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THE EFFECT OF DECORATED SAUROPUS ANDROGYNUS LEAVES ON INCREASING BREAST MILK PRODUCTION IN BREASTFEEDING MOTHERS AT THE MAWEA PUBLIC HEALTH CENTER, NORTH HALMAHERA REGENCY

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ABSTRACT

Background: Optimal breastfeeding requires the support of mothers and health workers so that the breastfeeding process runs well. In addition to strengthening the bond between mother and baby, breast milk production can be increased through the consumption of boiled katuk leaves containing alkaloids, sterols, vitamin A, vitamin B1, vitamin C, tannins, saponins, and papaverine alkaloids that play a role in facilitating breast milk production. **Research Method:** With a pre-experimental design whose design uses the one group pretest-posttest design. **Research Results:** The results of the paired sample t-test showed a p value = 0.000 < α = 0.05, this means that Ho is rejected Ha is accepted meaning that there is an effect of giving boiled katuk leaves on breast milk production in postpartum mothers at the Mawea Community Health Center in 2025. **Conclusion:** Giving boiled katuk leaves has been proven to increase breast milk production in postpartum mothers, where all respondents experienced an increase in breast milk production after the intervention.

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PRELIMINARY

Breast milk (ASI) plays a crucial role in supporting optimal infant growth and development, both physically, mentally, and intellectually. Therefore, breastfeeding requires attention from mothers and healthcare professionals to ensure proper breastfeeding. In addition to meeting infant nutritional needs, breastfeeding has also been shown to reduce the risk of infant morbidity and mortality and increase immunity against various diseases.¹

The coverage of exclusive breastfeeding in Indonesia has shown an increasing trend over the past three years, reaching 72.04% in 2022, 73.97% in 2023, and 74.73% in 2024. Although further improvements are needed to achieve the national target.^{2,3}

One effort to increase breast milk production is to utilize katuk (*Sauropus androgynus*) leaves as a natural lactagogum. Katuk leaves contain phytosterols, alkaloids, flavonoids, saponins, polyphenols, tannins, and papaverine, which play a role in stimulating the hormones prolactin and oxytocin, thus helping to increase and facilitate breast milk production in breastfeeding mothers.^{3,4}

According to Harsodjo (2013), the katuk plant (*Sauropus Androgynus* (L.) Merr.) has long been used by the people of Indonesia and several neighboring countries, both as a traditional medicine, as a vegetable, and as a dye. It is reported that this plant is often used to treat fever, boils, ulcers, yaws, as a diuretic, to stimulate breast milk production, and as an external medicine. However, it is also reported that excessive

consumption of katuk leaves can cause dizziness, drowsiness, and constipation.

Based on a preliminary survey conducted by researchers, which included interviews with midwives at the Mawea Community Health Center, 21 postpartum mothers between May and June.

METHOD

This study was an experimental study with a quasi-experimental design and pre-posttest.

This study aimed to analyze the effect of boiled katuk leaves (*Sauropus androgynus*) on increasing breast milk production in breastfeeding mothers at the Mawea Community Health Center, North Halmahera Regency.

The intervention group in this study consisted of patients undergoing an intervention procedure to determine the effect of boiled katuk leaves (*Sauropus androgynus*) on increasing breast milk production in breastfeeding mothers.

This study was conducted at the Mawea Community Health Center, North Halmahera Regency, from May to June. The total population in this study was 21 breastfeeding mothers. The sample size for this study was 21 individuals who met the inclusion criteria.

RESULTS

Table 1. Frequency Distribution of Respondents by Gender.

Age	N	%
>20 Year	6	28,6
23-35 Year	12	57,1
>35 Year	3	14,3
Total	21	100

Source primary data 2025

Based on table 4.1.1 above, it can be seen that of the 21 respondents at the Mawea Community Health Center, demographic data was obtained with the majority age being 20-35 years, as many as 12 respondents (57.1%).

Table 2. Frequency Distribution of Respondents by Education.

Education	N	%
SD	2	9,5
SMP	3	14,3
SMA	10	47,6
PT	6	28,6
Total	16	100

Source primary data 2025

Based on table 4.1.2 above, it can be seen that of the 21 respondents at the Mawea Community Health Center, the majority of educational demographic data was high school/equivalent, as many as 10 respondents (47.6%).

Table 4. Frequency Distribution of Respondents by Occupation.

Job	N	%
Housewives	13	61,9
Swasta	5	23,8
Civil Servants	3	14,3
Total	21	100

Source primary data 2025

Based on table 4.1.3 above, it can be seen that of the 21 respondents at the Mawea Community Health Center, the demographic data obtained shows that the majority of occupations are housewives, amounting to 13 respondents (61.9%).

Table 5. Distribution Respondent characteristics based on parity number.

Parity	N	%
1	6	28,6
2	10	47,6
3	5	23,8
Total	21	100

Based on table 4.1.4 above, it can be seen that of the 21 respondents at the Mawea Community Health Center, the data obtained shows that the majority of children were 2 children, amounting to 47.6%.

Analisis Bivariate

Table 2.1. Breast Milk Production of Postpartum Mothers Before Giving Katuk Leaves at Mawea Community Health Center in 2025

Job	N	%
Insufficient breast milk	14	66,7
Sufficient breast milk	7	33,3
Plenty of breast milk	-	-
Total	21	100

Based on the results of table 2.1 above, it can be seen that breast milk production in postpartum mothers before being given boiled katuk leaves at the Mawea Community Health Center in 2025, the most breast milk production was low, namely 14 respondents (66.7%).

Table 1. Breast Milk Production of Postpartum Mothers After Giving Katuk Leaves at Mawea Community Health Center in 2025

Job	N	%
Insufficient breast milk	-	-
Sufficient breast milk	-	-
Plenty of breast milk	21	100
Total	21	100

Based on the results of table 2.2 above, it can be seen that breast milk production in postpartum mothers after being given boiled katuk leaves at the Mawea Community Health Center in 2025, the majority of breast milk production was high, namely 21 respondents (100%).

Table 2.3 Results of the Paired Sample T-Test on Breast Milk Production in Postpartum Mothers at the Mawea Community Health Center in 2025 (n=21)

Paired Samples Statistics					
Mean	N	Std. Deviation	Std. Error	Mean	
Pair 1 PRETEST	1,33	21	0,4	0,10	
POSTEST	3,00	21	0,000	0,00	

Based on Table 2.3, it can be explained that the results of giving katuk leaves before treatment in the intervention group obtained an average pretest value of 1.33 to an average posttest value of 3.00 after giving boiled katuk leaves to 21 respondents.

Table 2.4 Results of the Paired Sample T-Test on Breast Milk Production in Postpartum Mothers at the Mawea Community Health Center in 2025 (n=21)

K E l	N	BB				BAK				BAB			
		BB 1		BB 7		BAK 1		BAK 7		BAB 1		BAB 7	
		Me an	SD	Mea n	SD	Mea n	SD	Mea n	SD	Mea n	SD	Mea n	SD
K o n t r o l	21	0,14	0,359	1,00	0,00	0,48	0,512	0,81	0,402	0,24	0,436	0,62	0,4398

Based on the table above, it can be seen in the control group that the average difference in the increase in baby's weight on day 1 to day 7 was 0.86, the baby's urination output from day 1 to day 7 was 0.33 and the increase in the frequency of baby's bowel movements (BAB) on day 1 to day 7 was 0.38.

Univariat Analysis

Based on the research results, the majority of respondents were aged 20–35 years, as many as 12 people (57.1%), had a high school education/equivalent as many as 10 people (47.6%), worked as housewives as many as 13 people (61.9%), and had 2 children as many as 48.6% of respondents.

Bivariate Analysis

Based on the research results, it was found that breast milk production in postpartum mothers before being given boiled katuk leaves at the Mawea Community Health Center in 2025 was mostly low in breast milk production, namely 14 respondents (66.7%).

DISCUSSION

A study on the Effect of Katuk Leaf Decoction on Breast Milk Production in Breastfeeding Mothers at the Mawea Community Health Center was conducted in 2025. The respondents were 21 postpartum mothers breastfeeding at the Mawea Community Health Center. The study used a pre-experimental design using a one-group pretest-posttest design. This chapter will discuss the research results, including respondent characteristics and the effect of Katuk leaf decoction on breast milk production in postpartum mothers at the Mawea Community Health Center.

This is consistent with Soetningsih (2021) who reported that breastfeeding success was as follows: breastfeeding within one hour of

birth; exclusive breastfeeding; only breast milk. This means no additional food or drink, not even water, was given (47.6%).

Factors influencing breast milk production include maternal diet. The food a breastfeeding mother consumes does not directly affect the quality or quantity of breast milk produced. The nutritional value of 1 liter of breast milk is equivalent to that of 2 plates of rice plus 1 egg. Therefore, the same amount of energy is required to produce 1 liter of breast milk as 1 plate of rice. If a breastfeeding mother does not receive additional nutrition, breast milk production will decline.

CONCLUSION

1. Based on the research results, it was found that breast milk production in postpartum mothers before being given boiled katuk leaves at the Mawea Community Health Center in East Tobelo District, North Halmahera Regency, was highest among 14 respondents (66.7%) and low, respectively.
2. Breast milk production in postpartum mothers after being given boiled katuk leaves at the Mawea Community Health Center in East Tobelo District, North Halmahera Regency, was highest among 21 respondents (100%) in 2025.
3. It is recommended to utilize katuk leaves as a herbal remedy to increase breast milk production in postpartum mothers, encouraging them to exclusively breastfeed their babies.

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