



The effect of acupressure therapy on mothers with postpartum blues[☆]



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Abstract

Objective: Postpartum blues is an event that occurs in the first week after delivery. Postpartum blues are temporary, but when they cannot be handled properly they will continue to become postpartum depression or anxiety disorders. This study aims to determine the potential of acupressure therapy for decreasing the Edinburgh Postnatal Depression Scale (EPDS) score in mothers with postpartum blues.

Method: This research was an experimental study with one group pre–posttest design, at RSIA Sitti Khadijah I and the Kassi-Kassi Health Center in Makassar City with a sample of 30 people conducted in August–October 2019. The EPDS questionnaire was conducted before and after acupressure therapy in each respondent who fits the inclusion criteria.

Results: The results of the study showed that acupressure has the potency to decreased EPDS scores. The highest EPDS scores on the first day are 12.33, and after day 9, EPDS score has decreased to 6.86. The decrease occurs every day until the 9th day.

Conclusion: Acupressure therapy carried out in mothers with postpartum blues decreased EPDS score in mothers with postpartum blues.

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Introduction

Postpartum blues are events that occur in the first week after delivery, on average, 50% (15.3–85%) of postpartum mothers who experience the condition. The condition of mothers who experience postpartum blues such as unstable moods, crying without reason, decreased appetite, anxiety, irritability, and this event will not last long, as long as the mother can handle the condition.^{1,2} Postpartum blues occur due to hormonal changes (decreased levels of progesterone, cortisol, estrogen, and an increase in prolactin) where postpartum blues will develop on the first and 14th day after giving birth and will reach a maximum between days 3 and 5.^{3,4}

One of the causes of postpartum blues is experience in labor. An unpleasant labor experience can affect psychological changes after giving birth. Some of the factors that cause postpartum blues include age, parity, and labor experience.⁵ Postpartum blues are a significant risk factor for postpartum depression and breastfeeding disorders. Postpartum blues are temporary, but when they cannot be handled properly they will continue to become postpartum depression or anxiety disorders.^{1,4,6}

Acupressure is a simple non-invasive intervention by applying pressure; this therapy is similar to acupuncture which usually uses hands, fingers, applied to cause the redistribution of energy resources and restore harmony to the body and health, thus achieving balance in the body.⁷⁻¹⁰ Acupressure therapy is useful in reducing stress, fatigue to postpartum depression. Acupressure is a technique that has been used to treat various conditions in obstetrics and gynecology, such as anxiety in premenopausal and postmenopausal women, menstrual disorders, nausea, vomiting, and after gynecological surgery. Acupressure also has many benefits, both during pregnancy and postpartum.^{11,12}

Method

Subject

The subjects of this study were all postpartum mothers who gave birth normally in RSIA Sitti Khadijah I and Makassar City Kassi-Kassi Health Center, which was by the inclusion criteria and was willing to be respondents as many as 30 people.

The research instrument was used to assess whether or not mothers experienced postpartum blues or using the EPDS (Edinburgh Postnatal Depression Scale), a score of 0–9 mothers did not experience postpartum blues while a score of ≥ 10 mothers experienced postpartum blues. Checklist sheets are used to assess respondent characteristics. Ethical permission was obtained from the Faculty of Medicine at Hasanuddin University. All subjects were given prior approval for research.

Experimental design

This research was a quasi-experimental; each postpartum mother was visited on the 10th day of postpartum, then informed consent was given before the study was conducted. Subsequently, an EPDS was completed to assess

Table 1 Characteristics of respondents.

Characteristics	Frequency		p-value
	N	%	
<i>Age</i>			
Risk	7	23.3	0.061*
Not at risk	23	76.7	
<i>Last education</i>			
Low	3	10	0.543*
High	27	90	
<i>Occupation</i>			
Working	7	23.3	0.666*
Does not work	23	76.7	
<i>Family support</i>			
Yes	30	100	**
Not	0	0	

* Chi-square test.

** p-value is not calculated because there is a constant value.

the incidence of postpartum blues. After obtaining the results of the mother experiencing postpartum blues, then give informed consent again to do acupressure therapy. Interventions were given three times a week for three weeks. For the analysis test using the Kruskal–Wallis test.

Result

Data in [Table 1](#) show the characteristics of age, last education, employment, and family support.

In [Table 1](#) it can be seen that from 30 respondents based on the age variable p -value = 0.061 (>0.05) there is no significant relationship between age and the incidence of postpartum blues. The frequency of respondents based on age there is seven people or 23.3% of respondents in the age category at risk (<20 years, and >35 years) 23 respondents or 76.7% of respondents in the group of age without risk (20–35 years).

The last education obtained p -value = 0.543 (>0.05); there is no significant relationship between the education category with the incidence of postpartum blues. The frequency of respondents based on the education category there is three people or 10% of respondents in the low education category and 27 people or 90% of respondents in the higher education category ([Table 1](#)).

Work obtained p -value = 0.666 (>0.05) there is no significant relationship between work and the incidence of postpartum blues. The frequency of respondents based on work status there are seven people or 23.3% of respondents in the category of work, and there are 23 people or 76.7% of respondents in the category of not working. From the results of the analysis for family support, all respondents received family support in their current conditions as new mothers ([Table 1](#)).

The results of the study showed that acupressure has the potency to decreased EPDS scores. The highest EPDS scores on the first day are 12.33, and after day 9, the EPDS score has decreased to 6.86. The decrease occurs every day until the 9th day ([Table 2](#)).

Table 2 Descriptive EPDS data score for each day.

Visit	Average \pm SD	Minimum	Maximum	p-value
Day 1	12.33 \pm 1.98	10.00	16.00	
Day 2	10.37 \pm 2.27	6.00	16.00	
Day 3	9.07 \pm 2.46	6.00	17.00	
Day 4	8.67 \pm 1.67	6.00	14.00	
Day 5	8.30 \pm 1.44	6.00	12.00	0.000*
Day 6	7.70 \pm 1.26	6.00	11.00	
Day 7	7.26 \pm 1.23	5.00	9.00	
Day 8	6.83 \pm 1.17	4.00	9.00	
Day 9	6.86 \pm 1.33	4.00	9.00	

* Kruskal–Wallis test.

Discussion

Most respondents found it difficult to sleep at night because they woke up to take care of their babies, of course, this will be a hard task for mothers to calm their babies in the middle of the night. The birth of the first child, although it is a happy event, puts the mother in a state of crisis, stresses a lot and faces it with new roles and responsibilities.

The average postpartum blues score decreased day by day with the highest postpartum blues score i.e. on the first day with a mean score of 12.33. In line with the decrease in every day, it is shown by the existence of a significant difference in postpartum blues scores hypothalamus. Acupressure therapy is useful in reducing stress, fatigue to postpartum depression, and is useful during pregnancy and postpartum.^{11,12}

Emphasis on the acupressure point, this involves a reaction between the hypothalamus, where the hypothalamus will deliver a message to the anterior pituitary/pituitary gland to produce adrenocorticotrophic hormone (ACTH). The ACTH hormone stimulates the production of hormones in which ACTH will be produced when feeling stressed, depressed, afraid, and others. With the production of ACTH, it causes excess production of cortisol, endorphins, and serotonin, all of which are stress relievers, natural pain relievers, giving comfort and pleasure. Then naturally the body will be relaxed or feel happy.¹³

Conclusions

We can conclude that there is potential for acupressure therapy to decrease the Edinburgh Postnatal Depression Scale (EPDS) score in mothers with postpartum blues.

Conflict of interest

The authors declare no conflict of interest.

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