Benefits of Oketani Massage to Solve Breast Milk Problems: A Scoping Review

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ABSTRACT

Many problems arose during the puerperium, including the production of little breast milk, milk that was not smooth, and the dam of breast milk. The hormones prolactin and oxytocin secretion impact how well breast milk is produced. The mother's mental health impacts how these two hormones are secreted. When a mother is under psychological strain (stress), the hypothalamus's work function is suppressed, preventing the pituitary gland from secreting prolactin and oxytocin. This study aimed to find the latest scientific evidence on the benefits of Oketani massage to overcome breast milk problems. The PICO Framework and PRISMA-ScR Checklist were used in this scoping review. The literature search in this study used 4 databases: Pubmed, Science Direct, Research Rabbit, and ResearchGate. The research used the Joanna Briggs Institute (JBI) Appraisal Tool. There are 392 potentially relevant articles, and 11 eligible articles were selected. Article inclusion criteria were articles published in 2017–2023 in English or Indonesian, and articles focused on Oketani massage to address breastfeeding problems, namely the smoothness of breast milk, milk production, and milk dam. These 11 articles explain and prove scientifically that the Oketani massage technique and the Oketani massage combination will affect milk production, smooth milk, and breast milk dam. There is a conclusion that Oketani Massage can be used to overcome breast milk problems in postpartum mothers. Oketani massage can be done with 8 manual massage techniques and lasts 30-45 minutes, i.e., 15-20 minutes each for each breast. And also, health workers are advised to learn Oketani massage techniques as a therapy to overcome breast milk problems, which is expected to overcome breast milk problems.

Keywords: mothers, breastfeeding, breast milk dam, Oketani massage
**ABSTRAK**


Kata kunci: menyusui, nifas, pijat Oketani, bendungan ASI

**INTRODUCTION**

According to the WHO, the percentage of mothers exclusively breastfeeding their babies is 25% in Central Africa, 32% in the Caribbean & Latin America, 30% in East Asia, 47% in South Asia, and 46% in emerging nations. 40% of infants less than six months are breastfed exclusively (WHO, 2015). In 2021, 56.9% of all infants in Indonesia are exclusively breastfed nationally. This number is higher than the 40 percent program goal for 2021 (Kemenkes RI., 2021). Breastfeeding could save more than 820,000 children under 5 years old if all children aged 0-6 months were exclusively breastfed. Ineffective breastfeeding can cause various health problems, including malnutrition, infectious diseases, and developmental disorders in children and toddlers; breastfeeding can also reduce the health costs of children in the family (WHO, 2022).

Prolactin and oxytocin hormone release affect milk production. These two hormones are released in a way that is influenced by the mother's mental state. The working function of the hypothalamus decreases when a mother experiences psychological tension (stress), which inhibits the pituitary gland from secreting the hormones prolactin and oxytocin (Machmudah et al., 2018). Problems during the puerperium include little milk production, non-smooth milk expenditure, and breast milk dam. Milk that accumulates in the breasts, if not removed, causes the breasts to swell, the areolae to become more prominent, the nipples flatter, and it is difficult for the baby to suckle. The breast skin looks redder and shiny, the mother has a fever, and the breasts feel very painful (Rosita, 2017).

Breast care aims to increase blood flow and avoid milk duct blockage to enhance breast milk secretion. Lactation massage is a type of breast care that can be performed, namely Oketani massage, which was popularized in Japan by Sotomy Oketani and used in Korea, Japan, and Bangladesh. After giving birth, a mother's new responsibility is caring for her baby and taking care of other household tasks. Mothers will experience fatigue and increased anxiety so that milk production can be disrupted and even reduce the mother's intention to breastfeed her baby more often (Machmudah et al., 2018). Oketani massage is beneficial for boosting milk production and can give the mother a sense of ease and relaxation. Oketeni massage can make the areola and breast area smoother and more flexible, making the baby easier to suckle. Paya Alveoli will smooth the flow of milk (Nani Jahriani, 2019). Based on these problems, this study aimed to study scientific evidence about the benefits of Oketani massage.
METHOD

Scoping Review is a literature review that explores knowledge gaps, research goals, and implications for decision-making by mapping the concepts behind the research, sources of evidence, and categories of evidence available (Tricco, Lillie, Zarin, O'Brien, Colquhoun, Kastner, et al., 2018). The researcher chose Prisma-ScR as a source for the preliminary literature review because it includes a comprehensive and in-depth list of preparatory courses. Prisma-ScR has 22 assessment items, 20 important reporting items, and 2 optional items (Tricco, Lillie, Zarin, O'Brien, Colquhoun, Kastner, et al., 2018).

The article inclusion criteria to be reviewed are articles related to the effectiveness of Oketani massage on breastfeeding problems, the timeframe for publishing articles 2017-2023, in English or Indonesian, original research, and open access. Exclusion criteria are thesis, thesis, and research report. The databases used are Science Direct, ResearchGate, and PubMed. These keywords were used for a literature search: "Breastfeeding Mothers OR Mothers who have problems breastfeeding OR Mothers with breast milk dam AND Oketani Massage OR Oketani Method Mendeley is a reference management program that researchers use to sort publications, such as checking for duplication, picking titles and abstracts, and reading the entire text. In the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) Flowchart below, you can see how to find the number of articles and how to filter them. (Tricco et al. 2018):

Figure 1 PRISMA Flowchart
(Tricco, Lillie, Zarin, O'Brien, Colquhoun, Levac, et al., 2018)
### Table 1 Data Charting

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<tr>
<td>1</td>
<td>The Impact Of Combination Of Rolling And Oketani On Prolactin Level And Breast Milk Production In Post-Cesarean Section Mother (Yullati et al., 2017)</td>
<td>Indonesia</td>
<td>To determine the impact of rolling and Oketani massage on milk supply and prolactin levels in post-c-section mothers.</td>
<td>Quasy-Experimental.</td>
<td>Post-c-section mothers received the intervention for 12 hours over three days, in the morning and evening. The duration of each intervention was 45 minutes. The massages are carried out alternately, beginning with a rolling massage and progressing to the Oketani massage. Breast care was provided for the control group once a day for three days, for 15 minutes per session. Interventions were delivered by certified and trained researchers and enumerators. Interventions are administered in every patient room. The fear of early mobilization is a barrier researchers face while giving interventions, but it can be overcome with encouragement and motivation.</td>
<td>36 post-cesarean section mothers, 17 participants aged 20-25, 10 participants aged 26-30, and 9 participants aged 31-35. The sampling technique was consecutive, with 18 each assigned to the experimental and control groups.</td>
<td>ELISA (Enzyme-Linked Immunosorbent Assay) was used to evaluate prolactin levels. Each respondent had blood drawn three times: prior to the intervention, three days later, twelve hours after the cesarean section, and on the third day in the evening, just before the patient was scheduled to return.</td>
<td>After the treatment, there was a statistically significant difference ($p=0.035; 0.005$) in prolactin levels between the study and control groups, and a p-value of 0.000 ($&lt;0.05$) indicated a significant difference in milk production between the two groups at posttests 1 and 2.</td>
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<td>2</td>
<td>Efektifitas Pijat Oketani dan Pijat Oksitosin Dalam Meningkatkan Produksi Air Susu Ibu (ASI) (Anggraini et al., 2022)</td>
<td>Indonesia</td>
<td>to assess the efficacy of Oketani and oxytocin massage in enhancing breast milk production</td>
<td><em>Quasi Eksperimental.</em></td>
<td>The interventions were Oketani and oxytocin massage for 3 consecutive days.</td>
<td>There is no control group.</td>
<td>The Non-probability Sampling method is a type of purposive Sampling. There were 34 respondents, 31 (20-35 years) and 3 (&gt;35 years). The majority were aged 20-35 years and were broken down into 2 groups each, 17 people in the Oketani massage group and 17 in the oxytocin massage group.</td>
<td>The method for collecting data using a one-group pretest and posttest volume observation sheet design that compares breast milk production before and after oxytocin massage or massage for three consecutive days was used in this study. Guidelines for using Oketani and oxytocin massage are also used.</td>
<td>Wilcoxon test results in the Oketani massage group before and after the intervention showed a p-value of 0.000 &lt; ( \alpha ) (0.05). The conclusion is that breast milk production has increased significantly. The Wilcoxon test was conducted in the oxytocin massage group with a p-value of 0.000 &lt; ( \alpha ) (0.05). The independent sample t-test results between the Oketani and oxytocin massage groups revealed the difference in the amount of milk produced before and after the oxytocin massage. Intervention with a p-value of 0.046 &lt; ( \alpha ) (0.05).</td>
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<td>3</td>
<td>Efektifitas Pijat Oketani Terhadap Bendungan ASI Pada Ibu Postpartum di RSB. Masyita Makkasar (Jama &amp; S, 2019)</td>
<td>Indonesia</td>
<td>To know the Effectiveness of Oketani Massage on Breastfeeding in Postpartum women at Masyita Maternity Hospital.</td>
<td>Quasi-experimental.</td>
<td>The intervention given was Oketani massage. The duration and frequency are not explained.</td>
<td>There is no control group.</td>
<td>15 postpartum mothers, 11 respondents aged 20-35 and 4 respondents aged 35-35 with a consecutive sampling technique.</td>
<td>Data collection instruments were not described.</td>
<td>The results of the T-test analysis obtained an average value = 4,800, SD = 1.46 and p-value = 0.000 &lt;= 0.05, indicating that after doing Oketani massage therapy in all postpartum mothers, it is effective in curing breast milk in postpartum mothers.</td>
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<td>4</td>
<td>Pengaruh Pijat Oketani terhadap Pencegahan Bendungan Asi pada Ibu Postpartum (Dewita et al., 2022)</td>
<td>Indonesia</td>
<td>To find out Oketani massage's effect on postpartum mothers' breast milk dam.</td>
<td>Quasi-experimental.</td>
<td>Oketani massage was performed for 3 consecutive days for 30 minutes.</td>
<td>No intervention for the control group. On the 4th day, observations were made in both groups.</td>
<td>32 participants, 2 participants aged &lt;20 years, 17 participants aged 20-25 years, 10 participants aged 26-30 years, and 3 participants aged&gt; 30 years with consecutive sampling technique.</td>
<td>Using the observation sheet for symptoms of breast milk dam as a research instrument.</td>
<td>Breast milk dam symptoms differed significantly between the control and Oketani massage groups (p = 0.000). Most postpartum women who received the Oketani massage intervention had fewer symptoms of breast milk retention than postpartum mothers who were only observed for symptoms of breast milk dam.</td>
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<td>5</td>
<td>Efektivitas Pijat Oketani Pencegahan Bendungan ASI Pada Ibu Postpartum dan Post Seksio Sesarea (Nababan et al., 2020)</td>
<td>Indonesia</td>
<td>To assess Oketani massage efficacy for preventing breast milk dam in postpartum and postcesarean section mothers at Sarah Medan Hospital.</td>
<td>Pre-experiment with posttest-only design.</td>
<td>The administration of Oketani massage therapy differed for the respondents; some received Oketani massage therapy twice, three and four times.</td>
<td>There is no control group.</td>
<td>Accidental Sampling was employed as the sampling technique and yielded 35 responses. 12 respondents aged 23-27 years, 16 respondents aged 28-32 years, 6 respondents aged 33-37 years and 1 respondent aged 38-42 years.</td>
<td>The measurement of information in this study used an observation sheet, a measuring device containing a list of statements to be observed by ticking (√) and used after the intervention was carried out to measure Oketani massage efficacy in preventing breast milk dam.</td>
<td>Breast milk prevalence in postpartum and postcesarean moms can be effectively prevented with Oketani massage.</td>
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<td>6</td>
<td>Efektifitas Pijat Oketani Pencegahan Bendungan ASI Pada Ibu Postpartum (Kusumastuti, Umi Laelatul Qomar, 2018)</td>
<td>Indonesia</td>
<td>To know the Effectiveness of Oketani Massage Against Prevention Breast Milk Dam in Post Partum Mothers.</td>
<td>Quasi experiment.</td>
<td>Oketani massage treatment is done once daily with a nominal measurement scale from the first day of childbirth to the third day. The measurement interval scale is used to observe from the fourth to the seventh day.</td>
<td>The control group was not given the intervention.</td>
<td>The population of this study was all postpartum mothers, with research subjects totaling 22 respondents in each group with the sampling technique using consecutive Sampling.</td>
<td>Using an observation sheet.</td>
<td>For all postpartum mothers who received Oketani massage, 22 responders, or 100%, reported no cases of breast milk retention. Meanwhile, the results of the 22 postpartum mothers who did not receive Oketani massage showed that 5 (22.7%) did not experience breast milk retention, and 17 (77.3%) people experienced breast milk dam.</td>
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<td>7</td>
<td>Pengaruh Pijat Oketani Terhadap Kelancaran ASI dan Tingkat Kecemasan Pada Ibu Nifas (Romlah &amp; Rahmi, 2019)</td>
<td>Indonesia</td>
<td>To know the impact of Oketani massage on postpartum mothers' anxiety levels and the smoothness of their breast milk.</td>
<td>Quasi-experimental with One Group Pretest-Posttest design.</td>
<td>The treatment given was Oketani Massage, which was carried out for 2 days, lasting 15-20 minutes.</td>
<td>There is no control group.</td>
<td>10 mothers with babies aged 1-2 days and for the sampling technique based on inclusion and exclusion criteria.</td>
<td>Before the intervention, informed consent was obtained from the respondents. Furthermore, respondents were assessed the smoothness of breast milk using a questionnaire of indicators for mothers and babies and the level of anxiety using the HARS scale.</td>
<td>The study's results mean the fluency of postpartum moms' breast milk before and after the Oketani massage was 10.3 and 12.5, respectively. The dependent t-test showed a fluency difference among postpartum women before and after Oketani massage (p=0.016). The dependent t-test results revealed changes in anxiety levels in postpartum mothers before and after the Oketani massage (p=0.006).</td>
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<td>8</td>
<td>Pengaruh Pijat Oketani terhadap Produksi ASI pada Ibu Post Partum di Wilayah Kerja Puskesmas Lhok Bengkuang Kecamatan Tapaktuan (Yasni et al., 2020)</td>
<td>Indonesia</td>
<td>To investigate the correlation between Oketani massage and postpartum milk production in the Lhok Bengkuang Public Health Center working area.</td>
<td>Quasi experiment.</td>
<td>Oketani massage therapy intervention was given on the first day postpartum. The duration and frequency are not explained.</td>
<td>There is no control group.</td>
<td>35 breastfeeding mothers, 33 respondents aged 28 years, and only 2 people aged 29 years. As for the sampling technique, taking the total population as a whole (total Sampling).</td>
<td>Data collection techniques were carried out through interviews and observation methods.</td>
<td>Oketani massage therapy after childbirth boosted and smoothed milk production, altered nipples, and showed no evidence of milk damage. There was a difference in milk supply before and after the Oketani Massage therapy, as indicated by the p-value, which is less than 0.05.</td>
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<td>Pengaruh Pijat Oketani Terhadap Peningkatan Produksi ASI Pada Ibu Post Partum (Katili et al., 2022)</td>
<td>Indonesia</td>
<td>To investigate the impact of Oketani massage on milk production in postpartum mothers at the Tilango Public Health Center, Tilango District, Gorontalo Regency</td>
<td>Quasi-experiment-nonequivalent control group design.</td>
<td>The intervention was carried out for 12 days. The duration and frequency are not specified.</td>
<td>Oketani massage was not done.</td>
<td>The chi-square test was utilized in this research with a total sampling technique of 32 postpartum mothers. 16 people in the intervention and 16 people in the control group.</td>
<td>The data collection technique in this study consisted of two instruments, namely observation sheets, and SOPs, for implementing the Oketani massage. The observation sheet contains data before and after the Oketani massage.</td>
<td>Oketani massage significantly increases postpartum Moms' breast milk production at the Tilango Public Health Center, Tilango District, Gorontalo Regency, where the overall significant value is &lt;0.05. Oketani Massage is used as a non-pharmacological therapy that can be done by breastfeeding mothers to boost breast milk production.</td>
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<td>10</td>
<td>The Effect of Oketani Breast Massage on Successful Breastfeeding, Mothers' Need for Breastfeeding Support and Breastfeeding Self-Efficacy: an Experimental Study (Mahdizadeh-Shahri et al., 2021)</td>
<td>Iran</td>
<td>To determine the effect of Oketani breast massage on breastfeeding needs, success, and self-efficacy.</td>
<td>Experimental study.</td>
<td>The researchers also received routine care by massaging Oketani's breasts twice before the mother entered the operating room. They once before breastfed for the first time in the recovery room/ward.</td>
<td>Receive care routinely, including height and pectoral circumference measurements, dressing the baby assisted by officers who transfer the infants to the mother's room under the nurse's supervision, and oral breastfeeding training, as well as the nurse's emphasis on timely breastfeeding and care instructions for the baby while breastfeeding.</td>
<td>113 expectant mothers who are candidates for a C-section. There were 58 members of the control group and 55 members of the intervention group.</td>
<td>The Infant Breastfeeding Assessment Tool (IBFAT), LATACH Assessment Score, and Breastfeeding Self-Efficacy Scale (BSES) were utilized.</td>
<td>The intervention group had a much greater breastfeeding success rate (p 0.001). There was less need for maternal support in the intervention group at the first breastfeeding stage (p = 0.044) and the last two pre-discharge stages (p 0.001). The intervention group received more nursing sessions from delivery to discharge (p = 0.002). Breastfeeding was also more common among mothers in the intervention group (p=0.002). Based on BSES, women in the intervention group showed significantly greater levels of nursing self-efficacy (p.001).</td>
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<td>11</td>
<td>Difficulties in breastfeeding: Easy solution by Oketani breast massage (Tasnim et al., 2019)</td>
<td>Bangladesh</td>
<td>To assess difficulties in breastfeeding and the mother's expression of the benefits of Oketani breast massage.</td>
<td>Cross-Sectional</td>
<td>Oketani massage therapy was carried out with 8 types of massage techniques. Massages and expressions are completed in a minute and repeated for fifteen to twenty minutes.</td>
<td>There was no control group.</td>
<td>98 breastfeeding mums who experienced breast issues.</td>
<td>A pretested semi-structured questionnaire was used for data collection. Nurses and midwives helped mothers if something was not understood when completing the questionnaire.</td>
<td>Oketani massage can help mothers with problems breastfeeding gain confidence and increase milk secretion.</td>
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Data Item
The researcher identified each article relevant to the review's topic. The breast massage approach known as Oketani massage concentrates on the mother's areola and nipples. Oketani Milk Expenditure Management is a way of massage brought up by a Japanese nun named Sotomi Oketani. Oketani massage was one of the earliest breast care procedures popularized in Japan by Sotomi Oketani. It has been used in Bangladesh, Korea, and Japan, among other places. Oketani Back Rub can help breastfeeding mothers overcome challenges during childbirth. Oketani massage can relieve pain after childbirth. After giving birth, The mother's body begins to relax. Unlike a standard breast massage, it's not the same thing. The areolas, nipples, and breasts will grow softer and more elastic due to Oketani massage, making the baby easier to suckle. Milk flows more evenly due to pressure on the alveoli.

Synthesis of Results
The three databases have 392 relevant articles with several scoping review questions based on article search results. There were 100 articles from research gate, 30 from Research Rabbit, 292 from Science Direct, and 9 from PubMed. In addition, Mendeley Reference is used to import each article. A total of 109 articles were filtered based on the title and abstract of the article "Benefits of Oketani massage to overcome breastfeeding problems", and 30 duplicates were found. After getting 18 full-text articles and re-screening them according to the framework, several articles did not meet the inclusion criteria and study results.; only 11 articles were similar, and 91 were deemed irrelevant and excluded. The PRISMA flowchart can enhance publication reporting quality and be the foundation for other researchers to report systematic reviews (Tricco, Lillie, Zarin, O'Brien, Colquhoun, Levac, et al., 2018).

RESULTS
Selection Of Sources Of Evidence
based on search results for the PICO framework keywords from three databases. Mendeley is then used to perform the filtering procedure. The article screening stages are described using the Prisma Flowchart.

Characteristics of Evidence Sources
The 11 articles were chosen based on several factors, such as the nation's name and the characteristics of the study methodology. Characteristics of articles by country, namely Indonesia (82%), Bangladesh (9%), and Iran (9%). Characteristics of articles based on research design, namely Cross-Sectional (9%), Experimental Study (9%), Pre-experimental (9%), and Quasy Experimental (73%).

Critical Appraisal Within Sources of Evidence
11 articles within the scope of this review use quantitative studies. Articles 1 and 2 perfectly answer questions from the Joana Briggs Critical Appraisal Tools (JBI), which are used to evaluate each article critically. In addition, This article's instruments, data collection techniques, sampling techniques, and samples have all been validated to reduce error rates. Articles without comparison groups (3,4,5,6,7,8,9,10) give imperfect results.

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Oketani Massage

**Oketani Massage Technique**

On A7 explained the eight steps of Oketani massage. For 15 to 20 minutes, the one-minute Oketani massage stage is repeated. Some advantages that the mother will experience include less pain and discomfort, increased milk production, and increased elasticity in some areas of the breast, such as the areola, neck of the nipple, and the top of the nipple, improving the milk flow and milk production, protecting against and treating women who have flat or inverted nipples. Oketani massage will also give the respondent a general sensation of relief and comfort, enhance breast milk quality, avoid mastitis and swollen nipples, and help alleviate/reduce lactation issues (Romlah & Rahmi, 2019).

There are eight different manual techniques used in Oketani breast massage on A10. Steps 1 through 7 are called “grooming” and Step 8, “expressing or milking”. An operation and expressions series takes one minute, then repeated every fifteen to twenty minutes. Pulling and pushing Steps 1–3 entail mild pressure to detach the hard component of the breast from the pectoralis major fascia without giving distress to the mother. In the fourth to the sixth step, both hands pull across the breast with two thumbs down and to either side. Step 4 involves pushing the entire breast toward the umbilicus. The fifth and sixth steps are techniques for isolating the breast's firm base. Also, Step 7 is a gentle clockwise rotation of the breast by extending the base. Step 8 involves expressing the right breast's outside, lower, and inner surfaces, as well as the inside of the upper rim, in four different directions, and the left breast's inner, lower, outer, and inner surfaces, as well as the inside of the upper rim. Manual procedures are performed rhythmically and delicately. Both the right and left breasts are massaged with Oketani. All mothers receive massage treatment after receiving the appropriate training and abilities under a complementary medicine practitioner's supervision (Mahdizadeh-Shahri et al., 2021).

In A11, it is explained that Oketani massage is applied to the area between the breast and the underlying chest muscle. Oketani breast massage is a manual breast care technique created by Sotomi Oketani to enhance breastfeeding, particularly in cases of low milk, uncomfortable nipples, or mastitis. It is a non-painful connective tissue massage that energizes the mother calms the tissue and encourages secretion to make it easier for the infant to suckle. Eight kinds of manual massage techniques on the breasts numbered 1, 2, 3, 4, 5, 6, 7, and 8. Massages 1 through 7 are a set or treatment, and each is different for each breast. The massages and expressions take one minute, then repeated every fifteen to twenty minutes (Tasnim et al., 2019).

Oketani Massage Combination

Patients undergoing national section for three days received 12 hours of intervention in group A1 every morning and evening. Each intervention lasted 45 minutes. Oketani massage is an alternative form of massage performed after rolling massage. For each intervention, the control group received 15 minutes of breast care every morning for three days. Certified and experienced researchers and enumerators delivered the interventions. The intervention is given to each patient in their own room. One of the obstacles researchers encountered when conducting interventions was fear of early mobilization; however, motivation and encouragement can help overcome these obstacles. The findings showed A p-value of 0.035 (0.005) indicates a statistically significant difference in prolactin.

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levels between the experimental and control groups following the intervention, as well as a p-value of 0.000 (0, 05) indicates a significant difference between the two groups' milk production at posttests 1 and 2. The rolling and ocatre rub mixture significantly increases prolactin levels and milk production (Yuliati et al., 2017). The intervention group received oxy massage or oxytocin injections for three consecutive days in group A2 to increase milk production. Oxytocin and Oketani massage instruction sheets were used. In this study, there was no control group. With a p-value of 0.0001 (0.05), the Wilcoxon test revealed a substantial increase in milk production in the Oketani massage group before and after the intervention. In the oxytocin massage group, the Wilcoxon test showed a difference between before and after the intervention with a p-value of 0.0001 (<0.05). Independent sample t-test revealed that the Oketani massage and oxytocin massage groups produced different volumes of breast milk before and after the intervention, with a P value of 0.046 (<0.05)(Anggraini et al., 2022).

**Oketani benefits**

**Breast Milk Production**

The results of A1 showed a significant difference in milk production between the two groups in posttests 1 and 2 with a p-value of 0.000 (0.05) and a statistically significant difference in prolactin levels between the experimental and control groups after intervention with a p-value of 0.035 (0.005) (Nababan et al., 2020). In article A2, it was found that Oketani massage was more effective in increasing milk production in nursing mothers seen from the average value of the subjects; the Oketani massage group had an average milk production volume of 82.41 ml before Oketani massage and increased to 135.98 ml with a difference in increase of 53,56 ml (Anggraini & Dilaruri, 2022).

In A7, the dependent t-test showed a difference in fluency before and after the Oketani massage was performed on postpartum women (p=0.016) (Romlah & Rahmi, 2019). In A8, based on breast milk production, it shows that breast milk production is not smooth in most postpartum mothers before the Oketani massage (71.4%). After the Oketani massage, all postpartum mothers can produce milk smoothly (100%) (Yasni et al., 2020). Article A9 The study results show that breastfeeding frequency on the first day is higher, with a mean value of (5.25), compared to oxytocin massage, with a mean value of (4.52) and a p-value of 0.003. It indicates a significant difference in breastfeeding frequency between Oketani and oxytocin massage (Katili et al., 2022).

In A10, there were 35 (63.6%) less than 1 hour during the first breastfeeding after entering the recovery room, and 20 (36.4) more than 1 hour during the first breastfeeding after entering the recovery room in the intervention group. Milk production was much higher in the Oketani massage group compared to control group participants who only received care routinely. The length of breastfeeding demonstrates breastfeeding success, and the mother will feel satisfied with fulfilling the baby's needs (Mahdizadeh-Shahri et al., 2021).

**Breast Milk Smoothness**

Based on A7 (Romlah & Rahmi, 2019), Postpartum mothers who have received Oketani massage for 15-20 minutes have smoother breast milk supply. Smooth breast milk production might help postpartum women feel less anxious about providing for their newborns. The dependent t-test showed differences in smoothness before and after the Oketani massage was performed on postpartum women (p=0.016).

**Breast Milk Dam**

In A5 (Nababan et al., 2020) Oketani massage was performed 2.3 and 4 times to several respondents. Most respondents who had not received an Oketani massage experienced breast milk retention by 20 (57.14%), while those who had received Oketani massage did not experience breast milk dam by 15 (42.85%). After receiving Oketani massage therapy, all 35 respondents (100%) did not experience breast milk dam.

In A6, the intervention given was Oketani massage performed on the first postpartum day to the third day with a frequency of 1x a day. Observations were made from day 4 to day 7, and it revealed
that of all respondents who underwent the Oketani massage intervention, 22 respondents (100%) have no history of breast milk dam (Kusumastuti, Umi Laelatul Qomar, 2018).

In A3 Oketani massage for postpartum mothers with breast milk dam, namely 7.73 with an SD of 1.163, then after the Oketani massage, the breast milk dam experienced by postpartum mothers experienced significant changes, namely the mean value = 2.93 with SD = 1.580 then from the results the T-test obtained postpartum mothers after having Oketani massage with a mean value = 4.800, SD = 1.46 (p = 0.000) with a significant level <0.05, in other words, Giving Oketani massage therapy to postpartum women is useful in minimizing breast milk retention, but in this article it was also found that from 15 respondents 2 respondents did not experience changes in the dam of breast milk (Jama & S, 2019).

In A4, the intervention group was given Oketani massage for 3 consecutive days for 30 minutes. The results obtained from observing the symptoms of breast milk dam were that in the Oketani massage group, 11 respondents (68.8%) did not experience symptoms of breast milk retention and 5 (31.3%) of respondents experienced 1 symptom (Dewita et al., 2022).

LIMITATIONS OF THE STUDY

Several articles did not explain how the Oketani massage technique was performed.

CONCLUSIONS AND SUGGESTIONS

Oketani massage can be utilized as an intervention to treat breast milk issues such as insufficient milk supply and lumpy breast milk. It can also be a therapy for preventing and treating breast milk dam in postpartum mothers. Oketani massage can be done with 8 manual massage techniques and lasts 30-45 minutes, 15-20 minutes each for each breast. Health workers are advised to teach the Oketani massage technique to pregnant women and postpartum mothers as a therapy to overcome breast milk problems.

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ETHICAL CONSIDERATIONS

It is not an ethical review.

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CONFLICT OF INTEREST STATEMENT

This review has no conflicts of interest.

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Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K. K., Colquhoun, H., Levac, D., Moher, D., Peters, M.


