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The Effect of Continuous Slow-Stroke Back Massage (SSBM) and Warm Compress Therapy on the Severity of Menstrual Pain in Young Women

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ABSTRACT

Period discomfort, or stomach pain resulting from uterine cramping during menstruation, is one of the issues that young women encounter most frequently. Since nonpharmacological remedies are safe to administer on one's own and are easy to get, the general people has employed them extensively since ancient times. Both non-pharmacological treatment and cutaneous stimulation are useful in minimizing pain. Warm compresses can lessen uterine contractions and enhance blood circulation, while slow stroke back massages (SSBM) might lessen pain perception by assisting in the reduction of muscle tension, which can exacerbate pain feelings. The literature was gathered from the Google Scholar database, which included publications from 2016 to 2020. Relevant articles were hand-picked.

Keywords: Menstrual Pain, Slow Stroke Back Massage (SSBM), Warm Compress Therapy

BACKGROUND

Adolescence is a time of psychological and physical transition from child to adult; in fact, the main symptoms of adolescent growth are the bodily changes that take place throughout this phase. Meanwhile, growing bodily alterations lead to a variety of changes, including psychological ones (Sarwona, in Dahlan 2017). Puberty, a term used to describe this teenage stage that is associated with the maturation of sexual organs and the ability to procreate, which is indicated by the occurrence of menstruation (menarche) (Widyastuti, 2009). Teenagers' primary focus should be on their reproductive health. Menarche, or the onset of the first menstrual cycle, marks the start of a woman's reproductive period and is characterized by the endometrial tissue being shed.

When a clot or a fragment of uterine tissue goes through the cervix, the pain is more severe, particularly if the cervical canal is narrow. According to Sarasawati (2010), other causes of dysmenorrhea include the uterus facing backwards (retroversion), inactivity, and psychological or social stress. Around the age of 20, secondary dysmenorrhea frequently manifests as lower abdominal discomfort that radiates to the lower back and legs. The pain is typically experienced as intermittent cramps or as a constant dull ache. Typically, the discomfort starts right before or during the menstrual cycle, peaks in less than a day, and goes away two days later (Saraswati 2010). Based on data from WHO, it was discovered.

Warm compresses can be applied to the area of the body that hurts by securing a towel soaked in warm water or a rubber bag filled with warm water (Rima, 2016). The following formulation of the research problem can be made in light of the previous description: Does using warm compress therapy along with cutaneous stimulation slow stroke back massage (SSBM) have an impact on young women's menstrual pain intensity? The aim of this study is to ascertain the impact of warm compresses and slow-stroke back massage on the severity of

menstruation pain in teenagers. Based on personal experience, the researcher selected this title. The researcher is a female who experiences discomfort during her menstrual cycle. Additionally, researchers frequently.

METHODS

The working techniques employed in research are known as research methods (Fathoni, 2011). A review of the literature is the research method used in this essay.

RESULTS

The average success rate for cutaneous stimulation was 88.6%, but the average success rate for warm compresses was 42.8%, according to a literature search that turned up 11 papers. Reducing Dysminorrhea in Adolescent Girls by Cutaneous Stimulation, Sulistiyowati. The paired sample t-test results indicated that t = 45.64 and p = (0.000) were the outcomes; when p < (0.05), H1 was accepted, indicating that cutaneous stimulation had an effect on lessening the discomfort of dysmenorrhea in teenage girls attending the Al-Futuh Vocational School complex during the 2018–19 school year. The Effect of Warm Compress Therapy on Menstrual Pain (Dysmenorrhea) in Banking Vocational School Students at Simpang Haru Padang is a study done by Asmita Dahlan, Tri Veni Syahmin An. The outcomes of statistical analyses utilizing.

The Effect of Giving Warm Compresses on Reducing Dysmenorrhea Pain in Class, by Rima Maratun Nida, Defie Septiana Sari, has a p value of 0.000 (p < 0.05). The degree of monthly pain experienced by young women at SMA Karya Ibu Palembang can be reduced by applying warm compresses, as reported by Eka Rahmadhayanti, Rahmalia Afriyani, and Annisa Wulandari. Based on the outcomes of statistical analyses utilizing the Wilcoxon test, the p-value was determined to be 0.0001. The study's findings demonstrated that using warm compresses could help reduce Based on statistical testing utilizing the Wilcoxon test, the degree of menstrual discomfort experienced by young women at SMA Karya Ibu Palembang was determined to have a p-value of 0.0001. investigation by Hawa Mahua.

Effectiveness of Warm Compress Therapy in Reducing Dysmenorrhea Pain in Adolescents in Bandung, Maidartat, Sri Hayati, Afifah Permata Hasanah. Ho is rejected based on the study's results, which indicate a p value less than 0.05 (0.000 < 0.05), indicating the presence of effectiveness. Warm compress therapy for female students in Bandung experiencing menstruation pain. Diana, V. Utari, and Eko Mindarsi h Marlina Wati, When using the Paired Sample T-Test statistical test to examine the impact of warm water compresses on the intensity of dysmenorrhea pain in adolescents in Randusari Hamlet, Argomulyo Village, Cangkringan, Sleman, Yogyakarta, the results showed that the calculated T value was 25.40 greater than the T table (1.694), with a significance value of 0.000 (Pvalue<0.05) and a mean difference of 3.6364.

Cutaneous Stimulation Slow Stroke Back Massage Against Primary Dysmenorrhea Pain, Wiwin Rohmawati, Lilik Hartati According to the results of the Wilcoxon analysis test, the Aisyiyah Tonggalan Klaten Women's Orphanage's Slow Stroke Back Massage cutaneous stimulation was found to have an effect on reducing the pain level of primary dysmenorrhea. Ha was accepted and Ho was rejected. The calculated z value of -4.042 and the p value of 0.000, meaning p < 0.05, were obtained in Klaten. Diah Ayu Fatmawati, Kurniawati, Mukhoirotin, βEndorphin Levels, IL-6, and TNFα in Adolescents with Dysmenorrhea: The Impact of Warm and Cold Compression. The study's findings demonstrated that both groups' levels of β Endorphin and IL did not change following the administration of warm and cold compresses.

DISCUSSION

The findings of the study have led to the understanding that warm compress therapy combined with slow-stroke back massage has a cutaneous stimulating impact on young women's menstrual pain. The study's findings support Potter & Perry's (2015) theoretical framework, which claims that massage is a sensory integration method that has an impact on the autonomic nervous system. When cutaneous stimuli are used correctly, they can ease discomfort and ease tense muscles before causing a relaxation response. According to Rahayu (2015), the slow-stroke back massage technique might produce a warming sensation by widening the blood vessels in the affected area. Vasodilation of blood vessels will improve blood flow to the area being massaged, resulting in an increase in cell activity.

According to Sulistiyowati's (2020) research, all young women experienced dysmenorrhea pain prior to receiving cutaneous stimulation. This suggests that a large number of young women experienced dysmenorrhea pain because cutaneous stimulation had not been performed and there was no treatment available to lessen the pain they felt. Meanwhile, none of the young women felt any pain following cutaneous stimulation. to give young ladies practice managing the pain associated with dysmenorrhea. in line with the principle of gate control. The endorphin theory, which states that rising endorphin levels in the body impact pain reduction by influencing the individual's perception, and the gate control theory, which states that pain intensity is decreased by preventing pain transmission at the gate, both explain the mechanism for reducing pain.

The pain scale prior to the Slow Stroke Back Massage Cutaneous Stimulation shows this, with the greatest value being 4 and the lowest value being 3 following the Slow Stroke Back Massage Cutaneous Stimulation. Bivariate analysis results revealed a Z value of -4.042 and a p value of 0.000, indicating $p < 0.05$. This means that Ho was rejected, indicating that cutaneous stimulation with Slow Stroke Back Massage had an effect on lowering primary dysmenorrhea pain levels at the Putri Aisyiyah Tonggalan Klaten Orphanage. According to Rima Maratun Nida and Defie Septiana Sari (2016), the research on class is rather different from previous studies because the warm compress action revealed.

Warm compresses help raise the temperature of the skin in that area, stimulate blood vessels, improve blood circulation, lessen muscle spasms, raise the pain threshold, stop pain perception, and provide relaxation and quiet (Simkin, 2005). The study's findings demonstrated a substantial impact of warm compresses on dysmenorrhea in young women attending the Angkasa Singosari Aviation Vocational School in Malang, with as many as 4 individuals (25%) reporting mild pain prior to the study, 12 reporting moderate pain, and 2 reporting no pain following. As for the 12.5%, 11 (68.8%) reported mild discomfort, and 3 (18.8%) reported significant pain. bolstered by studies on teenagers conducted in Maidartat, Sri Hayati, and Afifah Permata Hasanah (2018).

CONCLUSION

Based on the study findings, it is known that providing warm compress therapy and cutaneous slow stroke back massage (SSBM) stimulation have an impact on young women's menstrual pain intensity. However, it has been demonstrated that these therapies necessitate prolonged periods of time and repeated actions, with an average intervention duration of 3 to 15 minutes. While warm compresses have an average success rate of 42.8%, cutaneous stimulation has an average success rate of 88.6%. Warm compress therapy has a higher success rate based on research data from the two pain therapies mentioned above, namely Cutaneous Stimulation, Slow Stroke Back Massage, and Warm Compress Therapy. However, when considering the accessibility of resources, like tools and materials, warm compresses are better because they are more readily available.

REFERENCES

Afrelia Inut, N. L. (2016). Pengaruh kompres hangat terhadap penurunan dismenorea pada mahasiswi D3 kebidanan Angkatan 2014 di Whn Malang. Jurnal Keperawatan.

Ani T Priyanti, R. R. (2019). Pengaruh kompres panas terhadap penurunan intensitas nyeri disminorea primer pada mahasiswi universitas Megarezky. Seminar Nasional Sains, Teknologi dan Sosial Humaniora Uit.

Asmita Dahlan, T. (2017). Pengaruh terapi kompres hangat terhadap nyeri haid (dismenorea) pada siswi SMK Perbankan simpang haru Padang. Journal Endurance.

Diana, E. V. (2918). Pengaruh kompres air hangat terhadap intensitas nyeri dysmenorrhea pada remaja di dusun Randusari desa Argumulyo Cangkringan Sleman Yogyakarta. Jurnal Medika Respati.

Dina Indarsita, y. (2017). Warm Compress action to reduce painful of mentruation or dysmenorrhea at SMPN 1 Desa Baru area pancur Batu District Deli Serdang Regency. Proceeding safety in Emergency.

Eka Rahmadhayanti, R. A. (2017). Pengaruh kompres hangat terhadap penurunan derajat nyeri haid pada remaja putri di SMA Karya ibu Palembang. Jurnal Kesehatan.

Hawa Mahua, S. P. (2018). Pengaruh pemberian kompres air hangat terhadap disminorea pada remaja putri di SMK Penerbangan Angkasa Singosari Malang. Nursing news.

Maidartat, S. A. (2018). Efektivitas terapi kompres hangat terhadap penurunan nyeri disminore pada remaja di bandung. Jurnal Keperawatan BSI.

Moch, B. (2017). Patofisilgi Nyeri (Pain). 13 (8).

Retno Hayu Pangesti, G. R. (2017). Pengurangan nyeri dismenore primer pada remaja putri dengan kompres hangat. Jurnal Kesehatan Metro Sai Wawai.

Rima Maratun Nida, D. (2016). Pengaruh pemberian kompres hangat terhadap penurunan nyeri dismenore pada siswi kelas XI SMK Muhammadiyah Walukelir Sukoharjo. Jurnal kebidanan dan kesehatan tradisional poltekes kemenkes surakarta.