

Influence of Oketani Massage and Acupressure Massage on Breastfeeding Success

Ulil Rauzah¹⁾ Yusnaini^{2)*} Kartinazahri³⁾ Gustiana⁴⁾ Yuni Sari⁵⁾
Email : nainiqim@yahoo.co.id

ABSTRACT

Background: The low coverage of exclusive breastfeeding in Indonesia is caused by various factors, one of which is the lack of milk production. Based on data for 2020, the target for exclusive breastfeeding coverage is 69% . Based on data obtained from Aceh's health profile in 2019 the number of babies receiving exclusive breastfeeding in Aceh Besar is 47%. In 2020 the coverage of exclusive breastfeeding for babies will increase by 61%. But in 2021 the coverage of exclusive breastfeeding is only 49%. This shows that the coverage of exclusive breastfeeding in the last 1 year has decreased. This research aims to identify the influence of oketani massage and acupressure massage on lactation success

Methods: This type of research is *Quasy Experiment with two group pre-test and post-test design* . The sample in this study were postpartum mothers from the first day to the third day , totaling 34 people, of which 17 postpartum mothers were given oketani massage interventions and 17 postpartum mothers were given acupressure ur massage interventions. This study use Mann-Whitney test to see the difference in LATCH scores after treatment with Oketani Massage and Acupressure Massage.

Results: There is a significant difference in the LATCH score before and after oketani massage with a value (P Value 0.000 <0.05), There is a difference in the LATCH score before and after acupressure massage with a value (P Value 0.000 <0.05), There is a difference in the LATCH score before treatment between the oketani massage group and the acupressure massage group with a value (P Value 0.000 <0.05), There is a difference in LATCH scores after treatment between the oketani massage group and the acupressure massage group with a value (P Value 0.000 <0.05), Oketani massage is more effective on lactation success than acupressure massage with a value (P Value 0.000 <0.05).

Conclusion: Oketani massage has a greater influence on the success of lactation, resulting in the release of more milk compared to acupressure massage.

Keywords : Oketani Massage; Acupressure Massage; Lactation Success and Postpartum Mothers

¹Midwifery Department, Poltekkes kemenkes Aceh, Indonesia

^{2,3,4,5} Midwifery Department Poltekkes Kemenkes Aceh, Indonesia

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Background. Indonesia has set a target for exclusive breastfeeding coverage among under 6 months of age by 50% in 2019. In the 2020 national work, a national strategic plan for 2020-2024 was made to improve the nutritional status of toddlers by increasing the target for exclusive breastfeeding coverage to 69% in 2020(S, 2021).

The percentage of exclusive breastfeeding for infants aged 0-5 months is 71.58%. This figure indicating an improvement from the previous year which which was 69.62 % . Most provinces still have a percentage of exclusive breastfeeding below the national average. Aceh is one such province, with an average of 66.66%(Rizaty MA, 2022).

Based on data obtained from Aceh's health profile in 2019 proportion infants receiving exclusive breastfeeding in Aceh Besar is 47%. In 2020 the coverage of exclusive breastfeeding for babies will increase by 61%. But in 2021 the coverage of exclusive breastfeeding is only 49%. This shows that the coverage of exclusive breastfeeding in the last 1 year has decreased(Dinas Kesehatan Aceh, 2019).

Based on data from the Aceh Besar Health Service in (2022), there are several sub-districts that still have low coverage of exclusive breastfeeding, such as Lhoong 54.1%, Montasik 36.2%, Darul Imarah 42.6%, Peukan Bada 40.3% , Want Jaya 49.0%,

Darussalam 33.5%, Pulo Aceh 57.1%, Seulawah Valley 50.0%, Kuta Cot Glie 54.4%, Kuta Malacca 4.5%, and Simpang Tiga 43.5%(Besar, 2022).

One of the factors causing the low coverage of exclusive breastfeeding is the small expenditure of breast milk. Breast milk expenditure can be influenced by two factors, namely production and expenditure. Milk production is influenced by the hormone prolactin while expenditure is influenced by the hormone oxytocin. The oxytocin hormone will come out through stimulation of the nipples through sucking the baby's mouth or through massage on the mother's breast area, by massaging the breasts the mother will feel calm, relaxed, increase the pain threshold and love her baby, so that the hormone oxytocin comes out and breast milk is fast go out(Romlah and Rahmi, 2019).

Efforts to expedite the release of breast milk can be done pharmacologically and non-pharmacological. Some of the efforts made with nonpharmacology include acupressure massage and oketani massage (S, 2022) . Acupressure comes from the word accuse and pressure which means needle and push. Acupressure, also known as spot therapy / finger pricks, is a form of physiotherapy by giving massages. Acupressure is also interpreted as pressing healing points using fingers gradually which increases the body's ability to heal naturally (Ene, Hadi and Kusumawardani, 2022).

Massage is a breast massage technique that focuses on the areola and nipples of the mother. The massage technique created by Sotomi Oketani, a midwife from Japan, is one of the unique massage techniques and is called Oketani *Lactation Management*. By doing this massage the relationship between mother and baby is related to each other physically and mentally. The implementation of oketani massage is completed within one minute and repeated for 15-20 minutes(Junita *et al.*, 2022).

The study's findings (Putri, 2020) on Oketani Massage and Pressure at GB-21

Acupressure Points on Breast Milk Production in Post Sectio Caesarea Mothers. The results of the study stated that oketani massage was more effective for increasing milk production than pressure at the GB-21 acupressure point from the baby indikator.

Methods. This study used an analytic research methods with a quasi- *experimental design* . The research design used *two group pre - test and post -test design* , a research design that aims to determine the effect of giving treatment to one experimental group.

The population in this study were all postpartum mothers who were in the working area of the Darul Imarah Public Health Center. The sample in this study were postpartum mothers from the first day to the third day, totaling 34 people, of which 17 postpartum mothers were given oketani massage interventions and 17 postpartum mothers were given acupressure massage interventions. The first respondent selected was included in the oketani massage intervention group, the next respondent was included in the acupressure massage intervention group, this will be continued until all research respondents are met.

Samples were taken by purposive sampling technique. With the following inclusion criteria are mother with normal delivery, mother with the birth of the first child, mother giving birth at term (aterm), normal postpartum mother, mother has no breast abnormalities, the condition of mother and baby is healthy, baby's weight normal. The exclusion criteria are mother is allergic to baby oil/ /handbody, mothers who had breast problems during the intervention, such as swollen breasts, mastitis and sore nipples, mothers do not consume katuk leaves and supplements to facilitate breastfeeding.

Before the research was carried out, respondents were first given *informed choice* and *informed consent* . The treatment of the two groups of postpartum mothers were the oketani massage and acupressure massage . Researchers carried out administrative procedures by submitting written permission

requests to the Head of the Health Service and the head of the Darul Imarah Health Center in Aceh Besar District.

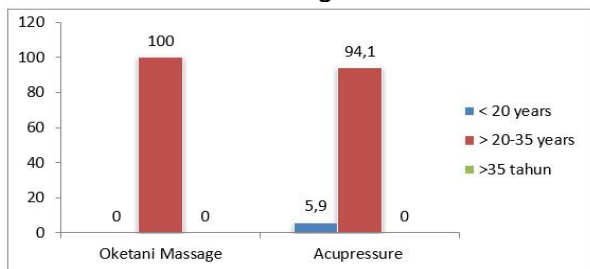
Before being given treatment to the oketani massage and acupressure massage groups, a *pre- assessment was carried out* using the LACTH score. Then make visits to the respondent's house 2 times a day for 3 days. Researchers will perform oketani massage in the oketani massage intervention group 2 times a day for 3 days, morning and evening with a massage duration of 10-15 minutes and in acupressure massage 2 times a day for 3 days, morning and evening with a massage duration of 5-10 minutes. The selection of respondents was carried out alternately for the oketani massage and acupressure massage intervention groups.

After treatment or intervention for 3 days on the sample, then *the Post-test is measured again* using the LATCH Assessment Instrument.

Result and Discussion

1. Age

Graphic 1. Characteristics respondent based on age



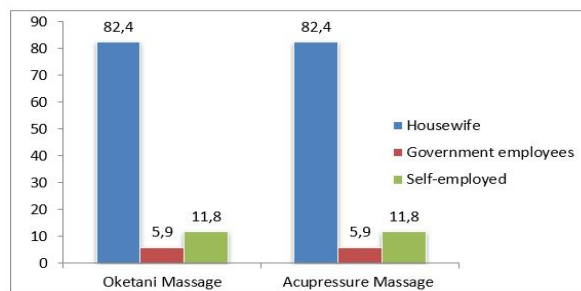
Based on graph above, it shows that the majority of respondents from the three groups are in the 20-35 year category, meaning that all respondents are in the reproductively healthy age category.

The results of the study showed that in general the age range of the respondents was > 20-35 years, only one respondent was in the acupressure massage group who was <20 years old. In accordance with the theory put forward by (Rosiana, 2020), 20-35 years of age is a safe age and is recommended for pregnancy, childbirth and breastfeeding,

because the reproductive organs are mature, thus supporting successful lactation (Hana Rosiana Ulfah and Farid Setyo Nugroho, 2020) . Mothers aged less than 20 years still have an immature psychological side, the development of the uterine muscles is not yet perfect, both for strength and contraction, and the hormonal system has not been coordinated smoothly and stably. Mothers over 35 years old will be accompanied by chronic diseases such as hypertension, egg cells and uterine conditions will experience a decrease in fertility (Prihandini, Pujiastuti and Hastuti, 2016).

2. Work

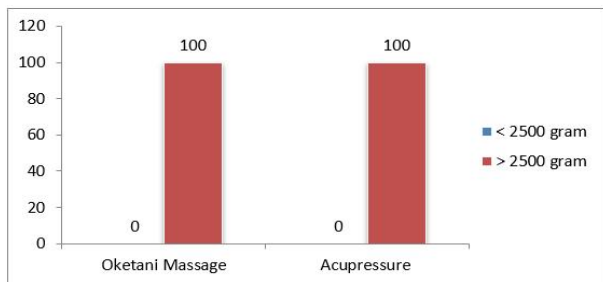
Graphic 2. Characteristics respondent based on work



Based on graph above shows that the majority of mothers work as housewife. Frequency distribution in the occupational group, most of the respondents were housewives as much as 82.9%, entrepreneurs 11.8%, and civil servants 5.9%. In terms of existence, housewives have a lot of free time at home so that exclusive breastfeeding can be maximized. So that the attachment of mother and baby is well established. Working mothers, because of their busy and busy work schedules, where they cannot leave them for a long time, mothers often leave their babies, so this also affects breastfeeding(L, 2019).

3. Baby's Weight

Graphics 3. Characteristics respondent based on baby's weight



Graph above illustrates that the weight of the baby born to the respondent is normal birth weight, which ranges from 2500 -3500 grams.

The distribution of frequency on birth weight of all respondents' babies weighing > 2500 grams. In accordance with the theory put forward (L, 2019), normal baby weight is 2500-3500 grams. In babies with normal birth weight the ability to suck milk is better compared to babies with low birth weight < 2500 grams, thus affecting hormone stimulation in producing breast milk. If a baby is found with a birth weight <2500 grams, it can be said that the baby has low birth weight (LBW). Babies with LBW have problems breastfeeding because their sucking reflex is still relatively weak. Babies with low birth weight usually get tired quickly and often choke when sucking milk. As a result, the baby becomes lazy to drink. Even though his body needs a lot of breast milk so that his weight is normal soon (Khoir Z, Syarifah AS, 2017).

4. The Effectiveness of Oketani Massage and Acupressure Massage on Lactation Success

Table 1 Normality Test Results Oketani Massage and Acupressure Massage on Lactation Success

Group	Df	Shapiro Wilk	
		Before	After
Oketani Massage	17	0.271	0.000
Akupressure Massage	17	0.027	0.102

Based on table 1 above it can be seen that all data in the oketani massage group, the acupressure massage group, the value of the difference before and after treatment, is not normally distributed. Where (significant value < alpha value). P Value < 0.05.

5. The Difference In Mean LATCH Scores In Each Group

Table 2 The Average Score LACTH In The Oketani Massage Group And The Acupressure Massage Group

Group	Df	Mean		Sign
		Before	After	
Oketani Massage	17	4.94	9.59	0.000
Akupressure Massage	17	2.59	5.47	0.000

Based on table 2 above shows a significant difference in LACTH scores before and after being given treatment in the oketani massage group and the acupressure massage group, where the value (P value <0.05).

The results of the study found that there was a significant difference in the LACTH score before and after the oketani massage treatment. The LACTH score measurement before the oketani massage yielded a mean of 4.94, while the LACTH score measurement after the oketani massage obtained a mean of 9.59 so that a difference of 4.65 points was obtained with the value (P value 0.000 <0.05).

The results of this study are in accordance with the theory put forward by (Macmudah, 2017), stating that oketani massage is a management skill for overcoming lactation problems such as insufficient milk production or insufficient milk and breast swelling. Oketani massage consists of 7 hand techniques namely, 7 techniques of separating the mammary glands or retro-mammae which aim to treat breast problems (mastitis, swollen breasts, milk dams, and flat nipples) for postpartum mothers with painless massage. Oketani massage will make the breasts soft, supple and the areola and nipples become more elastic. Oketani massage can cause the mammary glands to become mature and wider, so that there are more milk glands and more milk is produced.

The results of research conducted by Suharti, regarding the Comparison of Oketani and Oxytocin Massage on Mother's Milk Production in Postpartum Mothers from the First Day to the Third Day at TK II Pelamonia Hospital Makassar, stated that postpartum mother intervention with the oketane

massage method was better than oxytocin massage . With a P Value of $0.003 < 0.05$, this shows a significant difference in the frequency of breastfeeding with oketani massage and oxytocin massage (Buhari, Jafar and Multazam, 2018).

Based on the observations of researchers, there is an influence of oketani massage on lactation success. This is in accordance with the results of the study which showed that there were differences before and after the oketani massage. Respondents after the oketani massage did ASI more smoothly. Oketani massage can provide a feeling of comfort, calm, relaxation, relaxation in breastfeeding the baby so that it causes oxytocin levels to increase and milk to flow smoothly. This massage can also stimulate the pectoralis muscle strength to increase milk production as well as make the breasts soft and elastic making it easier for the baby to suck milk, milk flow becomes smoother due to the pressure that occurs on the alveoli.

The results of the study found that there was a significant difference in the LACTH score before and after the acupressure massage treatment. The LACTH score measurement before acupressure massage yielded a Mean of 2.59, while the LACTH score measurement after acupressure massage obtained a Mean of 5.47 so that a difference of 2.88 points was obtained with a value (P value $0.000 < 0.05$).

The results of this study are in accordance with the theory put forward by (Dian, 2022), Acupressure is a non-pharmacological treatment technique that is closely related to acupuncture points, by applying pressure to certain points in the body, useful for reducing various types of disease and pain and reducing tension and fatigue, in post partum mothers when they are given massage at the acupressure points they will feel comfortable, relaxed and not tense, so that a lot of milk will come out and the baby's needs will be fulfilled.

Acupressure can provide stimulation to the nerves of the mammary gland, the response

from this stimulation will be sent to the hypothalamus to produce the hormone prolactin and flow to the anterior pituitary to secrete the hormone prolactin to the breasts. Furthermore, the hormone prolactin will stimulate alveoli cells to form breast milk(Wulandari, Hasanah and Sabrian, 2019).

The results of Dewi's research entitled The Effect of Acupressure on Increasing Breast Milk Production in Postpartum Mothers at the Trimaliah Maternity Clinic, Laut Dendang Village, Medan Tembung District in 2019. Stating that there was a significant effect of acupressure massage on increasing milk production compared to the control group in postpartum mothers, with a P Value of $0.004 < 0.005$ (Ramadani, Zaen and Hayati, 2019).

In accordance with the results of the study which showed that there were differences before and after acupressure massage. Acupressure massage given to postpartum mothers can increase milk production, the mechanism of acupressure massage can stimulate increased morphine known as endorphins in the body, generating a comfortable, calm and relaxed atmosphere will show increased lactation success in postpartum mothers.

Based on the researchers' observations, in the oketani massage group which was intervened for 3 consecutive days, there were differences in milk production before and after the oketani massage. After the oketani massage, more milk is released, so that the baby is satisfied with breastfeeding and the baby is not fussy.

Based on the researchers' observations, in the acupressure massage group there were also differences in milk production before and after acupressure massage. After the acupressure massage, there is more milk production than before the massage. So that mothers feel happy because they can breastfeed their babies frequently.

Difference In Mean LATCH Score Between The Two Groups

Table 3 Mann-Whitney test results to see differences in LATCH scores before treatment on Oketani Massage and Acupressure Massage

Group	Df	Mean	Sign
Oketani Massage	17	24.00	0.000
Akupressure Massage	17	11.00	

Based on table 3 above shows the difference in LATCH scores before treatment on oketani massage and acupressure massage with a P Value of $0.000 < 0.05$.

Table 4 The results of the Mann-Whitney test to see the difference in LATCH scores after treatment with Oketani Massage and Acupressure Massage

Group	Df	Mean	Sign
Oketani Massage	17	26.00	0.000
Akupressure Massage	17	9.00	

Based on table 4 The above shows the difference in LATCH scores after treatment with oketani massage and acupressure massage with a P value of $0.000 < 0.05$.

Table 5 The results of the follow-up NPars test (*one-sample Kolmogrov-Smirnov test*) to see which massage groups were more effective between Oketani Massage and Acupressure Massage

Group	Df	Mean	Sign
Oketani Massage	17	9.59	0.000
Akupressure Massage	17	5.47	0.127

Based on table 5 above shows that oketani massage is more effective on lactation success than acupressure massage with a P Value of $0.000 < 0.05$.

Based on the results of the study, there was a difference in the *Mean Rank* before the oketani massage and acupressure massage, with a P Value of $0.000 < 0.05$, whereas after the treatment of oketani massage and acupressure massage, there was a difference in the *Mean Rank* with a P Value of $0.000 < 0.05$. then further tests were carried out to find out which massage group was more effective between the oketani massage and

acupressure massage groups. In the oketani massage group with a P Value of $0.000 < 0.05$, while in the acupressure massage group with a P Value of $0.000 < 0.05$. it can be concluded that oketani massage is more effective in successful lactation compared to acupressure massage.

The results of this study are in accordance with the theory put forward by (Kamila, 2019) that oketani massage is a breast massage technique that focuses on the areola and nipple areas of the mother. This massage can strengthen the relationship between mother and baby with each other physically and mentally. Oketani massage will also provide an overall feeling of relief and comfort to the mother, increase breast milk, prevent sore nipples and mastitis and can improve or reduce lactation problems caused by flat nipples *and* inverted or inverted nipples.

Research Results on Oketani Massage and Pressure at the GB-21 Acupressure Point on Breast Milk Production in *Post Sectio Caesarea Mothers*. It was found that oketani massage was more effective for increasing milk production than pressure at the GB-21 acupressure point. When the oketani massage is done, the breast tension (*let down reflex*) works well, this indicates the work of the oxytocin hormone which causes *the let down reflex* to also work well. One of the causes of the good work of the hormone oxytocin is due to stimulation from the baby and relaxed mother (Sari, P., Nursanti, I., & Widakdo, 2020).

Oketani massage is effective in promoting milk production and milk excretion because oketani massage stimulates the larger chest muscles to increase milk production. Oketani massage will cause the breasts to become soft, supple and the areola becomes more elastic, the lactiferous ducts and nipples also become more elastic. The whole breast becomes more flexible and produces good quality milk because the total solids content, fat concentration and *gross energy* increase (Yuliani, 2021).

Massage is one of the solutions to overcome breast milk difficulties. This technique can maximize prolactin and oxytocin receptors and minimize the side effects of delayed breastfeeding. Acupressure can increase the feeling of relaxation in nursing mothers (Djanah and Muslihatun, 1930).

Acupressure massage Located on the little finger of the hand, on the distal ulnar phalanx. Approximately 0.1 f-cun proximal to the medial corner of the nail, and the ST 15,16,18, SP 18, and CV 17 points are located on the breast. Effective in promoting milk production because *acupressure points for lactation* can be given through meridian points according to the organ to be targeted and can also help reduce discomfort, thereby triggering the let down reflex *and increasing* levels of prolactin and the hormone oxytocin. In addition, acupressure is also able to stimulate the release of endorphins, block pain receptors, stimulate the release of the hormone oxytocin and can affect prolactin production which can increase milk production (Indrayani *et al.*, 2023).

The indicator seen from the mother's factor is through breast tension, *the let down* reflex works well, this indicates the good work of the hormone oxytocin. One of the things that causes the hormone oxytocin to work well is due to stimulation from babies and mothers who are relaxed, one way is by stimulation through oketani massage. Another factor that also affects the work of the hormone oxytocin is the psychological condition of the mother, it can overcome problems in breastfeeding such as swollen breasts, mastitis, and flat nipples, thus making the mother more relaxed and the hormone oxytocin working more smoothly (Indrayani *et al.*, 2023).

Based on the observations of researchers, between oketani massage and acupressure massage which have been intervened in postpartum mothers on the first day to the third day, oketani massage on the second day there is milk production, while acupressure massage has milk production on the third day,

but not as much as in postpartum mothers the oketani massage intervention was carried out.

Conclusion and Suggestions. Based on the result of research There is a significant difference in the LATCH score before and after oketani massage with a value (P Value 0.000 <0.05), There is a difference in the LATCH score before and after acupressure massage with a value (P Value 0.000 <0.05), There is a difference in the LATCH score before treatment between the oketani massage group and the acupressure massage group with a value (P Value 0.000 <0.05), There is a difference in LATCH scores after treatment between the oketani massage group and the acupressure massage group with a value (P Value 0.000 <0.05), Oketani massage is more effective on lactation success than acupressure massage with a value (P Value 0.000 <0.05).

Suggestions. For postpartum mothers, It is hoped that postpartum mothers will always increase their knowledge by gathering information about oketani massage so that they can improve breastfeeding. For health care facilities, It is expected that health workers socialize and apply oketani massage as a permanent procedure for postpartum services. For educational institutions, It is hoped that it can play a role in postpartum services related to lactation success through research activities and community service regarding oketani massage. For further researchers, It is hoped that future researchers can increase research by combining oketani massage and acupressure massage on working mothers.

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