



EARLY MOBILIZATION WITH WOUND HEALING AT POST SECSIO CAESARE WOMEN

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SUBMISSION TRACK

Received: Januari 2019
Final Revision: Maret 2019
Available Online: Maret 2019

KEYWORDS

Post Sescio Caesare, Mobilization, wound healing

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A B S T R A C T

Mobilization is a very important process carried out by post partum mothers, because mobilizing will help accelerate the process of post partum recovery, especially in post-SC mothers. In Pariaman Hospital, data obtained in 2017 were 641 post section patients. The purpose of this study was to find out the Early Mobilization Relationship. Against Post Sescio caesare (SC) Wound Healing in Pariaman Hospital. The type of research used is an analytical survey with a cross sectional study design, which was carried out in the Pariaman Hospital obstetric ward on 18 September to 25 September 2018. Based on the result of the search conducted, it was found that more than respondent half (66.7%) were mobilized after post section caesarean (SC), more than respondent half (69.7%) of wounds post section caesarean (SC) were said to be cured, and there was a significant relationship between mobilization and wound healing (p value = 0.000 < 0.05). It can be concluded that mobilization is very influential on post-SC wound healing, where mobilization can facilitate blood vascularizations that the wound can heal well because of smooth blood circulation. With the results of the research, it is expected that mobilization can be one way to accelerate wound healing in the mother of Post Sescio Caesarea (SC).

I. INTRODUCTION

The mortality rate for mothers, babies and children under five in Indonesia is still quite high. The Millennium Development Goals 2000-2015 and now continued with the 2015-2030 Sustainable Development Goals (SDGs) are committed to reducing the Maternal Mortality Rate (MMR) and the Infant Mortality Rate (IMR). SDGs have 17 goals and 169 targets, the first, second and third objectives relate to health. Meanwhile, the goal related to the reduction of MMR is the third goal, namely the target of decreasing MMR by 70 per 100,000 live births (KH), IMR 12 per 1,000 KH. According to WHO (World Health Organization, 2015), the incidence of Sectio Caesarea (SC) is increasing in developing countries. WHO assigns 5-15% SC delivery indicators for each country, if not appropriate, indications for SC surgery can increase the risk of morbidity and mortality in mothers and babies.

Delivery by caesarean section has a high risk because surgery is performed by opening the abdominal wall and uterine wall or a trans abdominal uterine incision, so that the patient will feel pain. Pain is a stressor that can cause stress and tension to which individuals can respond biologically and in behaviors that cause physical and psychological responses. With the cesarean section scar causes pain in the mother so that the patient tends to lie down to keep the whole body stiff and does not pay attention to the surgical area, causing stiff joints, bad posture, muscle contractures, tenderness if not mobilizing, mobilization is important to speed up recovery of the mother so that she can return to normal daily activities. This delay in mobilization will make the mother's condition worse, make post-cesarean section recovery too late, and can cause complications (Reni, 2016).

These complications can be prevented if the post partum post-SC patient is willing to mobilize. Therefore, mobilization is a very important process for post-partum mothers to do, because mobilizing will help speed up the recovery process for the post-partum period, especially for post-SC mothers so that mothers get normal wound care and healing. If the mobilization is not done immediately, it will have an impact on the slow recovery and healing process and can also cause complications such as infection and bleeding. (Tupriliyani, 2016)

In helping the course of wound healing in post-sectio caesarean mothers, it is recommended to mobilize, but sometimes it is difficult to mobilize because the mother feels tired and sick. One of the reasons is the mother's ignorance of mobilization. For this reason, health education is needed about the mobilization of post-caesarean section surgery so that the implementation of mobilization can be maximized. Mobilization is an effort to maintain independence by guiding the patient to maintain physiological functions.

According to Suriadi (2004: 13) factors that influence wound healing include age, nutrition, vascular insufficiency, drugs, blood supply, infection, necrosis, and the presence of foreign bodies in the wound. This is in accordance with Boyle's (2008: 45) opinion, the things that affect wound healing are: tissue perfusion and oxygen, smoking, sleep disorders, stress, medical conditions and treatment, nutritional status, infection, sub-optimal care, obesity and mobilization. With better mobilization of vascularization, it will affect postoperative wound healing because wounds require good blood circulation for cell growth or repair (Sumarah, 2013).

From the results of the Preliminary Data Survey conducted at Pariaman Hospital, it was obtained data in 2017 that there were 641 post-section caesarean patients treated in the obstetric room. (Medical records of RSUD Pariaman) The results of research conducted by Sumarah, et al (2013) on the effect of early mobilization on post-section Caesarean wound healing in Sleman Hospital, found that there was a significant relationship between early mobilization and post-caesarean wound healing (p value = <0.05). Based on the above background, the researcher is interested in conducting research on "The Relationship of Early Mobilization to Post Secsio Caesare (SC) Wound Healing at Pariaman Hospital.

II. METHODS

Research conducted using this type of quantitative analysis with a cross sectional research design. This study was conducted in Pariaman Public Hospital. The population in this study were all post SC women in Pariaman Hospital. The sample of this study was taken using non-random sampling technique, namely purposive sampling, found a sample of 33 respondents. The measuring instrument used was the menstrual pain observation sheet to analyze the wound healing. the results of normally distributed data and using the Paired T-Test with a significance level of $p < 0.05$ in bivariate analysis.

III. RESULT

Table 1. Frequency of Mobilization of Post-Caesarean (SC) Mothers

| mobilization | f | % |
|------------------|----|------|
| mobilization | 22 | 66,7 |
| Non mobilization | 11 | 33,3 |
| | 33 | 100 |

Based on table 1, there is 22 of 33 respondent who applied early mobilization and there is 11 of 33 respondent who does not apply mobilization

Table 2. Average Intensity of Menstrual Pain after Intervention in Breath Relaxation Technique

| Wound healing | f | % |
|---------------|----|------|
| yes | 23 | 69,7 |
| Not yet | 10 | 30,3 |
| | 33 | 100 |

Based on table 2, 23 of 33 respondent experience good wound healing.

Table 3. Relationship between Mobilization and Wound Healing in Post-Caesarean (SC) Mothers

| mobilization | Wound healing | | | | Total | | p value | OR |
|------------------|---------------|------|----|------|-------|-----|---------|--------|
| | yes | | no | | | | | |
| | n | % | N | % | N | % | | |
| mobilization | 21 | 95,5 | 1 | 4,5 | 22 | 100 | 0.000 | 94.500 |
| Non mobilization | 2 | 18,2 | 9 | 81,8 | 11 | 100 | | |
| total | 23 | 69,7 | 10 | 30,3 | 33 | 100 | | |

Of the 22 respondents who were there to mobilize, 21 (95.5%) wounds were declared healed. Meanwhile, of the 11 respondents who did not mobilize, 9 (81.8%) wounds were declared not healed. After the statistical test was carried out, it was obtained (p value 0.000 <0.05) which means that there is a significant relationship between mobilization and wound healing.

IV. DISCUSSION

Mobilization is movement performed in bed by training body parts to stretch or learn to walk. Mobilization can be done when the patient's condition is improving. In postoperative patients with cesarean section starting the first 6 hours it is recommended to immediately move the limbs. The body movements that can be done are moving the arms, hands, feet and fingers so that the work of the digestive organs returns to normal immediately (Etna, 2014).

Caesarean section scars cause pain in the mother so that the patient tends to lie down to keep the whole body stiff and does not pay attention to the surgical area, causing joint stiffness, bad posture, muscle contractures, tenderness if not mobilizing, mobilization is important to

speed up the mother's recovery so that you can return to normal daily activities. This delay in mobilization will make the mother's condition worse, make post-cesarean section recovery too late, and can cause complications (Reni, 2016).

The results of the study are the same as the results of research conducted by Sri Mahampang Salamah (2015), namely the relationship between early mobilization and post-caesarean wound recovery at Panembahan Senopati Bantul Hospital in 2015, it is known that most of the respondents mobilized well (63.9%) .

The results of the study are the same as the results of research conducted by Sri Mahampang Salamah (2015), namely the relationship between early mobilization and post-caesarean section wound recovery at Panembahan Senopati Bantul Hospital in 2015, it is known that (86.1%) most of them have recovered.

The results of the study are the same as the results of research conducted by Sri Mahampang Salamah (2015), namely the relationship between early mobilization and post-caesarean section wound recovery at Panembahan Senopati Hospital, Bantul in 2015, it is known that there is a significant relationship between mobilization and wound recovery, namely value = $0.006 < 0.05$).

From the results of the investigators' analysis of maternal mobilization after post SC with scar healing, SC appears to have a significant relationship. This can be seen from the 22 respondents who mobilized 21 (95.5%) had wounds that healed or did not have signs of inflammation, and vice versa where out of 11 respondents who did not mobilize 9 (81.8%) had wounds who do not heal or have signs of inflammation after SC surgery. It is clear that the mobilization has had a significant impact on the wound healing of respondents after the SC surgery. where according to Reni (2016) states that mobilization is important to speed up the recovery of the mother so that she can resume normal daily activities. This delay in mobilization will make the mother's condition worse, make post-cesarean section recovery too late, and can cause complications. However, there are also respondents who mobilize but get signs of inflammation, this is because there are many factors that cause the respondents to experience inflammation, such as the entry of germs during SC, unclean wound care, and the mobilization is not optimal. This is what makes respondents experience inflammation in the area of the SC scar.

V. CONCLUSION

Mobilization is movement performed in bed by training body parts to stretch or learn to walk. Mobilization can be done when the patient's condition is improving. In postoperative patients with cesarean section starting the first 6 hours it is recommended to immediately move the limbs. It can be advised to the post SC Women to do early mobilization to increasing wound healing time.

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