

MILK SUPPLY

Session Objectives

- ◎ Discuss concerns about “not enough milk” with mothers
- ◎ Describe normal growth patterns of infants
- ◎ Describe how to improve milk intake / transfer and milk production
- ◎ Discuss a case study of “not enough milk”

Concerns about “not enough milk”

The most common reason for mothers to stop breastfeeding, or to add other foods is they believe that they do not have enough milk.

Why do mothers' think she does not have enough breastmilk?

- Baby cries often,
- Baby have sleep for long periods,
- Baby is not settled at the breast and is hard to feed,
- Baby sucks his or her fingers or fists,
- Baby is particularly large or small,
- Baby wants to be at the breast frequently or for a long time,
- Mother (or other person) thinks her milk looks 'thin',
- Little or no milk comes out when the mother tries to express,
- Breasts do not become overfull or are softer than before,
- Mother does not notice milk leaking or other signs of oxytocin reflex,
- Baby takes a supplementary feed if given.

These signs *may* mean a baby is not getting enough milk but they are not reliable indications.

Reliable signs of sufficient breastmilk intake

▣ Output

- after day 2, six or more wet diapers in 24 hours with pale, diluted urine.
- 3-8 x bowel movements in 24hrs

▣ Alert, good muscle tone, healthy skin.

▣ A consistent weight gain, with an average of 150 gram per week, is a sign of sufficient

- Knowing these signs will build the mother's confidence – point out the things that she is doing well and suggest ways that she can get support in mothering.

Causes of low milk production

A. The common reasons for low milk production are related to factors that limit the amount of milk the baby removes from the breast.

These factors include:

- Infrequent feeds
- Scheduled feeds
- Short feeds
- Poor suckling
- Poor attachment

B. Low milk production may be also related to psychological factors:

- The mother may lack confidence; feel tired, overwhelmed, worried.
- Physiological factors may lead to too little or ineffective breastfeeding practices.

A mother who is in a stressful situation may feed less frequently or for a short time, be more likely to give supplementary feeds or a pacifier, and may spend less time caring for the baby.

Causes of low milk transfer

The mother may have a good supply of milk but the baby may not be able to remove the milk from the breast. Low milk transfer may result if:

- The baby is poorly attached to the breast and not suckling effectively.
- Breastfeeds are short and hurried or infrequent.
- The baby is removed from one breast too soon, and does not receive enough hindmilk.
- The baby is ill or premature and not able to suck strongly .

Milk transfer and milk production are linked. If the milk is not being removed from the breast, the milk production will decrease. If you help the baby to remove milk more efficiently then sufficient milk production will usually follow.

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Normal growth patterns of babies

- An average weight gain means that some weeks it may be lower and some weeks it may be higher.
- The range may be 100-200 grams (3.5 – 7 ounces) per week.

What is a normal growth pattern for a baby?

If exclusively breastfed:

- ❑ start to gain weight soon
- ❑ lose weight in the first few days after birth. But total loss should not exceed 7-10% of birth weight. Should regain birth weight by two weeks.
- ❑ Babies usually gain
 - 100-200 grams (3.5 – 7 ounces) / week during the first six months,
 - 85-140 grams (3-5 ounces) / week in the second half of the first year.
 - Double their birth weight by five to six months;
 - Triple it by one year. Babies also grow in length and head circumference.

Practising the Ten Steps to Successful Breastfeeding helps to assure an abundant

- Discuss the importance of breastfeeding and basics of breastfeeding management during pregnancy (Step 3),
- Facilitate skin to skin contact after birth (Step 4),
- Offer the breast to the baby soon after birth(Step 4),
- Help the baby to attach to the breast so the baby can suckle well (Step 5),

Practising the Ten Steps to Successful Breastfeeding helps to assure an abundant

- Exclusively breastfeed (Step 6),
- Keep baby near so feeding signs are noticed (Step 7),
- Feed frequently, (Step 8),
- Avoid use of artificial teats and pacifiers. (Step 9),
- Provide on-going support to the mother and ensure that mother knows how to find this support (Step 10),

Improving milk intake and milk production

- Use your communication skills:
 - Listen to the mother and ask relevant questions,
 - Look at the baby
 - Observe a breastfeed
 - Respond to the mother , avoid criticism or judgments.
 - Give relevant information
 - Offer suggestions
 - Build the mother's confidence.
 - Help her to find support for breastfeeding and mothering.

Improving milk intake/transfer

- Address the cause of the low milk intake and try to remedy it.
 - Discuss how the mother could feed the baby more frequently,
 - Point out feeding cues when the baby has finished one breast
 - Encourage skin contact and holding the baby close,
 - Suggest that pacifiers and artificial teats be avoided,
 - Suggest offering the breast for comfort
 - Suggest avoiding use of supplement
- If the milk supply is very low, another source of milk is needed for a few days while the supply improves.

Increasing Milk Production

-To increase milk production, breast needs stimulation and milk needs to be removed frequently.

- ❖ Gentle massage
- ❖ Express between feeds
- ❖ Get family support
- ❖ Use of food, drinks, local herbs

Monitoring and follow up

Follow up – check milk production/
transfer.

Monitoring – signs of improvement,
Build mother's confidence.

If baby's weight is low and
supplements are needed, reduce
supplements as the situation
improves.

Case Study

- Three participants to role-play the Case Study below in front of the class. This roleplay should reflect what the midwife will do now and how she will follow up. Follow up the role-play with a discussion among all the participants.
- Characters:
 - The patient, Anna
 - Her mother-in-law (husband's mother)
 - The midwife at the outpatient department
- *Show Slide 9/2 with the key points of the Case Study*

Case study



*Breastfeeding Counselling: a training course,
WHO/CHD/93.4, UNICEF/NUT/93.2*

2 weeks old Healthy at birth Discharged Day 2

- “Sleeping all the time”
- “Refusing” the breast
- 3 stools in week
- 12% under birth weight
- Bottle with honey and water twice yesterday

Discussion Questions

What are the good elements in this situation that you can build upon?

What are three main things this family needs to know now?

What follow-up will you offer? What follow-up will you offer?

Summary

- Concerns about “not enough milk”.
- Normal growth patterns of infants.
- Improving milk intake and milk production.