

EFFECTIVENESS OF STAGEN USE ON DECREASED UTERINE FUNDUS

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ABSTRACT--- Purpose of Sustainable Development Goals (SDGs) 2030 guarantees healthy life and promotes welfare for all people at all ages. The decrease in number is not in accordance with the target SDGs. Three causes of maternal death in Indonesia are bleeding, hypertension in pregnancy (HDK), and infection. (Indonesian Ministry of Health, 2015). Alternative efforts to use stagen to increase uterine contractions in post-partum mothers. The purpose of this study was to determine of stagen in reducing uterine fundus between 5 meters, 10 meters and the effectiveness of using traditional blinding to prevent bleeding that often occurs during the post-partum period. This type of experimental research, Quasi-research methods experimental with time series control group. Data analysis Repeated Measures Anova. The population of post-partum in Central Java, Samples of 20 postpartum mothers in the 5 meter and 38 in the 10 meter stagen group, 20 in the traditional blinding group. Data collection by measuring the height of the fundus uteri at 1, 3, 5 and 7 day's post-partum. The instruments used were metlin and measurements with ultrasound on the 7th day post-partum. Results of the study of the decrease in TFU with mean in the TFU traditional blinding group on day 1 to day 7 were 5,550 cm, while on day 7 with day 3 4,075 cm and day 7 with fifth day was 1,675 cm. with a value of P 0,000 which means meaningful. In the 5 meter stagen group results were obtained, TFU on day 1 with day 7 means 5,289, day 7 with day 3 mean 3,605 while on day 7 with day 5 with mean 1,711. with a value of P 0,000 which means meaningful. In the 10 meter stagen group the results were obtained, TFU on day 1 with day 7 means 6,658, day 7 with day 3 mean 3,605 while on day 7 with day 5 with mean 0,505. with a value of P 0,000 which means meaningful. Conclusion 10 meters of stagen is most effective with an average decrease in TFU on day 7 of 6.658 cm. Suggested normal labor can use 10 meters of stagen so that uterine contractions can run normally.

.Keywords--- stagen, post-partum, uterine fundus

I. INTRODUCTION

The objectives of the Sustainable Development Goals (SDGs) of 2030 include ensuring a healthy life and promoting prosperity for all people of all ages. One indicator is to reduce the Maternal Mortality Rate (MMR) to below 70 per 100,000 live births (Indonesian Ministry of Health, 2015). According to the IDHS in 2015 it decreased to 305 maternal deaths per 100,000 compared to 2012 that the MMR in Indonesia amounted to 359 maternal deaths per 100,000 live births based on the results of the Inter-Census Population Survey (SUPAS). The decrease in number is not in accordance with the target SDGs. Judging from the biggest causes of death are bleeding, hypertension in pregnancy (HDK), infection, prolonged / obstructed labor, and abortion. Most maternal deaths occur in the puerperium by 48.65%. The most common cause is bleeding (Ministry of Health, 2014). Three causes of maternal death in Indonesia are bleeding, hypertension in pregnancy (HDK), and infection. However (Indonesian Ministry of Health, 2015).

In Central Java in 2016 maternal deaths were 602 cases and in 2017 there were 475 maternal deaths, with maternal mortality of 109.65 per 100,000 KH and 88.05 per 100,000 KH. When viewed from these data the maternal mortality rate has decreased by 21.6%. 60% of maternal deaths occur during childbirth, 60% during pregnancy is 26.32%, and during labor is 13.68%. Whereas the cause of first death was hypertension by 32.97%, followed by bleeding by 30.37% ((Dinas Kesehatan, 2016).

The puerperium is a very important period and must be considered, because if it is not managed properly, the puerperium will be a very dangerous period for post-partum mothers, because during childbirth prone to complications occur that can cause maternal mortality and can increase maternal mortality (Health and Indonesia, 2018).

Maternal Mortality Rate (MMR) is one important indicator of the degree of public health. AKI is a picture of the number of women who die per 100,000 live births, of a cause of death related to pregnancy disorder or treatment during pregnancy, childbirth and the postnatal (Health, 2017).

Impaired postnatal one of which is a disorder of the recovery process the physical condition of the mother post-partum is the process of uterine involution and the occurrence of diastasis rectus abdominis (abdominal muscles separation). Disorders of imperfect uterine involution process include uterine sub involution that can cause bleeding, besides that it is hyper involution of the uterus (Ambarwati, 2008). The highest maternal mortality caused by other causes by 35% includes amniotic embolism, Unexplained, CVA, peritonitis ec curettage peritonitis, Acute Fatty Liver, and liver disorders. The second position caused by diseases such as heart disease, tuberculosis, and ICH by 22%. Furthermore Preeclampsia and eclampsia. The fourth position is bleeding by 17% and finally sepsis by 4%. While the deadliest conditions still occur in the puerperium that is equal to 70%. But it has decreased compared to the previous year by 71.87% (Health, 2017).

Problems that can arise during the puerperium are very diverse, ranging from vaginal bleeding, infection of the puerperium, preeclampsia, pain in the breast, to psychological disorders. Because it is very important for mothers and families to recognize danger signs during the puerperium (Bahiyatun, 2009).

Most mothers use stagen after giving birth because according to them, this is related to cultural factors and beliefs. From the beginning even now many pregnant women use stagen after giving birth. The reason some mothers use stagen is so that the abdominal muscles and loose skin can quickly return to body shape like before pregnancy, restore the stomach to regain lean shape. Of course the use of this stagen must be routine, not only for a day or two, but even for good, it will be better. In the Java community the use of stagen is carried out for up to 40 days. This is based on the experience of parents in the past did show a positive effect of the use of stagen after giving birth. But according to the experience of some postpartum mothers who use stagen said that the effects when using stagen cause discomfort, difficulty moving, and some are itching in the abdomen of the mother (Ernawati, 2013).

Based on research conducted by Sugita and Widyastuti, most respondents used stagen in the postpartum period. Stagen lengths consist of two types, namely four meters and ten meters. In the use of 50% of postpartum mothers use 4-meter stagen and 41.66% use 10-meter stagen (Sugita and Widiastuti, 2016).

While research conducted by Sekti Mayasari, Dwi (2017) found that there were significant differences in changes in the height of the fundus uteri between the groups using tight stagen and the use of loose stagen with a p-value of 0.006. With the tight stagen group the average decrease in the height of the fundus of the uterus in the

postpartum mother is faster than the group of loose stagen users, 6.4 cm. This is because in groups that use tight stagen the pressure on the abdomen increases so that there is a strong contraction in the musculus transversus abdominis as a result of using stagen.

During the puerperal period changes occur in the reproductive organs, including the uterus, cervix uterine, vagina, perineum, and pelvic organ muscles. In the uterus several changes occur starting from involution uterine, contractions, after pains, regeneration of the placental site and the release of lochea from the birth canal.

During the puerperium the process of involution uterine will take place the process of uterine shrinkage until it returns to its original size or before pregnancy. Normally after the tenth day the uterus is no longer palpated, but if up to 2 weeks after delivery the uterus has not yet entered the pelvis it is necessary to suspect sub involution (Suherni, 2010).

Vaginal bleeding can cause sub involution or disruption of the process of involution uterine so that the uterine return process runs more slowly. Sub involution can result in problems that can harm the puerperal mother. Usually sub involution results from residual placenta, infection and advanced bleeding (Mary Greece, 2009).

Nowadays people re-assume and practice the practiced culture by their ancestors. Like the use of stagen in the postpartum period that is re-desirable and is considered to have benefits to accelerate the process of returning the uterus to its state before pregnancy. For example, the use of stagen is very lately popular in the United States. They assume by using stagen will make them feel more comfortable and the process of involution will run faster (Hartono, 2009).

However, in Indonesia the use of stagen is still a pros and cons because according to some opinions, the use of stagen that is not right will actually inhibit the process of involution uterine that will endanger the postpartum mother. However, stagen culture in Indonesia is still difficult to leave because it has become a hereditary culture passed down from the days of our ancestors.

Some post-partum mothers use stagen after giving birth because they follow local customs or because of encouragement from parents, especially in rural areas that still uphold the values of customs. Some others think that the use of stagen is useful to restore the elasticity of the abdominal muscles and restore body shape to the state before pregnancy. Some even think that the use of stagen causes discomfort because the stomach is stuck, itching on the skin, difficulty in moving, and can cause swelling in the legs if it is incorrect in the use of stagen (Sugita and Widiastuti, 2016).

The use of stagen should be used in postpartum mothers with a history of normal labor, because it is feared the use of stagen for postpartum mothers with a history of delivery by Sectio Caesar will interfere with the wound healing process. In postpartum mothers with a history of normal labor, the use of stagen can be done in the first week after birth. Whereas for postpartum mothers with a history of caesarean section, the use of stagen should be done at 3-4 weeks or after a dry wound.

Based on research that has been done on groups that use stagen and do not use stagen, after 6 days a significant difference is obtained. In the group that used stagen decreased waist circumference of ± 4.98 while the group without using stagen by ± 3.62 cm. Decreased diastasis recti in the group using stagen by ± 2.45 cm while in the group without using stagen by ± 2.05 cm (El-Mekawy et al., 2013).

Based on the description above, researchers are interested in conducting research on the effect of effectiveness the use of stagen to decrease the height of the uterine fundus in post-partum mothers in Central Java.

Research objectives to determine the characteristics (age, parity) of postpartum mothers. Knowing the decrease in fundal height of the uterine group using 5-meter stagen in postpartum mothers. Knowing the decrease in the height of the fundus of the group using 10 meters of stagen in postpartum mothers. Knowing the decrease in fundal height of uterine groups using traditional blinding in postpartum mothers. To find out the difference in the decrease in the height of the fundus uteri of each group in post-partum mothers.

II. METHODOLOGY

The type of research used in this study is the experiment study a quasi-experimental research/Quasi Experimental is an experimental research that is not yet real, because there are still external variables that also influence the formation of the dependent variable. In this study the intervention was tried out to a group of respondents with a comparison group but randomization was not carried out in entering the sample into the treatment group and the control group. The design of this study was a time series with control group where data collection was carried out several times during the intervention in the treatment group. In addition there are two groups chosen non randomly namely the intervention group and the control group that was given a pretest.

Research variable In this study, the research variable used was the independent variable using stagen and traditional blinding. The dependent variable is a decrease in the height of the fundus of the uterus in post-partum mothers. The population in this study were all postpartum mothers and PKM and PMB in Central Java in Jepara Regency, Semarang City, Salatiga City and Grobogan Regency.

Ethical Clearance (EC) is a written statement given by the Research Ethics Commission for research involving living things which states that a research proposal is feasible after fulfilling certain requirements. Ethical Clearance in this study was conducted at the health research ethics commission, Faculty of Medicine, University of sultan Agung with number 439 /A.1/FIK-SA/VIII / 2019.

III. RESULTS

Results and discussion of univariate analysis The average age in the 5 meter stagen group was 28.83 years, the oldest age was 36 years and the youngest age was 24 years. While the average parity 1 with the most is 3. The average age in the 10 meter stagen group is 27, 16 years old, the oldest age is 40 years and the youngest age is 18 years. While the average parity 2 with low parity is 1 and the most is 4. The average age in the Traditional blinding group is 26.70 years, the oldest age is 39 years and the youngest age is 16 years. While the average parity of 2 children with low parity is 1 and most are 4 children

Table 1: Distribution of respondents based on age and parity

	S 5 m		S 10 m		G	
	um	parita	um	pari	um	pari
	ur	s	ur	tas	ur	tas
Min	2	1	18	1	16	1
	4					

Max	3	3	40	4	39	4
	6					
Mean	28,	1	27,1	2	2	2
	83		6			

Frequency distribution in the 5 meter stagen group. On the first day the minimum TFU value is 11 cm, the value is maximum 18 cm, SD 2.6, mean 14, 65 and median 14, 50. On the 3rd day post-partum the minimum TFU value is 9 cm, minimum maximum 17 cm, SD 2.5 mean 14, 40 and median 14cm. On the 5th day post-partum the minimum TFU value was 6 cm, the value was minimum 15 cm, SD 2.48, mean 8.95 and median 8, 00 cm. On the 7th day post-partum the minimum TFU value was 4.50 cm, the value was maximum 14 cm, SD 2.5, mean 7.4 and median 7.00 cm. And ultrasound examination results on the 7th day post-partum is the minimum TFU value is 5.40 cm, the value is maximum 14 cm, SD 2.0, mean 7.96 and median 7, 20 cm.

Table 2: Tendencies Central in the 5 meter stagen group

	TFI 1	TFU	TFU	TFU	USG
		3	5	7	
Min	11	9	6.0	4.50	5.1
Max	18	17	15	14.00	14.0
Mean	14.7	11.4	8.9	7.40	7.9
Media	14.6	10.0	8.0	7.00	7.2
n					
SD	2.6	2.5	2.5	2.5	2.1

Frequency distribution in the 10 meter stagen group. On the first day the minimum TFU value is 9 cm, the value is maximum 18 cm, SD 3.45, mean 11, 92 and median 10. On day 3 post-partum the minimum TFU value is 7 cm, minimum maximum 14 cm, SD 2, 58 mean 9.12 and a median of 8.0 cm. On the 5th day post-partum the minimum TFU value was 6 cm, the value was minimum 15 cm, SD 2.48, mean 7.4 and median 6.5 cm. On the 7th day post partum the minimum TFU value was 6.90 cm, the value was minimum 16.77 cm, the SD 3 mean 12.36 and the median was 13.2cm. And ultrasound examination results on the 7th day post-partum is the minimum TFU value is 5.40 cm, the value is maximum 14 cm, SD 2.0, mean 7.96 and median 7, 20 cm.

Table 3: Tendencies Central in the 10 meter stagen usage group

	TFI 1	TFU	TFU	TFU	US
		3	5	7	G
Min	9.0	7.0	5.5	4.0	6.9
Max	18.0	14.0	12	10.0	16.8
Mean	11.9	9.1	7.4	5.8	12.4
Medi	10	8.0	6.5	5.0	13.2
an					

SD	3.5	2.5	2.2	1.9	3.1
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Frequency distribution in the traditional blinding group. On the first day the minimum TFU value was 9.50 cm, the value was maximum 18 cm, SD 2.53, mean 12, 22 and median 12. On day 3 post-partum the minimum TFU value was 7 cm, the value was maximum 19 cm, SD 3.1 mean 10.77 and a median of 10 cm. On the 5th day post-partum the minimum TFU value was 5.50 cm, the value was maximum 13 cm, SD 2.48, mean 8.35 and median 8 cm. On the 7th day post-partum the minimum TFU value was 4.5 cm, the value was maximum 12.0 cm, SD 2.99 mean 6.57 and median 5.75 cm. And the results of ultrasound examination on the 7th day post-partum is the minimum TFU value is 6.30 cm, the value minimums 16.19 cm, SD 3.0, mean 9.49 and median 10.0 cm

Table 4: Tendency Central in the tradisonal Blinding use group

	TFI 1	TF	TFU	TFU	USG
		U 3	5	7	
Min	9.50	7.0	5.5	4.6	6.3
Max	18.0	19.	13.0	12.0	16.3
		0			
Mean	12.2	10.	8.4	6.6	9.5
		8			
Media	12	10	8.0	5.8	10.0
n					
SD	2.5	3.2	2.15	2.3	3.0

Results of the Bivariate Analysis of the study found a decrease in the Fundus Uterine with a mean in the group of High Fundus Uterus Uday day 1 with day 7 is - 5,550 cm, while on day 7 with day 3 -4,075 cm and day 7 with the fifth day is -1,675 cm. with a value of P 0,000 which means meaningful. In the 5 meter stagen group the results were obtained, High Fundus Uteri on day 1 with day 7 mean -5,289, day 7 with day 3 mean -3,605 while on day 7 with day 5 with mean -1,711. with a value of P 0,000 which means meaningful. In the 10 meter stagen group the results were obtained, High Fundus Uteri on day 1 with day 7 mean -6,658, day 7 with day 3 mean -3,605 while on day 7 with day 5 with mean -1,505. with a value of P 0,000 which means meaningful.

Table 5: Differences in decrease in uterine fundus height in the 5 meter, 10 meter stagen group and Tradisional Blinding use and examination of uterine fundus height with USG

		Min	Max	Mean	Median	SD
	S 5	11	18	14.7	14.6	2.6
TFU 1	S10	9.0	18.0	11.9	10	3.5
	G	9.50	18.0	12.2	12	2.5
TFU 3	S 5	9	17	11.4	10.0	2.5
	S10	7.0	14.0	9.1	8.0	2.5

	g	7.0	19.0	10.8	10	3.2
	S 5	6.0	15	8.9	8.0	2.5
TFU 5	S10	5.5	12	7.4	6.5	2.2
	G	5.5	13.0	8.4	8.0	2.15
	S 5	4.50	14.00	7.40	7.00	2.5
TFU 7	S10	4.0	10.0	5.8	5.0	1.9
	g	4.6	12.0	6.6	5.8	2.3
	S 5	5.1	14.0	7.9	7.2	2.1
TFU	S10	6.9	16.8	12.4	13.2	3.1
USG	G	6.3	16.3	9.5	10.0	3.0

Discussion of the results of the study showed that the average age of the mother in the 5 meter stagen group was 28.83 years old, the youngest age was 24 th and the oldest age is 36 years old. Whereas in the 10 meter stagen use age group the average age of the mother is 27 years old and the youngest age is 18 years old the oldest 40 years while in the traditional blinding use group the average respondent is 26 years old, the oldest age is 39 young age 16, this shows that in the third the group has a average age the same.

The results of the study of parity variables indicate that in the group use of stagen 5 meters the average parity is 2, the highest parity is, and parity low 1. the group use of stagen 10 meters the average parity is 2, the highest parity is, and parity low. the average traditional blinding parity usage group was 2, the highest parity was, 4 and the parity was low is 1 of the results obtained that the parity in all three groups is the same.

In the 5 meter stagen group the results were obtained, High Fundus Uteri on day 1 with day 7 mean -5,289, day 7 with day 3 mean -3,605 while on day 7 with day 5 with mean -1,711. with a value of P 0,000 which means meaningful. From these results it shows that the daily decrease in the 5 meter stagen group for 7 days is 5,289, the decrease in decline from day 3 to day 7 is an average of 3,605, and on the fifth day with day 7 is 1, 711. According to theory in midwifery care during puerperium care postpartum 2011 Student library. That the decrease in fundal height of the uterus every day is an average of 1 cm. From the results of this study, on average every day the decline occurred 0.75 cm. In accordance with the study of "postpartum belly binding" in 2014. At the 10 meter stagen group results were obtained, Uterus Fundus Height on day 1 with day 7 means -6,658, day 7 with day 3 mean -3,605 while on day 7 with day 5 with a mean of -1.505. with a value of P 0,000 which means meaningful. Which means that the decrease in the height of the fundus uteri on the 7th day is 6.658 cm and on the 3rd day to the 7th day the decrease is 3.605 cm and the 5th day until the 7th day is 1.505. From the results of this study the average decrease in the height of the uterine fundus per liver was 0.95 cm. This is consistent with the theory that the decrease in fundal height of the uterus every day is 1 cm.

The traditional blinding usage group found a decrease in the Fundus Uteri Height with the mean in the traditional blinding group Fundus Uteri Height day 1 with day 7 was - 5,550 cm, while on day 7 with day 3 -4,075 cm and day 7 with fifth day was -1,675 cm. with a value of P 0,000 which means meaningful. Which means that the decrease in height of the uterine fundus on the 7th day is 5, 550 cm, and on the 3rd day with the 7th day is 4, 075 cm while on the 5th day with the 7th day is 1, 675 cm. The average reduction per day for 7 days is 0.79 cm. The most decrease occurred on day 3 to day 7 as much as 4, 075 cm, which means that the decrease per day

occurred 1, 18 cm. This is according to what was stated in the journal of visual Languages and computing, entitled the relationship of early mobilization with the decrease in height of the Fundus Uteri. Th 2018. The conclusions of this study are the average age in the 5 meter stagen group is 28, 83 years, the maximum age is 36 years and the minimum age is 24 years. While the average parity 1 with low parity is 1 and the most is 3. Decreased height of uterine fundus In the 5-meter stagen group on day 7 the results were 5,289 P 0,000 The average age in the 10-meter stagen group was 27, 16 years, age a maximum of 40 years and a minimum age of 18 years. While the average parity 2 with low parity is 1 and the most is 4. Decreased height of the Uterine Fundus In the 10 meter stagen group on the 7th day, results were 6,658, P 0,000. The average age in the Traditional blinding group is 26.70 years, the maximum age is 39 years and the minimum age is 16 years. While the average parity 2 with low parity is 1 and the highest is 4. Decreased Uterus Fundus Height in the traditional blinding group on day 7 is 5.550 cm value of P0.000

IV. CONCLUSION

Suggestions for using stagen and traditional blinding can be used in normal post-partum. In normal labor, you can use 10 meters of stagen so that uterine contractions can run normally.

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