



## **EFFECT OF HYPROLA (HYPNOBREASTFEEDING AND LAVENDER AROMATHERAPY) ON BREAST MILK FLOW IN POSTPARTUM MOTHERS**

**Ariu Dewi Yanti<sup>1</sup>**

<sup>1</sup> University Bina Sehat PPNI Mojokerto  
Corresponding Email: ariu914@gmail.com

| <b>ABSTRACT</b>  | <b>Keywords</b>  |
|--|--|
| <p>Breast milk is the optimal source of nutrition for infants; however, exclusive breastfeeding rates in Indonesia remain suboptimal. One of the main challenges during the early postpartum period is inadequate breast milk flow, which is often associated with maternal anxiety and insufficient stimulation of prolactin and oxytocin hormones. Non-pharmacological interventions focusing on maternal relaxation may support lactation. This study aimed to examine the effect of HYPROLA therapy, a combination of hypnobreastfeeding and lavender aromatherapy, on breast milk flow in postpartum mothers. This study employed a pre-experimental one-group pretest-posttest design involving 15 postpartum mothers within 2–7 days after delivery. Participants were selected using total sampling. HYPROLA therapy was administered according to a standardized protocol. Breast milk flow was assessed before and after the intervention using an observation sheet and questionnaire. Data were analyzed using the Wilcoxon signed-rank test with a significance level of 0.05. The results showed a significant improvement in breast milk flow following the intervention. Before HYPROLA therapy, only 13.3% of participants experienced smooth breast milk flow, whereas after the intervention, 93.3% demonstrated smooth milk flow (<math>p = 0.001</math>). In conclusion, HYPROLA therapy significantly improves breast milk flow in postpartum mothers. This intervention may serve as a safe and effective complementary approach to support successful breastfeeding practices in midwifery care.</p> | <p><i>Hypno<br/>Breastfeedin<br/>g, lavender<br/>aromatherap<br/>y, breast milk<br/>flow,<br/>postpartum<br/>mothers</i></p> |

### **INTRODUCTION**

Breast milk production during the early postpartum period is strongly influenced by both physiological and psychological factors (Solama, 2022). Adequate stimulation of prolactin and

oxytocin hormones is essential for optimal breast milk flow; however, maternal anxiety and stress have been shown to inhibit oxytocin release and disrupt the milk ejection reflex, resulting in inadequate milk production (Priharwanti et al., 2024;

Anggraeni et al., 2024). Non-pharmacological interventions that promote maternal relaxation have therefore gained increasing attention in breastfeeding support. Hypnobreastfeeding has been reported to reduce maternal anxiety, enhance self-confidence, and improve emotional stability during breastfeeding, thereby supporting hormonal balance involved in lactation (Mayangsari et al., 2025; Wulan et al., 2023). In addition, lavender aromatherapy is known to induce relaxation through its effects on the limbic system, reduce cortisol levels, and improve parasympathetic nervous system activity, which may facilitate oxytocin secretion during breastfeeding (Widayanti et al., 2020; Dewi et al., 2025). The combination of hypnobreastfeeding and lavender aromatherapy, referred to as HYPROLA, is expected to provide synergistic psychological and physiological benefits that enhance breast milk flow. Although hypnobreastfeeding and lavender aromatherapy have been studied separately, evidence regarding their combined effect (HYPROLA) on breast milk flow in postpartum mothers remains limited, particularly in community-based settings in Indonesia. Therefore, this study aimed to examine the effect of HYPROLA therapy on breast milk flow in postpartum mothers.

## METHOD

This study used a single-group pretest–posttest experimental design to examine the effect of HYPROLA therapy on breast milk flow in postpartum mothers. The study was conducted in a community-based setting in Indonesia. The study population consisted of postpartum mothers experiencing difficulties with breast milk flow. A total of 15 postpartum mothers were recruited using a purposive sampling method.

Inclusion criteria were postpartum mothers within 2–7 days of delivery, willingness to participate in the study, and the absence of breast abnormalities or medical conditions that could affect lactation. HYPROLA therapy, which combines hypnobreastfeeding and lavender

aromatherapy, was administered according to a standard protocol.

The HYPROLA intervention consisted of a combination of hypnobreastfeeding and lavender aromatherapy. The breastfeeding hypnotherapy sessions were conducted once daily for approximately 20–30 minutes, using guided relaxation and positive affirmations focused on breastfeeding confidence and milk production. Lavender aromatherapy was administered simultaneously using 2–3 drops of 100% pure lavender essential oil diluted in water via inhalation (diffuser method) during each session. The intervention was administered once daily for three consecutive days.

This study received ethical approval from the Health Research Ethics Committee (IRB) of the Faculty of Health Sciences. Written informed consent was obtained from all participants prior to data collection. Participation was voluntary, and respondents were informed of their right to withdraw at any time without consequence.

Hypnobreastfeeding sessions were conducted to promote relaxation and positive breastfeeding affirmations, while lavender aromatherapy was administered via inhalation to enhance maternal comfort. Milk flow was assessed before and after the intervention using an observation sheet and a structured questionnaire. Data were analyzed using the Wilcoxon signed-rank test with a significance level set at  $p < 0.05$ .

## RESULTS

**Table 1. Table Characteristics**

**Respondents**

| Variables | Category     | F         | %           |
|-----------|--------------|-----------|-------------|
| Age       | < 20 years   | 1         | 6.7%        |
|           | 20–30 years  | 13        | 86.7%       |
|           | > 35 years   | 1         | 6.7%        |
|           | <b>Total</b> | <b>15</b> | <b>100%</b> |
| Education | JUNIOR       | 2         | 13.3%       |
|           | HIGH SCHOOL  |           |             |
|           | SENIOR       | 12        | 80%         |
|           | HIGH SCHOOL  |           |             |

|        |                        |           |             |
|--------|------------------------|-----------|-------------|
|        | College                | 1         | 6.7%        |
|        | Tall                   |           |             |
|        | <b>Total</b>           | <b>15</b> | <b>100%</b> |
| Work   | No working (housewife) | 9         | 60%         |
|        | Work                   | 6         | 40%         |
|        | <b>Total</b>           | <b>15</b> | <b>100%</b> |
| Parity | Primipara              | 11        | 73.3%       |
|        | Multipara              | 4         | 26.7%       |
|        | <b>Total</b>           | <b>15</b> | <b>100%</b> |

A total of 15 postpartum mothers participated in this study. The majority of respondents were aged 20–30 years, indicating that most participants were within the optimal reproductive age range. Most of the mothers had completed senior high school education and were not formally employed. In terms of obstetric characteristics, primiparous mothers predominated the study sample, accounting for more than two-thirds of the participants.

**Table 2. Table Results Smooth flow of breast milk**

| N<br>o | Category<br>y     | Breast<br>milk<br>productio<br>n | F        | %          |  |
|--------|-------------------|----------------------------------|----------|------------|--|
|        |                   |                                  |          |            |  |
| 1      | Before<br>Therapy | Fluent                           | 2        | 13.3       |  |
|        |                   |                                  |          | %          |  |
|        |                   | No Fluent                        | 1        | 86.7       |  |
|        |                   |                                  | 3        | %          |  |
|        |                   | <b>Total</b>                     | <b>1</b> | <b>100</b> |  |
|        |                   |                                  | <b>5</b> | <b>%</b>   |  |
| 2      | After<br>Therapy  | Fluent                           | 1        | 93.3       |  |
|        |                   |                                  | 4        | %          |  |
|        |                   | No Fluent                        | 1        | 6.7%       |  |
|        |                   | <b>Total</b>                     | <b>1</b> | <b>100</b> |  |
|        |                   |                                  | <b>5</b> | <b>%</b>   |  |

Before the implementation of HYPROLA therapy, the majority of postpartum mothers experienced unsmooth breast milk flow. Only a small proportion of participants demonstrated smooth breast milk flow at the pretest assessment. Following the administration of HYPROLA therapy, a marked improvement in breast milk flow was observed. Almost all

participants demonstrated smooth breast milk flow during the posttest assessment.

**Table 3. Table Tabulation Cross**

| HYPRO<br>LA | Smooth flow of<br>breast milk |     |               |     | Total    |    |
|-------------|-------------------------------|-----|---------------|-----|----------|----|
|             | Fluent                        |     | Not<br>smooth |     | $\Sigma$ | %  |
|             | $\Sigma$                      | %   | $\Sigma$      | %   |          |    |
| Before      | 2                             | 13. | 1             | 86. | 1        | 10 |
|             | 3                             | 3   | 7             | 5   | 5        | 0  |
| After       | 1                             | 93. | 1             | 6.7 | 1        | 10 |
|             | 4                             | 3   |               |     | 5        | 0  |

Statistical analysis using the Wilcoxon signed-rank test revealed a significant difference in breast milk flow before and after the intervention ( $p = 0.001$ ), indicating that HYPROLA therapy had a significant effect on improving breast milk flow among postpartum mothers.

## DISCUSSION

The results of this study indicate that HYPROLA complementary therapy is highly effective in improving the smooth flow of breast milk among postpartum mothers. The application of HYPROLA resulted in significant changes, as evidenced by differences in breast milk production before and after the intervention. Prior to the intervention, the majority of respondents experienced unsmooth breast milk flow; however, after the intervention, most respondents demonstrated a marked improvement with smoother breast milk flow. These findings were statistically confirmed by the Wilcoxon test, which showed a  $p$ -value of 0.001, indicating that the HYPROLA intervention significantly enhances the smooth flow of breast milk in postpartum mothers.

The smoothness of breast milk flow is influenced by the optimal function of prolactin and oxytocin hormones, which work effectively when the mother is in a calm and comfortable condition

(Priharwanti et al., 2024). Stress and anxiety have been shown to inhibit oxytocin secretion and disrupt the let-down reflex, resulting in reduced breast milk flow (Anggraeni et al., 2024). Hypnobreastfeeding is a relaxation technique that utilizes positive affirmations to enhance self-confidence, reduce anxiety, and program the subconscious mind, enabling mothers to feel confident in their ability to breastfeed. This process facilitates the optimal release of prolactin and oxytocin (Mayangsari et al., 2025). In addition, hypnosis promotes a relaxation response that improves breathing patterns, emotional stability, and breastfeeding comfort (Wulan et al., 2023). Lavender aromatherapy contains linalool and linalyl acetate compounds that exert sedative effects through the limbic system, reducing cortisol levels, improving mood, and enhancing sleep quality (Widayanti et al., 2020). Furthermore, lavender aromatherapy stimulates the parasympathetic nervous system, thereby supporting oxytocin secretion during breastfeeding (Dewi et al., 2025). The combination of hypnobreastfeeding and lavender aromatherapy in HYPROLA simultaneously induces psychological and physiological relaxation, increasing blood flow to the breasts, facilitating the oxytocin reflex, and maximizing breast milk production (Rahayu, 2021). These theories support the notion that emotional relaxation plays a crucial role in successful lactation and can accelerate breast milk production adaptation in postpartum mothers.

Therefore, the implementation of HYPROLA can serve as an important strategy in midwifery services, particularly considering that this method is safe, low-cost, non-invasive, easy to apply, and can be performed independently at home. The success of HYPROLA in this study not only contributes to improved breast milk flow but also enhances positive breastfeeding experiences among postpartum mothers, thereby potentially increasing the long-term success of exclusive breastfeeding. Based on these findings, HYPROLA is worthy of consideration as an alternative

complementary intervention in breastfeeding education programs within healthcare facilities and independent midwifery practices.

## CONCLUSIONS

Complementary HYPROLA therapy, which combines hypnobreastfeeding and lavender aromatherapy, has been proven effective in improving the smooth flow of breast milk among postpartum mothers. This effectiveness is demonstrated by an increased proportion of mothers experiencing smooth breast milk flow after the intervention compared to before the intervention, supported by the results of the Wilcoxon test ( $p = 0.001$ ), indicating a statistically significant difference. The mechanism of HYPROLA operates through psychological and physiological relaxation, which reduces maternal anxiety and optimizes the release of prolactin and oxytocin hormones, thereby enhancing breast milk production and facilitating a smoother milk flow. Therefore, HYPROLA is worthy of recommendation as a safe, complementary, and easily implemented intervention to support successful lactation and breastfeeding outcomes in infants.

## REFERENCES

Anggraeni, N. ... Surtiningsih. (2024). *COMPLEMENTARY MIDWIFERY CARE TEXTBOOK*. PT. Sonpedia Publishing Indonesia. <https://books.google.co.id/books?id=iHrsEAAAQBAJ>

Dewi, NKR ... Rahayu, S. (2025). Perbedaan Tingkat Kecemasan Ibu Pascapersalinan Sebelum dan Sesudah Hipnomenyu dan Aromaterapi Lavender di Rumah Sakit Ganesha. *Jurnal Penelitian Pendidikan Multidisiplin*, 2 (4), 206–220. <https://doi.org/10.71282/jurmie.v2i4.251>

Hardani, Helmina Andriani, Jumari Ustiawaty, Evi Fatmi Utami, Ria

Rahmatul Istiqomah, Roushandy Asri Fardani, Dhika Juliana Sukmana, NHA (2020). Buku Metode Penelitian Kualitatif & Kuantitatif. Dalam *Revista Brasileira de Linguística Aplicada* (Vol. 5, Edisi 1).

Mayangsari, D. ... Ardhita Listya Fitriani. (2025). *Complementary Lactation Therapy* . Nuansa Fajar Cemerlang Jakarta.

Priharwanti, A. ... Nabilah, I. (2024). *Buku Teks Gizi dalam Siklus Hidup* . PT. Sonpedia Publishing Indonesia. <https://books.google.co.id/books?id=IgD6EAAAQBAJ>

Rahayu, TB (2021). *EFEKTIVITAS AROMATERAPI PADA TINGKAT KECEMASAN WANITA HAMIL PADA TRIMESTER KETIGA* . 1 (4), 561–570.

Solama, W. (2022). FAKTOR-FAKTOR YANG TERKAIT DENGAN TEKNIK MENYUSUI PADA IBU PASCA ORANG TUA. *Jurnal Ilmiah Multi Science Kesehatan* , 14 (2), 43–54. <https://publications.waim.org.my/index.php/jims/article/view/132/100>

Windayanti, H. ... Sofiyanti, I. (2020). Hipnomenyusui dan kualitas tidur pada ibu menyusui. *Jurnal Kebidanan Indonesia (IJM)*, 3 (2), 151. <https://doi.org/10.35473/ijm.v3i2.631>

Wulan, S. ... Prihantiningsih, A. (2023). *TEXTBOOK OF COMPLEMENTARY MIDWIFERY CARE FOR WOMEN IN LABOR* . Nuansa Fajar Cemerlang. <https://books.google.co.id/books?id=fp2CEQAAQBAJ>