



THE EFFECT OF PRENATAL YOGA ON ANXIETY IN PREGNANT WOMEN IN THE THIRD TRIMESTER LITERATURE REVIEW

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ABSTRACT

Anxiety is one of the psychological disorders often experienced by pregnant women, especially in the third trimester. If left untreated, anxiety can have a negative impact on the physical and mental health of the mother and the development of the fetus. One non-pharmacological approach that is considered effective in reducing pregnancy anxiety is prenatal yoga. This study aims to examine the effect of prenatal yoga on the level of anxiety of pregnant women in the third trimester through a literature review method, referring to scientific literature from 2020 to 2025 with data sources obtained from national and international journal articles. PICOS approach, by reviewing 13 articles from various trusted sources such as Google Scholar, Semantic Scholar, Research Gate, and Garuda Kemdikbud, and selected databases that have been indexed at the national and international levels, such as Sinta 1, 2, 3, 4, Scopus, and Index Copernicus International (ICI). Based on Table 4, 13 articles showed that there was a relationship between prenatal yoga and anxiety with a value of ($p = <0.05$) with the most frequent practice being 4 times a month (once a week) with a duration of 60 minutes. The findings from this literature review indicate that routine prenatal yoga can reduce the level of anxiety of pregnant women, improve sleep quality, and increase emotional readiness before childbirth. In addition, prenatal yoga exercises have also been shown to improve maternal connection with the fetus, stabilize emotions, and help reduce physical stress that arises due to physiological changes during pregnancy. Prenatal yoga is one of the non-pharmacological methods that is effective in reducing anxiety levels in pregnant women in the third trimester, it is recommended that health workers, especially midwives, encourage the implementation of prenatal yoga as part of education and health promotion for pregnant women.

Keywords: pregnancy anxiety; pregnant women; prenatal yoga

INTRODUCTION

Anxiety is one form of psychological disorder that is often experienced by pregnant women. This psychological disorder can appear from the first trimester of pregnancy to the third trimester, but generally the level of anxiety tends to be higher in the third trimester compared to the previous two trimesters (Setiyarini and Rahmawati., 2024). During pregnancy, pregnant women face various changes, both in their bodies and in their emotional (psychological) state. These various changes are a form of adaptation that mothers must go through during pregnancy. These conditions often cause physical discomfort, compounded by concerns about the delivery process, the condition of the baby at birth and after birth, and readiness to become a mother. All of these changes take place gradually over the nine months of pregnancy. One common psychological aspect is increased anxiety, which tends to increase as the delivery date approaches (Maryati et al., 2021). If pregnancy anxiety is not properly addressed, it can lead to postpartum depression (Charla., 2019). Pregnant women lack understanding of the fact that the anxiety they experience during pregnancy can actually be prevented or minimized (Hidayatillah, Pamungkas, and Olinda., 2023).

Anxiety and depression during the perinatal period are common mental health conditions. In high-income countries, approximately 1 in 10 women experience mental disorders. Meanwhile, in low- and middle-income countries, approximately 1 in 5 women experience similar conditions (mental disorders) during pregnancy and within one year after giving birth. Anxiety and depression during the perinatal period are common mental health problems (World Health Organization., 2023). In Indonesia, approximately 43.3% of pregnant women are known to experience anxiety during pregnancy. As many as 48.7% of pregnant women feel anxious before giving birth, and around 20% to 30% report experiencing severe anxiety disorders during pregnancy (Kementerian Kesehatan Republik Indonesia., 2022).

During pregnancy, anxiety levels in pregnant women can be influenced by various factors, such as the mother's age, level of education achieved or pursued, number of previous children (parity), and knowledge related to pregnancy (Hidayathillah et al., 2023). Other factors include lack of support from the husband, not participating in prenatal exercises, pregnancies that are too close together, previous pregnancy experiences, increasing gestational age and approaching delivery, and cultural beliefs or myths that are still prevalent in society, which can contribute to anxiety (Yanti, Utami, and Maulina., 2020). Anxiety in pregnant women is also often triggered by a lack of understanding about pregnancy and low levels of support from family, social circles, and society. Another contributing factor is the presence of health disorders or illnesses experienced by the mother, which can cause concern for her own well-being and that of the fetus (Muzayyana and Saleh., 2021).

Anxiety during pregnancy is not something that can be ignored, as it can affect the health of both the mother and the baby. Mental health disorders that occur during the perinatal period are also associated with a threefold increase in the risk of violence. Furthermore, anxiety that is not addressed early on risks developing into perinatal depression and may potentially increase the risk of premature birth and low birth weight babies (Savitri, Hayati, and Daryanti., 2022). Excessive anxiety in pregnant women can have a negative impact on the pregnancy process, one of which is by triggering unexpected uterine contractions. This condition can lead to miscarriage and high blood pressure, which can then trigger preeclampsia, a pregnancy complication characterized by hypertension in the final trimester or during childbirth. Additionally, anxiety can also trigger sleep disturbances caused by hormonal changes, abdominal enlargement, and increased frequency of urination in pregnant women. Thoughts about the painful childbirth process and increased stress also play a role, which ultimately can affect the mother's immune system and overall well-being (Eka, Debby, and Ariska., 2020).

Anxiety during pregnancy can be reduced through various non-pharmacological methods, such as classical music therapy (Haeriyah, Winarni, and Agustin., 2024), acupressure therapy (Sri et al., 2022), the effectiveness of lavender aromatherapy (Nila, Kristiningrum, and Afriyani., 2019), and hypnobirthing (Zartasha et al., 2024). One method that is now widely used is prenatal yoga, a non-pharmacological approach that has been proven effective in preventing and relieving anxiety in pregnant women in the third trimester. Through prenatal yoga, pregnant women can achieve mental and emotional balance by reducing anxiety levels (Fauziah et al., 2016). Prenatal yoga also contributes to increasing comfort for pregnant women, reducing pain, and supporting better pregnancy outcomes (Kartini., 2023).

Previous research conducted by Olga, Patricia, and Javier (2023) in Spain showed that a significant majority (93%) experienced a reduction in symptoms of anxiety, depression, and stress, indicating the positive impact of prenatal yoga on mental health during pregnancy. According to another study in China, practicing prenatal yoga is effective as a preventive measure against anxiety, mental instability, and related problems during pregnancy, especially for women experiencing mild to moderate depression (Miao et al., 2023). Ministry of Health Regulation No. 28 of 2017 authorizes midwives to provide comprehensive care to pregnant women, including health education that can support the well-being of mothers during pregnancy. The goal is to leverage prenatal yoga, a modality of health education, to effectively improve the mental and physical status of pregnant women, thereby ensuring better readiness for delivery. Based on this, the author wishes to conduct a literature study on “The Effect of Prenatal Yoga on Anxiety in Pregnant Women in the Third Trimester.”

METHOD

The method used in this literature review was to search for the results of previous studies. The literature search was conducted from January to April 2025. The data used in this study was not data obtained from direct observation, but rather data obtained from the results of studies conducted by previous researchers. The secondary data sources obtained were reputable national and international articles with predetermined themes. The keywords used were additional words (AND and OR) to specify the search process, thereby making it easier for researchers to determine articles that were relevant to the topic. In this literature review, researchers used the keywords “Prenatal Yoga AND Pregnancy Anxiety” and “Prenatal Yoga OR Pregnancy Anxiety.”

The data sources obtained in this study were from national and international journals, consisting of three databases, namely Google Scholar, Semantic Scholar, Research Gate, and Garuda Kemdikbud, with the condition that the articles searched for were published in the last five years, around 2020-2025. These databases were searched using national and international indexes such as Sinta 1, 2, 3, and 4, Scopus, and ICI (Index Copernicus International). This Literature Review study was limited by inclusion and exclusion criteria to focus the journals on the specified theme. The strategy used to determine the criteria was the PICOS method, namely:

Table 1.

PICOS Inclusion and Exclusion Criteria

Criteria	Inclusion	Exclusion
<i>Population</i>	Pregnant Woman	Mothers with preeclampsia, mothers with postpartum depression
<i>Intervention</i>	Prenatal Yoga	-
<i>Comparison</i>	There is a comparison with Pregnancy Exercises	-
<i>Outcome</i>	Anxiety	-
<i>Studies</i>	Quantitative	Systematic literature review dan Meta Analisis
<i>Publication Year</i>	2020 – 2025	-
<i>Language</i>	English and Indonesian	-

In this literature review, the search and selection of studies were conducted by searching for data based on keywords that had been created through databases such as Google Scholar, Semantic Scholar, Research Gate, and Garuda Kemdikbud. A total of 2,783 articles were obtained from these databases. Selection was based on the year of publication, namely around 2020-2025, and the articles were in Indonesian or English, with a total of around 40 articles obtained. The researchers reselected articles that contained full text rather than articles that only contained reviews, resulting in a total of 13 articles from various databases. The final result was 13 articles that met the inclusion and exclusion criteria.

RESULT

This literature review analyzes data from various previous studies to identify key findings related to the effects of prenatal yoga on anxiety in pregnant women in the third trimester.

Article Characteristics

Tabel 2.
Characteristics of Articles

No	Researcher Name, year	Article Title	Location	Research Method	Sampling Techniques	Quality Assessment (0-9 points)
1.	(Natsir et al., 2024)	<i>Efektivitas Prenatal Yoga Terhadap Tingkat kecemasan Ibu Hamil Trimester III Di TPMB Hj. A. Nani Nurcahyani Kota Makassar</i>	Indonesia	Pre eksperimental one group pretest posttest design	<i>Kriteria inklusi dan eksklusi</i>	8
2.	(Indrayani dan Legiati., 2021)	<i>Prenatal Yoga membantu Mengurangi Kecemasan Ibu dalam menghadapi proses Persalinan.</i>	Indonesia	Quasi eksperimen Pretest- Posttest control group design.	Simple random sampling	9
3.	(Utami and Zolekhah., 2021)	The impact of relaxation in prenatal yoga on anxiety levels in pregnant women	Indonesia	<i>Quasi eksperimen dengan pendekatan pre and post test design.</i>	Purposive sampling	8
4.	(Kurniawati, Asmarani and Muthoharoh., 2024)	The Effectiveness of Prenatal Yoga in Reducing Anxiety in Third-Trimester Pregnant Women Facing Childbirth	Indonesia	Pre-eksperimental (one group pre test and post test design)	Purposive sampling	8
5.	(Ginting et al., 2022)	<i>Hubungan Prenatal Yoga Terhadap Pengurangan Tingkat Kecemasan Pada Ibu Hamil</i>	Indonesia	<i>Quasi experimental Design dengan pendekatan non equivalent control group design.</i>	Purposive sampling	8
6.	(Veftisia and Afriyani., 2021)	Effects Of Prenatal Yoga On Maternal Anxiety	Indonesia	<i>Quasi Eksperimen dengan pendekatan Pretest- Posttest Design</i>	Purposive random sampling	8
7.	(Amalia, Rusmini dan Yuliani., 2020)	<i>Prenatal Yoga Terhadap Tingkat Kecemasan Primigravida Trimester III</i>	Indonesia	<i>Quasy eksperimental dengan pendekatan pretest posttest design.</i>	-	8

8.	(Apsari et al., 2021)	<i>Perbedaan Tingkat Kecemasan Pada Ibu Hamil Trimester Ketiga Yang Mengikuti Dengan Yang Tidak Mengikuti Prenatal Yoga Di Kabupaten Gianyar.</i>	Indonesia	<i>Observasi analitik komperatif dengan metode pendekatan cross sectional</i>	Purposive sampling	8
9.	(Wahyuni, Kirana dan Hayati., 2023)	<i>Prenatal Yoga Mengurangi Kecemasan Ibu Hamil Primi Gravida Dalam Menghadapi Persalinan</i>	Indonesia	Quasi Eksperimen one group pre-post test	-	8
10.	(Situmorang, Rossita dan Rahmawati., 2020)	<i>Hubungan Senam Prenatal Yoga dengan Tingkat Kecemasan Ibu Hamil Primigravida Trimester III</i>	Indonesia	<i>Kuantitatif bivariat dengan pendekatan Quasy Eksperimenpre pre post test with one group design</i>	Purposive sampling	8
11.	(Novianti et al., 2024)	<i>The Impact of Prenatal Yoga on Anxiety Levels in Third – Trimester Primigravida Mothers: A Pre-Experimental Study.</i>	Indonesia	<i>Pre-Experimental Design dengan pendekatan One Group Pretest-Posttest Design.</i>	Total sampling	9
12.	(Atunisa, Suprihatin and Siauta., 2024)	<i>The Effect of Prenatal Yoga on Pregnant Women's Anxiety in Facing Labour</i>	Indonesia	<i>Eksperimen semu dengan desain kelompok kontrol non-ekuivalen.</i>	<i>Purposive sampling</i>	8
13.	(Jiang et al., 2025)	<i>The Impact of Prenatal Yoga Exercise on the Stress Levels, Psychological Resilience, Distribution of the Second Stage of Labor, and Pregnancy Outcomes in Pregnant Women</i>	China	Studi kohort retrospektif	-	9

Table 2 shows that 13 articles were conducted in Indonesia, with the most dominant research method in this literature review being quasi-experimental with a pre- and post-test design. The sampling techniques most commonly used in this literature review were purposive sampling and total sampling. Quality assessment in this literature review aimed to determine the quality of the research articles found. Based on the 13 selected articles, most articles with a score of 8

were classified as high quality, meaning that these articles are of high quality and very good for review.

Anxiety in Pregnant Women in the Trimester III

Tabel 3

Anxiety in Pregnant Women During the First Trimester III

Researcher Name, Year	Instrument Used	Results
(Natsir <i>et al.</i> , 2024)	Hamilton Anxiety Rating Scale Questionnaire (HARS)	Anxiety decreased from 23.65% before the prenatal yoga intervention to 9.09%.
(Indrayani dan Legiati., 2021)	Hamilton Anxiety Rating Scale Questionnaire (HARS)	Anxiety decreased from 99.1% before the prenatal yoga intervention to 91.8%.
(Utami and Zolekhah., 2021)	Hamilton Anxiety Rating Scale Questionnaire (HARS))	Anxiety decreased from 57.5% before the intervention to 36.4%.
(Kurniawati, Asmarani and Muthoharoh., 2024)	State-Trait Anxiety Inventory (STAI)	This shows that all pregnant women in their third trimester before doing prenatal yoga experienced moderate anxiety with a frequency of 100% and after doing prenatal yoga experienced mild anxiety with a frequency of 100%.
(Ginting <i>et al.</i> , 2022)	-	Anxiety decreased from 49.39% before the prenatal yoga intervention to 43.12%.
(Veftisia and Afriyani., 2021)	Hamilton Anxiety Rating Scale Questionnaire (HARS)	Anxiety decreased from 20.23% to 14.98% after performing routine prenatal yoga for 4 weeks.
(Amalia, Rusmini dan Yuliani., 2020)	Hamilton Anxiety Rating Scale Questionnaire (HARS)	Anxiety decreased from 24.92% before the prenatal yoga intervention to 13.62% after the intervention.
(Apsari <i>et al.</i> , 2021)	Depression Anxiety Stress Scale 42 (DASS 42)	No data available.
(Wahyuni, Kirana dan Hayati, 2023)	Perinatal Anxiety Screening Scale Questionnaire (PASS)	Anxiety decreased from 34.50% before the prenatal yoga intervention to 24.92%.
(Situmorang, Rossita dan Rahmawati, 2020)	Hamilton Anxiety Rating Scale Questionnaire (HARS)	The results before and after the prenatal yoga intervention were 54.6% to 72.2%.
(Novianti <i>et al.</i> , 2024)	PRAQ-R2 Questionnaire (Pregnancy-Related Anxiety Questionnaire - Revised)	Moderate anxiety levels in pregnant women in their third trimester III decreased from 70.4% to 37.0% after receiving prenatal yoga intervention.
(Atunisa, Suprihatin and Siauta, 2024)	Perinatal Anxiety Screening Scale Questionnaire (PASS)	Anxiety decreased from 36.24% before to 25.24% after prenatal yoga.
(Jiang <i>et al.</i> , 2025)	Psychological Stress of Pregnancy Scale Questionnaire (PSRS)	Stress levels decreased from 121.02% before to 96.95% after the prenatal yoga intervention.

Based on Table 3, prenatal yoga intervention was proven to be effective in reducing anxiety levels in pregnant women. Most studies used the Hamilton Anxiety Rating Scale (HARS) questionnaire to measure anxiety levels. The average anxiety level before the prenatal yoga intervention was 53.2%, and it decreased to 43.49% after the intervention, with the most significant change seen in the group experiencing severe anxiety.

The Relationship Between Prenatal Yoga and Anxiety During the First Trimester of Pregnancy III

Table 4, 13 articles showed that there was a relationship between prenatal yoga and anxiety with a value of ($p = <0.05$) with the most frequent practice being 4 times a month (once a week) with a duration of 60 minutes.

Tabel 4.
The Relationship Between Prenatal Yoga and Anxiety During the First Trimester of Pregnancy III

Researcher Name, Year	Frequency	Results	Conclusion
(Natsir <i>et al.</i> , 2024)	Performed eight times.	The results obtained show that the significance value in the pretest group was 0.165 ($P > 0.05$) and in the post-test group was 0.137 ($P > 0.05$), proving that the data was normally distributed.	Although the significance value shows $P > 0.05$, prenatal yoga has been proven to be successful in reducing anxiety levels in pregnant women in their third trimester.
(Indrayani dan Legiati., 2021)	Performed seven times in one week (daily training).	Prenatal yoga can significantly reduce anxiety levels in primigravida pregnant women in the third trimester, with a value (p value = 0.0001 < $\alpha = 0.05$).	The practice of prenatal yoga shows a significant relationship in reducing anxiety in pregnant women who are facing the process of childbirth. With (p value = < $\alpha = 0.05$).
(Utami and Zolekhah., 2021)	-	Prenatal yoga has been proven to be effective in reducing anxiety in pregnant women who are preparing for childbirth. Based on the results of the chi-square test, a p-value of <0.001 was obtained with an RR Score of = 5.64 at 95% CI 1.99-15.93, indicating that relaxation techniques in prenatal yoga significantly contribute to reducing anxiety ($p < 0.05$).	There is a significant relationship and effect between prenatal yoga practice and decreased anxiety levels in pregnant women when facing childbirth ($p < 0.05$).
(Kurniawati, Asmarani and Muthoharoh., 2024)	-	All respondents experienced a decrease in anxiety levels from moderate to mild after participating in prenatal yoga sessions. The analysis results showed an Asymp sig (2-tailed) value of (0000 < 0.05), indicating a significant correlation between prenatal yoga and reduced anxiety in pregnant women approaching childbirth	There is a significant relationship ($p = 0 < 0.05$), which shows that prenatal yoga is effective in reducing anxiety levels in pregnant women.
(Ginting <i>et al.</i> , 2022)	-	In the group that participated in prenatal yoga and pregnancy exercises, the significance was 0.000, which means that prenatal yoga and pregnancy exercises had a significant difference in average anxiety levels before and after participating in the exercises. This shows that both prenatal yoga and pregnancy exercises significantly affect anxiety reduction ($p = < 0.05$).	There is a significant relationship between prenatal yoga and a decrease in anxiety levels in pregnant women ($p = 0 < 0.05$).
(Veftisia and Afriyani., 2021)	Performed four times in one month (once a week).	Prenatal yoga conducted for two weeks did not have a significant effect on anxiety ($p = 0.893$). However, after four weeks, this exercise proved to be effective in reducing anxiety levels ($p = 0.003$).	There is a relationship that prenatal yoga is effective in reducing anxiety in pregnant women after being practiced for four weeks ($p = 0.003$).
(Amalia, Rusmini dan Yuliani., 2020)	Performed once a week for one month, with each session lasting 60 minutes.	here was a significant difference in anxiety levels in primigravida pregnant women in the third trimester before and after participating in prenatal yoga, with a p-value of 0.000 ($p < 0.05$). In addition, there was also a significant change in sleep quality before and after doing prenatal yoga, with a p value= 0,000 ($p < 0,05$).	There is a significant relationship between prenatal yoga and a reduction in anxiety in primigravida pregnant women in the third trimester, with a value of ($p = 0.000$).
(Apsari <i>et al.</i> , 2021)	Performed six times in one month, each session lasting 60 minutes.	There was a significant difference in anxiety levels between pregnant women in their third trimester who participated in prenatal yoga and those who did not, with the analysis results showing ($p < 0.05$).	The anxiety levels of pregnant women in their third trimester who practiced prenatal yoga were significantly lower than those who did not, indicating that

Researcher Name, Year	Frequency	Results	Conclusion
(Wahyuni, Kirana dan Hayati., 2023)	Performed four times in two weeks, with a duration of 1 hour per session.	Prenatal yoga has been proven to reduce anxiety in primigravida mothers approaching childbirth, with a value of ($p < 0.005$).	There is a significant relationship between prenatal yoga practice and reduced anxiety in primigravida mothers in facing the delivery process ($p < 0.005$).
(Situmorang, Rossita dan Rahmawati., 2020)	Performed six times in three weeks, with a duration of 60 minutes per session.	Prenatal yoga is effective in reducing anxiety in primigravida pregnant women, showing a significant difference between prenatal yoga practice and anxiety levels in primigravida pregnant women in the third trimester III ($p = 0,000$).	There is a significant relationship between prenatal yoga and reduced anxiety levels in primigravida pregnant women ($p = 0.000$).
(Novianti <i>et al.</i> , 2024)	Conducted eight times, each session lasting 60 minutes.	There is a significant effect of prenatal yoga on reducing anxiety in primigravida pregnant women in the third trimester. III after participating in the prenatal yoga program ($p = 0 < 0,05$).	Prenatal yoga has a significant effect on anxiety levels in primigravida pregnant women in the third trimester ($p = 0 < 0.05$).
(Atunisa, Suprihatin and Siauta., 2024)	Conducted once a week for one month, with each session lasting 60 minutes.	There is a significant difference between the anxiety levels of pregnant women before and after doing prenatal yoga, with a p-value of 0.000.	Prenatal yoga was proven to be effective in reducing anxiety in pregnant women, with a significant difference between the conditions before and after participating in the exercise ($p = 0 < 0.05$).
(Jiang <i>et al.</i> , 2025)		After the intervention, the stress levels of pregnant women who participated in prenatal yoga decreased significantly ($p < 0.05$).	There was a significant relationship between a decrease in stress levels and an increase in psychological resilience in pregnant women who participated in prenatal yoga ($p < 0.05$).

DISCUSSION

Respondent Characteristics

This literature review accessed many sources from various accredited journals. However, this literature review was limited to journals indexed nationally and internationally.

Overview of Perineal Massage

Based on this literature review, it appears that most mothers who practice prenatal yoga experience a decrease in anxiety levels. Although anxiety may still arise, it is generally only mild. This indicates that prenatal yoga has significant benefits, as it can help pregnant women become calmer, more relaxed, and mentally prepared to face the delivery process (Kurniawati, Asmarani dan Muthoharoh., 2024). The pre-test and post-test results show a difference in anxiety levels before and after participating in prenatal yoga. Based on the data in the frequency distribution table, the percentage of pregnant women experiencing moderate anxiety decreased from 70.4% to 37.0% after undergoing prenatal yoga. Thus, it can be concluded that prenatal yoga has a significant effect in reducing anxiety levels in primigravida pregnant women in the third trimester (Novianti *et al.*, 2024). Perineal massage (PM) has emerged as a significant non-pharmacological intervention within contemporary antenatal care, primarily aimed at

optimizing the elasticity and compliance of the perineal tissues to mitigate the risk of trauma during vaginal delivery. This practice, typically initiated late in the third trimester (generally from 34 to 36 weeks of gestation), involves manual stretching and gentle friction applied to the perineum the musculature and skin located between the posterior fourchette and the anus. The core objective of PM is to acclimatize the tissues to the significant distension that occurs as the fetal head crowns, thereby aiming to reduce the incidence of severe perineal lacerations and the need for episiotomy. (Dwilda et al; 2022)

A substantial body of meta-analytic evidence, particularly drawn from Cochrane reviews, consistently supports the beneficial role of PM, especially for primiparous women (first-time mothers). For this cohort, regular prenatal PM has been demonstrated to significantly decrease the overall risk of sustaining a third- or fourth-degree perineal tear (severe lacerations involving the anal sphincter complex). This reduction is crucial, as severe perineal trauma is associated with significant maternal morbidity, including chronic pain, dyspareunia, and long-term anal incontinence, which profoundly impacts quality of life. The proposed mechanisms of action for PM are multi-faceted. Physiologically, the repetitive stretching facilitates the rearrangement of collagen fibers within the connective tissue, potentially promoting greater extensibility. Furthermore, the practice may induce mild edema and increased blood flow to the region, contributing to tissue pliability. The sensory component is equally important: PM serves as a form of desensitization, preparing the mother for the intense stretching sensation often described during the "ring of fire" phase of crowning. This desensitization can potentially decrease involuntary muscle guarding and tension during labor, allowing for smoother, less traumatic distension of the pelvic floor. While the evidence is strongest for nulliparous women, studies also suggest that multiparous women (those who have previously given birth) may benefit from PM in terms of a reduced need for therapeutic episiotomies, although the reduction in severe tears is less pronounced compared to first-time mothers. The recommended protocol for effective PM typically involves a frequency of three to four times per week, with sessions lasting approximately five to ten minutes. Techniques often involve the use of lubrication and focused pressure directed laterally and inferiorly within the introitus.

The implementation of PM is considered a low-risk, high-benefit self-care strategy. It empowers the pregnant individual by fostering active participation in their birth preparation. This empowerment and the development of body awareness are recognized psychological benefits that contribute to reduced birth-related anxiety, aligning with the benefits observed in practices like prenatal yoga.(Gupta; 2020). Despite its documented efficacy, adherence to PM protocols can be variable. Challenges often cited include discomfort during the procedure, practical difficulties in self-administration, and lack of consistent guidance from healthcare providers. Consequently, the role of partners in performing the massage has been identified as a critical factor in enhancing compliance.(Abdel-Latif, A. M., et al. 2020)

Future research needs to focus on optimizing the timing and duration of PM, standardizing the specific techniques used, and exploring the synergistic effects of PM when combined with other pelvic floor muscle training and relaxation methods. The ultimate goal is to integrate PM seamlessly into evidence-based maternity guidelines, ensuring that this simple yet powerful intervention is routinely offered to all expectant mothers to promote optimal maternal outcomes and reduce long-term pelvic floor dysfunction. The sustained practice of PM represents a

proactive approach to promoting perineal health, reflecting a move toward preventative maternal healthcare.

Overview of Perineal Laceration

The frequency and duration of yoga practice play a very important role in the effectiveness of reducing anxiety levels. Research conducted by (Indrayani and Legiati, 2021) and (Veftisia and Afriyani, 2021) shows that the more often prenatal yoga is practiced, especially if done consistently for at least four weeks, the more significant its effect on reducing anxiety will be. This confirms that consistency in practicing prenatal yoga is a key factor in achieving optimal results. In their study, Natsir et al. (2024) stated that prenatal yoga is effective in reducing anxiety levels in pregnant women in their third trimester. This means that practicing prenatal yoga has been proven to help reduce anxiety effectively during this period. These results confirm that prenatal yoga plays an important role in helping pregnant women manage anxiety, which has a positive impact on their health and well-being during pregnancy.

CONCLUSION

From a literature review describing the effects of prenatal yoga on anxiety in pregnant women in the third trimester, several conclusions can be drawn, namely: Most of the respondents in this literature review were aged 20–35 years, primigravida, and working mothers. Anxiety levels in pregnant women in the third trimester who practiced prenatal yoga decreased. There is a correlation between the practice of prenatal yoga and anxiety levels in pregnant women in the third trimester III. Health Care Professionals (HCPs) should acknowledge prenatal yoga not merely as a recreational activity, but as an evidence based therapeutic intervention for managing antenatal anxiety. To effectively implement these recommendations, HCPs should establish collaborative relationships with certified prenatal yoga instructors, ensuring that the instruction provided is safe, evidence-informed, and adapted for the physiological changes of late pregnancy. In summary, prenatal yoga represents a low-risk, high-impact tool that HCPs must actively integrate into comprehensive third-trimester care to promote maternal mental well-being and foster a calmer, more positive transition toward childbirth.

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