

CHAPTER 1

INTRODUCTION

1.1 Background

Labor is the process of opening and depleting the cervix and the fetus down into the birth canal. Childbirth is the process of removing the fetus that occurs at term pregnancies (37-42 weeks), born spontaneously with a back-head presentation lasting 18 hours, without complications for both the mother and fetus. One of the most frequent deliveries is delivery with section caesarean (Prawiroharjo, 2010).

At present section caesarean (SC) has become a trend for various reasons in the last 20 years. This increase occurs for various reasons namely the presence of obstacles experienced by the fetus and mother, but not a few SC done because the request of mothers who do not want to give birth normally for fear (Sadiman, 2010). According to Amin & Hardhi (2013), cesarean section surgery is usually done because of indications that may complicate birth and to save both mother and fetus. Such as : presentation buttocks, gemelli pregnancy, presentation mall, latitude, chepalopelvic disproportion (CPD), birth canal, hydrocephalus and placenta previa.

The World Health Organization (WHO) sets the average standard of Sectio Casarea in a country to about 5-15% per 1000 births worldwide. Government Hospital about 11% and Private Hospital can more than 30%. (Gibbson L., 2010). According to Sumelung's research (2014) of 167 of respondent there are four factors that most play a role in increasing the incidence of SC emergency, namely fetal distress (31.14%), non-advanced delivery (27.55%), pre-eclampsia (24.55%) and narrow pelvis (16.76%).

In Indonesian caesarean section is generally performed if there are certain medical indications, as an act of ending a pregnancy with complications. In addition, Caesarean section is also an alternative delivery without medical

indications because it is considered easier and more comfortable. Cesarean section as much as 25% of the total number of births performed on mothers who are not at high risk for normal childbirth or other labor complications (DepKes, 2012).

In Indonesian the incidence of section caesarean has increased in 2000 the number of mothers with section caesarean 47.22%, in 2001 amounted to 45, 19%, in 2002 amounted to 47.13%, in 2003 amounted to 46.87%, in 2004 amounted to 53, 2%, in 2005 amounted to 51.59%, and in 2006 amounted to 53.68% and in 2007 there were no significant data, in 2009 amounted to around 22.8% (Karundeng, 2014). The rate of section cesarean delivery in Indonesia is also quite high, the figure is 35.7% -55.3%. With the action of section caesarean as much as 19.5-27.3% of them were section caesarean due of Cephalopelvic Disproportion (DepKes, 2010).

A case of Cephalopelvic disproportion (CPD) is an imbalance between fetal size and pelvic size, ie certain pelvic size is not large enough to accommodate certain fetal deliveries through the pelvis until vaginal delivery occurs (Varney, 2007: 796). According to Cunningham (2014), cephalopelvic disproportion (CPD) arises due to reduced pelvic size, large size, or more commonly due to a combination of both.

Based on data obtained at Dr. H. Moch. Anshari Saleh General Hospital Banjarmasin, the incidence of cases with the process of childbirth Section Caesarea in 2016-2017 as many as 989 cases. The process of delivery of Section Caesarea is performed in several pregnancy complications, one of which is CPD. The incidence of complications of CPD pregnancy in 2016-2017 was 326 cases. (Medical Record of Dr. H. Moch Anshari Saleh General Hospital Banjarmasin).

The usual problems that appear in the post section caesarean is pain, risk of infection, and impaired physical mobility.

Nursing intervention would do such a review of vital signs, pain scale and monitor for signs and symptoms of infection, wound care, teach early mobilization of patients, advocating to maintain hygiene, rest enough and nutritious meal collaborative, others in the running of drug therapy and diet.

Implementation will be done in accordance with the planned interventions, such as reviewing vital signs and pain scale, monitor signs and symptoms of infection, do wound care, teach early mobilization of patients, advocating for keep clean, get enough rest and nutritious food intake, a collaboration with another medical team in administering drug therapy and diet.

Evaluation of the nursing action is expected after vital signs normal, no pain, infection does occur, the patient can do early mobilization, get enough rest and nutritious food intake as well as get drug therapy and the diet accordingly.

Based on the above description to avoid complications occur in post-partum mothers with cesarean section action, then the role of nurses is need as a health worker. The role of nurses in nursing care in post partum Clients with cesarean section action on indications of Cephalopelvic Disproportion, includes promotive, preventive, curative and rehabilitative. In terms of nurse promotive can make improvements to the mother's understanding of good nutrition to help the recovery of stitches, avoid infection, and treatment of wound surgery at home.

In addition, nurses also play a role in terms of preventive nurses can monitor uterine contractions in order to avoid further complications such as bleeding, nurses also have a role in curative or treatment, nurses collaborate for post operative analgesics, antibiotics to prevent infection in surgical scar and treatment of wound surgery. In rehabilitative nursing action, the nurse recommends the client to do early ambulation, postpartum gymnastics for the restoration of health condition and keep control of post partum health as suggested.

From the above discussion it can be concluded that cesarean post cesarean section indication of cephalopelvic disproportion is a way to give birth to the fetus by surgery on the uterine wall through the front of the stomach where the fetus can not be born manually pervaginam because of an imbalance between the size of the head and the pelvis.

Based on the above description, the authors are interested to choose the title "Nursing Care at Mrs. R with Medical Diagnosis Post Op SC with indication of CPD at Nifas Ward in Dr. H. Moch. Anshari Saleh General Hospital Banjarmasin ". From this case, in addition to managing the care of the medical team and to know more knowledge about post-operative SC with CPD indications, it is important for our guidelines while providing care to reduce the number of CPDs.

1.2 General Purpose

The general purpose of this report is to conduct nursing care activities for clients in comprehensive care in the nursing process.

1.3 Special Purpose

The specific purpose of writing nursing is to get the following specific goals:

- 1.3.1 Assessment biopsychosocial and spiritual of clients with indications of Cephalopelvic Disproportion (CPD)
- 1.3.2 Enforcing nursing diagnoses to clients with indications of Cephalopelvic Disproportion (CPD)
- 1.3.3 Plan nursing actions for clients with indications of Cephalopelvic Disproportion (CPD).
- 1.3.4 Implementation nursing actions on clients with an indication of Cephalopelvic Disproportion (CPD).
- 1.3.5 Evaluation of nursing actions on clients with indications of Cephalopelvic Disproportion (CPD).
- 1.3.6 Documenting nursing care for clients with indications of Cephalopelvic Disproportion (CPD).

1.4 Benefits of writing

Writing reports on nursing care, the authors hope to get the following benefits:

1.4.1 Theoretically

The writing of this paper serves to find out between the theory and the real cases that occur in the synchronous field or not, because in the existing theory it is not always the same as the case. So this scientific paper was completed.

1.4.2 Practically

1.4.2.1 Clients and families

They will get good spiritual biopsychosocial care that can improve their health and increase their knowledge about caesarean section. Families can participate and provide full support for recovery.

1.4.2.2 Nurse or health worker.

Improve the quality of nursing care to clients with postoperative SC with indications of CPD.

1.4.3 Academically

Specifically, students can improve patient knowledge about post-operative SC with indications of execution of CPD nursing care orders to clients with post-operative SC cases with indications of CPD can be increased.

1.5 Method of Writing

The author uses descriptive methods that report the results of the approach to nursing care processes, which begin assessment, nursing diagnosis, implementation, and evaluation. The results of the entire nursing process have been documented.

1.6 Organization of Writing

This paper consists of:

- 1.6.1 Chapter 1 Introduction : background, general purpose, specific purpose, benefits of writing, writing method, and writing systematics.
- 1.6.2 Chapter 2 theoretical background : Background Cephalopelvic Disproportion Theoretical (CPD) and Caesarean section include: anatomy of the reproductive and physiological systems, internal reproductive organs, pelvic bone anatomy, caesarean section definition and etiology of cephalopelvic disproportion, type of cesarean section, pathway, pathophysiology, SC indications, complications. The theoretical review of care includes: clinical manifestations, nursing management, nursing diagnoses, nursing and rational interventions.
- 1.6.3 Chapter 3 reports on nursing care include : client identity, assessment, supporting examinations, focus data, data analysis, intervention, implementation and evaluation, progress notes at the Hospital and notes on the progress of home care.
- 1.6.4 Chapter 4 Conclusion : conclusions and suggestions

