

LITERATURE REVIEW CORNER CARE RELATIONSHIP WITH A LONG DELIVERY OF THE COURSE IN NEW BIRTH BABIES

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Abstract

According to WHO, cases of death in newborns due to umbilical cord infection in the world are very high with an estimated 4 million newborn deaths each year reaching 550,000 more than 50% of deaths that occur in Africa and Southeast Asia, it is very important to do proper umbilical cord care. properly in accordance with hygiene standards, namely the umbilical cord is cared for in a clean and sterile condition and is protected from infection of the umbilical cord in newborns. To find out scientific evidence of the relationship between umbilical cord is released in newbrons. The research method used is literature review using Google Scholar 11 journals and articles based on predetermined criteria. Based on 11 journals it can be concluded that the most effective treatment or the festest drying or removal of the umbilical cord is to use the open treatment method, namely the umbilical cord is left open so that it is exposed to direct air by not wrapping the umbilical cord and without being spiked with anything it will come off on the day 4, while the umbilical cord treatment using a closed treatment method using alcohol gauze will make the umbilical cord become moist and wet so that it slows down the process of releasing umbilical cord, will come off on day 9. open umbilical cord treatment is faster to fall off or fall off compared to closed treatment.

Keywords : umbilical cord cares, long time loose, newborn baby

Introduction

WHO World Health Organization the mortality rate for newborns globally reaches 31.7 deaths per 1000 live births and the neonatal mortality rate reaches 19.2 deaths per 1000 live births, in Southeast Asia it reaches an infant mortality rate of 34 deaths per 1000 live births. life and neonatal mortality rate reached 24.3 deaths per 1000 live births (WHO 2015). Based on the Indonesia Demographic and Health Survey (IDHS) 2017 shows the mortality rate (Indonesian IMR reaches 24 deaths per 1000 live births from the data, it shows that there has been a decline in IMR from 2012 to now (Kemenkes RI 2017).

The case of neonatal morbidity and mortality is one of the determinants of health and welfare in the MDGs (Era Millennium Development Goals) ending in 2015, all countries in the world including Indonesia agreed that a new framework, namely the SDGs (The Sustainable Development Goals) which where there is one target and a new commitment that has been agreed to reduce the neonatal mortality rate to at least 12 deaths per 1000 live births (Bappenas 2016).

Umbilical cord care in newborns is caring for the umbilical cord in a sterile, clean and free from infection of the umbilical cord in newborns. How to care for the umbilical cord properly and correctly can have a positive impact, namely the umbilical cord will quickly break or fade on the 5-7 day without complications, while the negative impact of incorrect care can cause infection in the umbilical cord and can lead to death in the baby. newborn (Rohardjo K 2015).

How to treat the umbilical cord with antiseptic materials in umbilical cord care is still very diverse, the materials used in the treatment of the umbilical cord are using alcohol gauze and some using sterile gauze or dry gauze without alcohol (Wiliams 2012).

One of the causes of death in infants is neonatal tetanus. Tetanus neonatorum is caused by the result of *Clostridium tetani*, entering the baby's body through wounds caused by cutting the umbilical cord with unsterile tools and incorrect umbilical cord care techniques (Kemenkes RI 2014). Improper umbilical cord care technique will cause umbilical cord infection in infants. The signs include the baby's body temperature is hot, the baby doesn't want to drink, the umbilical cord is swollen, red and smells bad. So the care of the umbilical cord is very important. Culture in the community that affects mothers' knowledge of caring for the umbilical cord causes mothers to still be afraid or hesitant to take care of the umbilical cord in their babies so that mothers still behave incorrectly in caring for the umbilical cord by sprinkling the umbilical cord with turmeric or leaves so as to allow the development of *Clustridium* spores that can cause infection. cause infection in the newborn. Good and correct umbilical cord care is one of the efforts to prevent infection in newborns (Novi 2015).

According to Astuti's research (2015) entitled the relationship between the level of knowledge of post partum mothers about umbilical cord care and the condition of the neonate's umbilical cord at BKIA RS William Booth Surabaya. The umbilical cord is the lifeline for the baby when it is in the mother's womb and is cut after the baby is born. The umbilical cord needs to get aseptic care to prevent infection that can cause death in newborns.

According to Saragih's research (2018), entitled the relationship between care and umbilical cord detachment in newborns in the working area of the Fajar General Hospital, Sarirejo Sub-district, Medan Polonia. Neonates are normal newborns from 37 weeks to 42 weeks of gestation with a birth weight of 2500 grams to 4000 grams, without any problems or defects in newborns up to 28 days old. Tetanus neonatorum is a disease of tetanus in newborns with distinctive signs, namely after the first

two days the newborn cries and suckles normally on the third day or so, symptoms of difficulty opening the mouth and suckling begin to appear, followed by convulsions in the baby.

Based on the description in the background above, the authors are interested in conducting research using the literature review method on "The relationship between umbilical cord care and length of umbilical cord detachment in newborns

" with the aim of knowing scientific evidence of the relationship between umbilical cord care and the length of time the umbilical cord is released.

Materials and Methods

The research method used is literature review. This literature review method is a form of research carried out through searching by reading various sources, both books, journals, and other publications related to the research topic, to answer existing issues or problems.

The literature sources used in this study are journals that have been found on Google Scholar using the keywords umbilical cord care"+"long time out of umbilical cord"+"newborn baby. The literature review was carried out from November 2020 to June 2021.

Results and Discussion

Of the 11 journals obtained, there are 11 national journals that prove the relationship between the umbilical cord care method with open and closed techniques and the length of time the umbilical cord is released in newborns.

Umbilical cord care is the process of treating the umbilical cord which is treated in a clean, dry and sterile condition and will fall off and avoid infection of the umbilical cord. A good and correct or effective method of umbilical cord care will accelerate the release of the umbilical cord and reduce the incidence of infection in newborns (Dinda 2019). This is in line with research (Febriyana 2018) it was found that there was a difference between umbilical cord care that was treated with the right umbilical cord care more quickly than the wrong umbilical cord care and the difference in the results of the T-test there was a significant difference this was due to the treatment If the umbilical cord is properly left open and only closed with sterile gauze, it can be easily exposed to outside air so that the umbilical cord is not damp and accelerates the drying and detachment process of the umbilical cord, this indicates that there is a difference between the length of the umbilical cord detachment based on the method of umbilical cord care in infants. Newborn.

This is also in line with research (Saleh 2020) which states that there is a relationship between open technique umbilical cord care methods and closed technique umbilical cord care on umbilical cord wound healing in newborns. Treatment of the umbilical cord using a closed technique, namely by

cleaning the umbilical cord using alcohol or wrapping the nipple of the umbilical cord with gauze that has been smeared with alcohol and treatment of the umbilical cord with an open technique, namely by leaving the umbilical cord dry and clean without being bandaged and affixed with anything so that the umbilical cord exposed directly to the outside air so as to avoid moisture from the umbilical cord and facilitate the process of drying and releasing the umbilical cord, so that the umbilical cord dries faster and becomes loose.

The results of the study, according to Wahyuni 2020, stated that there was a difference between open technique umbilical cord care and closed technique umbilical cord care, the average time of releasing the umbilical cord with open technique was 98.7 hours (4 days 2.7 hours) and technical umbilical cord care. closed 170.6 hours (7 days 2.6 hours). As well as reinforced by research (Sari 2020) the average time of umbilical cord detachment for babies treated with open care is 5.73 days while the time for umbilical cord separation treated with closed care is 6.60 days.) stated that umbilical cord care treated with the open method was 5.6 days while the treatment with the closed method was 6.5 days.

There are still many and varied materials used for umbilical cord care, some use alcohol gauze and some use sterile or dry gauze without alcohol, often also referred to as open and closed treatment methods (Williams 2012). This is in line with research (Handini 2018) which states that the length of time to release the umbilical cord using alcohol cotton treatment or the closed method has an average of 5.88 days with a standard deviation of 1.716, meaning that the length of time to release the umbilical cord using alcohol cotton treatment is slower while The length of time for removing the umbilical cord using sterile gauze or the open method is faster because it has an average of 4.68 days with a standard deviation of 1.069. Reinforced by research (Limoy 2019) which states that the length of time after the umbilical cord treatment with sterile gauze or the open method is 5 days, while the length of time after the umbilical cord treatment with alcohol gauze or the closed method is 7 days. And it is further strengthened by research (Sulastri 2019) which states that the length of time after the umbilical cord treatment with sterile gauze or the open method is 5 days, while the length of time after the umbilical cord treatment with alcohol gauze or the closed method is 7 days. Meanwhile, the study (J.M 2015) also stated that the average time of releasing the umbilical cord with alcohol was 9 days while the length of time for releasing the umbilical cord with natural drying was 7 days, so alcohol use did not speed up the drying of the umbilical cord, and slowed down the release of the umbilical cord.

According to research from Khairiza 2018 which states that of the 38 respondents for umbilical cord care who used sterile gauze, the majority for < 7 days were 20 respondents (95%) while for umbilical cord care using alcohol gauze for > 7 days, 18 respondents (86%)). This is in line with research

(Mustagfiroh 2017) it was found that in the open treatment method the majority of the umbilical cord fell off between 5-7 days as many as 28 babies (70%), only 7 babies (17.5%) were separated for >7

days. Meanwhile, in the closed treatment method, the majority of the umbilical cord fell off or fell off between >7 days as many as 6 babies (30%). This is further strengthened by research (Saleh 2020) which states that open technique treatment shows that respondents who experience umbilical cord wound healing are more likely to use open techniques, namely 15 people (88.2%) compared to only 10 people using closed techniques (71). ,4%). The results of the study according to (Febriana 2018) stated that the average length of umbilical cord detachment in newborns was 6 days, while the slowest length of umbilical cord detachment in newborns was 10 days.

According to the theory (Novi 2015) Good and correct umbilical cord care is one of the efforts to prevent infection in newborns. Reinforced by research (Limoy 2019) it was found that umbilical cord care that is not in accordance with health standards can result in various health problems in infants including tetanus neonatorum or umbilical cord infection, the timing of umbilical cord removal is influenced by the way the cord is cared for, the humidity of the umbilical cord, environmental sanitation conditions. around neonates and the onset of infection in the umbilical cord due to actions or treatments that do not meet hygiene requirements or do not comply with predetermined standards.

Conclusion

Based on the above discussion, it can be concluded that umbilical cord care using the open method with only dressing with sterile gauze or dry gauze alone is more effective, faster detachment or puput in the fastest time of 4 days and 7 days late in using the open method compared to using the closed method. wrapped in alcohol gauze can make the umbilical cord moist so that it slows down the drying process of the umbilical cord with the fastest release time of 7 days and the slowest 10 days.

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