

HERBAL PLANTS FOR POSTPARTUM RECOVERY: LITERATURE REVIEW

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Abstract

Banjarasin City is one of the big cities in South Kalimantan Province which still has a very strong tradition of drinking herbal plants. Most postpartum mothers and the community still consume herbs or herbal plants to help the postpartum recovery process. The forms of herbs or herbal plants that are often consumed are rhizome plants (turmeric, kencur rice, betel leaf, pepper, red ginger, cinnamon) which are boiled, or the use of betel leaf, ground red ginger with pepper which aims to expel postpartum blood. To determine the use of herbal plants for postpartum recovery. The type of research used is a literature study. The criteria for the study materials used in this study include containing the same keywords as the research topic, namely herbal plants, society (soecity), traditional (traditional), puerperium period, immediate postpartum period, early postpartum period, postpartum, late postpartum period. The article is a full paper published in the last 5 years between 2016 and 2020. Based on these 10 research journals, it can be concluded that the characteristics of postpartum mothers are at risky age (<20 years/>35 years) with an average of low education (no school, elementary and junior high school). Postpartum mothers consume herbal plants without using appropriate doses and doses because they only rely on the experiences of previous people such as from parents, community beliefs and own personal experiences. There are still many people who use herbal plants for postpartum recovery.

Keywords: herbal plants, traditional medicine, postpartum period

1. Introduction

Maternal and child health is a target in the health development goals, namely by reducing the maternal mortality rate (MMR) and infant mortality rate (IMR). One of the causes of maternal death is infection in pregnancy which is almost 50%. Infectious diseases that occur in pregnant women can also increase the risk of preterm birth, low birth weight (LBW) and premature rupture of membranes (PROM). According to WHO in 2020, it was recorded that one in six births was born prematurely or not at term, in Indonesia alone the incidence of preterm labor ranges from 10-20% and more than 50% of cases of preterm labor and premature rupture of membranes are caused by local infections such as infections of the genitals. Genital and systemic infections and preterm delivery can cause 36% of neonatal deaths. MMR in Indonesia according to the results of the 2015 Intercensus Population Survey reached 305/100,000 live births. The IMR according to the 2017 IDHS reached 24/1,000 live births (Kemenkes RI, 2020).

In 2019 the IMR in South Kalimantan reached 3.4/1000 live births, and for MMR in South Kalimantan it reached 76.03/100,000 live births. In Banjarmasin the IMR reached 2.96/1,000 live births, the MMR reached 63.6/100,000 live births. The incidence of puerperal infection reached 38 postpartum mothers or 8% of the 487 cases of maternal death. This figure is still far from the SDGs and RPJMN 2020-2024 targets for AKI of 232/100,000 live births in 2024 and the IMR target of 16.8/1,000 live births and 12.3/1,000 live births SDGs 2030 (Kemenkes RI, 2020).

The puerperium is a period where there are changes in their reproductive conditions after giving birth. Women will experience physiological changes where the uterus shrinks back to its original size. To restore their condition, the Indonesian people have several traditions such as limiting certain foods and consuming herbal plants. Herbal plants are plants or plants that have more use or value in medicine. In other words, all types of plants that contain active ingredients or substances that are useful for treatment can be classified as herbs. Herbal plants are sometimes referred to as medicinal plants, so in their development they are included as a form of alternative medicine. People consider herbal plants to be a safer treatment than modern medicine. The use of herbal plants is widely found in the community both during pregnancy, childbirth and the puerperium. Consumption of herbal plants is more common during the puerperium than during pregnancy and childbirth. Most people consume herbal plants with the aim of helping to launch breast milk, prevent disease, maintain body resistance and maintain maternal beauty, especially in the female organs. The habit of consuming herbal plants is commonly found in Javanese society, but it is also a habit for other tribal communities. As many as 70% -80% of the community relies heavily on herbal plants as traditional medicine. This is because getting herbal plants is easier and more economical. In addition, herbal plants can reduce anxiety or tension in postpartum mothers (Baequny et al, 2016).

The tension that often arises is social tension. Social tension can occur if one member of the community does not follow the traditions or habits of the community which generally results in scorn and ostracism. If social tension is found in postpartum mothers, it will affect the health of the mother during the postpartum period. Some of the impacts of social tension on mothers include decreased milk production, stress, depression, and so on (Utari et al, 2019).

Banjarmasin City is one of the Big Cities in South Kalimantan Province which is still very strong in the tradition of drinking herbal plants. The results of a preliminary study conducted by the author by conducting data collection and brief interviews with postpartum mothers during the Merdeka Learning Program at the Merdeka Campus in Hulu Sungai Selatan Regency in March 2021, it is known that most postpartum mothers and the community still consume herbs or herbal plants to help the recovery process during the period. breath. The forms of herbs or herbal plants that are often consumed are rhizomes (turmeric, kencur rice, betel leaf, pepper, red ginger, cinnamon) which are boiled, or the use of betel leaf, ground red ginger with pepper which aims to expel postpartum blood. and facilitate breast milk and various other plants such as areca nut, tamarind and so on.

This study aims to determine the characteristics of herbal plant users for postpartum recovery and the use of herbal plants for postpartum recovery.

2. Materials and Methods

The research method used in this research is Literature Review. The literature sources used in this study were traced using Google Scholar and Google Scholar with the condition that the journal/article was published at least 5 years ago and carried out from the beginning of November 2020-January 2021.

3. Results and Discussion

a. Identifying Characteristics of Herbal Plant Users for Postpartum Recovery Literature Review

The characteristics of postpartum mothers have differences between each other. Mother's characteristics can include age at pregnancy and recent educational history (Notoatmodjo, 2018). These characteristics can be an indicator of the mother's handling of the risks and dangers that will be faced during pregnancy, childbirth and the puerperium so that midwives can anticipate actions that can be taken by looking at these risk factors. At the age of <20 years, the female reproductive organs are immature so that it can harm the health of the mother and affect the growth and development of the fetus. In addition, it also has an impact on the mother's socio-

economic status. Mothers aged >35 years experience a high risk of preterm delivery because it will cause complications in pregnancy and harm the development of the fetus during the gestation period. This is due to a general decline in physiological and reproductive functions (Manuaba, 2020). Based on 10 reviewed journals, it can be concluded that all journals analyze the characteristics of postpartum mothers based on age. The characteristics of mothers based on age in the literature review are explained as follows.

The results of 10 journals, it is known that Nurul Aini Siagian (2020), in his research, obtained the results that as many as 8 people (44.4%) postpartum mothers aged 20-35 years. Nur Aziz Setiadi (2017), states that the average age of respondents is in the age of 21-35 years with a total of 20 respondents with a percentage of 95%. Tuti Marjan Fuadi (2017), stated that the respondents in this study were postpartum mothers aged 15-40 years. Umi Narsih (2019), informed that the majority of postpartum mothers with perineal injuries were <20 years old, 42.9% for the control group, and 35.7% for the treatment group. Usman (2018), with research informants as many as 14 participants aged >35 years. Ida Maryati (2019), most of the post partum mothers are 20-35 years old. Paulina Gdańska (2019), stated that the sample in this study was 120 postpartum mothers and as many as 34% of mothers aged <20 years/>35 years at risk. Sri Banun Titi Istiqomah (2019), involving 111 primiparous women and as many as 77 respondents aged <20 years/>35 years. Masoudeh Babakhanian (2019), the sample in this study was 144 postpartum mothers with a percentage of respondents aged <20 years by 20%, 20-35 years by 60% and >35 years by 20%. George Uchenna Eleje (2018), 87.7% of postpartum mothers aged 20-34 years.

Pregnant women younger than 20 years are more likely to experience complications during pregnancy and childbirth because young women often have limited knowledge about pregnancy or lack of information about how to access the health care system. In addition, young women who are pregnant for the first time will have less experience in caring for pregnancy. At this age, women have not yet reached physical maturity, mental and reproductive organs function to become prospective mothers. The possibility of stress on pregnant women at a young age is very high, so that catecholamine and cortisol levels can increase which then activates the placental Corticotrophin Releasing Hormone and labor deposits through biological pathways. Whereas in pregnancy >35 years, it will reduce physical productivity and the reproductive system which causes many complications such as preeclampsia, bleeding, uterine rupture and so on (Manuaba, 2020). Another factor that influences the incidence of preterm delivery is maternal education. Based on the 10 reviewed journals, it can be concluded that all journals analyze the characteristics of postpartum mothers based on their last education. The characteristics of the mother based on the latest education in the literature review are explained as follows.

The results from 10 journals, it is known that Nurul Aini Siagian (2020), in his research, obtained the results that as many as 11 people (44.4%) postpartum mothers had low education. Nur Aziz Setiadi (2017), states that the average respondent who uses herbs has a low education of 65%. Tuti Marjan Fuadi (2017), stated that the respondents in this study were postpartum mothers with secondary education. Umi Narsih (2019), informed that most post partum mothers with perineal injuries had low education (SD/SMP). Usman (2018), with research informants as many as 14 participants with high school education. Ida Maryati (2019), the majority of post partum mothers have a high school education of 67%. Paulina Gdańska (2019), stated that the sample in this study was 120 postpartum mothers and 23% of mothers had low education (no school, elementary and junior high school). Sri Banun Titi Istiqomah (2019) involved 111 primiparous women and 64% of them were mothers with low education. Masoudeh Babakhanian (2019), the sample in this study were 144 postpartum mothers with a low education percentage of 43%,

secondary education 41% and higher education 16%. George Uchenna Eleje (2018), 49% of postpartum mothers have secondary education.

Mothers with basic education (SD or SMP) are more at risk of developing infection during the puerperium compared to mothers with secondary-high education. The higher level of maternal education is directly proportional to the ability to apply the health information obtained in everyday life. Low maternal education will affect the mindset and decisions that mothers will take on their health. Mothers with secondary-high education will understand the steps that can be taken to maintain their pregnancy, including the importance of prenatal care in accordance with standards to protect early occurrence of abnormalities in pregnancy and complications in childbirth and the puerperium so that they get the right intervention from the start (Manuaba, 2010). 2020)

Based on these 10 research journals, it can be concluded that the characteristics of postpartum mothers are at risky age (<20 years/>35 years) with an average of low education (no school, elementary and junior high school). The lack of education owned by the community has resulted in an increase in traditional care due to support from the family in this case advice from the mother, the experience of neighbors, the experience of friends or personal experience. In addition, the use of herbal plants is considered cheaper and easier to find by the public.

b. Identifying the Use of Herbal Plants for Postpartum Recovery Literature Review

Indonesia has around 30,000 species of medicinal plants based on their rich flora. So that almost all indigenous people in Indonesia have developed plants for various purposes and one of the most important functions of plants is for medicinal purposes. According to Daulay (2011: 34) knowledge of medicine and treatment is one of the most important areas of traditional knowledge shared by all indigenous peoples and local communities. Various types of herbal plants that are widely used by the community include red betel, turmeric, kencur, areca nut, cinnamon, aloe vera, green tea, and various other types of botanical plants.

Red betel (*Piper crocatum*) is one type of medicinal plant found in Indonesia from several types of herbal medicinal plants. There are so many ingredients contained in the red betel plant, namely volatile oil compounds, alkaloids, avonoid, tannins and saponins. The essential oil content in red betel leaf (*Piper crocatum*) is empirically efficacious in reducing acute bloating and secretions in the vaginal canal because it contains chavicol, sesquiterpenes, flying oil (betlepenol), attache, sugar, PA and tanning substances. Red betel leaf extract has been shown to be able to eat the fungus *Candida albicans* which causes acute blisters and itching of the genitals, and prevents infection in wounds (Anggraini and Masfufatun, 2017).

Like herbal medicine, it is a traditional medicine introduced by Javanese ethnicity and has been widely used by other ethnic groups and even other countries. However, there is still a lot of knowledge about the use of plants as medicinal ingredients used by various other ethnic groups in Indonesia that have not been documented or disclosed, such as the treatment of madeung and sale by the Acehnese. The madeung and sale treatment process is carried out by utilizing various spices that will produce a fragrant aroma and are nutritious for health. Postpartum treatment is believed to be able to cure various diseases such as knees, bones, calves, joints and various other diseases that often appear in a woman after giving birth. Especially for mothers after giving birth, traditional medicine is carried out to help repair the reproductive organs so that they recover as before (Tuti, 2017).

Medicinal plants used by local Indonesian people began to be studied scientifically by Rumphius in the 19th century. Since then, the number of plant species that are useful as medicine has continued to increase in line with increasing research activities. Heyne in 1927 noted that no less than 1,040 species of plants in Indonesia have documented medicinal benefits. Ethnomedicine

research has been carried out a lot, but it is still concentrated in the area of the island of Java, especially Kasepuhan and Baduy, and the area of Bali. Ethnomedicine research in Bali is associated with lontar husodo while Javanese ethnicity is associated with herbal medicine. The research is concentrated on the islands of Java and Bali, but based on my search of the online literature, there are data on ethnomedicine research on the island of Sumatra, namely Minangkabau, Rejang, Malay, Lahat, Sesaat, Batak. However, ethnomedicine research on Acehnese ethnicity has not been found, especially in the treatment process and the use of medicinal plants for the healing of postpartum mothers (Tuti, 2017).

Nurul Aini Siagian (2020), said that herbal plants can help the postpartum recovery process, especially in healing perineal wounds. Nur Aziz Setiadi (2017), mentions that herbal plants can help the postpartum recovery process. The results showed that there were two categories of postnatal drugs, namely external drugs, namely lampok, pilis and param which were formulated to be smeared on the abdomen, forehead, arms and thighs. As well as drugs taken in liquid form such as herbs. The people of Krueng Kluat village believe that using traditional postnatal medicine can expedite postpartum blood, tighten the abdominal muscles, heal wounds to the uterus and vagina, as a contraceptive, restore fitness and health to the mother's body after giving birth and lose weight. Tuti Marjan Fuadi (2017), mentions that herbal plants can help the postpartum recovery process, especially in healing perineal wounds. Umi Narsih (2019), mentions that herbal plants can help the postpartum recovery process. Usman (2018), mentions that herbal plants can help the postpartum recovery process.

Ida Maryati (2019), said that herbal plants can help the postpartum recovery process. This treatment is based on the use of light that mimics natural sunlight during a light therapy session. Paulina Gdańska (2019), said that herbal plants can help the postpartum recovery process. The results showed that of the 10 respondents all of them had consumed postpartum herbal ingredients. Sri Banun Titi Istiqomah (2019), said that herbal plants can help the postpartum recovery process. Several herbal remedies showed a significant effect on mother-infant attachment and feeling to the infant scale. Masoudeh Babakhanian (2019), said that herbal plants can help the postpartum recovery process, especially in healing anemia for mothers who lose a lot of blood after giving birth. George Uchenna Eleje (2018), mentions that herbal plants are effective in the recovery of the postpartum period. This is known from the content of herbal plants such as red betel and rhizome which can accelerate uterine evolution and stop bleeding and reduce postpartum pain.

Based on 10 journals, it can be concluded that a number of mothers who have experienced the postpartum period and mothers who are in the puerperium period understand the efficacy of the drugs taken, some do not understand the efficacy of the drugs taken. All of the informants consider traditional medicine that has been used for generations to be proven to give effective results, so that until now they still maintain the culture. Compounding traditionally done by postpartum mothers uses a handful, a serimpang, a sheet that is difficult to determine the accuracy so that it will be difficult to determine a clear dose.

People still use traditional medicine for postpartum treatment based on the experience given from previous parents through direct practice and passed down to the next generation and is still being preserved. Complementary medicine based on the results of research that has been carried out by utilizing natural ingredients, taking from nature such as herbs is considered an alternative medicine in postpartum care. The use of plants such as aloe vera, cinnamon, binahong, red betel leaf, gotu kola leaf, and green tea have proven to be effective in helping and speeding up the postpartum recovery process.

4. Conclusion

Based on these 10 research journals, it can be concluded that the characteristics of postpartum mothers are at risky age (<20 years/>35 years) with an average of low education (no school, elementary and junior high school). Postpartum mothers consume herbal plants without using the appropriate dose and dose because it is only based on the experience of previous people such as from parents, community beliefs and own personal experience. The use of herbal plants is considered more effective in the postpartum recovery process and herbal plants are cheaper and easier to find by the public.

Acknowledgements

The community is expected to consume herbal plants in accordance with the right dosage and dosage by first consulting the nearest health worker in order to avoid negative risks or complications during the postpartum period. The Department of Health and the relevant BPOM should carry out supervision and analysis of the chemical components of medicinal plants intensively to determine the role of herbal plants in the postpartum recovery process. It is hoped that the results of this study can be used as initial data for researching herbal plants for further postpartum recovery. In addition, other researchers can conduct research on other factors that affect herbal plants for postpartum recovery.

Declaration of Interest Statement

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