Yoga Gymnology of Process Involution Uterus Mom Post-Partum

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Abstract

Post-partum haemorrhage is the main cause of maternal morbidity and mortality, among others, due to the failure of the uterine involution process, which is influenced by physical and psychological adaptations, marked by hormonal changes. Attempts are made with yoga exercises so that post-partum mothers focus on physical exercise, breathing, muscle strengthening pelvic floor and relaxation. Data obtained by researchers in the working area of the long inpatient health centre in Bandar Lampung, it is known that in 2019 the number of post-partum mothers was 754 people. From the results of the interview, it was found that 8 (80%) mothers had never been taught yoga exercises to accelerate uterine involution. Nursing care for post-partum mothers given only standards from the Ministry of Health. The purpose of this study is to know the effect of yoga exercises on uterine involution in the working area of the long inpatient health centre in Bandar Lampung. This study using a quantitative design with an analytical design using a Quasi-experimental approach with one group pre-posttest design. The research site will be carried out in the work area of the Puskesmas inpatient Bandar Lampung. In this study, the researchers identified the sample used as 60 post-partum mothers as respondents. Then the researchers determined the sample based on the researchers’ own considerations according to the desired criteria. Divided into 30 post-partum mothers in the intervention group and 30 post-partum mothers in the control group. The sampling method used was the purposive sampling technique. The study used a t-test (t-test). The results obtained were based on statistical tests, there was a difference in uterine involution in the intervention group and control with p-value = 0.000, the result was the effect of yoga gymnastics on uterine involution in post-partum mothers in the Puskesmas Panjang p-value. 0.000 <0.005 means that there is an effect of yoga exercise on the postpartum uterine involution process. Suggestions from health centre staff for maternity nurses and midwives can provide yoga exercises to post-partum mothers according to the yoga exercise booklet that researchers have provided. Health cadres can work together with post-partum mothers in practising yoga exercises for post-partum mothers.

Keywords:
Yoga gymnastics
Uterine involution
Post-partum mother

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Involusi uterus
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Yoga Gymnology Proses Involusi Uterus Mom Post-Partum

Kata kunci:
Senam yoga
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ABSTRACT
Perdarahan post-partum merupakan penyebab utama morbiditas dan mortalitas ibu antara lain akibat kegagalan proses involusi uterus yang dipengaruhi oleh adaptasi fisik dan psikis yang ditandai dengan perubahan hormonal. Upaya yang dilakukan dengan latihan yoga agar ibu post-partum fokus pada latihan fisik, pernapasan, penguat an otot dasar panggul dan relaksasi. Data yang diperoleh peneliti di wilayah kerja Puskesmas Rawat Inap Lama Bandar Lampung diketahui pada tahun 2019 jumlah ibu nifas sebanyak 754 orang. Dari hasil wawancara diketahui bahwa 8 (80%) ibu belum pernah diajarkan senam yoga untuk mempercepat involusi uterus.

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INTRODUCTION

The post-partum period is a time of healing and change, a time to return to a non-pregnant state. During the puerperium, the internal and external genital organs will gradually recover to their pre-pregnancy state. To help speed up the healing process during childbirth, postpartum mothers need a diet that is adequate in calories and protein, requires adequate rest and so on. During pregnancy and childbirth, the mother experiences many physical changes such as sagging abdominal walls, loosening of the intercourse and pelvic floor muscles (Bobak, 2005).

Some of the physiological changes that occur during the puerperium include shrinkage of the uterus, which is a process in which the uterus returns to its pre-pregnancy state weighing only 60 grams. The uterus undergoes the greatest change at the end of the third stage of labor, the uterus measures approximately 20 weeks’ gestation and weighs 1000 g, and it shrinks rapidly so that by the end of the first week of the puerperium it weighs approximately 500 g. This involution can be proven by the fact that on the abdominal examination, namely on the 12th day the uterus is no longer palpable, after which the involution occurs more slowly (Williams, 2012).

Uterine involution or uterine contraction is a process by which the uterus returns to its pre-pregnancy state. Uterine involution can also be said to be the process of returning the uterus to its original state or pre-pregnancy state (Varney, 2003). There are several factors that influence uterine involution, including postpartum exercise, early mobilization of post-partum mothers, early initiation of breastfeeding, nutrition, psychological and age factors and parity factors (Sarwono, 2014).

After childbirth, a mother’s body will enter a period of recovery and slowly return to its original state. The actions of bed rest and puerperal exercise help this physiological process slowly. In general, what concerns the mother during the postpartum period is how to restore the body shape and abdominal wall to normal (Mochtar, 2011).

But in fact, postpartum mothers are afraid to make a lot of movements, the mother is worried that the movements she will do will have unwanted effects. In fact, if the mother gives early ambulation, it can accelerate the occurrence of uterine involution. And in general, women who have given birth often complain that their body parts are stretchy, even their body condition is less than optimal due to fatigue and tension. Meanwhile, blood circulation and respiration have not returned to normal, so to help restore the body to its original shape and condition, we must do regular postpartum exercise (FORIKES Health Journal, 2011).

According to Huliana (2005), one of the factors that accelerates the involution is Yoga exercise, which is a type of exercise that is recommended for those who want to calm down and lose weight. Yoga is often recommended for postpartum mothers who often experience mood swings or often feel tired, the benefits of yoga for postpartum mothers are also numerous (Yi-Li ko and Chi-Li Yang, 2008).

Yoga is a holistic approach that focuses on the interconnectedness of body, mind and spirit that combines physical poses (asanas), breathing techniques, meditation and relaxation which restores one’s balance with nature and neutralizes physical, emotional and mental discomfort (Sindhu, 2009). Postpartum yoga is a special program given to postpartum mothers with techniques and intensity that have been adapted to the mother’s physical and psychological conditions and needs.

Several studies have been done before regarding uterine involution, namely oxytocin massage, endorphin massage, back massage, and puerperal exercise where the results obtained were significant. According to the research of Arriziqiyani (2017), it was found that puerperal exercise is more effective in accelerating uterine involution compared to oxytocin massage with p value 0.001.

Based on the data obtained by researchers in the working area of the long inpatient public health center in Bandar Lampung, it is known that in 2019 the number of postpartum mothers was 754 people who averaged 60 postpartum mothers per month in the long inpatient public
health center in Bandar Lampung, the researchers then conducted unstructured interviews with 10 postpartum mothers, from the results of these interviews it was found that 8 (80%) mothers had never been taught yoga exercises to accelerate uterine involution. Postpartum care provided is only the standard from the Ministry of Health.

The limited research related to yoga exercise in postpartum mothers made researchers interested in researching the effect of yoga exercises on uterine involution in the working area of the long inpatient community health center in Bandar Lampung. 30% followed by Bengkunat Belimbing 29%, Pematang Sawa 27%, Suoh 27%, Gedung Surian 26%, Belalau 26%, Rawajitu Utara 26%, Mesuji 25%, Muara Sungkai 25%, Bandar Mataram 25% and Pancara Jaya 2%. The proportion of pregnancies aged 10-54 years in Lampung Province is 3.9%. Among the 10-54-year-old female population, 2% of pregnancy at adolescence (15-19 years) (Central Statistics Agency, 2020). Based on data from family planning and family stages in Tanggamus District, out of 149,242 registered households, 3599 were couples of childbearing age who were under the age of 20. With the highest number in Ulu Belu Subdistrict, 560 PUS, Kota Agung Barat 517 PUS, Pematang Sawa with 444 PUS and the lowest in Limau District with 1 PUS under 20 years of age ((BKKBN Tanggamus, 2020). In 2017 cases of maternal death in Tanggamus District, out of 199 cases only 9 people in Tanggamus Regency, but in 2018 it increased to 11 people and in 2019 there were 12 people (Lampung Provincial Health Office, 2020).

Many things affect a person’s behavior, according to the Theory of the World Health Organization (WHO). A person behaves in a certain way because of four main reasons, namely understanding and consideration (knowledge, perceptions, attitudes and beliefs and one’s judgments about objects) (in this case, health objects). an important person as a reference (personal reference), resources, culture (Notoatmodjo, 2014c).

So far, there have been many studies and analyzes on unwanted pregnancy, such as the analysis of the determinants of unwanted pregnancy, the effect of unwanted pregnancy on low birth weight and other analyzes related to unwanted pregnancy, but not many have examined the risk behavior of adolescents for childbearing age. child.

The current condition of Indonesia’s adolescent risk behavior shows an increasingly worrying symptom. From the aforementioned facts, it can be concluded that morbidity and mortality among adolescents is generally caused mainly due to psychosocial factors such as violence, juvenile delinquency, unwanted pregnancy, sexually transmitted diseases, HIV/AIDS, drug abuse, and smoking. These various risk behavior problems can be related to each other or result in other risky behavior problems.

This purpose of study to determine the effect of yoga exercises on uterine involution in Post-Partum mothers in the working area of the long inpatient public health center in Bandar Lampung.

METHOD

This type of research is quantitative research with a quasi-experimental approach. The population in the study was all partum iubopt. The object in the study was Yoga Gymnastics, the subject in the study was Uterine Involution. The method of collecting data using a questionnaire. The research was conducted in the working area of inpatient Puskesmas Bandar Lampung. Bivariate analysis using the t test (t-test). This study has obtained ethics worthy of ethics from the Health Research Ethics Committee of the Tanjungkarang Health Polytechnic.

RESULTS

Table 1

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19-24 Old</td>
<td>24</td>
<td>40.0</td>
</tr>
<tr>
<td>25-31 Old</td>
<td>17</td>
<td>28.3</td>
</tr>
<tr>
<td>32-37 Old</td>
<td>19</td>
<td>31.7</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SMP</td>
<td>20</td>
<td>33.3</td>
</tr>
<tr>
<td>SMA</td>
<td>40</td>
<td>66.6</td>
</tr>
<tr>
<td><strong>Profession</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IRT</td>
<td>51</td>
<td>85.0</td>
</tr>
<tr>
<td>Wiraswasta</td>
<td>3</td>
<td>5.00</td>
</tr>
<tr>
<td>PNS</td>
<td>6</td>
<td>10.0</td>
</tr>
<tr>
<td><strong>Parity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>23</td>
<td>38.3</td>
</tr>
<tr>
<td>2</td>
<td>13</td>
<td>21.7</td>
</tr>
<tr>
<td>3</td>
<td>21</td>
<td>35.0</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>5.00</td>
</tr>
</tbody>
</table>

Characteristics of respondents in terms of age, the most were in the age group 19-24 years at 40%, 25-31 years old at 28.3%, and 32-37 years old at 31.7%. For the characteristics of the latest education, the most number was high school graduation, amounting to 66.6% (40 respondents), while for education that graduated from junior high school / equivalent 33.3% (20 respondents).

The occupation of the most respondents was IRT as much as 85% (51 respondents), self-employed 5% (3 respondents) and civil servants 10% (6 respondents). The highest parity, namely mothers with the highest number of parity was one 75% (47 respondents), two 21.7% (13 respondents), three 35% (21 respondents) and four 5% (3 respondents).
Table 2
The Mean Value of Uterine Involution Before and After Yoga Exercise in the Intervention Group’s Post Partum Mothers

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Intervention</td>
<td>30</td>
<td>10.33</td>
<td>0.661</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td>Post Intervention</td>
<td>30</td>
<td>0.27</td>
<td>0.583</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

Based on table 2, uterine involution before doing yoga exercises for post-partum mothers in the intervention group, the average result is 10.33, the standard deviation is 0.661, the minimum value is 10 and the maximum value is 12, and the uterine involution after doing yoga exercises the average result is 0.27, the standard deviation is 0.583 with the minimum value is 0 and the maximum is 1.

Table 3
The Mean Value of Uterine Involution in Post-Partum Mothers in Control Group

<table>
<thead>
<tr>
<th>Group</th>
<th>n</th>
<th>Mean</th>
<th>SD</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Control</td>
<td>30</td>
<td>10.50</td>
<td>0.777</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td>Post Control</td>
<td>30</td>
<td>5.83</td>
<td>0.747</td>
<td>5</td>
<td>7</td>
</tr>
</tbody>
</table>

Based on table 3, uterine involution in post-partum mothers in the control group obtained pre-control results with an average of 10.50 with a standard deviation of 0.777 with a minimum value of 10 and a maximum of 12, and post-control results were obtained with an average of 5.83 with a standard deviation of 0.747 with a minimum value of 5 and a maximum value of 7.

Table 4
Differences in Uterine Involution in the Intervention Group Post-Partum Mothers

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean</th>
<th>SD</th>
<th>p value</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Intervention</td>
<td>10.33</td>
<td>0.661</td>
<td>0.000</td>
<td>30</td>
</tr>
<tr>
<td>Post Intervention</td>
<td>0.27</td>
<td>0.583</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The mean uterine involution of respondents in the intervention group before being given yoga exercises was 10.33 and after being given yoga exercises was 0.27. The results of statistical tests using the paired t test obtained p value = 0.000 in the intervention group so that it can be concluded that there are differences in uterine involution in post-partum mothers in the intervention group before and after yoga exercises.

Table 5
The Difference of Uterine Involution Before and After Doing Yoga Exercise in the Control Group Post-Partum Mothers

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean</th>
<th>SD</th>
<th>p value</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre Control</td>
<td>10.50</td>
<td>0.777</td>
<td>0.000</td>
<td>30</td>
</tr>
<tr>
<td>Post Control</td>
<td>5.83</td>
<td>0.747</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 6
Differences in Uterine Involution of Post-Partum Mothers in the Intervention and Control Groups

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean</th>
<th>SD</th>
<th>P-Value</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>0.200</td>
<td>0.407</td>
<td>0.000</td>
<td>30</td>
</tr>
<tr>
<td>Control</td>
<td>5.83</td>
<td>0.583</td>
<td></td>
<td>30</td>
</tr>
</tbody>
</table>

In Table 6, the statistical test shows that the uterine involution in the intervention group and the control group obtained a p-value of 0.000 <0.005, which means that there is a difference in yoga exercise to the postpartum uterine involution process.

DISCUSSION

Uterine Involution in Post-Partum Mothers

Based on table 2, uterine involution before doing yoga exercises for post-partum mothers in the intervention group, the average result Meanwhile, uterine involution in post-partum mothers in the control group obtained pre-control results with an average of 10.50 with a standard deviation of 0.777 with a minimum value of 10 and a maximum of 12. And post control results were obtained with an average of 5.83 with a standard deviation of 0.747 with a minimum value of 5 and a maximum value of 7.

Uterine involution is the receding uterus after childbirth or returning to its original shape. The gradual return of the uterus means not all at once but on an equal basis. A day or 24 hours after childbirth, the uterine fundus is slightly elevated due to an upper segment of the uterus that is stretched, and the lower uterus is too weak to increase its tone again. But after tonus the muscles return, the uterine fundus will decrease little by little (Ifafan, 2010).
is 10.33, the standard deviation is 0.661, the minimum value is 10 and the maximum value is 12, and the uterine involution after doing yoga exercises the average result is 0.27, the standard deviation is 0.583 with the minimum value is 0 and the maximum is 1.

In line with research conducted by Surani (2010) at RB Harmoni Ambarawa Semarang, it was shown that most respondents before being given learning and treatment for postpartum exercise experienced a slower decrease in TFU, as many as 45 people (90%), while those who experienced a rapid decrease in TFU were 5 people (10%). Meanwhile, postpartum mothers who were given learning and doing postpartum exercise experienced a decrease in fast TFU, namely as many as 38 people (76%), and 12 people who experienced a slow TFU decrease (24%).

Based on Table 4.1, the age of the youngest respondents was 19 years and the oldest was 37 years. Characteristics of respondents in terms of age, the most were in the age group 19-24 years at 40%, 25-31 years old at 28.3%, and 32-37 years old at 31.7%.

Researchers assume that age is one of the factors that influence uterine involution. Starting at the age of 20, the reproductive organs, especially the uterus and other parts of the body, are ready to accept pregnancy. Because at this time it is the safest time to get pregnant. Mothers who are <20 years old, their reproductive organs are not yet fully developed, causing the possibility of experiencing complications after giving birth, one of which is uterine subinvolution. In this study, there were no respondents who were > 35 years old.

In line with the theory according to Ambarwati (2010) that the process of uterine involution is strongly influenced by the mother’s age at delivery. The age of 20-35 years is the ideal age for the occurrence of a good involution process. This is because mothers who are > 35 years of age have reduced muscle elasticity.

Based on the data obtained from all the respondents studied, the researcher categorized the respondents under study with an average age of 19-37 years. Older mothers are influenced by the aging process, where the aging process increases the amount of fat. Decreased muscle elasticity and decreased absorption of fat, protein and carbohydrates. If this process is associated with a decrease in protein during the aging process, it will inhibit uterine involution (Nanny, Vivian, and Lia Dewi, 2012.).

In the characteristics of the latest education, the highest proportion was high school graduation, amounting to 66.6% (40 respondents), while for education that graduated from SMP / equivalent 33.3% (20 respondents). Suryani (2007) states that the level of education is the level in the completion of the formal learning process. The higher a person’s education level is expected to have better knowledge and behavior, because with higher education, more information and knowledge will be obtained, so that changes in behavior for the better are expected to occur. In this study the educational characteristics of the respondents were mostly high school graduates, so that the mother’s knowledge was sufficient. Most respondents’ occupations were IRT as much as 85% (51 respondents), self-employed 5% (3 respondents) and civil servants 10% (6 respondents).

Martini (2012) states that mothers who work are more likely to have a shorter postpartum period than mothers who do not work. Working mothers are more active in carrying out daily activities (mobilization). In this study, most of the respondents worked as housewives (IRT), thus the respondents performed their daily activities more often so as to accelerate the occurrence of uterine involution.

The highest parity, namely mothers with the highest number of parities was one 38.3% (23 respondents), two 21.7% (13 respondents), three 35% (21 respondents) and four 5% (3 respondents).

Researchers assume that parietas is one of the factors that influence uterine involution because multiparous mothers have given birth more than once, therefore the uterus of multiparous mothers returns to its original shape more quickly. In line with the parietas theory of affecting uterine involution, muscles that are stretched too often take a long time. During pregnancy and childbirth, the mother experiences many physical changes such as sagging abdominal walls, loosening of the intercourse and pelvic floor muscles. To return to normal conditions and maintain good health, postpartum exercise is very good for mothers after childbirth. Mothers do not need to be afraid to move a lot, because early ambulation (getting up and moving after a few hours of delivery) can help the uterus to return to its original shape (Mansyur, et al, 2014).

Researchers assume that the uterine involution in the results of this study is normal, because it is in line with Ambarwati’s (2010) theory, that the uterine involution after the placenta is born is the size of the uterus as high as the center with a diameter of 12.0-12.5 cm. While the uterine diameter of 13.0 cm based on theory can be influenced by age and parity factors.

**Difference of Uterine Involution in Post-Partum Mothers Before and After Yoga Exercise in the Intervention and Control Groups**

The mean uterine involution of respondents in the intervention group before being given yoga exercises was 10.33 and after being given yoga exercises was 0.27. The results of statistical tests using paired t test obtained p value = 0.000 in the intervention group so that it can be concluded that there are differences in uterine involution in post-partum mothers in the intervention group before and after yoga exercises.

The average uterine solution of respondents in the control group before being given yoga exercises was 10.50 and after being given yoga exercises was 5.833. The results of statistical tests using the paired t test obtained p value = 0.000 in the control group so that it can be concluded that there are differences in uterine involution in the control group post partum mothers before and after yoga exercises.

From these results it can be seen that both groups have a decrease in the height of the uterine fundus, this is in accordance with the theory, namely the presence of regressive changes in the uterus that cause a reduction in the size of the uterus, the involution of the puerperium is limited to the uterus and what happens to other organs and structures is only considered. as a change in the puerperium (Varney, 2004).

Generally, what concerns the mother during the postpartum period is how to restore the body shape and the abdominal wall will return to normal, so that by doing postpartum exercise the body shape and abdominal wall will return to normal (Mochtar, 2011).

In line with the results of research conducted by Masrurroh at the Faculty of Health Sciences, Darul Ulum Jombang University in 2009, it was found that post-partum mothers who before doing puerperal exercise experienced a decrease in normal uterine fundal height by 27.3% and after postpartum exercise had increased to 81.8%. Post-partum mothers who did not do puerperal exercise experienced a decrease
Differences in Uterine Involution of Post-Partum Mothers in the Intervention Group and the Control Group

In Table 6, the statistical test shows that the uterine involution in the intervention group and the control group obtained a p-value of 0.000 <0.005, which means that there is a difference between yoga exercise and the postpartum uterine involution process. This is in line with research conducted by Maruroh (2012) on 25 respondents of spontaneous post-partum mothers and the results showed that there was an influence between postpartum exercise and a decrease in uterine fundal height in post-partum mothers.

This is in line with the existing theory that after the labor process ends, there is a process of uterine involution, which is marked by a gradual decrease in the height of the uterine fundus, the uterus of a newborn mother is still enlarged, if you feel it from outside the fundus height is about 1 finger below, center. On the third day, about 2 or 3 lower central digits, the fifth day, midway between the center and the symphysis, the ninth day, about 1 finger above the symphysis and after the tenth day, usually the uterus is no longer palpable from the outside (Maryunani, 2011).

Research by Surtiati and Nawati (2010), states that postpartum exercise performed on post-partum mothers has an effect on physical recovery nine times better in mothers who are given postpartum exercise intervention compared to mothers who are not given postpartum exercise intervention. Physical exercise in the form of postpartum exercise has an effect on the physical recovery of post-partum mothers more quickly. This information indicates that physical recovery includes uterine involution as seen from a decrease in uterine fundal height.

This study is in accordance with Ineke’s (2016) research entitled The Effect of Postpartum Exercise on Uterine Involution and Types of Lochea in Primipara. Research results There is an effect of postpartum exercise on uterine involution with p = 0.000 (<0.05). There is an effect of postpartum exercise on the type of lochea on day 4 and 7 with p = 0.000 (<0.05). There is an effect of postpartum exercise on decreasing uterine involution on days 2, 4, and 7 with p = 0.000 (<0.05). There is an effect of postpartum exercise on the type of lochea on the 7th day with a value of p = 0.001 (<0.05).

Andriyani’s research (2013) entitled The Effect of Postpartum Exercise on the Decrease in Uterine Involution in Postpartum Mothers. The results showed, from 15 postpartum mothers who did postpartum exercise, there were 13 people (86.7%) who experienced a corresponding decrease in uterine involution. Meanwhile, of the 15 postpartum mothers who did not do puerperal exercise, 4 (26.7%) experienced a decrease in uterine involution which corresponds to a p value of 0.03 ≤ (0.05).

This research is in accordance with what was stated by Maryunani and Sukaryati (2011) that performing postpartum exercise can restore uterine elasticity and stiffness. The results of this study are in line with the research conducted by Ni Putu, et al. (2019) With the title the effectiveness of postpartum yoga on uterine involution among postpartum women in Indonesia. The Cohen effect size test was 1.63. The results of the Mann Whitney test showed that there was a significant difference between the intervention group and the control group with a p value of 0.000. The results of the determination test (R Square), postpartum yoga gave an effect of 40.3% on postpartum uterine involution controlled along with parity, breastfeeding frequency, and anxiety.

The goal of doing puerperal exercise in the mother after childbirth can help accelerate the recovery of the mother’s condition, accelerate the process of uterine involution and restore uterine function, function, to help restore strength and firmness of the pelvic, abdominal and perineal muscles, especially the muscles associated with pregnancy and childbirth, facilitate the release of lochea, helps reduce pain in the muscles after childbirth, relaxes the muscles that support pregnancy and childbirth, and minimizes the occurrence of postpartum disorders and complications, such as embolism, thrombosis (Walyani and Purwoastuti 2015). The benefits of postpartum exercise in general can help heal the uterus, stomach, and hip muscles that have been traumatized and accelerate the return of these parts to their normal shape, help normalize joints that have become loose due to pregnancy and childbirth and prevent further weakening and stretching, and produce psychological benefits, namely increasing the ability to deal with stress and relax so as to reduce postpartum depression (Sukaryati and Maryunani 2011).

Researchers argue that doing yoga exercises will stimulate uterine contractions thus accelerating the decrease in uterine fundal height. The results of this study concluded that there was an effect of giving yoga exercises on uterine involution in post-partum mothers. So that in women who do yoga exercises, the decrease in Fundus Uterine Height (TFU) takes place faster than those who do not exercise.

CONCLUSIONS AND SUGGESTIONS

There are differences in the involution of the uterus in post-partum mothers in the intervention and control groups and there is an effect of yoga exercises on the process of uterine involution in post-partum mothers in the long hospitalized Puskesmas area.

In order to continue to carry out advice about yoga exercises for post-partum mothers against uterine involution continuously by involving small groups in turns. Making a guide in the form of a Booklet on Yoga Exercises Against the Uterine Involution Process of Post-Partum Mothers and can apply and motivate post-partum mothers to do yoga exercises which are beneficial for the mother's recovery process during the post partum period.
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