

## Factors Related to Perineal Wound Healing in Postpartum Mothers at Jawilan Public Health Center

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### ABSTRACT

Based on a preliminary study conducted in the Jawilan Health Center area from February to April 2021 birth data there were a total of 173 deliveries, while 50 mothers did not experience a uterine rupture. Perineal wounds in postpartum mothers that do not heal immediately can cause infection, several factors are known to be associated with the duration of perineal wound healing. The purpose of this study was to determine the factors associated with perineal wound healing in postpartum mothers. This study used an analytic survey, the sampling technique used total sampling and used a cross-sectional design. The research instrument contains a questionnaire about five factors of perineal wound healing. The results showed that there was a relationship between perineal wound healing with knowledge (p-value 0.045 <0.05), personal hygiene (p-value 0.035 <0.05), nutrition (p-value 0.000 <0.05), early mobilization (p-value 0.001 <0.05). There is no relationship between perineal wound healing and family support (p-value 0.085 > 0.05). The conclusion of this study is that there is a significant relationship between knowledge, personal hygiene, nutrition and early mobilization with perineal wound healing.

Keywords: perineal wound; knowledge; personal hygiene; nutrition; early mobilization

### INTRODUCTION

The puerperium is the period starting a few hours after the birth of the placenta until 6 weeks after delivery. The postpartum period begins after the birth of the placenta and ends when the uterine organs return to their pre-pregnancy state which lasts approximately 6 weeks (Marmi, 2017). One of the causes is often an infection during the puerperium where the infection starts from the perineal wound. Perineal wounds are injuries due to a tear in the birth canal either due to rupture or due to an episiotomy at the time of delivery of the fetus (Afandi, 2014). Perineal rupture is the cause of postpartum hemorrhage for postpartum maternal bleeding. Postpartum hemorrhage is the main cause of 40% of maternal deaths in Indonesia. In Indonesia, perineal lacerations are experienced by 75% of women who give birth vaginally. In 2017 found that out of a total of 1951 spontaneous vaginal births, 57% of mothers received perineal sutures (28% due to episiotomy and 29% due to spontaneous tearing (Depkes RI, 2017).

Postpartum mothers who experienced a tear in the perineum or perineal wound were very susceptible to the occurrence of infection because if the perineal wound is not maintained properly it will greatly affect the infection and slow down the healing process of the wound. Basically, most postpartum mothers have minimal knowledge about how to treat perineal wounds so that most postpartum women do not care about the impact if the perineal wound is not treated. well cared for (Ratih, 2020). Factors that influence perineal care include nutrition, medicine, heredity, facilities and infrastructure, culture, and beliefs. Hygiene behavior in perineal wound care is to prevent the wound from becoming infected ( Nurrahmaton, 2018).

Based on a preliminary study conducted in the Jawilan Health Center area and From data on deliveries from February to April 2021, there were a total of 173 vaginal deliveries of these 173, 123 mothers who gave birth experienced perineal rupture (71%). Meanwhile, from the observation of case data, as many as 30 postpartum mothers (24%) showed perineal wound healing in 7-8 days with proper perineal care, and as many as 93 postpartum mothers (76%) showed perineal wound healing > 8 days, with some notes namely cases of loose stitches as many as 33 postpartum mothers (35%) than other causes as 60 postpartum mothers (65%).

Based on the above, this study aims to analyze factors associated with maternal perineal wound healing postpartum in Jawilan Health Center, District Jawilan Serang Banten in 2021.

**METHOD**

The study was conducted in UPT Puskesmas Jawilan Serang District in July- August 2021. This study used a study design cross-sectional retrospective (analytic survey). The sampling method used was total sampling with 80 respondents in postpartum mothers who had perineal injuries.

The instrument of this research is a questionnaire made by researchers and has been tested for validity and reliability on 30 respondents in the working area of the Maja Health Center. The questionnaire used to measure perineal wound healing in postpartum mothers used the REEDA scale. The data analysis used is univariate analysis and bivariate analysis.

**RESULT**

**Univariate Analysis**

Table 1. Frequency of Postpartum Mother’s Age, Perineal Wound Healing, Knowledge, Personal Hygiene, Nutritional Status, Family Support, and Early Mobilization

	Frequency	Percentage
<b>Age</b>		
<20 years	8	10.0
21-35 years	62	77.5
>35 years	10	12.5
<b>Perineal Wound Healing</b>		
Good	46	57.5
Not good	34	42.5
<b>Knowledge</b>		
Good	53	66.2
Not good	27	33.8
<b>Personal hygiene</b>		
Good	42	52.5
Not good	38	47.5
<b>Nutritional Status</b>		
Good	50	62.5
Not good	30	37.5
<b>Family Support</b>		
Good	48	60.0
Not good	32	40.0
<b>Early Mobilization</b>		
Good	46	57.5
Not good	34	42.5

Based on table, the majority of respondents who experienced perineal rupture were in the age group 21-35 years, namely 62 people (77.5%). The majority of respondents experienced good wound healing, namely 46 people (57.5%). The majority of respondents who have good knowledge are 53 people (66.2%). The majority of respondents who had good personal hygiene were 42 people (52.5%). The majority of respondents who had good nutritional intake were 50 people (62.5%). The majority of respondents who have good family support are 42 people (52.5%). The majority of respondents who mobilized well were 46 people (57.5%).

**Bivariate Analysis**

Table 2. The Relationship between Knowledge, Personal Hygiene, Nutritional Status, Family Support, Early Mobilization and Perineal Wound Healing in Postpartum Mothers

	Perineal Wound Healing				n	%	p
	Good		Poor				
	n	%	n	%			
Knowledge							
Poor	23	85.2	4	14.8	27	100	0.045
Good	32	60.4	21	39.6	53	100	
Personal Hygiene							
Poor	31	81.6	7	18.4	38	100	0.035
Good	24	57.1	18	42.9	42	100	
Nutritional Status							
Poor	11	36.7	19	63.3	30	100	0.000
Good	44	88	6	12	50	100	
Family Support							
Poor	26	81.2	6	18.8	32	100	0.085
Good	29	60.4	19	39.6	48	100	
Early Mobilization							
Poor	16	47.1	18	52.9	34	100	0.001
Good	39	84.8	7	16.2	46	100	

Based on table, 53 respondents with good knowledge, the majority of respondents, namely 32 people (60.4%) experienced good perineal wound healing. Of the 27 respondents with poor knowledge, the majority of respondents, namely 23 people (85.2%) experienced good perineal wound healing. Based on the analysis of bivariate results with statistical tests using Chi-Square, p-value = 0.045 (p < 0.05), so it can be concluded that there is a significant relationship between knowledge and perineal wound healing. 42 respondents with good personal hygiene, the majority of respondents, namely 24 people (57.1%) experienced good perineal wound healing. From 38 people with poor personal hygiene, the majority of respondents, namely 31 people (81.6%) experienced good perineal wound healing. Based on the analysis of bivariate results with statistical tests using Chi-Square, p-value = 0.035 (p < 0.05), so it can be concluded that there is a significant relationship between personal hygiene and perineal wound healing. 50 respondents with good nutrition, the majority of respondents, namely 44 (88%) experienced good wound healing. Of the 30 respondents with poor nutrition, the majority of respondents, namely 19 people (63.3%) experienced poor perineal wound healing. Based on the analysis of bivariate results with statistical tests using Chi-Square, p-value = 0.000 (p < 0.05), so it can be concluded that there is a significant relationship between nutrition and perineal wound healing. 48 respondents with good family support, the majority of respondents, namely 29 people (60.4%) experienced good perineal wound healing. Of the 32 respondents with poor family support, the majority of respondents 26 people (81.2%) experienced good perineal wound healing. Based on the analysis of bivariate results with statistical tests using ChiSquare, p-value = 0.085 (p > 0.05), so it can be concluded that there is no significant relationship between family support and perineal wound healing. 46 respondents with good early mobilization, the majority of respondents, namely 39 people (84.8%) experienced good perineal wound healing. Of the 34 respondents with poor early mobilization, the majority of respondents, namely 18 people (52.9%) experienced poor perineal wound healing. Based on the analysis of bivariate results with statistical tests using Chi-Square, p-value = 0.001 (p < 0.05), so it can be concluded that there is a significant relationship between family support and perineal wound healing.

**DISCUSSION**

Based on the table of research results that have been carried out there are a number of respondents as many as 80 postpartum mothers who have perineal injuries at the Jawilan Health Center in 2021, in this chapter the researcher will compare the theory in this chapter previously with the research carried out including the following: research results showing.

### **Perineal Wound Healing in Postpartum Mothers**

Based on result, 80 respondents, the majority of respondents experienced good wound healing, namely 46 people (57.5%). The perineum is a muscular area covered with skin, which extends between the posterior commissure and the anus. The average length is 4 cm. The perineum is a muscular area covered with skin, which extends between the posterior commissure and the anus. The average length is 4 cm (Wahyuningsih & Kusmiyati, 2017). This is in accordance with research conducted by Tulas (2017) of 56 respondents (100%) there were 50 respondents (89.3%) clean and dry wounds and 6 respondents (10.7%) wounds were not clean and not dry in the hospital. The Radiance of Love for GMIM Manado. The assumption of the researcher is that respondents who Performing perineal wound care who have clean and dry wounds and have good behavior, are very influential in determining beliefs and health values and can determine the correct perineal wound care. Midwives should provide counseling on how to properly care for wounds in the fourth stage (during the first 2 hours after delivery) or precisely before the midwife leaves the mother.

### **Knowledge of Postpartum Mothers**

Based on table, the majority of respondents who have good knowledge are 53 people (66.2%). The factors that influence a person's knowledge according to Mubarak cited by Losu (2018) are the level of education, occupation, age, interests, experience, surrounding culture, and information. The higher the mother's level of knowledge, in understanding information about Perineal Wound Care, thus increasing her knowledge about perineal wound infection. Knowledge is the result of "knowing" and this occurs after the person has sensed a certain object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste, and touch. Most of the human knowledge is obtained through the eyes and ears according to Wawan (2018). This is in line with research conducted by Nurrohmatun (2018) at the Maternity Clinic Hj. Nirmala Sapni, Am.Keb Medan showed the majority of healing for 7 days was 13 people (40.6%) and the minority for 6 days was 7 people (21.9%). This illustrates that postpartum mothers in perineal wound healing are in accordance with the wound healing time, which is 1 week (7 days). According to the researcher's assumption that postpartum mothers' knowledge about perineal wound care is not good. This is influenced by several factors such as education, sources of information such as electronics, and family. The mother's knowledge about proper wound care needs to be improved. As for how to find as much information as possible. This information comes from the internet, the midwife, and the family themselves. Postpartum mothers who experience perineal wounds should have a lot of information about how to treat or how to heal wounds because information can provide knowledge to postpartum mothers, nowadays a lot of information is obtained not only in books but on social media, the internet, and so on.

### **Personal Hygiene for Postpartum Mothers**

Based on table, the majority of respondents who had good personal hygiene were 42 people (52.5%). According to Wijaya as quoted from Vebry (2017) personal hygiene behavior or personal hygiene is an individual health effort to be able to maintain one's own health, improve and enhance health values and prevent disease. Personal hygiene includes cleanliness of the body, hands, skin/nails, teeth, and hair. This is in accordance with Mursyida's research (2018) conducted at the Pangarengan Public Health Center of 35 people, mostly maternal personal hygiene was sufficient with moderate injuries as many as 6 people (17.4%) while maternal personal hygiene was lacking with bad injuries as many as 2 people (15.7%). The assumption of the researcher is that the mother's perineal wound healing is good and the mother's personal hygiene is good because the mother already understands and knows about the benefits of personal hygiene. Personal hygiene is not only done by mothers in the perineal area, but mothers also have to pay attention to the cleanliness of the entire mother's body from hair to feet.

### **Nutritional Status of Postpartum Mothers**

Based on table, the majority of respondents who had good nutritional intake were 50 people (62.5%). According to Wulandasari (2010) quoted from Rosalina (2017), nutrition or nutrition is a substance needed by the body for its metabolic needs. Nutritional needs during the puerperium, especially when breastfeeding, will increase by 25%, because it is useful for the healing process after giving birth, and for producing enough milk to nourish the baby. This is in line with Sakinah's research (2017) conducted at Dewi Sartika Hospital, Kendari City, for postpartum mothers with good nutritional status as many as 49 mothers (75.4%) and that postpartum mother with poor nutritional status as many as 16 mothers (24.6%), so it can be concluded that most of the nutritional status of postpartum mothers is good nutritional status. Researcher assumptions The nutritional status of postpartum mothers is the health status produced by the balance between nutrient needs and inputs as measured using the upper arm circumference (LILA). Nutritional status is said to be good if the mother's LILA is 23.5 cm and less if the mother's LILA is. For postpartum mothers who have perineal wounds, their food and drink intake must be good, and nutritious. Because it can speed up wound healing.

### Postpartum Mother's Family Support

Based on table, the majority of respondents who had good family support were 42 people (52.5%). According to Friedman (2013), family support is a process that occurs continuously throughout human life. Family support focuses on interactions that take place in various social relationships as evaluated by the individual. Family support is the attitude, action, and acceptance of the family towards its members. Family members view that people who are supportive are always ready to provide help and assistance if needed. This is in line with lim (2020) research conducted at the Grillgaran Health Center. Of the 60 respondents, 2 people (3.3%) had enough family support, and 24 people (40.0%) had good family support, then 34 people (56.7%) got very good family support. Researcher assumptions Research analysis that 60 respondents, family support in the process of healing perineal wounds show that on average postpartum mothers with perineal wound care get very frequent family support such as always giving free time when caring for perineal wounds.

### Early Mobilization of Postpartum Mothers

Based on table, the majority of respondents who mobilized well were 46 people (57.5%). This is in line with research conducted by Amalia (2018). Of the 22 respondents, the proportion of respondents who experienced perineal wound healing with sufficient mobilization was 15 people (68.2%) while out of 24 respondents who did less mobilization were 6 respondents (25.0 %). The researcher's assumption is that early mobilization not only accelerates the healing of episiotomy suture wounds but also restores the condition of the mother's body if done correctly and appropriately. Early mobilization or movement as soon as possible can prevent obstructed blood flow. Obstruction of blood flow can cause deep vein thrombosis and cause infection. The early mobilization that can be done is moving the arms, hands, moving the tips of the toes and rotating the ankles, lifting the heels, tensing the calf muscles, and bending and shifting the feet b. After 6-10 hours, the patient is required to be able to tilt left and right and so on.

## CONCLUSION

The results of the study of factors related to perineal wound healing in postpartum mothers at UPT Puskesmas Jawilan Serang Regency, the majority of mothers who experienced perineal injuries were in the general group of 21 -35 that is 77.5%, respondents experienced good wound healing 57.5%, respondents who had good knowledge 66.2%, respondents who had good personal hygiene 52.5%, respondents who had good nutritional intake 62.5%, respondents who supported 52.5% good family, and good mobilization respondents 57.5%. Maternal mothers who experienced perineal injuries at the age of 21-35 were 77.5%. There is a significant relationship between knowledge, personal hygiene, nutrition, and early mobilization with perineal wound healing at the Jawilan Health Center in 2021. There is no significant relationship between family support and perineal wound healing at the Jawilan Serang Health Center in 2021.

It is hoped that the results of this study can help evaluate postpartum mothers who have perineal sutures in order to improve health status in the process of healing perineal wounds in postpartum mothers and it is hoped that further research will be carried out on factors related to perineal wound healing with other methods and by using more populations to produce research results which is better.

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