

27 February 2007

Dear Sir/Madam

Our daughter was born four months ago and has been exclusively breastfeed since birth. However our breastfeeding relationship was not easily established, and I believe it was due to my sheer determination and my knowledge of the benefits of breastfeeding that we have been successful.

I am writing to address the following section of the terms of reference - e. examine the effectiveness of current measures to promote breastfeeding.

### **E. Examine the effectiveness of current measures to promote breastfeeding**

#### My Hospital Experience

Nine weeks before the birth, I attended a breastfeeding antenatal class provided (at no charge) by the hospital where my baby was to be delivered. During the two hour session my husband and I were given an overview of the benefits of breastfeeding, the mechanics of breastfeeding and watched a 'how to' video. This was a very beneficial session, but in hindsight there was too much time between the class and when I needed to put the information into practice.

After the shock of a short and intense natural labour, I seemed unable to recall information from the antenatal class or from additional reading I had undertaken. I was relying on the midwives for direction. Unfortunately, I did not receive the support I required. My daughter was not attaching to the breast properly and before she was even a day old my nipples were sore and blistered with scabs forming. In frustration, the midwives were pushing my breasts into my daughter's mouth with such force that my breasts became bruised with their fingerprints.

I was discharged from hospital without having learnt the vital skill of attaching my baby to the breast. She continued to damage my nipples each time she fed and in addition to the scabs from blisters, I developed infected cracked nipples and battled with blocked milk ducts as the scabs were covering milk outlets on the nipples. At various times when the pain was too much, or while the infection was being treated, I expressed breast milk and fed my daughter with a bottle.

After five weeks of tears, frustration, a lot of expressed breast milk and a huge amount of support, my daughter and I were finally breastfeeding without pain. I sourced support and information from:

- The Australian Breastfeeding Association website
- *Breastfeeding Naturally* (second edition) edited by Jill Day
- My local Australian Breastfeeding Association group leaders
- A private lactation consultant (name and contact details supplied by my child and maternal health nurse)
- A breastfeeding day-stay program at the hospital where my daughter was born

- My husband
- My mother

In summary, the hospital where my daughter was born was promoting breastfeeding (ie, the antenatal class) but I did not receive adequate practical breastfeeding support (ie. how to correctly attach your baby to the breast) during my hospital stay.

### Other Health Professionals

Since successfully establishing breastfeeding, I have encountered health professionals who have been too ready to suggest that I give my daughter formula. I have politely declined their suggestions of offering a 'top-up' of formula after a breastfeed to ensure my baby was not going to sleep hungry (I conducted the same experiment using expressed breast milk – my daughter was not hungry!) or giving my daughter a bottle of formula at 10pm each night as a 'roll-over' feed so that she would sleep for longer.

When my daughter was three months old we attempted to implement a 'Sleep, Feed, Play' routine (a common suggestion for parents with unsettled babies). I found that these types of routines can be very detrimental to breastfeeding for the following reasons:

- The stress on the mother when hearing her baby cry, can affect milk supply
- It does not allow for extra feeds during hot weather
- It does not accommodate the baby's requirement to suckle more often during growth spurts to increase milk supply
- Parents are often advised to offer formula at 10pm as a 'roll-over' feed

In summary, health professionals outside the hospital system are inadvertently undermining established breastfeeding by suggesting supplementary feeding or strict routines. Successful breastfeeding is all about supply and demand – the baby must suckle to create the required milk. With correct information and support, the breastfeeding mother responds to her baby's need for milk and comfort, in the absence of imposed routines and supplementary feeding.

Yours faithfully,

Anna Ng