WARM COMPRESS ACTION TO REDUCE PAINFUL OF MENSTRUATION OR DYSMENORRHEA AT SMP N 1 DESA BARU AREA PANCUR BATU DISTRICT DELI SERDANG REGENCY

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Abstract

Painful of menstruation or Dysmenorrhea is the imbalance of progesterone in the blood and it can cause pain, psychological factors also contributed of dysmenorrhea in some women. There were 90% women had dysmenorrhea problem. This problem is at least disturbing 50% women in reproductive age and 60-85% girls in teen age, which made many absences at school or office. According Sulastri research shows that dysmenorrhea had effectted for daily activities and it was caused absences more than 3 days at school. Poureslami research (2001) in Sulastri research (2006) shows that almost 10 % teens had 'absence rate' during one till three days a month or discapable teens to doing daily activities because of high pain. Many female students who had dysmenorrhea, experienced decrease of concentration in class and many female students had absences because of dysmenorrhea. The nursing techniques to reduce dysmenorrhea with uses a warm compress the abdomen, the abdomen masase, keep body posture being good, exercises or sports, and balanced nutrition. The aim and purpose of this dedication is to help the female students to doing Warm Compresses Action which can reduce painful of menstruation or dysmenorrhea. This research had hold on 5th August 2016 at SMP N 1 Desa Baru Area Pancur Batu District Deli Serdang regency. The objects of this research are the female students SMP N 1 on 8 and 9 grade as many as 40 students and using demonstration method. After the demonstration of Warm compresses Action, all of the students were able to doing a warm compress to reduce painful of menstruation or dysmenorrhea.

Keywords: Warm Compress Action

Introduction

The adolescence is a phase of dynamic development in a life. This period is a period of transition from childhood to adulthood and marked by growth the development of physical, mental, emotional, and social (F.J. Monks, Koers, Haditomo, 2002).

The earliest change that appear is the development of biological. One sign of adolescent biologically is started a teenage had menstruation. Menstruation begins at puberty and the ability of a woman to conceive a child or reproductive age. Menstruation usually begins between ages 10 and 16 years, depending on various factors, including women's health, nutritional status and body weight relative to height. However, in reality many women had experienced menstrual problems including painful of menstruation or ordysmenorrhea (Sumudarsono, 1998).

Painful of menstruation or Dysmenorrhea is the imbalance of progesterone in the blood and it can cause pain, psychological factors also contributed of dysmenorrhea in some women. There were 90% women had experienced dysmenorrhea problem. This problem is at least disturbing 50% women in reproductive age and 60-85% girls in teen age, which made many absences at school or office (Annathayakheisha, 2009).

Sulastri research (2006) shows that dysmenorrhea had effectted for daily activities and it was caused absences more than 3 days at school. Poureslami research (2001) in Sulastri research (2006) shows that almost 10 % teens had 'absence rate' during one till three days a month or discapable teens to doing daily activities because of high pain. Many female students who had dysmenorrhea, experienced decrease of concentration in class and many female students had absences because of dysmenorrhea.

According to Rakhma Astrida research (2012) shows that female students who had experienced low pain level dysmenorrhea were 60 girls (46.5%), medium pain level dysmenorrhea were 44 girls (34.1%) and high pain level dysmenorrhea 25 were girls (19.4%).The pharmacological treatment by using distraction techniques doing as many as 65 girls (50.4%), pharmacological treatment by consuming antipain drugs from small shop doing as many as 16 girls (12.4%). And there was no one of student doing treatment by consuming the anti dysmenorrhea pain prescription.

To reduce the dysmenorrhea, consumed prescribe non-steroidal anti-inflammatory (eg, ibuprofen, naproxen and mefenamic acid). This drugs are most effective if consumed two days before menstruation and continued until 1-2 days of menstruation.

Beside consumed the drugs, the dysmenorrhea can also be reduced by: enough of rest, regular exercises (especially walking), massage, yoga, warm compresses on the abdominal area.

The program study of Nursing Poltekkes Kemenkes Medan is an institution that participated and support the development of public health through increased knowledge about health. The program study of Nursing Poltekkes Kemenkes Medan is also has a program Dedications to the Community which one of them is giving a demonstration about Warm Compresses Action to reduce painful of

menstruation or dysmenorrhea in SMP N 1 Desa Baru Area Pancur Batu District Deli Serdang Regency

Method Dedication

Demonstration

Respondent

The female students of SMP N 1 Desa Baru Area Pancur Batu District Deli Serdang Regency with total 40 students with details 20 students on 8 grade and 20 students on 9 grade.

Demonstration Procedure

Before doing the dedication activities, the first thing that should to do was filled the absent and then filled the Approval Letter interviewed and filled out questionnaires about the actions taken when experiencing menstrual pain, provide materials on the Standard Operating Procedure (SOP) of Warm compresses on the pain by using the poster

Standard Operating Procedure (SOP) of Warm Compress in Pain

Meaning

Warm compresses are giving a sense of warmth on specific areas of body parts that need the warmth by using liquid or device that causes warm. The warm compress indicated to arthritis, muscle spasms, flatulence, and chills.

Purpose

- 1. Improving blood circulation
- 2. Lowering the body temperature
- Reduces pain, relieves pain, possibly by increasing relaxation on muscle, improves circulation, increases psychological relaxation, and feel comfortable; worked as counterirritant
- 4. Give a sense of warm, comfortable and calm for client
- 5. Stimulating intestinal peristalsis

Tools and materials

- 1. Water Warm Zeil
- 2. A thermos of hot water
- 3. Hot water thermometer
- 4. Wipe cloth

Warm Compress Action Procedure

- 1. Prepare the tools.
- 2. Wash hands.
- 3. First perform the installation of Water Warm Zeil by: filling Water Warm Zeil with hot water, tighten the lid then flipped positions of Water Warm Zeil repeatedly, and then empty the contents. Prepare and measure the water (50-60°c).
- 4. Fill the Water Warm Zeil with hot water as much as approximately half of the Water Warm Zeil. Then remove the air by:
 - ¬ Put the Water Warm Zeil on a table or flat place.
 - \neg Fold the top of Water Warm Zeil until the surface of the water is visible in the Water Warm Zeil neck.
- 5. Then close the Water Warm Zeil tightly/properly.
- 6. Check if the Water Warm Zeil is leaking or not and then dry it with a wipe cloth and insert it into the glove of Water Warm Zeil.
- 7. Bring the Water Warm Zeil close to the client.
- 8. Place the Water Warm Zeil or plug in required area.
- 9. Assess client's condition regularly to know if there are disorders arising by giving compress with the Water Warm Zeil, such as redness, lack of comfort, leakage, etc.
- Replace the Water Warm Zeil after 30 minutes in pairs with hot water again, as you needed.
- 11. Organize tools when finished.
- 12. Wash hands.







RESULTS

The actions female student of SMPN1 Pancur Batu Deli Serdang Regency took when experiencing menstrual pain, can be seen in the table below:

Tabel.1
The Actions Female Student of SMPN I Pancur Batu Took when Experiencing Menstrual Pain

NO	Action when experiencing menstrual pain	Yes	%	No	%
1	Drinking pain reliever medicine	8	20	32	80
2	Drinking hormonal medicine	-	-	40	100
3	Massage	4	10	36	90
4	Doing warm compresses with Water Warm Zeil	1	2,5	39	97,5
5	Doing warm compress with warm water bottle	1	2,5	39	97,5
6	Doing a cold compress	-	-	40	100
7	Diverting pain by singing	9	22,5	31	77,5
8	Diverting pain by listening to music	27	67,5	13	32,5
9	Deep breathing techniques	4	10	36	90
10	Gymnastics / Sports	6	15	34	85
11	Drinking herbal medicine	13	32,5	27	67,5

Tabel.2

The Satisfaction of Female Student of SMPN I Pancur Batu on Warm Compress Action

			SATISFACTION				
NO	STATEMENT	NO	%	SATI SFIE	%		
				D			
1	Giving information about warm compresses	-	-	40	100		
2	There is demonstration of warm compresses	-	-	40	100		
3	Time show for 4 hours	-	-	40	100		
4	Conveying a warm compress demonstration	-	-	40	100		

DISCUSSION

Based on Table 1 above there were 27 female students (67%) which diverts the pain by listening to music while using water warm zeil and use a warm water bottle only 1 student (2.5%).

Looking at the data above this activity is necessary in SMPN I Batu Pancur. It is due to that heat or cold compress, which is one of the nonfarmakologi methods, considered highly effective in reducing pain cases. Warm compress is the act by using warm compress which aims to meet the needs of a sense of comfort, reduce or relieve pain, prevent muscle spasms, and gives a sense of warmth (Uliyah & Hidayat, 2006). According Asmadi (2008) a warm compress is the maintenance of body temperature method that causes warm or cold on body part. The heat that distributed through hot compresses can relieve the pain by getting rid of the inflammation products, such as bradykinin, histamine and prostaglandins which would cause local pain. The heat also stimulates nerve fibers that close the gate so implus transmission of pain to the spinal cord and the brain can be inhibited (Price, 2006). In general, the heat is quite useful for the treatment and increase the blood flow by using a hot compress to the tense and painful area deemed to be able to relieve the pain.

Heat reduces muscle spasm which caused by ischemia that stimulate neurons that blocks the further transmission of pain stimuli caused vasodilation and increased blood flow to the area that using the compress (Nicholas and Zwelling, 1997; Simkin, 1995, in Walsh, 2007). The advantage of using dry heat compresses by Smeltzer & Bare (2002) was able to increase blood flow to an area, which can potentially contribute to reduce the pain. Based on Table 2 above all the female students expressed satisfaction for this activity. They said their experience grew especially on warm compress action by using water warm zeil to reduce menstrual pain.

Conclusion

After following the demonstration of warm compress action using water warm zeil, all female students of SMPN 1 Pancur Batu Deli Serdang Regency are capable to perform the warm compress actions with water warm zeil.

Suggestion

- 1. It is hoped that this demonstration and counseling use an appropriate and easy language for the female students of SMPN1 Pancur Batu Deli Serdang to make the female students know more about preparations for menstrual pain. So the warm compress actions can perform more well
- 2. It is expected to male students of SMPN 1
 Pancur Batu Deli Serdang Regency to
 convey information about the warm
 compress actions using water warm zeil to
 their family and relatives who experience
 menstrual pain.

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