

EFFECTIVENESS OF P6 POINT ACUPRESSURE IN REDUCING THE FREQUENCY OF SOMETHING AND VOGING IN THE 1st TRIMESTER PREGNANT WOMEN

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Abstract. Nausea and vomiting in early pregnancy is a common problem that often occurs in the first trimester, causing discomfort such as dizziness, flatulence, and weakness, as well as vomiting <5 times a day. One way to deal with nausea and vomiting in Trimester 1 pregnant women is through point P6 acupressure, which is an effective non-pharmacological method. The purpose of this study was to determine the effectiveness of point P6 acupressure in reducing nausea and vomiting in first-trimester pregnant women. The method in this study uses Pre-Experimental *Design* with a one group pre-test and post-test design. This research was conducted on mothers first trimester pregnant women who experienced nausea and vomiting in as many as 20 people with the technique purposive *Sampling*. Statistical test results with the Paired sample T-Test showed that there were differences in the frequency of nausea and vomiting in first trimester pregnant women before and after the p6 point acupressure with a significance value of $0.000 < 0.05$, which means that point P6 acupressure is effective in reducing nausea and vomiting in first-trimester pregnant women.

Keywords: [Point p6 Acupressure, Nausea Vomiting, First Trimester Pregnant Women]

INTRODUCTION

Pregnancy is a natural process in a woman's life, where there are several physical and psychological changes. This process lasts for 40 weeks and consists of three phases known as trimesters, namely Trimester I (0-12 weeks), Trimester II (12-28 weeks), and Trimester III (28-40 weeks). In the first phase, physiological changes occur which can result in several complaints in pregnant women, one of which is frequent nausea and vomiting which causes discomfort. (Indarti, 2013).

Nausea, vomiting, or what is also known as emesis gravidarum can cause discomfort because there is a feeling of dizziness, flatulence and weakness in the body, followed by the release of stomach contents through the mouth which occurs less than five times a day in the first trimester. If not treated immediately, emesis gravidarum in pregnancy can become a dangerous pathological condition (Ministry of Health RI, 2013).

The feeling of discomfort in the stomach can occur due to increased levels of the hormones estrogen and human chorionic gonadotropin (hCG) in the blood circulation. The hormone hCG triggers the production of estrogen in the ovaries. the increasing rate of estrogen can increase sour stomach, and cause nauseous in woman pregnant. From a psychological standpoint, being nauseous And vomiting during pregnancy influence more than 80% of women pregnant And very influence their quality of life. (Rofiah, 2017).

Maternal health efforts can be measured from several indicators including the Maternal Mortality Rate (TKI) sign. The number of maternal deaths in the Rembang Region in 2021 is 14 incidents. Maternal death occurred at the Gunem Health Center, Sarang 1, Sedan, Kaliori, Rembang 1, Rembang 2, Kragan1, Kragan 2, and Lasem. According to the history of pregnancy, deaths occurred during pregnancy in 8 cases (57.14%) and during the postpartum period in 6 cases (42.86%). The number of cases of mothers who died aged <20 years was 1 case (7.14%), and those aged between 20-34 years was 13 cases (92.86%). Causes of maternal death due to bleeding in 4 cases (28.57%), hypertension in

pregnancy in 1 case (7.14%), blood circulation system problems in 1 case (7.14%), and metabolic problems in 1 case (7, 14%). (Rembang Regency Health Office, 2021:19-20).

The number of cases of nausea and vomiting in pregnant women or *emesis gravidarum* in Indonesia was observed as a whole in 2,203 pregnancies, totaling 534 pregnant women. While the prevalence of cases in Indonesia is estimated at 10%.from whole Mothers pregnant Who suffer *emesis gravidarum* (Department Health RI, 2015).

There are several ways to treat nausea and vomiting, namely with pharmacological and non-pharmacological approaches. The non-pharmacological approach is one of the complementary medicine techniques regulated in the Regulation of the Minister of Health of the Republic of Indonesia Number 15 regarding the Implementation of Additional Traditional Health Services in 2018(Permenkes, 2018) so that many expectant mothers turn to using non-medical methods to deal with nausea and vomiting during pregnancy. This was done out of fear of the possible negative effects of drug treatment. One of the non-pharmacological methods that are often used is the acupressure technique. (Primary, 2016).

Acupressure is a form of traditional medicine that involves pressing acupuncture points on the surface of the body using fingers, blunt-tipped devices, or other parts of the body to maintain health. This technique involves pressing on certain points as much as 30 times until pain is felt and can be done 1-2 times a day (RI Ministry of Health, 2017).

Acupressure point p6 is an attempt to reduce or relieve the uncomfortable sensation and urge to vomit during pregnancy by pressing certain points on the body (eg pericardial point 6 or three fingers under the wrist). (Fitriana, 2017).

A preliminary study in May 2022, found 15 pregnant women who experienced symptoms of nausea and vomiting in the first trimester. To overcome nausea and vomiting, 10 pregnant women took anti-nausea and vomiting drugs provided by midwives or other health workers to relieve their symptoms. As many as 3 other pregnant women chose to drink ginger tea, while 2 pregnant women chose to just rest without taking any medication or drink to relieve the symptoms of nausea and vomiting they were experiencing. In conclusion, there are no pregnant women in the first trimester who use the non-pharmacological method of acupressure point p6 to relieve symptoms of nausea and vomiting. This sparked the interest of researchers to conduct research focusing on the topic of P6 Point Acupressure. The purpose of this study was to determine the effectiveness of point P6 acupressure in reducing nausea and vomiting in first-trimester pregnant women.

METHODS

The type of research used is a pre-experimental design with pre and post-test groups. This research is part of the study of pregnancy And midwifery Which relate to method nonpharmacology. The independent variable used was acupressure at the p6 point, while the dependent variable observed was a decrease in the frequency of nausea and vomiting. The research location was conducted at PKU Muhammadiyah Pamotan Hospital, Rembang Regency from February to March 2023. The study population included all first-trimester pregnant women with symptoms of nausea and vomiting. A total of 36 respondents were selected and 20 people were taken as samples using a sampling technique, namely purposive sampling. This study uses a questionnaire that has been tested for validity and reliability previously, namely the PUQE-24-hour questionnaire. Data is processed through the stages of editing, coding, data processing, storing, cleaning, and tabulation. Data interpretation was carried out by using univariate and bivariate tests *Test Paired samples T-Test*.

RESULTS AND DISCUSSION

RESULTS

1. Frequency of Nausea and Vomiting Before Point P6 Acupressure Therapy

Table 1. Frequency Nausea and Vomiting in Early Trimester Pregnant Women Before Point P6 Acupressure Therapy

Acupressure Technique	Category	Frequency	Percentage (%)
Before	Light	3	15 %
	Currently	17	85 %
Total		20	100%

From Table 1 above it can be concluded that frequency of nausea and vomiting in pregnant women since the first trimester before acupressure techniques there were 3 pregnant women with mild category (15%) and 17 pregnant women with moderate category (85%).

2. Frequency Nausea and Vomiting After P6 Point Acupressure Therapy

Table 2. Frequency of Nausea and Vomiting in Early Trimester Pregnant Women After Point P6 Acupressure Therapy

Acupressure Technique	Category	Frequency	Percentage (%)
After	Light	18	90%
	Currently	2	10 %
Total		20	100 %

From Table 2 above it can be concluded that the frequency of nausea and vomiting in pregnant women since the first trimester after the acupressure technique there were 18 pregnant women in the mild category (90%) and 2 pregnant women in the moderate category (10%).

3. Average Reduction of Nausea Vomiting Before and After Acupressure Point P6

Table 3. Average Reduction in Nausea Vomiting Before and After Application of Acupressure at Point P6

Acupressure Technique	Category	freq	%	N	Means	Median	std. Deviation	Min	Max
Before	Light	3	15%	20	1.85	2.00	0.366	1	2
	Currently	17	85%						
After	Light	18	90%	20	1.10	1.00	0.308	1	2
	Currently	2	10%						

Based on Table 3 above, it can be concluded that there were 20 pregnant women experiencing symptoms of nausea and vomiting in the first trimester. Before undergoing acupressure therapy at point p6, 3 pregnant women were experiencing these symptoms in the mild category (15%) and there were 17 pregnant women in the moderate category (85%), with a mean value of 1.85. Whereas after the acupressure point p6, there was an increase of 18 pregnant women in the mild category (90%), and there was a decrease of 2 pregnant women in the moderate category (10%) with a mean value of 1.10.

4. Differences in Frequency of Nausea Vomiting Before and After P6 Point Acupressure Intervention in First Trimester Pregnant Women

Table 4. Differences in the Frequency of Nausea Vomiting Before and After the P6 Point Acupressure Intervention in First Trimester Pregnant Women

	Paired Difference					t	df	Sig. (2-tailed)	
	Means	std. Deviation	std. Error Means	95% Confidence Interval of the Difference					
				Lower	Upper				
PRETEST - POST TEST	3,200	1.005	.225	2,730	3,670		14,236	19	.000

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DISCUSSION

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Menurut Tose Republic of Indonesia knowsn 2013, youral muno to mother pregnant trimester 1 is suatutoconditions marked de just feel pusing, perut tomomng, and taste lesir at thatmomh, which digo toluit's filled with lambng me. Theni mulut, sering dieyour rateno lemore than 5 times seday. If not treated immediately, emesis gravidarum in pregnancy can become a dangerous pathological condition.

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Acupressure is a form of traditional medicine that involves pressing acupuncture points on the surface of the body using fingers, blunt-tipped devices, or other parts of the body for the purpose of maintaining health. This technique involves pressing on certain points as much as 30 times until pain is felt and can be done 1-2 times a day. (RI Ministry of Health, 2017).

Acupressure point p6 can attempt to reduce or relieve the uncomfortable sensation and urge to vomit during pregnancy by pressing certain points on the body (eg pericardial point 6 or three fingers under the wrist). (Fitriana, 2017).

The results of the above research were only known in 2018 by Ana Mariza and Lia Ayuningtias who titled "Penerapan pemresur at point P6 terhadap emesis gravidarum on mother pregnant trimester I" which was your right friend your usual and you are before the technique of massage pemresur have an average of 10.53, standard deviation 9, standard deviation 13, and standard deviation 1.408, where the results of statistical test obtained $p\text{-value} = 0.000 < 0.05$ meaning that the pemresur on p6 can help towards you all thank you for the first BPM Wirahayu Long Known 2018.

There is another research result only known in 2020 by Wiwi Wardani "Penerapan Pemresur At Point Pericardium 6 Terhadap Intensi Nyeri Muntah Pada Ibu Hamil Trimester I" which states that before the intervention have value Mean 7.30 and the standard value is 1.895 meaning that the pemresur point P6 has significant impact against the decrease in the intensity of nausea whether in the pregnant women first with the $p\text{-value} = 0.000 < 0.05$.

It is concluded that the use of material physiological way long to pregnant that can cause don't feel comfortable long to pregnant, one it is you are. *Emesis gravidarum* is a result of the HCG hormone ingredient, progesterone hormone and hormone estrogen rise. You are all nausea often because of the pregnancy range of 12 weeks or happens on the first trimester to pregnant. Your care all you can use non-pharmacological or non-pharmacological. Non-pharmacological way, one it can be handled just pemresur point p6.

CONCLUSION

From the results of the research, it can be seen that there is a difference in your usual before to mother pregnant trimester first before and after already applying the technique pemresur point P6. The results of significance test show $p\text{-value} = 0.000 < 0.05$ which is showing that the technique pemresur point P6 is effective in reducing the intensity of nausea on the first trimester to pregnant. Average grade before pemresur point P6 of 1.85 and after pemresur point P6 is 1.10, which means that on average there is a decrease in the frequency of nausea and vomiting by 0.75.

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