

ABSTRAK

Latar Belakang: *Sectio Caesarea* merupakan Tindakan bedah yang sering menimbulkan nyeri pasca operasi; protocol *Enhanced Recovery After Caesarean Surgery* (ERACS) dikembangkan untuk mengoptimalkan pemulihan dan control nyeri. **Tujuan:** Menganalisis perbedaan Tingkat nyeri pasca SC antara metode ERACS dan metode Konvensional di RS Hermina Arcamanik. **Metode:** studi Cross Sectional pada 116 ibu (58 ERACS; 58 Konvensional) di rawat inap *Obgyn*, September-Oktober 2025. Intensitas nyeri dinilai pada 12-48 jam pasca operasi menggunakan *Numeric Rating Scale* (NRS). Uji *Mann Whitney* digunakan untuk membandingkan Tingkat nyeri antar kelompok. Hasil: kelompok ERACS menunjukkan proporsi nyeri ringan lebih tinggi (75,9%) dibanding konvensional (29,3%); nyeri sedang 20,7% pada ERACS dan 53,4% pada konvensional; nyeri berat 3,4% pada ERACS dan 17,2% pada konvensional. Uji Mann-Whitney menunjukkan perbedaan bermakna Tingkat nyeri antara ERACS dan konvensional ($p=0,001$). **Kesimpulan:** Penerapan ERACS terbukti menurunkan intensitas nyeri dalam 12-48 jam pertama pasca SC dibandingkan metode konvensional, sehingga mendukung pemulihan yang lebih baik dan dapat direkomendasikan sebagai standar tata laksana perioperatif SC.

Kata Kunci: *Sectio Caesarea*, ERACS, Nyeri Pasca Operasi, *Numeric Rating Scale*.

ABSTRACT

Background: Caesarean Section (CS) is a common surgical procedure often associated with significant post operative pain. The enhanced recovery after caesarean surgery (ERACS) protocol was developed to optimize recovery and pain control. **Objective:** to analyze differences in post operative pain intensity between ERACS and conventional care following CS at Hermina Arcamanik Hospital. **Methods:** A cross-sectional comparative study of 116 post partum mothers (58 ERACS; 58 conventional) in the Obstetrics and Gynecology inpatient ward, conducted from September to October 2025. Pain intensity at 12-48 hours post-surgery was assessed using the Numeric Rating Scale (NRS). The Mann Whitney test was used to compare pain levels between groups. **Results:** the ERACS group showed a higher proportion of mild pain (75,9%) than the conventional group (29,3%); moderate pain was 20,7 % in ERACS and 53,4% in conventional; severe pain was 3,4% in ERACS and 17,2% in conventional. The Mann-Whitney test indicated a significant difference in pain intensity between groups ($p=0,001$). **Conclusion:** ERACS reduces pain intensity within the first 12-48 hours after CS compared with conventional care, support faster recovery, and is recommended as a perioperative standard for CS.

Keywords: Caesarean Section, ERACS, Postoperative Pain, Numeric Rating Scale.