

LITERATURE REVIEW : RELATIONSHIP OF MENORRGHAGIA AND ANEMIA IN IUD KB ACCEPTERS

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ABSTRACT

The IUD has several side effects, one of which is menorrhagia. Menorrhagia is menstrual bleeding that is heavy and longer than normal, ie > 7 days and changing pads 5-6 times per day and 60-80cc of blood issued. The number of erythrocytes that come out during menstruation can cause anemia. The purpose of this study was to determine the relationship between menorrhagia and anemia in IUD family planning acceptors. This article uses a literature review study method from scientific journals with the keywords IUD, menorrhagia, anemia as a guide. There were 5 scientific journals selected from research journals related to the research topic, namely the relationship between menorrhagia and anemia in IUD family planning acceptors. From the results of the literature review that has been presented, all articles explain the results of the study of the relationship between menorrhagia and anemia in IUD family of an Intra Uterine Device (IUD) can cause an increase in the concentration of plasminogen activators (enzymes that break down proteins and activate the dissolution of blood clots) in the endometrium, and these enzymes cause increased fibrinolytic activity and inhibit blood clotting, resulting in more bleeding and bleeding. cause anemia. Based on the results of the literature review, it can be concluded that there is a relationship between menorrhagia and anemia in IUD family planning acceptors.

Keywords: IUD, Menorrhagia, Anemia

1. INTRODUCTION

Based on data from the World Health Organization (WHO) in 2017 among 1.9 billion women of childbearing age (15-49 years), 1.1 billion of them have a need to use contraception, but currently, 842 million use modern contraceptive methods and 80 million use traditional methods. While another 190 million women choose not to use contraception. For longterm contraception, one of the recommended is an Intrauterine Contraceptive Device (IUD).

In Indonesia, statistical data shows that 7.75 out of 100 women used contraception in the form of an IUD. According to this data, there is still low data on IUD users in Indonesia, one of the causes is the side effects caused by IUD (WHO, 2021). The side effects caused are bleeding during menstruation, uterine wall perforation, vaginal discharge, and expulsion (2).

Based on data from SDKI (2018), users of modern KB tools/methods have decreased from SDKI 2012 by 60% to 57%. The number of KB users in Indonesia for the 2018-2020 period was in 2018 from the total number of modern KB

participants, only 17.8% of them use KB MKJP, while the other 82.2% are non-MKJP KB users. In 2019 saw an increase for MKJP KB users of 22.5% and for non-MKJP users of 77.5%. In 2020, MKJP KB users fell by another 20.2%, while non-MKJP users fell by 79.8%. We can see from the data above that MKJP family planning users in 2020 decreased by 2.3% from 2019. The pattern for choosing the type of contraceptives in 2020 showed that most acceptors chose to use the injectable method by 72.9%, followed by pills at 19.4%. In terms of effectiveness, both types of devices are short-term contraceptive methods so that the level of effectiveness in pregnancy control is lower than other types of contraceptives. This pattern occurs every year, where more participants prefer short-term contraceptive methods to long-term contraceptive methods (IUD, implant, MOW, and MOP) (4).

The pill, implants, intrauterine devices (IUD), and stable birth control are some of the birth control methods in use. Menorrhagia is one of the effects of using an IUD for contraception later in life (increased menstrual bleeding). The non-



hormonal IUD has an average of 50-100% more menstrual blood than before insertion, and the hormone-bearing IUD has an increase of 20-50%, and this bleeding can also last a long time. The cause of more menstrual bleeding (menorrhagia) is during installation. Installation of the IUD leads to an increase in the concentration of plasminogen activators (enzymes that break down proteins and activate thrombolysis) in the lining of the uterus This enzyme causes an increase in fibrinolytic activity and inhibits blood clotting, causing more blood to come out. The use of IUD CuT 380 A can cause more bleeding so that it can cause iron deficiency anemi (5).

The use of an IUD can have several negative effects, including discharge, uterine perforation, and issues with menstrual bleeding. It's important to consider the negative effects, as well as the advantages and disadvantages of using an IUD. Menorrhagia, or unusual bleeding during menstruation, is one of the side effects of the IUD. Menorrhagia brought on by hormonal imbalance, ovarian dysfunction, uterine fibroids, polyps, adenomyosis, use of an IUD, pregnancy complications, congenital bleeding issues, and medication for various disease (6).

Anemia can be brought on by the number of red blood cells lost during bleeding, or it can worsen the condition of people who already have it. Anemia is a condition in which hemoglobin levels in the blood fall below normal level that can be determined by laboratory means, and the number of red blood cells or the scattered amount of hemoglobin cannot perform its function as an oxygen provider. body tissues. Anemia in women if hemoglobin (Hb) levels < 12 or 13 mg / dL (7).

2. METHODS

The method used in writing this article is Literature Review. Pubmed and Google Scholar are used as search sources. Search for this article using the keyword "IUD, menorrhagia, and anemia" were the search terms for this article." The number of articles used is 5 from 2017-2022.

3. RESULTS

	5	eviewed articles	- · ·			
Title	Country	Researchers	Journal	Research methods	Data analysis	Research results
Hemoglobin	Indonesia	Widyana,	Maternal And	The design of this	Data collection used	Based on statistical tests
Level In IUD		Yudianti and	Neonatal Health	study was	observation sheets	with $\alpha = 0.05$, a
KB Acceptor		Widarin,	Journal	correlation analytics	and hemoglobin	calculated r value of -
		(2018)		with a cross-	level examination	0.531 with a value of ρ
				sectional approach.	using Easy Touch	value of 0.023 (p = <
				The population was	GCHb digital sticks	0.05) was obtained,
				49. The total sample	through home visits.	which means that Ho
				was 33 respondents.	Data analysis of this	was rejected meaning
				Sampling using	study used	that there was a
				stratified random	Spearman Rank	relationship between the
				sampling.	Correlation.	duration of use of
						Intrauterine
						Contraceptives (IUD) to
						Hemoglobin Levels
Relationship of	Indonesia	Medika and	Jurnal	The research method	Chi-Square Test	Based on the bivariate
Menorrhagia		Suherman,	kebidanan	used is a quantitative		analysis of the Chi-
with		(2019)		analytical method		square Test, the results
Hemoglobin				using a cross-		were obtained that the
Levels In				sectional research		variables associated
Acceptor of IUD				design. Total		with menorrhagia and
KB in Wangun				sampling is the		hemoglobin levels in the
Harja Village in				method used in this		kb IUD acceptor
2019				sampling.		(P.value 0.036 and OR
						0.174)

Table 1 Summary of reviewed articles



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Title	Country	Researchers	Journal	Research methods	Data analysis	Research results
The Relationship of Long Use of Intrauterine Devices with Hemoglobin Levels in Acceptors IUD Family Planning in the Bangko Health Center Work Area in 2020	Indonesia	Revinovita, (2020)	Jurnal Kebidanan dan Keperawatan	Analytical quantitative research using a cross- sectional approach, the population in this study was 117 people with sampling techniques used accidental sampling	Chi-Square Test	The results of the statistical test using the Chi-Square test obtained X2 count > X2 tables, namely 7,397 > 3,841. Thus, it can be concluded that there is a long relationship between the use of IUD and Hb levels in the acceptor of kb IUD in the working area of puskesmas Bangko in 2020.
The Relationship between Menstruation Length and Hb Levels in KB- IUD Acceptors of Tanjung Uma Village, Lubuk Baja District.	Indonesia	Novianti, F., & Sari, (2018)	Zona Keperawatan	Observational analytics design with a cross-sectional approach	Uji <i>Chi-Square</i> . Chi-Square Test	The results of the bivariate analysis with the chi-square test obtained a p-value = 0.003 (<0.05), meaning that H0 was rejected, then there was a relationship between the length of menstruation and the HB level in the acceptor's KB-IUD.
Percentage of Menorrhagia That Cause Iron Deficiency Anemia in Non-Hormonal Intrauterine Users	Pakistan	Jaffery <i>et al.</i> , (2021)	PJMHS	Descriptive case series	Chi-Square Test	In this study, the average age ± elementary school was 31.85 ± 5.05 years. The frequency of menorrhagia was positive only in 41 (19.52%) patients. Similarly, anemia was present in 57 (27.15%) patients.

4. DISCUSSION

From the results of the literature review that has been presented, all articles explain the results of the study on the relationship between menorrhagia and anemia in acceptors of birth control IUD. Menorrhagia is a lot of menstrual bleeding and longer than normal, which is > 7days and change pads 5-6 times per day and 60-80 cc of blood removed (13). All articles explained the results of research on the relationship of menorrhagia with anemia in acceptors of birth control IUD. So that it can be used as a basis for reviewing research journals. Four of the five journals used for the review were analytical, and one was descriptive.

The results of the study average acceptor of kb IUD experienced menorrhagia and anemia. There are several side effects of using IUD such as problems during bleeding menstruation, perforation of the uterine wall, and expulsion. For the use of the IUD, it is necessary to consider the side effects and the advantages and disadvantages. One of the side effects of the IUD is the occurrence of menorrhagia, which is an abnormal bleeding during menstruation. The causes of menorrhagia are hormonal imbalances, ovarian dysfunction, uterine fibroids, polyps, adenomyosis, IUDs, pregnancy use of complications, congenital bleeding disorders, drugs and other medical conditions (6).

Intra Uterine Device (IUD) insertion can cause an increased concentration of plasminogen activators (enzymes that break down proteins and activate dissolution of blood clots) in the



endometrium, and these enzymes cause increased fibrinolytic activity as well as block blood clotting, as a result of which more bleeding arises. Blood loss often doubles with the use of the CuT 380 A Intra Uterine Device (IUD), and may be so high that it causes iron deficiency anemia (5).

The large number of erythrocytes that come out during menstruation can cause anemia, or worsen the condition of patients who have been diagnosed with anemia. Anemia is a condition where blood hemoglobin levels decrease below normal values that can be determined laboratory, and where the state of the erythrocyte mass or scattered hemoglobin mass cannot fulfill its function as an oxygen provider for body tissues. Women are said to be anemic if hemoglobin (Hb) levels <12 or 13 mg / dL (7).

5. CONCLUSION AND SUGGESTIONS

Based on the results of the literature review from five articles, it can be concluded that there is a relationship between menorrhagia and anemia in IUD KB acceptor.

Suggestions that can be given for the implementation of the next literature review are that more databases should be used so that they can get more complete and better articles, and the year limit for searching articles with the specified keywords is the last five years so that the literature is more updated.

6. REFERENCES

- WHO. Progressing Towards SDG Target. Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health (SRMNCAH) SEAR 2020. World Health Organization; 2021.
- [2]. Marmi. Buku Ajar Pelayanan KB. Yogyakarta: Pustaka Pelajar; 2016.
- [3]. SDKI. Survei Demografi dan Kesehatan

Indonesia 2017: Daerah Istimewa Yogyakarta. Sdki. 2017;1–86.

- [4]. Kemenkes RI. Panduan Pelayanan Keluarga Berencana dan Kesehatan Reproduksi Dalam Situasi Pandemi COVID-19. kemenkes RI. 2020;
- [5]. Hartanto. KB & Kontrasepsi. Jakarta: Pustaka Sinar Harapan; 2013.
- [6]. Hanafi H. Keluarga Berencana dan Kontrasepsi. Jakarta: Pustaka Sinar Harapan; 2014.
- [7]. Soebroto I. Cara Mudah Mengatasi Problem Anemia. Yogyakarta: Penerbit Bangkit; 2015.
- [8]. Widyana ED, Yudianti I, Widarin IE. Kadar Hemoglobin Pada Akseptor Kb Iud. MIKIA Mimb Ilm Kesehat Ibu dan Anak (Maternal Neonatal Heal Journal). 2018;1(2):56–62.
- [9]. Medika I, Suherman D. Hubungan Menoragia Dengan Kadar Hemoglobin Pada Akseptor Kb Akdr Di Desa Wangun Harja Tahun 2019. 2019;
- [10]. Revinovita. Hubungan Lama Penggunaan Intrauterine Device Dengan Kadar Hemoglobin Pada Akseptor KB IUD Di Wilayah Kerja Puskesmas Bangko Tahun 2020. Din Kesehat J Kebidanan dan Keperawatan. 2020;Vol 11 No.
- [11]. Novianti, F., & Sari IN. Hubungan Lama Menstruasi Dengan Kadar Hb Pada Akseptor Kb-Iud Di Kelurahan Tanjung Uma Kecamatan Lubuk Baja. Zo Keperawatan Progr Stud Keperawatan Univ Batam. 2018;03(8(3)):30–8.
- [12]. Jaffery SN, Mubarik F, Zubair F, Laique T. Persentase Menoragia yang Menyebabkan Anemia Defisiensi Besi pada Pengguna Intrauterine Non Hormonal. 2021;15:204–5.
- [13]. Purwoastuti, Malyani. Ilmu Obstetri & Ginekologi Sosial untuk Kebidanan. Yogyakarta: Pustaka Baru Press; 2015.