

Breast Refusal After Breastfeeding is Established

Is my baby weaning?

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Breastfeeding Recommendation

Exclusive breastfeeding is recommended for the first six months of life for healthy term infants, as breast milk is the best food for optimal growth. Infants should be introduced to nutrient-rich, solid foods with particular attention to iron at six months with continued breastfeeding for up to two years and beyond. (Health Canada, 2004)

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Weaning

A process that begins with the introduction of culturally appropriate foods to a breastfed baby and continues until the last breast feed

Gradual - over many months or years

Deliberate - mother lead

Abrupt - mother lead immediate cessation

Riordan (2005)

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Breast Refusal/ Nursing Strike

- ▶ A sudden or gradual unexpected refusal of the breast after breastfeeding is well established.
- ▶ Can occur anytime - generally in the first year (3-4 months - Riordan, 2005)
- ▶ Babies seldom wean spontaneously before 12 months of age

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Regardless of the cause

- ▶ major cause of weaning - mothers often confuse breast refusal for weaning
- ▶ has a major emotional impact on mothers
- ▶ important to try and find the cause with an understanding that it is not always possible to discover one
- ▶ negative feeding associations, once well entrenched are hard to overcome

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Causes



- ▶ Infant factors
- ▶ Maternal factors
- ▶ Management or environmental factors
- ▶ Unknown

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Infant Factors

- ▶ A change in feeding frequency or duration may be interpreted as refusal
- ▶ Determine changes in breastfeeding patterns and baby's growth
- ▶ 4–8 month olds are easily distractible but often doing fine

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Infant Factors

- ▶ Tongue tie
- ▶ Mouth pain
- ▶ Ear infection
- ▶ Pain in the nursing position
- ▶ Illness – acute and chronic

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Maternal Factors

- ▶ Change in body odor
 - ? New deodorant, soap, perfume
 - ? New foods
 - ? Medication
 - ? Swimming
- ▶ Change in taste of milk
 - ? New foods
 - ? Medication
 - ? Mastitis
- ▶ Mother's reaction to biting or distraction

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Maternal Factors

- ▶ Change in milk volume
 - Related to early management
 - Cesarean section
 - Delayed first feeding
 - Early supplementation
 - Separation of mother & baby
 - Infrequent &/or timed feedings
 - Soother use

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Maternal Factors

- ▶ Change in milk volume
 - Return of menstruation
 - Estrogen containing OCP
 - Pregnancy

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Management/Environmental Factors

- ▶ Forcing baby to breast
 - Positional
 - To breast out of synchrony with baby

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Management/Environmental Factors

- ▶ Overstimulation, stress, or tension
- ▶ Distractions
 - Talking, music, reading, tv, people etc
- ▶ Prolonged separation
- ▶ Major change in routine
- ▶ Limit and/or rigid feeding pattern
- ▶ Use of pacifiers, bottles

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What to do?

1. Prevention – Prevention – Prevention

- Get breastfeeding off to a good start
- Anticipatory guidance
- Support

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What to do?

2. Assessment

Mother

Baby

Mother–Baby Interaction

Breastfeeding management

Timing of last good breastfeeding
Changes to routines since that time

Not always able to determine the cause

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Assessment

1. Maternal assessment

- Family and support
- Changes to lifestyle and/or routine
- Knowledge, support & motivation
- Medical conditions
- Surgical conditions
- Labor and birth
- Physical assessment of breasts & nipples

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Assessment

2. Infant assessment

- **Physical assessment**
 - Oral anatomy
 - Reflexes
 - Weight pattern
 - Current output pattern
- **Feeding to date**
 - Time of first feeding
 - Feeding pattern
 - Effectiveness

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Assessment

3. Feeding assessment

- ▶ Mother's readiness & responsiveness
- ▶ Baby's cues, positioning
- ▶ Latch
- ▶ Feeding effectiveness
- Do not force baby to feed

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What to do?

3. Eliminate the cause
4. Feed baby
 - Strategies to help baby back to breast
5. Milk supply support
6. Supporting the mother

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What to do?

4. Feed the baby

Helping baby back to the breast

Age & condition need to be considered

- ▶ Patience- patience
- ▶ Skin-to-skin - baby wearing
- ▶ Gentle, calm handling
- ▶ Decrease external stimuli

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Helping baby back to the breast

- ▶ Baby lead attachment
- ▶ Co-bathing
- ▶ Try as baby drifts off to sleep or just as babies wakes
- ▶ Change positions - standing - lying - sitting - rocking
- ▶ Household support

Starving the baby is not an effective strategy

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Feeding Baby

- ▶ According to age and condition

- Cups
- Finger foods
- Expressed breastmilk

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What to do?

5. Milk supply support
 - Effective milk removal is the key to effective supply
 - The place for breast pumps
 - Use of galactogues
 - foods
 - herbs
 - medications

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What to do?

6. Support for mother

- Sensitivity to the impact of breast refusal
- Belief that there is a solution
- Continuity of care
- Follow-up until resolution

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Breast refusal

1. Prevent
2. Assess
3. Eliminate the cause
4. Feed baby
5. Milk supply support
6. Support mother

Mothers define their own success

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