KF lengkap dengan nilai 58,62% yang artinya masih sangat jauh dengan target yang ditetapkan yaitu sebesar 95%. Salah satu cakupan pelayanan masa nifas adalah pemeriksaan payudara dan anjuran pemberian ASI eksklusif. Tersumbatnya saluran ASI adalah salah satu masalah menyusui yang menimbulkan rasa sakit, demam payudara kemerahan dan mengeras atau bengkak yang merupakan tanda gejala bendungan ASI. **Metode:** Studi ini menggunakan observasional deskriptif dengan metode penelitian *case study* pada Ny.F P1001 postpartum hari ke-5 dengan bendungan ASI di Puskesmas Mojo. **Hasil:** Hasil pengkajian didapatkan bahwa Ny.F mengeluhkan mengalami nyeri payudara dan dari hasil pemeriksaan payudara tampak kemerahan dan terdapat nyeri tekan. Intervensi yang diberikan adalah dengan memberikan KIE teknik menyusui yang baik dan benar, menganjurkan ibu untuk melakukan perah ASI untuk membantu mengosongkan payudara, dan dilakukan perawatan payudara. **Kesimpulan:** Setelah dilakukan perawatan payudara Ny.F mengatakan bahwa nyeri payudara yang dirasakan menjadi berkurang.

**Kata Kunci :** bendungan ASI; nifas; perawatan payudara

### ABSTRACT

**Background:** Postpartum care is essential because this phase is prone to complications, so health services for postpartum mothers play a crucial role in early detection and prevention of complications. In East Java, the number of postpartum visits has declined over the past three years. In 2024, Kediri Regency ranked second-lowest in complete postpartum care coverage with a score of 58.62%, which is still far from the target of 95%. One aspect of postpartum care coverage is breast examination and the recommendation for exclusive breastfeeding. Problems that occur during breastfeeding include blocked milk ducts, which cause pain, fever, redness, and hardening or swelling of the breasts, which are signs of milk duct blockage. **Method:** This study employed a descriptive observational design with a case study approach involving Mrs. F P1001, who experienced a blocked milk duct on the fifth day postpartum at the Mojo Community Health Center. **Results:** The assessment results showed that Mrs. F complained of breast pain, and the breast examination revealed redness and tenderness. The intervention provided included information, education, and communication (IEC) on proper breastfeeding techniques, advising the mother to express breast milk to help empty the breasts, and performing breast care. **Conclusion:** After breast care was performed, Mrs. F said that the breast pain she felt had decreased.

**Keywords :** breast care; breast engorgement; postpartum

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## BACKGROUND

The postpartum period is an important phase in a woman's reproductive cycle, and the care provided during this time is crucial because this phase is considered highly prone to complications. Therefore, health services for postpartum mothers play a vital role in early detection and prevention of complications (Dinas Kesehatan Jawa Timur, 2025). Postpartum maternal health services in Indonesia in 2024 reached 77.63%, with East Java Province ranking 11<sup>th</sup> at 78.13% (Kemenkes RI, 2025).

In East Java itself, there has been a decline in postpartum visits over the past three years. In 2022, the complete KF coverage was recorded at 91.29%, then decreased slightly to 91.10% in 2023, and dropped significantly to 77.40% in 2024. Kediri Regency ranks second from the bottom in complete postpartum care coverage, with a value of 58.62%, which remains far below the target of 95% (Dinas Kesehatan Jawa Timur, 2025).

Postpartum care coverage includes TTV examinations, signs of anemia, TFU, uterine contractions, bladder and urinary tract, lochia and bleeding, birth canal, breasts, recommendations for exclusive breastfeeding, etc.

Breastfeeding issues are common among postpartum mothers. Issues that may arise during breastfeeding include blocked milk ducts, which can cause pain, fever,

redness, hardening, or swelling of the breasts (Pemiliana et al., 2023). Research by (Efni & Yuniwati, 2025) found that factors associated with milk duct blockage include breast emptying. Mothers who do not optimally empty their breasts are at higher risk of experiencing milk duct blockage. Other contributing factors include maternal knowledge, parity, and *on-demand* breastfeeding.

Therefore, postpartum care in accordance with the government's recommendations of four visits is crucial for healthcare workers to minimize problems that may arise during the postpartum period. Through standardized and scheduled postpartum care, healthcare workers can conduct early detection of risks such as bleeding, infection, and lactation issues like milk duct blockages, which, if left untreated, can lead to more severe complications. By implementing comprehensive, high-quality postpartum visits, the risk of maternal morbidity can be significantly reduced, ensuring both physical and psychological safety for mothers.

## METHOD

The method employed a descriptive observational design using a *case study* approach. This study was conducted at the Mojo Community Health Center in Kediri Regency in January 2026 with a single

subject, Mrs. F P1001, on her fifth day postpartum.

Primary data were collected through interviews, physical examinations, and direct observations of the subject, Mrs. F. Secondary data were obtained from records and reports in the mother's KIA book. In this case, the author obtained permission from the subject with *informed consent*. Data were analyzed using Varney's 7-step midwifery care management approach, which was then documented in a narrative record in the SOAP format.

## RESULT

Maternal care during the postpartum period for Mrs. F was provided on the second visit on the 5th day postpartum. During the second postpartum visit, Mrs. F reported that her breasts had felt full and painful since the previous day. Physical examination revealed redness and tenderness in both breasts, with milk discharge observed during palpation. Mrs. F stated that she breastfed her baby every 2-3 hours or when the baby was fussy. Other examination results, including vital signs, were normal. The surgical wound remained covered with plaster and showed no discharge.

The interventions provided to Mrs. F to help resolve the milk stasis issue included providing health education to the mother on proper breastfeeding techniques,

providing health education on postpartum nutrition, providing health education on breast milk expression and encouraging the mother to express breast milk, as well as performing breast care on the mother.

## DISCUSSION

Midwifery care for Mrs. F was provided during the second postpartum visit (KF2) on the 5th day of the postpartum period. During the visit, it was found that Mrs. F was experiencing breast engorgement, characterized by redness, swelling, and tenderness. Breast engorgement is a condition of milk stasis that occurs due to narrowing or blockage of the lactiferous ducts or milk ducts, often due to incomplete breast emptying (Tadu & Susanti, 2025). In addition, there are other factors, namely the mother's knowledge, parity, and *on-demand* breastfeeding. Based on the assessment results, Mrs. F stated that she breastfed her baby every 2-3 hours or when the baby was fussy, and did so *on demand*. Therefore, counseling was provided on proper breastfeeding techniques. Providing information on the correct breastfeeding position and attachment techniques is very beneficial for mothers because it can prevent or reduce the risk of milk blockage (Huda et al., 2022); (Tseng et al., 2020). Education on breastfeeding is essential for postpartum mothers, as it helps reduce common

difficulties faced by new mothers and helps increase the rate of exclusive breastfeeding (Souza et al., 2020). Breastfeeding for 6 months, or what is known as exclusive breastfeeding, is strongly recommended to promote optimal physical and cognitive development in children. Children who are breastfed for at least 6 months have a lower risk of developmental delays in language and social skills, and vice versa. (Goldshstein et al., 2025).

A study by (Efni & Yuniwati, 2025) indicated that breastfeeding *on demand* based on a schedule increases the risk of milk duct blockage. This is in line with what is stated by the National Breastfeeding Research Center that scheduled breastfeeding can have negative effects, because the baby's sucking greatly affects subsequent milk production (Pemiliana et al., 2023). Therefore, breastfeeding without a schedule and adjusting to the baby's needs will prevent problems that may arise, including breast milk blockage. In this case, the intervention given is to encourage mothers to breastfeed their babies as often as possible without waiting for their breasts to feel full, and to express milk regularly to ensure complete emptying.

Breast milk pumping is the process of extracting breast milk from the breasts, either manually or with a pump, which is then stored before being given to the baby. Mothers are advised to pump breast milk at

the same frequency as the baby breastfeeds from the mother (Rosenbaum, 2022). (Maharani & Rini, 2024) found that mothers who express breast milk regularly are at lower risk of experiencing breast engorgement and vice versa. Mothers can express breast milk regularly at least every 2-3 hours and without having to wait for the breasts to be full, as this will make it more difficult to express breast milk. Pumping breast milk with swollen breasts will actually cause pain and decrease milk production (Astuti, 2019). Pumping breast milk not only helps empty the breasts but can also be used as a way to increase milk production, known as *cluster pumping*. This technique is usually recommended for mothers with low milk production (Devi & B, 2024).

In this case, the author taught Mrs. F breast milk expression techniques to help mothers empty their breasts and prevent milk blockages. Although generally harmless, milk blockages can cause discomfort such as pain, difficulty breastfeeding, breast infections, and disrupted milk production. Proper care is key to overcoming milk blockage and preventing more serious side effects, as well as ensuring a smooth breastfeeding process (Umayah Kumalasari & Tiara Permata Sari, 2024). One of the postpartum care treatments for overcoming milk blockage is breast care. Breast care is an effort made to

care for the breasts so that breast milk flows smoothly (Tety Septiani, 2024). After undergoing treatment, Mrs. F stated that warm compresses during breast care could help reduce her pain. This aligns with research conducted by (Silaban, 2025) which found that breast care is effective in reducing pain caused by breast milk blockage and improving comfort during breastfeeding. Warm compresses have been proven to help increase milk flow and also have an analgesic effect. The heat stimulates the skin's sensory receptors, reducing pain and helping to reduce swelling (Alshakhs et al., 2024). In this case, Mrs. F perform was advised to continue breast care at home to prevent breastfeeding problems in the future. Additionally, the author also performed and taught oxytocin massage to Mrs. F's husband to help facilitate milk flow. The husband's role is one of the factors contributing to successful breastfeeding; mothers who receive family support have higher self-confidence compared to those without family support (Hu et al., 2025).

The purpose of oxytocin massage is to help mothers feel calm and relaxed. With this sense of calm, mothers can feel more affection toward their babies and also stimulate the release of oxytocin in their bodies. Oxytocin is an important hormone in the breastfeeding process. This hormone helps accelerate the process of milk

ejection. (Triansyah et al., 2021) found an increase in milk production in mothers who underwent breast care and oxytocin massage. The combination of these two methods resulted in increased milk production through touch stimulation on the mother's breasts and back, which stimulates oxytocin production, causing myoepithelial cells to contract and increase prolactin hormone levels.

Breast milk composition is also influenced by the mother's food intake and nutritional reserves. Eating healthy foods is a way for mothers to maintain their health and that of their babies during breastfeeding. A balanced diet is one that includes vegetables, fruits, whole grains, nuts, fish, oils with unsaturated fats, and avoids excessive sugar consumption and processed or *ultra-processed foods* (Marshall et al., 2022). In this case, the author advised Mrs. F not to skip meals and to consume nutritionally balanced foods to meet her nutritional needs and support milk production.

## CONCLUSION

The care provided to Mrs. F P1001 on the 5th postpartum day for breast milk blockage was based on obstetric management and in accordance with current practice standards. Breast care was implemented to relieve breast milk blockage, and Mrs. F was encouraged to continue breast care

independently at home to help prevent breastfeeding problems and to increase breast milk production through oxytocin massage. These interventions aim to prevent future breastfeeding problems and promote successful lactation.

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