

APPENDIX 3

SUPPLEMENTS TO CHAPTER 5

Section 5.2 Choosing to give birth to breastfeed

As we saw in Chapter 5, the choices made during childbirth have a domino effect on the rest of the birth and on early lactation. domino effect on the rest of the birth and the start of lactation. To illustrate this, let's take a concrete case and see what happens during the birth unfolds.

Let's suppose we have a mother who is in her 41st week of pregnancy and can't take it any more. Her doctor agrees to induce delivery, starting with the detachment of the membranes. The detachment does not work, so the next step is synthetic oxytocin, administered with a lot of fluid through an intravenous solution, and a heart monitor to monitor the baby's heart, which could be weakened by the oxytocin. It is much more difficult to move with IV fluids and a heart monitor, which means that so the mother is often forced to lie on her back. The contractions artificially caused by oxytocin and experienced on the back are very difficult to bear without painkillers. The mother asks for an epidural. The baby is born and the mother feels no pain. The baby is placed on its mother, as it should be, but they do nothing. They don't reach for the breast. Even an hour later, when she put them to the breast, they don't know what to do. The mother, having received a lot of fluids, her legs and breasts are engorged. What happens with engorgement? They are all the more difficult for the baby to latch on to! They are even more difficult for the baby to take! For example, a birth that could have been natural and resulted in an alert baby who turned into a rather difficult start to breastfeeding, and all because of an induction that probably shouldn't have taken place.

Figure A1 - An Example of Childbirth that Doesn't Make it Easy to Start Breastfeeding

Let's go back to our example of the 41-week pregnant woman. This time, however she has decided to enlist the support of a doula, who listens sympathetically and who listens sympathetically and informs her of the strategies available to help her through the end of her pregnancy and childbirth. So, she waits until her body is fully ready for childbirth and uses strategies such as a warm bath, an exercise ball, movement and self-hypnosis to manage discomfort and pain. The baby arrives without any intervention, and is then placed skin-to-skin at least until they crawl, latch on and drink from the breast. Only then is it weighed, measured and tested, before being placed back in skin-to-skin contact with the parents, where they can suckle as much as they like, thus laying the foundations for breastfeeding.

Figure A2 - An Example of Natural Childbirth that Makes it Easier to Start Breastfeeding