

Vol. 01, No. 1, December 2024, 10-21 *e-*ISSN: 3089-672X

The Effect of Pilates Exercise on Reducing Menstrual Pain in Adolescents: Literature Study

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Article Information

Received: October 23, 2024 Revised: December 27, 2024 Online: January 21, 2025

Keywords

Dysmemorrhea, Pilates Exercise, Menstrual Pain

ABSTRACT

Dysmenorrhea, or menstrual pain, is common among adolescents, with global prevalence rates reaching 59.7% to 92%. This pain, affecting the lower abdomen, back, and groin, usually begins 24 hours before menstruation and can last up to three days. Management includes pharmacological options like NSAIDs and analgesics, as well as non-pharmacological approaches. Pilates exercise is a practical, non-drug option shown to reduce menstrual pain by stimulating endorphin production, providing a natural sense of relief and comfort. Purposes: The goal of this study is to ascertain whether Pilates exercises can help adolescents who are experiencing menstrual pain. Methods: The design of this study is a literature review. Search for published articles on Google Scholar, Pubmed and GARUDA with the keywords "Pilates Exercise", "Dysminorhea / Menstrual pain". Of the three databases found 446 articles, executed as many as 432 because they did not match the research variables so that 9 articles were obtained to be read in full and 5 articles were found that met the criteria. Results: The results of the literature review of 5 literature studies conducted stated that there was an effect of pilates exercise on reducing menstrual pain in adolescents. *Implications*: Pilates exercise can be an effective and safe non-pharmacological treatment alternative to reduce menstrual pain in adolescent girls. Conclusion: It is hoped that pilates exercises can be recommended as an effective method in efforts to reduce menstrual pain in adolescents.

Keywords: Dysmemorrhea, Pilates Exercise, Menstrual Pain





INTRODUCTION

Adolescence is a process of maturation marked by various changes such as physical, psychological, hormonal and the process of maturation of the reproductive system called puberty. When reaching adolescence, one of the things that indicates puberty in women is menstruation. Menstruation is the process of shedding the endometrium wall accompanied by bleeding due to the absence of fertilization between egg cells and sperm cells, which is influenced by various hormones and occurs in fertile women who are not pregnant or have not yet menopausal every month (Breehl & Caban, 2023).

One of the disorders that often occurs during menstruation is Dysmenorrhea. Dysmenorrhea or menstrual pain usually occurs during menstruation with symptoms such as lower abdominal pain, the pain can spread to the waist, lower back and thighs, usually felt just before or during menstruation. Dysmenorrhea also occurs in adolescent girls with complaints of pain or discomfort in the lower abdomen (independent scientific institution in Germany, 2023).

Based on data from various countries in the world, the incidence of Dysmenorrhea in the world is quite high. According to the World Health Organization (WHO), the incidence of menstrual pain in the world is very high. Epidemiological studies on the adolescent population (aged 12-17 years) in the United States, the prevalence of Dysmenorrhea reached 59.7%. Dysmenorrhea in adolescents is reported to be around 92% (Kalista, 2016). While the incidence of Dysmenorrhea is also high in Sweden as many as 72% complain of pain, 12% severe, 37% moderate and 49% mild (J Paterson, 2019).

According to a study in Indonesia, the prevalence of Dysmenorrhea reached 64.25%, of which 9.36% had secondary Dysmenorrhea and 54.89% were primary Dysmenorrhea. In a study in Bali on female students aged 15-18 years in 70 subjects with primary Dysmenorrhea, 64.3% experienced pain with mild intensity and 35.7% with moderate intensity. 70-90% of primary Dysmenorrhea incidents will have an impact on adolescents' academic and social activities. Based on data from the West Sumatra Health Service, there were more than 8143 cases of adolescents with primary dysmenorrhea, while 37% of adolescents who experienced dysmenorrhea were in the city of Padang with an incidence rate of 29% since 2015-2020.

Based on the high incidence of menstrual pain (Dysmenorrhea) in women, there are various methods used to overcome Dysmenorrhea pain, such as taking medication, conservative methods, and surgery (Nurmala, 2023). One form of conservative therapy is exercise therapy. Physical exercise shows effective results for use as a preventive and curative effort in primary Dysmenorrhea conditions. There is an exercise therapy method that can be used as a preventive and curative method in primary Dysmenorrhea conditions, namely Pilates exercise. Pilates exercise has the principles of centering, concentration, control, precision, flowing, and breathing. The goal of this exercise is to improve mental and physical strength by increasing breathing, flexibility, muscle strength, coordination, balance, and



stretching the relevant tissues while lowering prostaglandin levels to alleviate pain (Rolyta Triasari Purba, 2021).

Pilates exercises are designed to build a kind of "muscle corset" around the torso and strengthen the inner postural muscles, which can help shield the back from potential pain, stiffness, and injury during menstruation. Other fundamental principles of Pilates include the use of a series of exercises, controlled breathing, isolation of the taught muscles and routines, and careful movement control during movements. Pilates' gentle motions are intended to be revitalizing physical activities that also help to develop posture and enhance the lymphatic, respiratory, and blood circulation systems (Nurmala, 2023). The goal of this study is to ascertain whether Pilates exercises can help adolescents who are experiencing menstrual pain. Research titled "The effect of Pilates exercise on reducing menstrual pain in adolescents" is considered necessary based on the background description.

MET HODS

This study uses a literature review design, namely a specific research methodology and development carried out to collect and evaluate research related to a particular topic focus. The issue of menstruation pain was chosen as the first step in creating this literature review. More precisely, it is restricted to how Pilates exercises can lessen teenage menstrual pain. Only articles published between 2015 and 2020 will be reviewed, and the keywords pilates exercise and menstruation pain will be used. Furthermore, the analysis and synthesis of the literature can be seen starting from the abstract at the beginning of the paper, which will make this process and allow a decision whether it is worth continuing. The next stage is analyzing the text as a whole. After the screening process of the title/abstract and the entire contents of the study from the PubMed, Garuda, Ce databases, there are 9 studies that are relevant to the research question (Image 1.)



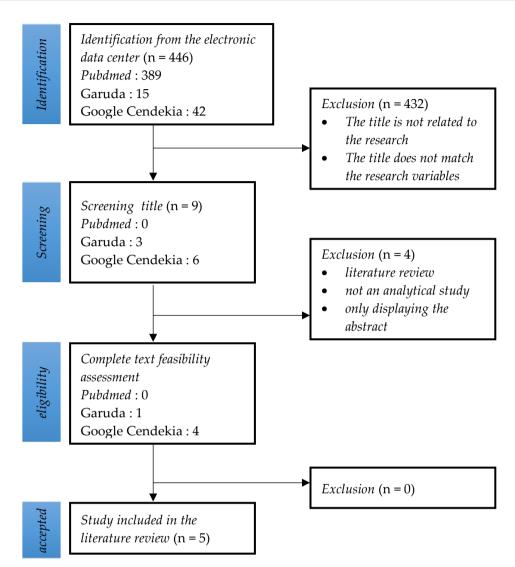


Image 1. Prism Diagram of the Literature Search Process

Using the terms Pilates Exercise, Menstrual Pain, the literature review search was conducted across three databases: Google Scholar, PubMed, and Garuda. All journals comprise the study's population. Pilates Exercise's Impact in Mitigating Adolescent Menstrual Pain. After the title/abstract screening process, there were 446 journals and then 432 journals were selected because they were not included in the criteria. The results of the journals showed that among the 5 journals reviewed, there were 5 journals that had a quasi-experimental design, 1 journal with a pre-experimental design. In total, 5 literature review journals. The selected journals were then studied one by one and then matched the inclusion and exclusion criteria, then selected journals that had good quality.



RESULTS

Table 1. Tabulation of Menstrual Pain in Adolescents Before Being Given Pilates Exercise

No.	Author Name	Types and	Population and	Before	Research
	and Year	Design of	sample		result
		Research	_		
1	Rolyta Triasari	quasi	Sampling using	There is	There is an
	Purba, Putu Ayu	experimental	non-probability	menstrual	effect of
	Sita Saraswati,	with Pretest-	sampling	pain before	Pilates
	Made	Posttest	technique with	pilates	exercise on
	Widnyana, Luh	Control	purposive	exercise was	reducing
	Made Indah Sri	Group	sampling. The	conducted	menstrual
	Handari	Design.	research subjects	on students	pain in
	Adiputra in 2020		were 30 samples.	of SMA	female
	(Rolyta Triasari		There was a	Negeri 3	students at
	Purba, 2021).		treatment group	Denpasar.	State Senior
			given pilates		High School
			exercise and a		3 Denpasar.
			control group.		
2	Reza Elfira, Siti	Quasi	The population of	It falls into	There is an
	Saadah,	experimental	this study was all	the	effect of
	Sariestys	and time	female students of	moderate	Pilates
	Rismawati in	series research	grade X, XI, XII of	pain	exercise on
	2017 (Elfira,	design	SMKN Sukaresik	category	reducing
	2018).		who experienced	before	menstrual
			primary	pilates	pain in
			dysmenorrhea	exercise was	female
			during January-	conducted	students.
			February 2017, the	on students.	
			sampling		
			technique used		
			Purposive		
			Sampling		
			technique, namely		
			100 people.		
3	Marinda Amelia	Quasi	The total sample	There is	There is an
	in 2015 (Amellia,	experimental	of 30 respondents	menstrual	effect of
	2015)	with Pretest-	was divided into 2	pain before	Pilates
		Posttest	groups, namely 15	pilates	exercise on



		Control	respondents in the	exercise was	reducing
		Group Design	treatment group	conducted	menstrual
		research	and 15	on	pain in
		design	respondents in the	teenagers.	adolescents
			control group. The		
			treatment group		
			was given Pilates		
			Exercise for 3		
			weeks with an		
			exercise frequency		
			of 3 times per		
			week for 50		
			minutes.		
4	Yellyta Ulsafitri	Quasi	The population	There is	There is a
	in 2016	experimental	taken was 15	menstrual	significant
	(Ulsafitri, 2017).	with Pretest-	people, in which	pain before	influence on
		Posttest	the sample was	pilates	the scale of
		Control	taken using the	exercise was	primary
		Group Design	total sampling	conducted	menstrual
		research	method of all	on	pain before
		design.	students with the	university	and after
			Statistical	students	Pilates
			Program for		Exercise in
			Science (SPSS).		students.
5	Alvina	Pre	The population in	There is	Menstrual
	Destyaningrum,	Experimental	this study was 32	menstrual	discomfort
	Atun Raudotul	One Group	respondents with	pain before	significantly
	Ma'rifah, Maria	Pretest and	sampling using	pilates	affects the
	Paulina Irma	Posttest	Purposive	exercise was	effectiveness
	Susanti in 2017	Design	Sampling with a	conducted	of Pilates
	(Destyaningrum		total of 18	on	workouts.
	et al., 2017).		respondents.	teenagers.	

DISCUSSION

1. The Presence of Menstrual Pain in Adolescents Before Being Given Pilates Exercise

All five of the reviewed studies address the issue of menstruation pain in teenagers prior to engaging in Pilates exercises. Rolyta Triasari Purba et al. in 2020, Reza Elfira et al. in



2017, Marinda Amelia in 2015, Yellyta Ulsafitri in 2016, and Alvina Destyaningrum et al. in 2017 were the researchers who carried out this study.

In the study of Rolyta Triasari Purba, et al. in 2020, the results of the analysis above showed that the treatment group initially had an average degree of primary dysmenorrhea of 5.13 ± 1.45 categorized as moderate and after being given Pilates exercise intervention decreased to 2.67 ± 1.11 categorized as mild with a value of p = 0.000 (p, 0.05) meaning that there was a significant difference in reducing the degree of primary dysmenorrhea before and after being given Pilates exercise in female students at SMA Negeri 3 Denpasar. In the results of the analysis of the control group which initially had an average degree of primary dysmenorrhea of 5.20 ± 1.82 categorized as moderate and after decreasing to 4.33 ± 1.49 categorized as moderate with p = 0.032 (p <0.05) meaning that there was a significant difference in reducing the degree of primary dysmenorrhea in the control group.

In the study of Reza Elfira, et al in 2017, it was found that primary dysmenorrhea pain in students before being given Pilates exercise was in the moderate pain category for 68 people (68%), and very severe pain for 2 people (2%). Primary dysmenorrhea pain in students after being given Pilates exercise was in the mild pain category for 66 people (66%), and moderate pain for 1 person (1%).

In Marinda Amelia's 2015 study, it was found that after the Wilcoxon test was conducted on the treatment group, a Z value of -3.497 (p value 0.001) was obtained, while in the control group a Z value of -2.126 (p-value 0.033) was obtained. The Mann Whitney test obtained a Z value of -3.597 (p-value 0.001) is a difference in the effect of giving Pilates Exercise between the treatment and control groups on reducing menstrual pain of primary dysmenorrhea in adolescents aged 18-21 years. In Yellyta Ulsafitri's 2016 study, the results of 15 respondents showed that most respondents experienced severe pain (53.3%) before doing Pilates exercise and decreased to a mild pain scale (40) after doing Pilates exercise. In the study by Alvina Destyaningrum et al. in 2017, the results of the differences in the scale of dysmenorrhea pain before and after Pilates exercise were obtained on 18 respondents. The Pretest variable was obtained with a Mean rank of 2.89 and the Posttest with a Mean rank of 0.61 and a p value of 0.000 was obtained.

Dysmenorrhea occurs during menstruation in young women. Menstruation is a uterine bleeding cycle as a sign that the female body's uterine organs are functioning. During menstruation, the endometrium experiences large amounts of prostaglandins, which increase strong myometrial contractions and can press on blood vessels, causing pain (Fitrica et al., 2023). Risk factors for dysmenorrhea include high menstrual blood volume, long menstrual duration, and a history of dysmenorrhea pain in the family. Adolescents who experience menstrual pain often feel muscle cramps, especially in the lower abdomen, which are caused by strong and prolonged contractions of the uterine wall. This causes muscle fatigue and reduced physical activity, so physical exercise is needed to overcome it. The elasticity of the



abdominal muscles is influenced by the level of oxygen that supplies the organ. If oxygen levels are maximally sufficient, pain will decrease. In addition, the release of the hormone prostaglandin during menstruation can also reduce pain (Kumalasari, 2024).

Based on a literature study with an analysis of 5 articles reviewed, it states that there is menstrual pain in adolescents before being given Pilates exercise. From these 5 journals, there are also similarities and differences from each research method, population and sample, sampling technique, test results used and the results obtained.

2. Reduction of Menstrual Pain in Adolescents After Being Given Pilates Exercise

Of the 5 articles reviewed, all articles discussed the reduction of menstrual pain in adolescents after being given Pilates exercise, namely those conducted by Rolyta Triasari Purba, et al. in 2020, Reza Elfira, et al. in 2017, Marinda Amelia in 2015, Yellyta Ulsafitri in 2016, Alvina Destyaningrum, et al. in 2017.

In adolescents after being given pilates exercise, in the study of Rolyta Triasari Purba, et al. in 2020, the results of the analysis above showed that the treatment group initially had an average degree of primary dysmenorrhea of 5.13 ± 1.45 categorized as moderate and after being given pilates exercise intervention decreased to 2.67 ± 1.11 categorized as mild with a value of p = 0.000 (p, 0.05) meaning that there was a significant difference in the decrease in the degree of primary dysmenorrhea before and after being given pilates exercise in female students at SMA Negeri 3 Denpasar. In the results of the analysis of the control group which initially had an average degree of primary dysmenorrhea of 5.20 ± 1.82 categorized as moderate and after decreasing to 4.33 ± 1.49 categorized as moderate with p = 0.032 (p <0.05) meaning that there was a significant difference in the decrease in the degree of primary dysmenorrhea in the control group.

In the study of Reza Elfira, et al in 2017, it was found that primary dysmenorrhea pain in students before being given Pilates exercise was in the moderate pain category for 68 people (68%), and very severe pain for 2 people (2%). Primary dysmenorrhea pain in students after being given Pilates exercise was in the mild pain category for 66 people (66%), and moderate pain for 1 person (1%). In the study of Marinda Amelia in 2015, it was found that after the Wilcoxon test was carried out on the treatment group, a Z value of -3.497 (p value 0.001) was obtained, while in the control group a Z value of -2.126 (p-value 0.033) was obtained. The Mann Whitney test obtained a Z value of -3.597 (p-value 0.001) is a difference in the effect of giving Pilates Exercise between the treatment and control groups on reducing primary dysmenorrhea menstrual pain in adolescents aged 18-21 years

In Yellyta Ulsafitri's 2016 study, the results of 15 respondents showed that most respondents experienced severe pain (53.3%) before doing Pilates exercise and decreased to a mild pain scale (40) after doing Pilates exercise. In Alvina Destyaningrum et al's 2017 study, the results of the difference in the scale of dysmenorrhea pain before and after Pilates exercise



were obtained on 18 respondents, the Pretest variable was obtained with a Mean rank of 2.89 and Posttest with a Mean rank of 0.61 and a p value of 0.000 was obtained.

Physical activity or exercise is one way to relax to reduce pain, including menstrual pain, because when exercising, the body will produce endorphin hormones. This hormone plays a role in providing a sense of calm to the brain so that the body feels comfortable (Sri et al., 2024).

3. The Effect of Pilates Exercise on Reducing Menstrual Pain in Adolescents

The test results used from 5 articles discussing the effect of pilate exercise on reducing menstrual pain in adolescents used different statistical test results, namely 3 articles used the T Test statistical test, namely in the research of Rolyta Triasari Purba, et al. in 2020, Reza Elfira, et al. in 2017, Yellyta Ulsafitri in 2016. 1 article used the Wilcoxon Test and the Mann Whitney Test, namely in the research of Marinda Amelia in 2015. 1 article used the Wilcoxon test, namely in the research of Alvina Destyaningrum, et al. in 2017.

In the study of Rolyta Triasari Purba, et al. in 2020, the results of the analysis above showed that the treatment group initially had an average degree of primary dysmenorrhea of 5.13 ± 1.45 categorized as moderate and after being given Pilates exercise intervention decreased to 2.67 ± 1.11 categorized as mild with a value of p = 0.000 (p, 0.05) meaning that there was a significant difference in reducing the degree of primary dysmenorrhea before and after being given Pilates exercise in female students at SMA Negeri 3 Denpasar. In the results of the analysis of the control group which initially had an average degree of primary dysmenorrhea of 5.20 ± 1.82 categorized as moderate and after decreasing to 4.33 ± 1.49 categorized as moderate with p = 0.032 (p <0.05) meaning that there was a significant difference in reducing the degree of primary dysmenorrhea in the control group.

Before receiving Pilates exercises, 68 students (68%), according to Reza Elfira et al.'s 2017 study, reported having moderate pain from their primary dysmenorrhea, while 2 students (2%), reported having very severe pain. Primary dysmenorrhea pain in students after being given Pilates exercise was in the mild pain category for 66 people (66%), and moderate pain for 1 person (1%).

In Marinda Amelia's 2015 study, the treatment group's Z value following the Wilcoxon test was -3.497 (p value 0.001) was determined to be -3.497, while the control group's Z value was -2.126 (p-value 0.033). When comparing the treatment and control groups, the Mann Whitney test revealed a difference in the impact of Pilates exercises on lowering menstrual pain associated with primary dysmenorrhea in teenagers aged 18 to 21 years, with a Z value of -3.597 (p-value 0.001).

In Yellyta Ulsafitri's 2016 study, the results of 15 respondents showed that most respondents experienced severe pain (53.3%) before doing Pilates exercise and decreased to a mild pain scale (40) after doing Pilates exercise. In Alvina Destyaningrum et al's 2017 study,



the results of the difference in the scale of dysmenorrhea pain before and after Pilates exercise were obtained on 18 respondents, the Pretest variable was obtained with a Mean rank of 2.89 and Posttest with a Mean rank of 0.61 and a p value of 0.000 was obtained.

The improvement in pilates exercise proficiency also suggests that the right amount of exercise is being done to enhance participant abilities. Because the endorphin concentration is steady in the afternoon, pilates is best performed in the afternoon, whether on a specific day or before or during menstruation. Since endorphin levels are greater in the afternoon and lower at night, the afternoon is the ideal time to perform pilates because endorphin levels are stable during this period(Ayu Andera, 2024).

Pilates movements involve the pelvic area because pelvic movements increase circulation in the pelvic area and massage the internal organs. Light exercise is highly recommended to reduce dysmenorrhea. Pilates exercises can improve blood circulation, correct muscle and postural imbalances, and restore vitality to the body and mind, which helps reduce pain, increase metabolism, regulate hydrodynamic balance and hemodynamic conditions, and improve circulation in the pelvic area (Anugrah, 2022).

Teenage menstruation pain has been demonstrated to be significantly reduced by Pilates exercises. Menstrual pain is frequently caused by stiff muscles in the abdominal and pelvic regions, which can be relaxed with Pilates movements that emphasize core development, flexibility, and deep breathing. In addition, Pilates also stimulates the production of endorphins, natural calming hormones that can help reduce pain. By doing Pilates regularly, adolescents can experience a significant decrease in the intensity and duration of menstrual pain, as well as an increase in overall quality of life (Elslemy et al., 2023).

CONCLUSIONS

Based on the results of the literature review, it can be concluded that Pilates exercise is effective in reducing the intensity of menstrual pain in adolescents. This exercise improves blood circulation, relieves muscle tension, and increases the production of **endorphins**, which are natural analgesics produced by the body. Pilates also improves posture and increases flexibility, which helps relieve pain associated with muscle contractions during menstruation.

As a low-impact exercise, Pilates exercise is safe and can be done by anyone, including teenagers who experience primary dysmenorrhea. With regular practice, Pilates can help reduce prostaglandin levels in the body, hormones that play a role in causing excessive contractions in the uterus that cause pain.

This study also found that the Pilates exercise method has the potential to be a safer long-term solution compared to pharmacological therapy such as the use of NSAIDs which have side effects such as digestive disorders and kidney damage if used long-term.



ACKNOWLEDGEMENT

Thank you to the respondents and all related parties who have helped in the research process and provided input for the perfection of this research report, so that the researcher can complete this research well.

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