



The Effect of Soy Milk and Mung Bean Juice Consumption on Increasing Breast Milk Production in Breastfeeding Mothers

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ABSTRACT

The Banten Province Central Bureau of Statistics in 2023 recorded that the exclusive breastfeeding rate was only 72.62%. In Indonesia, 31.36% of 73.94% of children fall ill due to not receiving exclusive breastfeeding. This study aims to evaluate the effect of soy milk and mung bean juice consumption on breast milk production in breastfeeding mothers at Puskesmas Saketi in 2024. This study provides treatment to breastfeeding mothers by giving them soy milk and green bean juice, 250 ml each per day for 7 days. A quasi-experimental study with a One Group Pre and Post Test Design. The sampling technique used in this study was Saturation Sampling, where the entire population in this study was used as the sample, totaling 32 people, with a paired sample t-test. There was an effect of consuming soy milk and mung bean juice on increasing breast milk production in breastfeeding mothers at Puskesmas Saketi Pandeglang in 2024, with a p-value of 0.000 ($p < 0.05$) in the Paired Sample Test. Conclusion: The average breast milk production before consuming soy milk and green bean extract was 81.72 ml, while the average breast milk production after consuming soy milk and green bean extract for seven days increased to 122.50 ml.

Keywords: Breast Milk Production, Mung Bean Juice, Soy Milk

INTRODUCTION

Breast milk is the first natural food for babies. It provides all the energy and nutrients a baby needs during the first months of life. Breastfeeding is an excellent way to provide the ideal nutrition for the healthy growth and development of a baby (Niar et al., 2021).

Breastfeeding is the act of providing pure nutritional intake to a baby. "Pure" means that the baby is given only breast milk for the first six months without any additional fluids such as formula milk, honey, tea, water, or any complementary foods like bananas, porridge, biscuits, or soft rice. After the baby reaches six months of age, complementary foods can be introduced while continuing to provide breast milk until the age of two years (Anik Maryunani, 2021).

Exclusive breastfeeding for babies provided by mothers plays an important role in strengthening the baby's immune system, helping to prevent various diseases that could threaten the baby's health. Additionally, the most significant benefit of exclusive breastfeeding is that it supports and aids the development of the baby's brain and physical growth (Devina Devina et al., 2024).

A lack of breast milk intake in babies can lead to malnutrition. Globally, 58% of child mortality cases are caused by

malnutrition (Rauda & Harahap, 2023). According to the Central Bureau of Statistics of Banten Province in 2023, the data recorded that only 72.62% of infants received exclusive breastfeeding for less than six months. Exclusive breastfeeding plays a crucial role in maintaining health and supporting children's growth and development, helping to prevent the risk of stunting, obesity, and other chronic diseases (Dini, 2023).

One of the challenges in breastfeeding is the insufficient production of breast milk. This is in line with the statement of Jania et al. (2021) who argued that the purpose of this health education is to increase the effectiveness of exclusive breastfeeding in 4,444 mothers. Maternal efficacy is influenced by several factors, including the perception of breast milk adequacy. Perception can be influenced by a lack of knowledge or information. As many as 51.1 breastfeeding mothers have low awareness of breast milk adequacy, and as many as 58.6% have low awareness of breast milk production adequacy and energy intake of breastfeeding mothers (Jania dkk, 2022)

Breast milk production can be improved by consuming certain lactation-boosting supplements, such as extracts from katuk leaves and special powdered or liquid milk for breastfeeding mothers. However, katuk

leaves are already well known among the local community for their benefits in promoting breast milk production. On the other hand, special milk for breastfeeding mothers is often too expensive and inaccessible for the local population, and not all mothers like milk (Devina Devina et al., 2024).

A mother may not provide exclusive breastfeeding after the baby is born due to postpartum anxiety and fear, which can reduce the smooth flow of breast milk. Additionally, a lack of information about proper breastfeeding techniques can contribute to this issue. As a result, there is a decrease in oxytocin levels, leading to reduced milk production. When breast milk is not sufficiently produced, postpartum mothers may decide to replace it with formula milk for their newborns (Silaban et al., 2023)

The researcher took the initiative to introduce soy milk to the community, emphasizing that soy milk can also help improve breast milk production. Soy milk or soybeans are easy to obtain and relatively affordable. Additionally, soy milk offers several advantages: it is suitable for individuals with lactose intolerance, beneficial for people with diabetes mellitus, and easy to prepare. The supporting factor for the increase in breast milk volume is the adequate fulfillment of

the nutritional content of mung beans (Hartanti dkk, 2021). One of the nutrients found in mung beans is protein. Protein is essential for mothers during the breastfeeding period and can enhance milk secretion because its nutritional content, especially protein, contains amino acids that can stimulate breast milk secretion. The nutritional content of mung beans is quite high and has a complete composition (Yuniarti, 2020).

One way to increase breast milk production is by consuming soy milk made from soybeans. Soy milk is chosen to enhance breast milk production because soybeans contain 35% protein, which helps boost milk production (Puspitasari, 2018). Soy milk also contains isoflavones, alkaloids, polyphenols, steroids, and other substances that stimulate the hormones oxytocin and prolactin, effectively increasing and facilitating breast milk production (Miranda, 2023).

As a primary ingredient in recommended supplemental beverages, every 100 grams of soybeans contain various essential nutrients. In the form of fresh soy milk, the iron, calcium, carbohydrates, phosphorus, vitamin A, high-dose B-complex vitamins, water, and lecithin can be absorbed more efficiently by the body. Mung beans are a plant that can grow in various locations. Mung bean extract contains vitamin B1

(thiamine), which helps convert carbohydrates into energy, strengthens the nervous system, and supports breast milk production (Widia dkk, 2019). Thiamine stimulates neurotransmitter activity, sending signals to the posterior pituitary gland to release oxytocin. This hormone then triggers the contraction of smooth muscles in the mammary glands, particularly in the alveolar walls and milk ducts, facilitating milk ejection. Mung beans have a high nutritional value, providing 323 calories, 22.9 grams of protein, and 7.5 mg of iron per 100 grams, with a fat content of approximately 1-1.2% (Amalia et al., 2021).

The problem of reduced or absent breast milk production is that the baby does not receive adequate nutrition, which can interfere with their growth and development. Other impacts include a lack of emotional bonding with the mother, increased vulnerability to infections, a higher risk of non-infectious diseases, and digestive health issues. Therefore, it is crucial to enhance breast milk production (Rizqiani, 2017).

According to data from Saketi Health Center, the exclusive breastfeeding rate was 78% in 2023, with 12 cases of decreased exclusive breastfeeding recorded in November 2024. In Indonesia, the exclusive breastfeeding coverage in

2022 was only 67.96%, down from 69.7% in 2021, indicating the need for more intensive support to improve this coverage (WHO, 2023).

The national target for exclusive breastfeeding in Indonesia is 80%. However, the rate of exclusive breastfeeding at the national level is still far below the national target of 80%. According to the 2023 Indonesian Health Survey (SKI), only 55.5% of infants aged 0-6 months received exclusive breastfeeding, to increase exclusive breastfeeding rates, UNICEF and WHO urge healthcare systems to enhance support for breastfeeding mothers. High-quality breastfeeding counseling from public health professionals is essential to improving breastfeeding rates.

Based on the data above, the researcher is interested in conducting a study titled "The Effect of Soy Milk and Mung Bean Juice Consumption on Increasing Breast Milk Production in Breastfeeding Mothers at Saketi Health Center in 2024."

METHOD

This study employs a quantitative approach, utilizing a quasi-experimental method. The research design used is the One Group Pre and Post Test Design, in which the researcher conducts an initial observation (pre-test) to measure

conditions before the intervention (Soekidjo Notoatmodjo, 2018).

This allows the researcher to evaluate changes that occur after the intervention is administered (consumption of soy milk and mung bean juice). The postpartum mother population at Saketi Health Center in December consists of 32 individuals. This study provides treatment to breastfeeding mothers by giving them soy milk and green bean juice, 250 ml each per day for 7 days. This study includes all postpartum mothers in December 2024 as the sample. Since the total population is

less than 100, the sampling technique used is saturated sampling or census sampling.

RESULTS AND DISCUSSIONS

Results

Based on the research results, it can be seen that the majority of mothers, before receiving the intervention, had a breast milk production volume of less than 90 ml, totaling 21 individuals (65.6%). Meanwhile, 9 individuals (28.1%) had a breast milk volume of 90 ml, and 2 individuals (6.3%) had a volume of more than 90 ml.

Table 1. Frequency Distribution of Breast Milk Production Increase During Pre-Test at Saketi Health Center in 2024

| Pre-test | Frequency | % |
|----------|-----------|-------|
| < 90 ml | 21 | 65,6 |
| 90 ml | 9 | 28,1 |
| > 90 ml | 2 | 6,3 |
| Total | 32 | 100,0 |

Source: Primary data, 2024

Based on the research results, it was found that the majority of mothers, after receiving the intervention, experienced an increase in breast milk production volume of more than 90 ml, totaling 30 individuals

(93.8%). Meanwhile, 2 individuals (6.3%) had a breast milk volume of 90 ml, and no mothers had a breast milk production volume of less than 90 ml.

Table 2. Frequency Distribution of Breast Milk Production Increase During Post-Test at Saketi Health Center in 2024

| Post Test | Frequency | % |
|-----------|-----------|-------|
| 90 ml | 2 | 6,3 |
| > 90 ml | 30 | 93,8 |
| Total | 32 | 100,0 |

Source: Primary data, 2024

Based on the normality test results using the Shapiro-Wilk test (as the sample size is less than 50 respondents), the pre-test

significance value was 0.088, which means $sig > 0.05$, indicating that the data is normally distributed. In the post-test

results, the significance value was 0.208, where $\text{sig} > 0.05$, meaning the post-test data is also normally distributed. Therefore, the data meets the requirements for conducting a Paired Sample T-test. In this study, bivariate analysis was

conducted to determine the effect of providing soy milk and mung bean juice to breastfeeding mothers on the increase in breast milk production at Saketi Health Center in 2024. To test this, the Paired Sample T-test was used.

Table 3. The Effect of Soy Milk and Mung Bean Juice Consumption on Breast Milk Production Increase in Breastfeeding Mothers at Saketi Health Center in 2024 Using Paired Sample T-Test

| Intervention | N | Mean | Standard Deviation | Difference Mean | P Value |
|------------------------|----|--------|--------------------|-----------------|---------|
| Pretes Produksi ASI | 32 | 81,72 | 9,471 | 1,675 | 0,000 |
| Post test Produksi ASI | 32 | 122,50 | 17,086 | 3,020 | |

The average breast milk production in the pre-test was 81.72 ml, while in the post-test, it increased to 122.50 ml, indicating an increase in breast milk production between the pre-test and post-test. Based on Table 3 the test for changes in breast milk production after consuming soy milk and mung bean juice for 7 days, using the Paired Sample T-Test, resulted in a significance value of 0.000 (< 0.05).

This indicates a significant difference in breast milk production before and after the consumption of soy milk and mung bean juice in breastfeeding mothers. The response from breastfeeding mothers who consumed soy milk and mung bean juice for seven days showed not only an increase in breast milk production but also improved digestion. Therefore, the effect of soy milk and mung bean juice is highly important for breastfeeding mothers

Discussion

From the research results, the average breast milk production before the administration of soy milk and mung bean juice was 81.72 ml, with a standard deviation of 9.471. The lactation or breastfeeding process is the formation of breast milk, which involves the hormones prolactin and oxytocin. During pregnancy, prolactin levels increase, but breast milk is not yet produced due to the inhibition caused by high estrogen levels. When childbirth occurs, estrogen and progesterone levels decrease, allowing prolactin to become dominant, leading to breast milk secretion (Mirani, 2024). Age over 35 is considered a risk factor because it is closely related to nutritional anemia, which can affect breast milk production. In primiparous women over the age of 35, there is a decline in hormone production,

leading to a decrease in lactation. The best age for a mother to produce breast milk is during the reproductive health period. However, mothers outside this ideal reproductive age can still produce breast milk effectively if they maintain adequate nutrition.

Breastfeeding is influenced by the mother's age. Mothers under 20 years old are still in a growth phase, including the development of reproductive organs such as the breasts. Younger mothers are less likely to breastfeed due to social demands, emotional factors, and social pressures that can affect milk production. The ideal age for optimal breast milk production is between 20 and 35 years, as physical and emotional maturity has been established. For mothers over 35 years old, reproductive organs weaken, making exclusive breastfeeding less optimal (Sufiani et al., 2022).

According to the researcher's assumption, the findings indicate that the average breast milk production before consuming soy milk and mung bean juice was below the normal production level. This suggests that many breastfeeding mothers experience low breast milk production. Several factors contribute to low milk production, one of which is dietary intake. Mothers with low milk production may not consume enough nutrient-rich foods that

can enhance milk production. From the research results, the average breast milk production after the administration of soy milk and mung bean juice was 122.50 ml, with a standard deviation of 17.086. Breast milk production is influenced by the mother's nutritional intake, as the mammary glands cannot function optimally without sufficient food intake. To ensure adequate milk production, mothers need to consume foods that contain calories, protein, fat, vitamins, and minerals in sufficient amounts. Additionally, it is recommended to drink 8–12 glasses of water per day to support smooth milk production (Arvianti, 2018).

A good breastfeeding frequency is around 10 to 12 times per day, or at least 8 times per day, with each breastfeeding session lasting 10 to 20 minutes per breast. The interval between feedings should be approximately one and a half to two hours. The criteria for successful breastfeeding can be observed through several signs: the baby appears satisfied after feeding, sleeps soundly, does not cry, looks healthy, and gains approximately 500 grams of weight each month (Yulianto et al., 2022).

According to the researcher's assumption, the findings show that the average breast milk production increased significantly after consuming soy milk and mung bean juice. This indicates that consuming

protein and isoflavones, which are found in soy milk and mung bean juice, is effective in enhancing breast milk production, leading to a notable increase compared to before the consumption of these beverages.

The research findings indicate that the test for changes in breast milk production after consuming soy milk and mung bean juice for seven days, using a paired sample t-test, resulted in a significant value of 0.000 (<0.05). This means that there was a notable difference in breast milk production before and after consuming soy milk and mung bean juice. Based on this data, it can be concluded that soy milk and mung bean juice consumption positively influences breast milk production in breastfeeding mothers.

Mothers who have just given birth produce less breast milk, so their babies may not receive enough. Soy extract is commonly known as soy milk. For individuals allergic to animal protein, soy milk can be used as a substitute for cow's milk because its amino acid composition is nearly identical or the same. (Febby, 2024)

Soy milk and mung bean juice are beneficial for increasing breast milk production in nursing mothers. It can be consumed once a day for seven days, with a recommended intake of 250cc per serving (Juliani et al., 2023). Soy milk,

derived from soybean extract, contains numerous nutrients and offers various health benefits. Compounds such as alkaloids, polyphenols, steroids, flavonoids, and other nutrients in soybeans help stimulate oxytocin and prolactin hormones, making it effective in increasing and facilitating breast milk production. Isoflavones, also known as phytoestrogen hormones, resemble natural estrogen hormones in the body. These compounds help enhance breast milk production by stimulating the mammary glands in breastfeeding mothers (Sufiani et al., 2022).

Mothers who regularly consume nuts during pregnancy and throughout the delivery process produce breast milk in greater volume—twice as much—and with a thicker consistency compared to mothers who do not regularly consume nuts during this period. The nutrients in nuts help support fetal growth in pregnant women and optimize breast milk production as well as its color intensity in breastfeeding mothers. Green bean extract is not a cure for breast milk engorgement, but it can aid in the healing process. Therefore, green bean extract can be an alternative remedy for breast milk engorgement and insufficient or slow milk production (Nasution, 2022).

This is also supported by research conducted by Puspitasari (2018) which found that mothers who consume soybean-based foods, including soy milk and other soy products, are believed to increase isoflavone levels in breast tissue. Regular consumption of soy can have positive health effects, including the prevention of breast cancer (Puspitasari, 2018). According to the researcher's assumption, the findings suggest that soy milk and mung bean juice consumption significantly affects breast milk production in nursing mothers.

This conclusion is supported by the observed increase in milk production before and after intervention. The nutrients in soybeans and mung beans effectively stimulate breast milk production, reinforcing the importance of consuming these beverages.

Encouraging mothers to drink soy milk and mung bean juice can help sustain breast milk production, allowing them to breastfeed exclusively for six months and continue up to two years. This practice may help reduce the risk of stunting in children, strengthen the bond between mother and baby, and protect infants from various diseases.

The results of this study are supported by research conducted by Mirani (2024), which found that the statistical test results

for examining the difference in breast milk volume before and after consuming mung bean juice, using a pretest and posttest in the treatment group, showed a p-value of 0.012.

This indicates a significant difference in breast milk volume between the pretest and posttest in the treatment group after consuming mung bean juice, as the significance value obtained was < 0.05 . It can be concluded that there is an effect of consuming mung bean juice on the increase in breast milk production. In line with the research conducted by Dini (2023), there is a difference in the effectiveness of providing soy milk and mung bean juice, with a significance result of 0.046 or $\text{sig} < 0.05$.

CONCLUSION

Based on the research conducted on the effect of soy milk and mung bean juice consumption on increasing breast milk production in postpartum mothers at Saketi Health Center, Pandeglang, in 2024, the findings are as follows:

- a. The average breast milk production before consuming soy milk and mung bean juice was 81.72 ml.
- b. The average breast milk production after consuming soy milk and mung bean juice for seven days increased to 122.50 ml.

- c. The study found a significant increase in breast milk production among postpartum mothers after consuming soy milk and mung bean juice at Saketi Health Center, Pandeglang (p = 0.000). It is recommended for breastfeeding mothers experiencing decreased breast milk production to consume soy milk and mung bean juice, each 250ml once a day for 7 days, as a preventive alternative.

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