

The Relationship Between Knowledge Of Young Women And The Benefits Of Sp8 Point Acupressure To Reduce Dysmenorrhea Pain In Sigulang Village, Padangsidempuan Tenggara District, 2022

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ABSTRACT

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Dysmenorrhea pain causes 50% of all women in the world to suffer. In 2008, there were around 54.89% cases of primary dysmenorrhea in Indonesia. Meanwhile, the rest are sufferers in the secondary category. This pain makes women unable and unable to carry out activities and activities so that it can reduce the individual's quality of life. Dysmenorrhea is caused by the production of prostaglandin F2 alpha originating from endometrial cells in excessive amounts. One way that can be done to treat dysmenorrhea is with acupressure. This research was conducted in Sigulang Village, Padangsidempuan Tenggara District, with the aim of increasing knowledge and insight towards school-age adolescent girls. In order to reduce dysmenorrhea or menstrual pain non-pharmacologically by massaging using acupressure techniques. This research uses the Pre Experimental Design method in the research process. Counseling on acupressure techniques and assistance were carried out during this research process. After being given training and knowledge about dysmenorrhoea, young women can understand the benefits of acupressure massage to reduce menstrual pain or dysmenorrhoea. There was an increase in knowledge with a score of 81.81% of teenagers with good knowledge and 18.18% in the sufficient category.

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1. INTRODUCTION

Menstruation is a cycle of periodic bleeding that appears from the uterus and is also accompanied by shedding or desquamation of the endometrium according to research from Wiknjosastro (2012). A woman has 2 ovaries in which there are 200,000-400,000 egg cells which are still in the follicle stage or immature. And normally, only 1 or a few egg cells grow during each menstrual period. If the egg is not fertilized, the lining of the uterine wall can stick to the result of fertilization and can then peel off until bleeding or menstruation occurs. The normal age for a woman to have her first menstrual period is 12 or 13 years old, although some can get it much earlier at the age of 8 years. So the age range for girls who experience menstruation is between the ages of 8 and 16 years. On average, most girls experience their first menstruation at the age of 12 years. Menstruation itself begins when the reproductive system of each individual has entered maturity.

The menstrual cycle or menstruation which is included in the normal category itself has a period of 28 days which is included in the normal cycle. However, there are also those who are in the 25 to 27 day phase. In 1 menstrual cycle, there are around 4 phases that occur in the uterus, consisting of:

1. Menstrual phase

This phase usually lasts 2 to 8 days. At that time the endometrium or lining of the uterus will fall off and bleeding will appear from ovarian hormones which have quite low levels.

2. Proliferation phase

When the menstrual period ends, the proliferation phase will begin with the hormone progesterone decreasing and stimulating the pituitary gland to be able to carry out the FSH secretion process and also stimulate the follicles and ovaries. Then it can cause the estrogen hormone to be produced again. The follicle cells will change and develop into graafian follicles which can produce the hormone estrogen in order to stimulate LH from the pituitary which will later cause a thickening process in the endometrium. In the 12th to 14th interval, the egg cell will be released from the ovary, which is called the ovulation process.

3. Secretion phase

This phase is the phase that occurs after ovulation. The progesterone hormone that is released can have an influence on the growth of the endometrium so that it can make the uterus ready for implantation or attachment of the fetus to the uterus.

4. Ischemic phase

In this phase, implantation can occur within 7 to 10 days after ovulation. If fertilization and implantation do not occur, the corpus luteum, which secretes the hormones estrogen and progesterone, will shrink. And this stops the thickening of the endometrial wall and can cause the endometrium to dry out and tear. In this phase, bleeding or menstruation occurs again.

Based on the World Health Organization (WHO) in research by Sulistyorini (2017), dysmenorrhea has a fairly high number in the world. The average dysmenorrhea suffered by young women is in the range of 16.8 – 81%. Data from WHO recorded 1,769,425 people or around 90% of women suffering from dysmenorrhea, of which 10-15% of women suffer from severe dysmenorrhea. This is supported by research from various countries that the incidence of primary dysmenorrhea in each country is above 50% (AYA, 2019). Dysmenorrhea is one of the causes of many women being absent from school in the superpower country of the United States. This is increasingly proven by a survey of 113 women or young women in the United States with results of around 29-44% suffering from this pain, especially women in the age range 18-45 years.

Based on data from WHO, dysmenorrhea which affects around 55% of women also occurs in Indonesia at productive age. Meanwhile, 15% of women complained of very, very limited activities caused by dysmenorrhea (Fahmi, 2014). From these research data, the incidence of dysmenorrhea pain that occurs in West Java is quite high. It is recorded that around 54.9% of women suffer from dysmenorrhea pain. And this consisted of 24.5% experiencing mild dysmenorrhea, 21.28% suffering from moderate dysmenorrhea. Meanwhile, sufferers of severe dysmenorrhea are around 9.36%. Based on research from Murtiningsih and Karlina (2014), dysmenorrhea itself is a gynecological complaint caused by the hormone progesterone in the blood being unbalanced and causing significant pain in the feminine area.

Dysmenorrhea is pain that occurs due to the menstrual process, which is periodic bleeding that appears from the uterus approximately 14 days after ovulation which occurs periodically. Menstruation occurs because the endometrial lining of the uterus is shed. Meanwhile, dysmenorrhea itself is pain and severe pain that occurs in the lower abdominal area when a woman experiences her menstrual cycle. Pain will occur before menstruation or menstruation occurs. Apart from that, during menstruation and the end of the menstrual cycle is also one of the times when dysmenorrhea or dysmenorrhea occurs. Pain that occurs over a continuous period of time will make women unable to carry out activities due to the pain

This condition is caused by the absence of fertilization of the egg during ovulation by sperm. Practically making the lining of the uterus or endometrium thicken in preparation for pregnancy eventually becomes shed due to the absence of the fertilization process. If a woman does not experience pregnancy, then the menstrual cycle becomes a regular guest every month.

Based on Prawirohardjo (2014) that dysmenorrhea is divided into several parts consisting of:

1. Primary dysmenorrhea

This essential, intrinsic, idiopathic dysmenorrhea has no correlation with gynecological disorders.

2. Secondary dysmenorrhea

Acquired extrinsic dysmenorrhea arises from gynecological disorders or chronic salpingitis, endometriosis. Uterine adenomyosis, uterine cervical stenosis and also other causes. Dysmenorrhea can be divided according to the type of pain and also whether there is an abnormality or cause.

There are several etiological factors for dysmenorrhea that women commonly suffer from. Namely internal factors and also external factors. For internal factors, there are several influences consisting of:

1. Physique

a. Consistency factor

This factor is closely related to psychological factors which are the cause of dysmenorrhea pain. Factors that arise due to anemia and chronic illnesses can cause a person's body's resistance to pain to become much lower.

b. Muscle tension

This factor is also one of the causes that occurs in the body's condition when it experiences pain so that it responds to the pain suffered. When pain becomes more chronic, muscle tension hyperactivity can change drastically, causing pain intensity to occur.

c. Menarche at an Earlier Age

This factor can cause the reproductive organs to not achieve normal and optimal function. Apart from that, we are not ready to accept the changes that occur, resulting in pain during menstruation, resulting in dysmenorrhea.

2. Psychic

a. Psychological factors

Dysmenorrhea is quite common among teenagers, causing emotional instability. Especially if you don't get good information and education about menstruation, dysmenorrhea will appear.

b. Psychological stress or social stress

The influence of stress that occurs when pain occurs and also when menstruation occurs, can have an effect on the neuroendocrinological system which has an important role in female reproduction.

c. Worry.

Pain during menstruation is correlated with anxiety factors. If you continue to feel anxious, dysmenorrhea pain will occur

d. Cognitive

Interventions that occur on cognitive factors have the function of increasing understanding of pain which has the biopsychosocial nature of pain and also the impact that arises from women's thinking patterns. So you can control the pain.

Apart from internal factors, there are also external factors that can influence dysmenorrhea pain. These external factors are:

1. Sport

Young women who rarely exercise regularly have a significant risk of experiencing dysmenorrhea. By exercising regularly you can reduce and also avoid the effects of this pain.

2. Family history

Family history also plays a role and also has a high potential for experiencing pain during menstruation in adolescents.

Symptoms and signs of pain during menstruation itself usually include pain that comes irregularly and is sharp. In fact, it is not uncommon for cramps to occur in the lower stomach area. And this cramping feeling can also spread to the area behind the waist to the legs. Areas such as the groin and vulva, namely the outer part of the genitals, will also experience pain from menstruation.

This pain will appear and arise just before and also during the menstrual process. And it can reach a peak within 24 hours. Then within 2 days it will disappear. These symptoms will appear accompanied by several signs such as anxious behavior, depression and irritability and sensitivity. Sometimes irritability, sleep disturbances, fatigue and mood swings can be one of these signs.

The degree of dysmenorrhea or dysmenorrhea pain can be divided into 3 degrees consisting of:

1. Degree I
Pain of this degree will only occur for a few moments. And women who suffer from this pain can still carry out activities and are not bothered by the pain.
2. Degree II
The pain caused by menstruation can be quite annoying. So sufferers need pain relievers so they can carry out their activities as usual.
3. Degree III
Sufferers will experience excruciating pain. In fact, women need time to rest for a few days to resume their activities. Sufferers can experience headaches and even fainting and metabolic disorders during periods of menstrual pain.

Acupressure techniques can be used to reduce pain caused by increased endorphin hormones. This hormone is a hormone that can provide a feeling of relaxation and comfort to the body in a natural way. This hormone can block pain receptors that spread to the brain so that the pain is not transmitted to the brain.

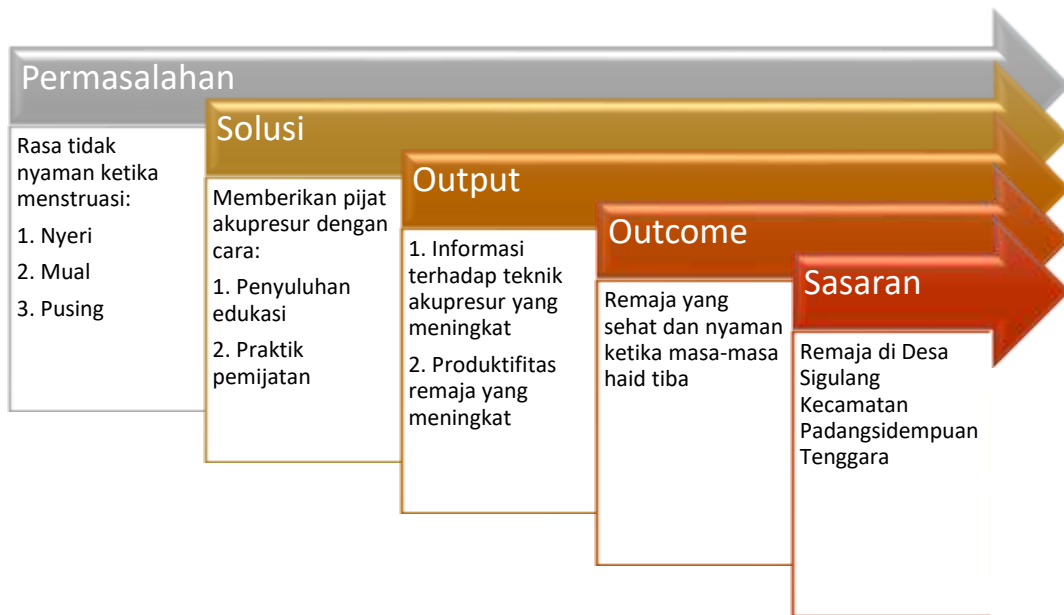
Pressing acupressure points can have an influence on the production of endorphins in the body. The endorphin hormone itself is a pain killer in the body. The endorphin hormone is a collection of peptide or protein molecules made from a substance, namely beta-lipotropin, around the pituitary gland. Endorphins can control all the activities of the endocrine glands where these molecules are stored. Endorphins can have an influence on pain-sensing areas in the brain in the same way as morphine in providing a feeling of relaxation to the body. The release of endorphins is controlled directly by the nervous system in the body. Nervous tissue is sensitive to pain and external stimuli. And if you use the acupressure technique, the body can give instructions to the endocrine system to release endorphins according to the body's needs.

In carrying out this acupressure technique, cleanliness in washing hands with running water and using antiseptic soap plays a very important role. This of course can guarantee cleanliness when performing the acupressure technique. Apart from that, areas that have conditions such as peeling skin, or parts of the body that are sick, can get protection so they don't get massaged. Apart from that, women who want to get a massage are at least free from 3 diseases that can cause sudden death, such as heart attacks, respiratory failure and also diseases that occur in the brain's nerves, such as strokes, ruptured blood vessels and injuries to the brain.

The acupressure technique in treating dysmenorrhea can be seen in research from Kashefi, 2010 where the acupressure technique at the SP6 point can reduce the severity of dysmenorrhea pain. The SP6 acupressure point in this study was quite effective in reducing menstrual pain. Meanwhile, Sacral Points or B27-B34 can also help reduce pain in dysmenorrhea, as per research in Aprillia (2010).

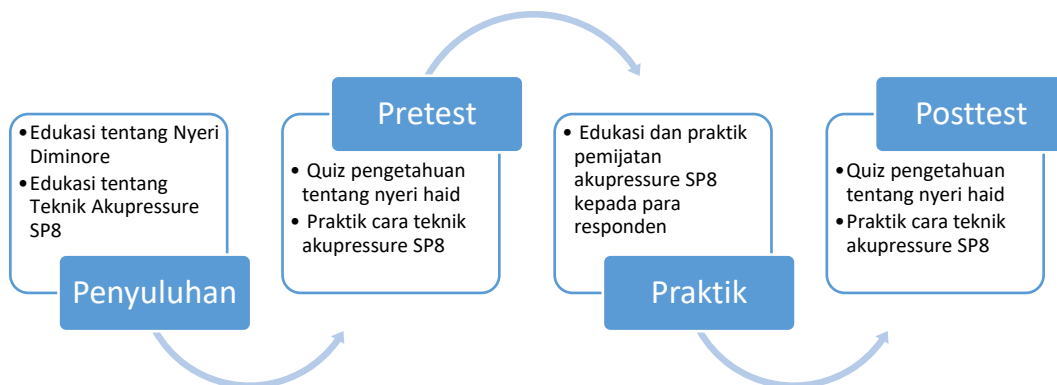
2. METHODS

The research method carried out and also used in this research is the Pre Experimental Design method. In this research, the method used to obtain the results of the research was Pretest and Posttest Design. This research provides a pretest or initial observation process that is carried out before the intervention or treatment process finally occurs. Then the intervention or treatment process is carried out using the posttest or final observation method. This research method was carried out using 3 phases, namely the planning phase, activity implementation, namely counseling and also practicum and evaluation phase. The research subjects used in this implementation were 25 school age teenagers in Sigulang Village, Padangsidempuan Tenggara District.



Graph 1. The process of conducting research

3. RESULTS AND DISCUSSION



Graph 2. Pretest & Posttest research process

The number of participants in the study regarding menstrual pain or dysmenorrhea pain using the acupressure method was 25 respondents consisting of teenagers aged 9 to 17 in Sigulang Village, Padangsidempuan Tenggara District.

Table 1. Category: Implementation of Educational Counseling on Acupressure Techniques SP8

Category	Amount	Percentage
Early Adolescence	20	80%
Middle Teenager	5	20%
Total	25	100%

From the table of categories for implementing educational outreach regarding the SP8 acupressure technique, it was recorded that there were 20 early adolescent respondents aged 9 to 12 years. Meanwhile, the remaining 5 respondents were teenagers or 20% of the total respondents who took part in this research.

No	Category	Amount	Percentage
1	Good	5	20%
2	Enough	14	56%
3	Not enough	6	24%
	Total	25	100%

Table 2. Pre Test Results for Respondents in SP8 Acupressure Technique Education

From the data in the table, it is clear that there are around 5 respondents or 20% of the total respondents who are quite good at knowing the SP8 acupressure technique to reduce menstrual pain. Meanwhile, 14 respondents or 56% of the total respondents received sufficient knowledge. Meanwhile, the rest were still in the category of not understanding the technique with around 6 respondents or 24%.

No	Category	Amount	Percentage
1	Good	20	80%
2	Enough	5	20%
3	Not enough	0	0%
	Total	25	100%

Table 3. Post Test Results for respondents in SP8 Acupressure Technique Education

After the counseling process was carried out, there was a change in the data where in the Good category, there were around 20 respondents who knew the SP8 acupressure technique for reducing pain. From this data, it can be concluded that the level of knowledge of teenagers regarding the acupressure technique for dysmenorrhea after receiving counseling has increased quite significantly. Initially there were only 5 respondents. Now it has increased to 20 respondents. Experienced an increase of around 60%. Meanwhile, respondents who did not understand experienced a decrease. From 6 respondents to 0 respondents. A decrease of around 24%. This indicates that the counseling and education process regarding the SP8 acupressure technique is quite good.

From the results of this research, it was found that teenagers in Sigulang Village, Padangsidempuan Tenggara District are starting to understand the material presented in the counseling. And this can be seen from the pretest and posttest data of the 25 teenagers who attended the counseling, who achieved quite significant improvements. The pretest results showed that only 5 teenage respondents knew about the acupressure technique in reducing menstrual pain. Meanwhile, 14 respondents were in the category who quite understood and understood the technique, with the rest not understanding the acupressure technique which can be used to reduce dysmenorrhea pain. From this research, it was found that the SP8 acupressure technique can help relieve pain when entering the menstrual period for women.

Acupressure therapy has significant benefits in reducing menstrual pain. This was obtained from all data samples who underwent acupressure therapy who experienced a reduction in dysmenorrhoea and were able to return to their normal activities. In this research process, the SP8 acupressure technique was carried out during the counseling. Education regarding acupressure techniques can reduce dysmenorrhea pain quite significantly. Acupressure itself is a healing technique by pressing and massaging parts of the body in order to activate the circulation of vital energy that emerges from the massage. This vital energy is also called Chi or Qi in Chinese and Japanese culture. The effect of massage and also pressing acupressure points can increase levels of endorphins which function as pain relievers that arise from within the body and also the blood and endogenous opioid peptides. All of these things appear in the central nervous system which can provide a stimulus to the endocrine system to release endorphins which can adapt to the body's condition and needs.

Research conducted by Sukini et al., (2012) states that there is a difference between the pain that occurs before using acupressure therapy and the action after acupressure is carried out. These massage points can provide the role and function of being a sedative and also a strong enough

antispasmodic so that it can reduce quite large and painful pain. This technique can have a strong influence on the mind and can also be a way to calm the mind and eliminate anxiety, especially dysmenorrhea pain that occurs due to menstruation, psychological disorders and also stress.

This acupressure technique has a very important role in the process of reducing dysmenorrhea pain. In accordance with research from Renityas (2017) where the research carried out acupressure intervention on 22 respondents who had research results on the intensity of dysmenorrhea pain before using the acupressure technique. Data was obtained that the dysmenorrhea pain scale was 1 for 3 respondents, the dysmenorrhea pain scale was 2 for 9 respondents, the dysmenorrhea pain scale was 4 for 10 respondents. After carrying out the acupressure technique, 9 people felt a pain scale of 1. Then a pain scale of 2 was felt by 8 people and a pain scale of 4 was felt by 5 people. This is proof that the acupressure technique can help reduce severe pain. From the pretest and posttest, correlation results can be obtained regarding the knowledge of young women regarding the benefits of SP8 acupressure which is still inadequate. By providing counseling and education, young women who receive education about this technique can reduce the dysmenorrhea pain they experience.

4. CONCLUSION

Carrying out research in Sigulang Village, Padangsidempuan Tenggara District, concluded that there was a relationship between the knowledge of young women regarding the benefits of SP8 point acupressure. After carrying out the counseling process and also acupressure practicum in reducing dysmenorrhoea pain, young women can gain knowledge about the SP8 point acupressure technique. The results of this research and practicum can reduce menstrual pain and also dysmenorrhea during menstrual periods.

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