
# **BREASTFEEDING:** COMMON CHALLENGES AND SOLUTIONS

It's an accepted fact that breast milk is best for babies, offering health benefits for both mother and baby that cannot be replicated synthetically. As Healthcare Professionals seeing mothers and babies every day, it is important to understand the overall importance of breastfeeding and possess practical knowledge of how to help mothers solve some common breastfeeding challenges.

**Breastfed babies**

- Get ill less and have a lower risk of allergies[1]
- May have a lower risk of obesity and Type 1 and 2 diabetes as they grow older[2]
- Have a lower incidence of SIDS (Sudden Infant Death Syndrome)[3]
- Have a reduced risk for ear infections (otitis media) and gastroenteritis[4]
- Are on a path to optimal brain development[5]
- Babies are less likely to be hospitalized with pneumonia or bronchiolitis, and have a decreased risk of lower respiratory tract infections[6]
- Have been associated with a slightly enhanced performance on cognitive development tests[7]

**Breastfeeding**

- Decreases breast cancer risk and may decrease the risk of ovarian and uterine cancer[8]
- Reduces the risk of developing Type 2 diabetes[9]
- Mothers show less postpartum depression as breastfeeding triggers the release of oxytocin (the "love hormone") and prolactin – substances that aid relaxation and reduce stress[10]
- Burns extra calories, making it easier to lose weight after pregnancy[11]
- Saves valuable time! No need to purchase, measure or mix formula, and no bottles to warm in the middle of the night.
- Is free – at least the milk is!

### Disconnect between knowledge of benefits and breastfeeding rates

The latest Infant Feeding Survey[12] results published in 2012 demonstrated significant improvements from the 2005 survey with the proportion of babies in the UK breastfed at birth rising by 5% from 76% to 81%, with further positive results at three months of age with a 4% rise from 13% to 17% in babies being exclusively breastfed with no other supplementation.

However, despite these encouraging results, breastfeeding rates in the UK remain the lowest in Europe and the proportion of babies exclusively breastfed at six months remains at 1%, indicating an increased and sustained need for Healthcare Professionals to provide ongoing support and information to breastfeeding mothers.

### Common challenges, achievable solutions

The biggest fear of most mothers relates to positioning and attachment of the baby at the breast and latching the baby on correctly, how it actually works to ensure a good milk supply as well as fears about pain associated with nursing. And, whilst many of these are legitimate concerns, there are ways to address these situations in a way that prevents them from turning from a small addressable issue that can keep breastfeeding on track into a complex problem that can derail breastfeeding.

### Principles of positioning and attachment

The most effective way to prevent breastfeeding problems is to follow the principles of effective positioning and attachment.

**Positioning considerations**

- What position is the mother going to use, i.e. cradle, cross cradle, football, side lying?
- Is the mother comfortable?
- Is the baby's head and body in a straight line?
- Is the mother holding the baby close to her?
- Is the baby's nose opposite the nipple?

## Lansinoh® breastfeeding solutions

care

**93%*** *of mothers say Lansinoh HPA® Lanolin helped soothe their nipples in the same day*


*Lansinoh HPA® Lanolin*

*Lansinoh® Latch Assist®*

*Lansinoh® Thera°Pearl® 3-in-1 Breast Therapy*

*Lansinoh® Contact Nipple Shields*

### The perfect latch

To ensure a good latch, the mother needs to hold the baby close so his nose is level with her nipple, the baby needs to take a big mouthful of breast coming in from underneath the nipple, the mother should allow the baby's head to tilt back a little, allowing his top lip to brush gently against the nipple, stimulating him to make a wide mouth. With the baby's mouth wide open the mother can bring the baby to the breast, allowing his chin to rest on the breast and keeping his nose clear. More of the darker skin of the nipple should be visible above the top lip and his cheeks should appear full and rounded. If the mother does experience soreness or chafing, using ultra-purified, hypoallergenic Lansinoh HPA® Lanolin to soothe and protect sore and cracked nipples. However, it is important to understand and address the underlying cause of the soreness, so if the mother has continuing pain she should discuss it with her Midwife or Health Visitor.

### Moist wound healing

Moist wound healing involves retaining the moisture already present in the skin of the areola; this can be achieved through applying a moisture barrier cream created through the use of Lansinoh HPA® Lanolin to the cracked and sore nipple. Internal moisture retained within the skin will enable the nipple to return to its normal healthy state, supple and soft, rather than brittle and dry. When cracked tissue is rehydrated from within, it heals without the formation of a scab or crust, enabling the mother to continue to successfully breastfeed her baby.

### Engorgement

Engorgement is a temporary condition that can begin around the third day postpartum and is caused by a mother's body making milk without yet realizing how much her baby needs. Nursing frequently is the best way to alleviate engorgement. Breastfeeding while engorged can be difficult since baby can have a hard time properly latching on. A Nipple Everter can be used to gently evert a flattened nipple to help baby latch on. To release some of the built up milk and soften the breast, it can also be helpful to advise a mother to take a hot shower or express a small amount of milk (by hand or with a pump) before feeding but only enough to evert the nipple. Mothers can also be advised to use a frozen or chilled compress to help soothe and ease discomfort related to engorgement.

### Mastitis

Mastitis is a condition which causes the mothers breast to become inflamed. This inflammation can quickly become an infection. Mothers may notice their breasts are:

- Red
- Hard
- Hot
- Swollen

Mothers may also feel a lump in their breast; this is caused by milk escaping into the breast tissue and, although not caused by a blockage, is referred to as a blocked duct. Mothers with mastitis may also experience flu-like symptoms. Mastitis is most commonly caused by milk stasis, which occurs when milk builds up in the breast and is being made faster than it is removed.

Milk stasis can occur for a number of reasons including not being latched on properly and engorgement. On occasions milk stasis can worsen and become infective mastitis, which requires treatment with antibiotics. It is important that mothers with mastitis continue to feed, as stopping can make it worse. Help and advice should be sought from a Healthcare Professional to ensure the baby is latched on to the beast well.

* Mum Hub HPA® Lanolin research study of 187 UK Mums, March 2016

It is important to keep the affected breast as empty as possible, so frequent feeding is advisable. Expressing breast milk by hand or pump following a feed is also beneficial. Some mothers also find hot or cold compresses help to relieve some of the discomfort.

### Pumping vs. breastfeeding

Feeding at the breast is the ideal because of the natural and physiological triggers that must happen in order for breast milk to be produced, let-down and elicited by a baby. However, if mother and baby have to be apart or, if the mother is having trouble latching baby on, an alternative is needed to be able to offer expressed breast milk and that is by using hand expression or a breast pump.

### The pumping "Why"

Pumping generally falls into two "whys": extra breast milk for occasional use (such as when the mother has an appointment), or building up a supply for when she needs to be away for longer stretches of time (such as going back to work).

### The pumping "When"

Many mothers find they have the most success when they pump first thing in the morning.

Resting has allowed their milk supply to replenish and is likely to be abundant. For easy and safe storage mothers can use breast milk storage bags and containers.

Going back to work or being away for several pumpings on a sustained basis takes a little more planning because she'll want to have an ample amount saved in advance. It is in these situations that a manual or an electric (single or double) pump is used to maximize the experience. To build up a supply, it is recommended a mother pumps daily after her baby has nursed. This ensures she has drained all the milk from her breast and signals to her body to make more milk. She can store the excess in her freezer for use at a later time.

When the mother is back at work or away from her baby, she would need to pump at the times when her baby would be feeding, then safely store the milk and bring it home to add to her freezer supply.

### The pumping "How"

Here are some tips to get a mother started, but remember it might take her some time to get used to pumping:

- "Wake up" her breasts by massaging or leaning over and gently shaking them and using a warm compress to encourage milk let down
- Wash her hands and take a few deep breaths to relax. This is key to getting her milk to flow freely (let-down reflex). Some mothers find looking at a photo of their baby and listening to soothing music helps. Closely holding an item of baby's clothing which has their unique scent may also aid in triggering the let-down reflex.
- Close her eyes, shut out the world, think of her sweet baby – this has been shown to help with let-down and milk flow
- To pump, the mother should centre the nipple in the cushion (the cone-like part that goes on the breast). Her breast needs to completely fill it to form a vacuum. She should tilt the tunnel slightly downward so the milk flows naturally into the container
- She should plan on a 20 minute pumping session, but this could vary – some mothers take more or less time. Encourage her to continue and not to worry if her output initially seems low. By pumping, she's telling her body to keep producing milk and she'll begin to see an increased amount if she is pumping on a regular schedule
- To build up her freezer supply, she can try pumping after nursing and add in extra sessions when baby is sleeping.

*Mums can pump directly into Lansinoh® Milk Storage Bags from Lansinoh® breast pumps*



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