

MINDFUL MOTHERHOOD: HYPNOBREASTFEEDING AS A NATURAL SOLUTION TO INCREASE BREAST MILK PRODUCTION

by Perpustakaan IIK Bhakti Wiyata

Submission date: 09-Sep-2025 11:03AM (UTC+0700)

Submission ID: 2501095056

File name: v9_i2_153-165_-_Ayu_Dewi.pdf (430.49K)

Word count: 3956

Character count: 22869



MINDFUL MOTHERHOOD: HYPNOBREASTFEEDING AS A NATURAL SOLUTION TO INCREASE BREAST MILK PRODUCTION

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Abstract

Background: For newborns, especially in their early years of life, breast milk is the primary and optimal source of nutrition. Stress, anxiety, and fatigue are often experienced by mothers postpartum, which can affect the let-down reflex and breast milk production. Many breastfeeding mothers worry about their milk supply, it can make mental pressure and exacerbate the condition. Therefore, interventions aimed at reducing stress and increasing confidence in breastfeeding can help enhance milk production. Hypnobreastfeeding is one method that has started to gain recognition in recent years as an alternative approach to support the breastfeeding process. Hypnobreastfeeding can establish mental environments that facilitate the release of oxytocin, which is essential for both the let-down reflex and the production of milk. The purpose of this study is to investigate the impact of hypnobreastfeeding on nursing moms' ability to produce breast milk. **Method:** Using a pre-test and post-test approach, this study uses a quasi-experimental design to assess how hypnobreastfeeding affects the production of breast milk. Purposive sampling was used to choose 25 nursing moms who had kids between the ages of 0 and 6 months for the research sample. **Result:** This study uses a quasi-experimental design to assess how hypnobreastfeeding affects the production of breast milk. Purposive sampling was implemented to choose 25 breastfeeding moms who had babies between the ages of 0 and 3 months for the research sample. This research showed a varying increase in breast milk production, with an average increase of around 30-35 ml every pumping. **Conclusion:** This study suggests that hypnobreastfeeding can help breastfeeding moms produce more breast milk.

keyword: hypnobreastfeeding, milk production, breastfeeding

INTRODUCTION

For newborns, especially in their early years of life, breast milk is the primary and optimal source of nutrition. The complete nutritional content and its easily digestible nature make breast milk an ideal food for a baby's development. For the first six months of a baby's life, the WHO advises exclusive breastfeeding to promote healthy growth and development. (Fitriasnani *et al.*, 2023). However,

e-ISSN 2656-7806 ©Authors.2025

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DOI: 10.20473/imhsj.v9i2.2025.153-165



various factors can affect ¹³breast milk production, including the physical and psychological condition of the mother.

Stress, anxiety, and fatigue are often experienced by mothers postpartum, which can affect the let-down reflex and breast milk production. Many breastfeeding mothers worry about the adequacy of their milk supply, which can add mental pressure and exacerbate the condition (Sandriani et al., 2023). Therefore, interventions aimed at reducing stress and increasing confidence in breastfeeding can help enhance milk production (Widayanti et al., 2022). Hypnobreastfeeding is one method that has started to gain recognition in recent years as an alternative approach to support the breastfeeding process. Hypnobreastfeeding utilizes relaxation techniques and positive suggestions to help mothers feel calmer and more confident during the breastfeeding process (Dağlı & Aktaş Reyhan, 2024).

Hypnobreastfeeding may be a hypnotherapy strategy utilized to assist increase breastmilk production in postpartum moms. Be that as it may, in addition to its impact on breast drain generation, Hypnobreastfeeding is additionally related to maternal brain research. Thinks about appears that Hypnobreastfeeding can offer assistance in decreasing pain and uneasiness levels in postpartum moms. In addition, Hypnobreastfeeding can also offer assistance in increasing the self-efficacy or self-confidence of moms in giving breastfeed to their babies. This is often exceptionally vital since knowledge about the benefits of breastfeeding alone isn't sufficient in the event that the mother isn't beyond any doubt she can do it successfully. In this way, mesmerizing as a portion of Hypnobreastfeeding can be an elective way to attain unwinding and decrease stress levels for postpartum moms, which increases their milk production. (Trianasari et al., 2024)

The goal of this method is to build mental environments that facilitate the release of oxytocin, which is essential for both the let-down reflex and the production of breastmilk. Research conducted by Trianasari et al., (2024) Shows that mothers who participated in the hypnobreastfeeding program experienced a significant increase in milk production compared to the control group that did not use this technique. The study included sixty breastfeeding moms, and after two weeks of hypnobreastfeeding sessions, the participants in the intervention reported

an average 30% increase in breast milk production. In addition, a decrease in anxiety and stress levels was also reported by the majority of participants, which contributed to the smoothness of the breastfeeding process.

Another study conducted by Rangkuti et al. (2022) also supports this finding, where mothers who received hypnobreastfeeding showed an increase in oxytocin levels in their blood, which directly correlated with an increase in breast milk volume. According to the study's research, 75% of moms in the hypnobreastfeeding group were able to satisfy their baby's exclusive needs for breastfeeding during the first six months of life. Although there are several anecdotal reports supporting the effectiveness of hypnobreastfeeding, the studies mentioned provide scientific evidence that this technique can enhance milk production through mechanisms of increased relaxation, reduced stress, and hormonal stimulation. However, further research with a larger design and longer duration is still needed to strengthen these results.

This research aims to further explore the effect of hypnobreastfeeding on breast milk production in breastfeeding mothers. With stronger scientific evidence, it is hoped that hypnobreastfeeding can become one of the effective non-pharmacological interventions in increasing breast milk production, thereby supporting the achievement of more optimal exclusive breastfeeding.

METHOD

This study utilized a quasi-experimental plan with a pre-test and post-test approach to assess the impact of hypnobreastfeeding on expanding breast milk production. The investigative test was chosen by purposive sampling with the criteria, moms who have babies matured 0-6 months, don't have noteworthy medical complications, and babies don't have an equation drain. The number of tests in this consider was 25 breastfeeding moms.

The intercession given was a one-month hypnobreastfeeding program, with sessions conducted once a week for 30 minutes each session and moms were too given hypnobreastfeeding unwinding sound that moms had to tune in to each day at domestic and propose to themselves by saying a few sentences of recommendation: "My breast drain is streaming easily, sufficient for my baby's



needs," "I feel upbeat to be able to breastfeed my child", "I am pleased to be able to grant the most excellent for my infant", "I continuously feel calm and loose when I begin pumping" and so on.

Using a breast milk volume measurement device, the amount of breast milk produced each day, both before and after the intervention, is calculated in milliliters. The Kolmogorov-Smirnov normality examination was used in SPSS data analysis, and the results showed that the data were normally distributed. The variations in breast milk production before and after the intervention were further examined using a paired t-test. With a p-value < 0.05, the test results indicate a significant increase in breast milk production.

RESULT AND DISCUSSION

The following are the characteristics of the respondents obtained from 25 respondents, which can help provide a comprehensive overview of their characteristics. We present the results in Table 1 below:

Table 1. Distribution of Respondent Characteristics

No.	General Data		Frequency	Percentage (%)
1.	Age	20-25 years	6	24
		26-30 years	10	40
		31-35 years	7	28
		>35 years	2	8
2.	Level Education	Elementary school	1	4
		Junior High School	3	12
		Senior High School	14	56
		Higher Education	7	28
3.	Occupation	Housewife	18	72
		Employed	5	20
		Entrepreneur	2	8
4.	Breastfeeding Experience	Never	15	60
		Have	12	40
5	Number of Children	1	15	60
		2	7	28
		>2	3	12
6	Duration of Breastfeeding	< 1 month	5	20
		1 month	8	32
		2 months	14	56

Based on the respondent characteristics table, the majority of breastfeeding mothers participating in this study are aged between 26-30 years (40%). More than half of the participants possess a high school degree (56%) and are housewives (72%). Additionally, the majority of respondents have no previous breastfeeding experience (60%), and most have 1 child (60%).

In terms of breastfeeding duration before the intervention, 56% of respondents had breastfed for 2 months. These characteristics indicate that most respondents are of productive age with a secondary education level and have sufficient breastfeeding experience, which can affect the effectiveness of the hypnobreastfeeding intervention in increasing breast milk production.

Next is the distribution table of results from 25 respondents who reported an increase in breast milk production after being given hypnobreastfeeding for one month:

Table 2 Breast milk production distribution: before and after hypnobreastfeeding

No.	respondent	Before Hypnobreastfeeding (ml/pumping)	After Hypnobreastfeeding (ml/pumping)	improvement (ml/pumping)
1	respondent 1	100	130	30
2	respondent 2	110	145	35
3	respondent 3	95	125	30
4	respondent 4	120	150	30
5	respondent 5	105	140	35
6	respondent 6	100	135	35
7	respondent 7	115	145	30
8	respondent 8	90	120	30
9	respondent 9	130	160	30
10	respondent 10	85	115	30
11	respondent 11	110	140	30
12	respondent 12	95	125	30
13	respondent 13	105	135	30
14	respondent 14	100	130	30
15	respondent 15	120	150	30
16	respondent 16	110	145	35
17	respondent 17	95	125	30
18	respondent 18	105	140	35
19	respondent 19	100	135	35
20	respondent 20	115	145	30
21	respondent 21	90	120	30
22	respondent 22	130	160	30
23	respondent 23	85	115	30
24	respondent 24	110	140	30
25	respondent 25	95	125	30



The table above illustrates an increase in breast milk production among 25 respondents after participating in the hypnobreastfeeding program for one month. Each respondent showed a varying increase in breast milk production, with an average increase of around 30-35 ml/pumping. To analyze the data on the increase in breast milk production obtained from the 25 respondents after participating in the hypnobreastfeeding program, a paired t-test was used, which will be displayed in the following table.

Table 3: The average amount of breast milk produced before and after hypnobreastfeeding differs

	Mean of rank	Milk production	p-value
		Sum of rank	
Before hypnobreastfeeding	104,6	12,49	0,003
After hypnobreastfeeding	135,8	12,72	

From the results of the table above, it can be concluded that there is a significant increase in breast milk production after participating in the hypnobreastfeeding program, with a p-value < 0.05 indicating statistically valid results. Additionally, the statistical test results show that there is an increase in breast production before and after hypnobreastfeeding was administered.

The results of this study indicate a significant increase in breast milk production among mothers who participated in the hypnobreastfeeding program. Based on the paired t-test, there is a difference in the average breast milk production before and after the intervention, with a p-value < 0.05, suggesting that hypnobreastfeeding is a useful method for boosting the supply of breast milk. These findings are in line with the research conducted by Asih & Nyimas (2020) Who also found that mothers who received the hypnobreastfeeding relaxation technique experienced a greater increase in breast milk volume compared to the control group that did not undergo the intervention.

Physiologically, hypnobreastfeeding is thought to work through mechanisms that reduce stress and anxiety in breastfeeding mothers, which ultimately increases the production of oxytocin and prolactin hormones. Oxytocin plays a crucial role in stimulating the milk ejection reflex, while prolactin functions to maintain milk production. (Kharisma Virgiani, 2022). A study Hutabarat &

Sihombing (2021) Also supports this finding, where relaxation through hypnosis methods has been proven to lower the stress hormone cortisol levels that can inhibit the milk ejection reflex. Thus, hypnobreastfeeding indirectly facilitates optimal conditions for increasing milk production through maternal emotional control.

In terms of respondent characteristics, the majority of participating mothers were aged 26-30 years and had a secondary education (high school), which is generally considered a productive age and an age range with a better understanding of intervention techniques such as hypnobreastfeeding. According to Zaen (2022), the success of lactation is significantly influenced by the mothers' degree of education and expertise, where mothers with higher education are more likely to accept and practice new techniques that support breastfeeding. This indicates that the implementation of the hypnobreastfeeding program for mothers with higher secondary education can be more effective.

The duration of breastfeeding before the intervention is also an important factor. Most respondents (52%) had been breastfeeding for 1-3 months before receiving hypnobreastfeeding, and this could affect the program's effectiveness. A study by Sari et al. (2022) Shows that interventions given during the early breastfeeding period (0-3 months) have a greater impact on breast milk production, because during this period, the mother's body is in the adaptation phase for optimal breast milk production. This may explain why the large majority of this study responded to the hypnobreastfeeding intervention with significant improvement.

Hypnobreastfeeding works by utilizing hypnosis techniques to help breastfeeding mothers achieve a deep state of relaxation, which can physiologically enhance breast milk production. During the breastfeeding process, the production of the hormones oxytocin and prolactin is crucial. Oxytocin aids the let-down reflex, which is the process where breast milk flows from the mammary glands to the nipple, while prolactin is responsible for the actual production of breast milk. When breastfeeding mothers experience stress or anxiety, elevated cortisol levels can inhibit the production of oxytocin, which ultimately negatively impacts breast milk production. The hypnobreastfeeding technique aims to reduce stress and increase oxytocin hormone production through deep relaxation conditions. (Asih & Nyimas, 2020) Showed that hypnobreastfeeding can increase the amount of



oxytocin, which subsequently smooths the let-down reflex in breastfeeding mothers. This explains how a calm state of mind can directly affect breast milk production. Additionally, hypnobreastfeeding provides positive suggestions to mothers, which can boost their confidence in their breastfeeding abilities. This confidence is also an important psychological factor in the success of breastfeeding.

Another study also found that mothers who underwent the hypnobreastfeeding technique experienced a reduction in anxiety and an increase in breast milk volume. Mothers who feel relaxed tend to be more patient during the breastfeeding process, allowing the baby to nurse longer and more effectively (Rohmah et al., 2021). Thus, more consistent breast stimulation also helps maintain high levels of prolactin, which ultimately increases milk production.

In the context of breastfeeding, the mother's psychological state ⁹ has a significant impact on the efficient production of breast milk.. Hypnobreastfeeding provides a holistic approach that not only focuses on the physiological aspect but also the psychological one. Hanum et al., (2021) State that the hypnobreastfeeding method offers an effective, non-invasive approach to improving the well-being of breastfeeding mothers, which ultimately supports the success of lactation. The relaxation condition obtained through this technique allows the mother's body to work optimally in producing breast milk, without the hindrance of stress or other emotional pressures. (Awaliyah et al., 2019).

Overall, the relationship between hypnobreastfeeding and increased breast milk production is proven through various mechanisms, both from a physiological and psychological perspective. This technique helps mothers achieve the hormonal balance necessary to increase and maintain breast milk production, as well as provide important emotional support for the success of breastfeeding.

In addition, this research provides important implications for midwifery practice, particularly in efforts to support breastfeeding mothers. Hypnobreastfeeding can be one of the inexpensive, easy-to-implement, and minimally side-effect non-pharmacological intervention methods to increase breast milk production. Education for breastfeeding mothers on relaxation techniques and hypnobreastfeeding can be one of the lactation education programs in healthcare facilities. A study by also Lydiani et al. (2020) Recommends the application of this

method in lactation clinics to help mothers who experience obstacles in breast milk production due to stress.

Implementation of hypnobreastfeeding in clinics includes preparing and mentoring breastfeeding moms in utilizing unwinding methods and positive assertions to extend milk production and smooth breastfeeding. Clinics or healing centers can give individuals or groups hypnobreastfeeding sessions, as well as give instructive materials and sound recordings to bolster autonomous practice at domestic.

Based on the researcher's coordinated involvement in this investigation, there are a few impediments experienced and a few components to be considered more by future analysts to encourage refining their investigation, since this investigation itself certainly has deficiencies that ought to be continually improved in future research. A few restrictions within the consideration include a really small number of tests, not employing a control group, hence increasing the chance of inquire about inclination.

CONCLUSION AND SUGGESTION

This study suggests that hypnobreastfeeding can help breastfeeding moms produce more breast milk. There was a substantial increase in breast milk production after the hypnobreastfeeding intervention over one month. The hypnobreastfeeding technique helps mothers achieve a deep state of relaxation, reducing stress and anxiety, which ultimately increases the production of oxytocin and prolactin, two important hormones in the breastfeeding process.

Additionally, hypnobreastfeeding provides emotional and psychological support that helps breastfeeding mothers feel more confident and comfortable during the breastfeeding process. This confidence plays a role in increasing the duration and frequency of more consistent breastfeeding, which supports optimal breast stimulation and enhances milk production.

These results suggest that hypnobreastfeeding should be taken as a non-pharmacological intervention method in lactation programs at healthcare facilities, particularly to support mothers experiencing issues with milk production due to stress or anxiety. Through the comes about of this thinking, it is trusted that all



wellbeing offices that give maternal and child wellbeing checks can execute Hypnobreastfeeding exercises and increase educational exercises for both moms and families so that the accomplishment of elite breastfeeding is accomplished by the National target.

DECLARATION

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Conflict of Interest

There is no conflict of interest in this study.

Authors' Contribution

The author contributed to the preparation of the article starting from research design, data collection, data processing, and analysis.

Ethical Approval

6

This research has received an ethical clearance letter from the Bhakti Wiyata Kediri Health Sciences Institute, which ensures that all protocols comply with ethical guidelines (04/FKes/TK/VI/2024).

Funding Source

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This research uses funds from the DRTPM grant from the Ministry of Research, Technology and Higher Education

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Data Availability

The data supporting the findings of this study are available upon reasonable request from the corresponding author, with restrictions due to participant confidentiality

Acknowledgements

⁴
The author would like to thanks to DRTPM grant from the Ministry of Research, Technology and Higher Education, the respondents, and also Mrican Health Center for all support

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