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(Novya Ashlahatul Mar’ah)
Research Article

The Effectiveness of Fingerhold Relaxation Techniques and Lemon Aromatherapy Towards Reducing Pain Intensity in Post Section Caesarian Patients

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Abstract

Aims : A person who experiences pain will have an impact on daily activities such as meeting the need for sleep, rest, and individual fulfillment as well as aspects of social interaction and, if not treated, can lead to neurogenic shock. Pain management can be done with several actions or procedures, both pharmacologically and non-pharmacologically. One of the non-pharmacological pain management techniques is the finger grip relaxation technique. This study aimed to Giving birth by Sectio Caesarea generally experiences pain due to surgical wound surgery.

Design : The research design used quasy experimental with pre-test-post test control group.

Methods : This study conducted in November 2021. The sample in this study were all patients post Sectio Caesarea. The study samples as many as 100 people. Sampling using accidental sampling technique.

Results : In the intervention group and the control group before being treated, most of them experienced moderate pain, and after being treated, most of the intervention group had mild pain, while in the control group they had moderate pain and some even experienced severe pain.

Conclusions : There was a difference in the average decrease in pain intensity in post-Section Caesarea patients who were given finger grip relaxation and lemon aromatherapy in the pre-intervention and post-intervention measurements in the intervention group and the control group.

Keywords
Pain, Finger Grip Relaxation, Lemon scent, section caesarean

INTRODUCTION

Complications during pregnancy, childbirth and the puerperium are important health problems, if not addressed can cause high maternal mortality. A worrying tragedy in the reproductive process, one of which is the death that occurs in the mother. The existence of a mother is a milestone for a prosperous family. For this reason, Indonesia has a target for achieving health through the 2015 IDHS. The MMR has decreased to 305/100,000 live births. Hard efforts are needed when looking at the national target according to the Sustainable Development Goals (SDGs) which is to reduce the MMR to 70/100,000 live births in 2030. According to the Ministry of Health, the
causes of maternal death are bleeding (29.2%), hypertension (25.8%), and others (29.7%) (Ministry of Health RI, 2018).

Sectio Caesarea (SC) deliveries have increased dramatically in the last 30 years. The International Healthcare Community (IHC) sets an indicator for CS delivery of 10%-15%. The latest data from 150 countries, currently the rate of deliveries by CS has increased by 18.6%. Latin America and the Caribbean region had the highest rates of cesarean delivery (40.5%), followed by North America (32.3%), Oceania (31.1%), Europe (25%), Asia (19.2%) and Africa (7.3%) (1).

In nine Asian countries it reached 27%, in Latin America 35%, the UK 4.5%. The results of studies in several hospitals in China and Taiwan cesarean section deliveries increased by up to 70%. The delivery rate for sectio caesarea in Indonesia has passed the maximum limit of the WHO standard of 5-15%. In Indonesia, delivery by cesarean section is 15.3% with the highest proportion in DKI Jakarta (19.9%) and the lowest in Southeast Sulawesi (3.3%) and in general the pattern of delivery by cesarean section according to the characteristics shows the highest proportion in the top ownership index. (18.9%), lived in urban areas (13.8%), worked as an employee (20.9%) and had higher education/graduated from PT (25.1%). The description of maternal risk factors during delivery by cesarean section is 13.4% due to premature rupture of membranes, 5.49% due to pre eclampsia, 5.14% due to bleeding, 4.40% Fetal position abnormalities, 4.25% due to closed birth canal. , 2.3% due to a torn uterus (2).

Giving birth by cesarean section generally experience pain due to surgical wound surgery. Someone who experiences pain will have an impact on daily activities such as meeting the need for sleep rest, individual fulfillment, as well as aspects of social interaction (avoiding conversation, withdrawing and avoiding contact), and if not treated, it can result in neurogenic shock (3).

In cesarean section patients, pain can interfere with the ability to care for the baby, exclusively breastfeed and reduce intense interactions with the baby. If the mother does not start breastfeeding more than two hours after postpartum the prolactin secretion response will decrease. The state of postoperative cesarean section pain in the mother will be a disorder that causes limited mobilization, disturbed/ unfulfilled bonding attachments, disturbed Daily Living (ADL) Activity, Early Initiation of Breastfeeding (IMD) cannot be fulfilled optimally due to increased intensity. pain in the postoperative sectio caesarea wound when the mother moves, so that the mother’s response to the baby is less and in the end breast milk as the best food for the baby and has benefits for both the baby and the mother cannot be given optimally (4).

Discomfort or pain is a condition that must be overcome with pain management, because comfort is a basic human need. Pain management can be done with several actions or procedures both pharmacologically and non-pharmacologically. Pharmacological procedures are carried out by giving analgesics, which are to reduce or eliminate pain, while non-pharmacologically it can be done by means of relaxation, breathing.
techniques, movement/change of position, massage, acupressure, hot/cold therapy, hypnobirthing, music, and TENS. Transcutaneous Electrical Nerve Stimulation) (5)

One of the non-pharmacological pain management that can be done is finger grip relaxation technique. The finger grip relaxation technique is an easy way to manage emotions and develop emotional intelligence. Along the fingers are channels or meridians of energy that are connected to various organs and emotions. The reflex points on the hand provide reflex (spontaneous) stimulation during grip. The stimulation will flow a kind of shock wave or electricity to the brain. These waves are received by the brain and processed quickly and then forwarded to the nerves in the affected organs, so that blockages in the energy pathways become smooth. The finger grip relaxation technique helps the body, mind and spirit to achieve relaxation. In a state of relaxation it will naturally trigger the release of endorphins, this hormone is a natural analgesic from the body so that pain will decrease (6)

In addition to hand-held relaxation techniques, aromatherapy can also provide a sense of comfort, relaxation and can reduce pain in post SC patients. Aromatherapy is defined in two words, namely aroma which means fragrance and therapy which means treatment. Aromatherapy that can be used includes lemon aromatherapy (7)

Lemon is a fruit that is good to eat when you are about to start detoxing. Lemon has the main composition of sugar and citric acid. Lemons contain flavonoids (flavanones), limonene, folic acid, tannins, vitamins (C, A, B1, and P), and minerals (potassium, magnesium). Lemon aromatherapy is a type of aromatherapy that can be used to treat pain and anxiety. One of the substances contained in lemon is linalool which is useful for stabilizing the nervous system so that it can have a calming effect for anyone who inhales it. This type of lemon aromatherapy is also useful as a cleanser and tonic, can reduce heat, increase immunity, anti-oxidant, antiseptic, prevent hypertension, and control excessive emotions (8)

From the results of the preliminary study that the author did, it was found that from 10 patients after 6 hours post SC who were not treated with finger grip therapy and lemon aromatherapy, there was a moderate pain scale with a scale range of 4-6, after 10-15 minutes the scale was measured. data showed that 9 people still experienced moderate pain, but the pain scale increased by 1 level and a person experienced severe pain. For the pain scale obtained in the intervention group 6 hours post SC out of 10 patients, 9 people experienced moderate pain on a scale of 4-6, 1 person experienced severe pain, after the intervention of finger gripping technique and lemon therapy for 10-15 minutes, data showed that there was a decrease in pain, namely: 9 people had mild pain on a scale of 1-3, and 1 person had moderate pain.

Based on the description above, the researcher is interested in conducting a study entitled “The effectiveness of finger grip relaxation techniques and giving lemon aromatherapy to reduce pain intensity in post sectio caesarea patients”.

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METHODS

The research method used a quasi-experimental design with pre-test-post-test control group design. Data collection obtained from instrument that used an observation sheet. The population were all post SC patients with a total sample of 100 people who were divided into 2 groups, 50 intervention groups and 50 non-intervention groups (accidental sampling). Data analyzed used univariate analysis and bivariate analysis with t test.

RESULTS

Characteristic respondent

Table 1.
Frequency Distribution of Respondents’ Characteristics by Age

<table>
<thead>
<tr>
<th>Variabel</th>
<th>Mean</th>
<th>SD</th>
<th>Min-Maks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention Group</td>
<td>28,68</td>
<td>5,204</td>
<td>20-40</td>
</tr>
<tr>
<td>Control Group</td>
<td>28,42</td>
<td>5,135</td>
<td>20-40</td>
</tr>
</tbody>
</table>

Table 1 shows that the average age of the respondents in the intervention group was 28.68 years with a standard deviation of 5.204. The youngest is 20 years old and the oldest is 40 years old. The average age of respondents in the control group was 28.42 years with a standard deviation of 5.135. The youngest age is 20 years while the oldest age is 40 years.

Table 2.
Distribution of Pain Intensity Frequency in Post SC Patients

<table>
<thead>
<tr>
<th>Group</th>
<th>Pain</th>
<th>Before</th>
<th>After</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>%</td>
<td>F</td>
</tr>
<tr>
<td>Intervensi</td>
<td>No pain</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td></td>
<td>mild</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td></td>
<td>moderate</td>
<td>38</td>
<td>76,0</td>
</tr>
<tr>
<td></td>
<td>Severe</td>
<td>12</td>
<td>24,0</td>
</tr>
<tr>
<td></td>
<td>Heavy severe</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td>Control</td>
<td>No pain</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td></td>
<td>mild</td>
<td>0</td>
<td>0,0</td>
</tr>
<tr>
<td></td>
<td>moderate</td>
<td>42</td>
<td>84,0</td>
</tr>
<tr>
<td></td>
<td>Severe</td>
<td>8</td>
<td>16,0</td>
</tr>
<tr>
<td></td>
<td>Heavy severe</td>
<td>0</td>
<td>0,0</td>
</tr>
</tbody>
</table>

Table 2 shows that of the 50 respondents in the intervention group before finger grip relaxation and lemon aromatherapy were given, most of them had moderate pain intensity as many as 38 respondents (76%) and after finger grip relaxation and lemon aromatherapy were given, most of them had mild pain intensity, as many as 39 respondents (78.0%). In the control group that was not given any treatment at the first examination, most of the respondents with moderate pain intensity were 42 respondents (84.0%), and in the second examination, the majority of respondents with
moderate pain intensity were 37 respondents (74.0%). While severe pain was 8 respondents (16%) and on the second examination increased to 13 respondents (26.0%). In the intervention group and the control group, no pain and severe pain were found (0).

Table 3.
The Pain Intensity Before and After Performed Finger Clasp Relaxation and Giving Lemon Aroma Therapy to Post SC Patients

<table>
<thead>
<tr>
<th>Group</th>
<th>Pain</th>
<th>Frequency</th>
<th>Mean</th>
<th>Mean</th>
<th>Difference</th>
<th>SD</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Before</td>
<td>After</td>
<td>Before</td>
<td>After</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intervensi</td>
<td>No pain</td>
<td>0</td>
<td>0</td>
<td>5.52</td>
<td>3.30</td>
<td>2.22</td>
<td>0.170</td>
</tr>
<tr>
<td></td>
<td>mild</td>
<td>0</td>
<td>39</td>
<td></td>
<td></td>
<td></td>
<td>&lt;0.00</td>
</tr>
<tr>
<td></td>
<td>moderate</td>
<td>38</td>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Severe</td>
<td>12</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Heavy severe</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Control</td>
<td>No pain</td>
<td>0</td>
<td>0</td>
<td>5.16</td>
<td>5.20</td>
<td>0.04</td>
<td>0.029</td>
</tr>
<tr>
<td></td>
<td>mild</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>moderate</td>
<td>42</td>
<td>37</td>
<td></td>
<td></td>
<td></td>
<td>0.598</td>
</tr>
<tr>
<td></td>
<td>Severe</td>
<td>8</td>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Heavy severe</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The results of the analysis of pain intensity after getting finger grip relaxation and giving lemon aromatherapy in the intervention group decreased pain intensity to 22.0% mild symptoms. And in the control group the average intensity of severe pain was 26.0%. The average analysis results showed that the pain intensity in post SC patients who received finger grip relaxation and lemon aromatherapy decreased significantly by 2.22 with p value <0.05 . While in the control group who did not get finger grip relaxation and lemon aromatherapy, there was no significant change, the change was only 0.04 with p value > 0.05. Based on the data above, it can be concluded that at 5% there was a significant change in pain intensity before and after finger grip relaxation and lemon aromatherapy in the intervention group. In the intervention group and the control group, no pain and severe pain were found (0).

DISCUSSION

Post Sectio Caesarea Mother's Pain Level Before Finger Clasp Relaxation and Giving Lemon Aroma Therapy

From the results of the study, it was found that of the 50 respondents in the intervention group before finger grip relaxation and lemon aromatherapy were given, most of them with moderate pain intensity as many as 38 respondents (76%). In the control group that was not given any treatment at the first examination, most of the respondents with moderate pain intensity were 42 respondents (84.0%). In the intervention group and the control group, no pain and severe pain were found (0).

Pain is an unpleasant sensory and emotional experience resulting from actual or potential tissue damage or described in terms of the damage. Postoperative pain will cause physical and psychological reactions in
postpartum mothers such as disturbed mobilization, lazy activities, difficulty sleeping, no appetite, not wanting to take care of the baby, so there needs to be a way to control pain in order to adapt to postoperative sectio caesarea pain and accelerate the postpartum period, because pain is an unpleasant sensory and emotional experience associated with actual/potential tissue damage. Besides the psychological effects mentioned above, pain can also cause an increase in blood pressure, palpitations (palpitations), decreased activity to disability (9).

The results of this study are in accordance with the results of Yayutrisnarwati's research (2018) which said that before the intervention, most of the respondents experienced moderate pain as much as 71.4%.

The intensity of pain in respondents is influenced by several factors, one of which is the psychological condition is the dominant factor that affects the intensity of pain felt in patients with post SC where the effect of acute pain, patients become anxious and unable to control pain. Women who are more likely to experience anxiety can increase pain than men, this is because women feel more sensitive to problems, so women's coping mechanisms are less good than men (10).

The researcher’s analysis was that before the finger gripping technique and lemon aromatherapy were given to 50 respondents, it was known that the pain felt by patients who were given the intervention with control patients on average was the same, which ranged from moderate pain to severe pain. This pain is due to the incision wound from the surgery, which starts to hurt when the anesthetic wears off, and this is normal for everyone who has just had surgery.

**Post Sectio Caesarea Mother’s Pain Level Before Finger Clasp Relaxation and Giving Lemon Aroma Therapy**

From the results of the study, it was found that of the 50 respondents in the intervention group after finger grip relaxation and lemon aromatherapy were given, most of them with mild pain intensity were 39 respondents (78.0%). In the control group which was not given any treatment on the second examination, most of the respondents with moderate pain intensity were 37 respondents (74.0%). While severe pain was 8 respondents (16%) and on the second examination severe pain increased to 13 respondents (26.0%). In the intervention group and the control group, no pain and severe pain were found (0).

In breathing relaxation techniques can reduce pain by minimizing excessive activity. If the autonomic nervous system increases, it will affect the activity and components of the vegetative parasympathetic nervous system stimulantly, so that this technique can control the intensity of the reaction to pain and reduce the existing pain sensation (11).

The occurrence of pain reduction after relaxation and finger gripping techniques is influenced by the ability of each respondent to focus his attention on the pain that arises, so that it can affect the feeling of pain felt and cause the perception of pain that the patient will feel on average is mild pain. The mechanism of finger grip relaxation in reducing pain according to gate-control theory, where pain has emotional and
cognitive components as well as physical sensations. Gate-control theory says that the "gate" mechanism along the central nervous system can regulate or even inhibit pain impulses when the "gate" is in the open position and will be stopped when the "gate" is closed. Closing the "gate" is the basis for non-pharmacological interventions in pain management (12).

The results of this study are in accordance with the results of Yayutrisnawati's research (2018) which said that after the intervention, most of the respondents experienced mild pain as much as 63.3%.

According to the researcher's assumption, finger grip relaxation using a simple hand touch and breathing techniques can balance the energy in the body which then releases the closure (gate), so as to reduce pain after finger grip relaxation is done. Holding the fingers while taking a deep breath can reduce physical tension because it can warm the points of entry and exit of energy in the meridians associated with organs in the body located on the fingers. The reflex points on the hand provide reflex stimulation during grip. The stimulus will send a kind of shock wave to the brain and then processed quickly and then forwarded to the nerves in the affected organs so that the blockage in the energy pathway becomes smooth. The mechanism of action of aromatherapy in the human body takes place through two physiological systems, namely the body's circulation and the olfactory system. Fragrances can affect a person's psychic condition, memory, and emotions. Lemon aromatherapy is a type of aromatherapy that is used to treat pain and anxiety. One of the substances contained in lemon is linalool which is useful for stabilizing the nervous system so that it can have a calming effect for anyone who inhales it.

Analysis of Changes in Pain Intensity Before and After Finger Clasp Relaxation and Giving Lemon Aroma Therapy to Post SC Patients

The results of the analysis of pain intensity after getting finger grip relaxation and giving lemon aromatherapy in the intervention group decreased pain intensity to 22.0% mild symptoms. And in the control group the average intensity of severe pain was 26.0%. The average analysis results showed that the pain intensity in post SC patients who received finger grip relaxation and lemon aromatherapy decreased significantly by 2.22 with p value <0.05 . While in the control group who did not get finger grip relaxation and lemon aromatherapy, there was no significant change, the change was only 0.04 with p value > 0.05. Based on the data above, it can be concluded that at 5% there was a significant change in pain intensity before and after finger grip relaxation and lemon aromatherapy in the intervention group. In the intervention group and the control group, no pain and severe pain were found (0).

Relaxation can increase oxygen in the body and vasodilation of blood vessels for good circulation. Relaxation techniques are nursing interventions that are carried out to overcome problems, especially due to the sympathetic nervous response. Based on nursing intervention classification (NIC) physiological domain: basic, there are various kinds of relaxation efforts, including finger grip relaxation techniques. By doing relaxation techniques, it is hoped that it can

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stimulate the parasympathetic nerves which will relieve muscle tension, vasodilation and most importantly can overcome fatigue.

Finger grip relaxation treatment will produce impulses that are sent through non-nociceptive afferent nerve fibers. Non-nociceptor nerve fibers cause the "gate" to close so that the painful stimulus is blocked and reduced. The two gate control theory states that there is one more "gate" in the thalamus that regulates pain impulses from the trigeminal nerve. With relaxation, pain impulses from the trigeminal nerve will be inhibited and result in the closing of the "gate" in the thalamus. The closing of the gate in the thalamus results in inhibition of stimulation to the cerebral cortex so that the intensity of pain decreases for the second time (13).

The results of this study are in accordance with the results of (11) at the Undata Hospital of Central Sulawesi Province which said that there was a relationship between relaxation techniques and finger grip on reducing pain in postoperative sectio caesarea patients.

The results of this study are also supported by the results of research by Rinda Anugrah Wati (2020) at the Karanganyar Hospital who said that finger gripping obtained a p value of 0.038, because the p value <0.05 then there was a difference in pain intensity before and after finger gripping therapy was given. So it can be concluded that finger gripping therapy is effective in reducing pain scale in post SC patients.

According to the researcher’s assumptions, the results of this study showed a decrease in pain intensity in post SC patients after giving finger grip relaxation and lemon aromatherapy, this can be seen from the results of the study which showed that most of the respondents who were given finger grip relaxation and lemon aromatherapy treatment with The intensity of pain was mild, while those who were not treated with finger grip relaxation and lemon aromatherapy were mostly with moderate and severe pain intensity, and some of the moderate pain became severe pain related to the anesthetic that had run out. This shows that finger grip relaxation and lemon aromatherapy are very good to be applied to post SC patients so that they can reduce pain intensity. In addition, the substances contained in lemon essential oil can cause a decrease in blood pressure, a decrease in pulse rate, a decrease in pain scale, changes in pain intensity, and facial expressions. Lemon aromatherapy contains linolool which can make someone who inhales it feel calm, this causes a sense of calm and facial expressions look relaxed after inhaling lemon aromatherapy.

CONCLUSION

It was proven that there was a significant difference in the average decrease in pain intensity in post SC patients who were given finger grip relaxation and lemon aromatherapy treatment in the pre-intervention and post-intervention measurements in the intervention group and control group. The findings of this study can be used by maternity nurses to develop educational materials and discharge plans for the use of fingerhold relaxation techniques and lemon aromatherapy towards reducing pain intensity in post-section caesarian patients.
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