



Here at Lola&Lykke we understand that every mum and every baby are different. For some women, breastfeeding can be a beautiful, nurturing, connecting activity. For others, it can trigger a range of negative feelings and emotions. The most important thing is that you choose the feeding option that is right for you and your baby. And if any aspect of breastfeeding is negatively affecting your emotional and mental wellbeing, especially if it impacts on your day to day living for more than two weeks, then it is time to seek support.



Contents

Breastfeeding and Your Emotions	4
 Breastfeeding Stress is Real 	5
 The Structural Barrier to Breastfeeding 	7
Rest Assured: Anxiety is Very Common	8
 How to Cope with Breastfeeding Anxiety 	10
Coping with the Stress of Breastfeeding	12
 Causes and Management of 	12
Breastfeeding Stress	
 Healthy Ways to Cope with Stress 	18
Breastfeeding and Sleep	19
 Self-care and Support Networks 	20
Birth Trauma, Preterm Infants, the Unwell	21
Baby and Breastfeeding	
Tackling Depression While Breastfeeding	22
Debunking 9 Breastfeeding Myths	25
Takeaway	.31

Breastfeeding and Your Emotions

Sometimes it can take time before a new mum and her baby learn what works for them. Every baby is different, so even if this isn't your first baby, you might come across a very different eater than your previous babies! Sometimes there are physical complications, with either you or baby, that can make breastfeeding difficult or impossible. Either way, you might not be able to feed your little one the way you originally intended. Or you might choose not to breastfeed, for one reason or another.

You shouldn't have to try alone. Persisting with something that just isn't working out will do no good to either of you, even though in many breastfeeding-positive societies "breast is best". We'd like to alter this a bit, and claim that "fed is best", preferably in the manner you chose to want to feed your child. Because, in the end, whether the ability to breastfeed impacts on a new mum's mental wellbeing depends on a range of factors. These include your original expectations and what you thought of breastfeeding before becoming your little one's mum. Some mums can accept it and carry on. For others, it can be hugely distressing and can contribute to postnatal anxiety or depression.



If you believed all news in many countries, you might think breastfeeding was inherently bad for maternal mental wellbeing. You see headlines screaming about the 'pressure to breastfeed' and 'breastfeeding bullies' who make mums feel anxious and miserable. There have been calls to action to stop breastfeeding promotion because these headlines and some health care practices make new mums feel like their motherhood experience has been ruined.

But breastfeeding does not damage maternal mental health. In fact, a good breastfeeding experience can do marvellous things for women's well-being. Alongside reducing risk of reproductive cancers, heart disease and diabetes, it can help mothers feel empowered, confident, and heal birth trauma too. Breastfeeding hormones are even thought to help reduce the impact of stress and sleep deprivation upon the body. It's no wonder that numerous studies have found that when breastfeeding is going well, a woman's risk of postnatal depression is lower.

Breastfeeding Stress is Real

When things don't go as planned, mums' mental health can be badly affected. Having a difficult breastfeeding experience and feeling forced to stop can leave women feeling devastated, grief stricken and very, very angry. The result is the same regardless of the reason why they had to stop nursing.

But, as you can see, the problem is not really breastfeeding at all.

Breastfeeding does not deplete mothers, nor does it cause depression.

The problem is the lack of support and investment in infant feeding, new mothers, and families more broadly. More than two-thirds of mothers who stop breastfeeding in the first few weeks in the UK do so because they needed more support, had pain, or difficulty latching a baby on. With this level of mums stopping breastfeeding due to lack of support, it is likely many mums in many other countries feel the exact same.







A key to successful breastfeeding is a motivated and rested mum, with a lively baby. The long maternity leave in Finland allows Finnish mums to breastfeed their children according to the WHO guidelines, but even then, nursing is rarely practiced solely: only 9% of Finnish babies under six months are exclusively breastfed. Meanwhile Ireland has the lowest breastfeeding rate in Europe — just 6% of babies are being exclusively breastfed at six months. The worldwide statistics show that only 40% of babies aged under 6-months are now exclusively breastfed.

The lack of worldwide investment in health services often means that mums are left by themselves without professional support – often being told that 'main thing is your baby is being fed' – rather than be referred for consultations with supportive lactation specialists. In fact, in the United Kingdom, issues such as not getting enough professional help, exhaustion and misinformation mean that more than half of babies have had formula by the end of their first week.

Difficult experiences also raise the risk of postnatal depression, over and above the hormonal implications of not breastfeeding. A study conducted in 2015 – with 217 mothers who stopped breastfeeding in the first few months – shows where women were ready to stop or were told to stop for reasons that they perceived to be positive, their mental health was not affected. But when they stopped because of pain, physical difficulties, or because they couldn't get the support they needed, their risk of depression was much higher.

It really isn't that surprising to find out that there is a significant amount of research indicating exactly that: positive feelings promote positive experience, while negative experience promotes negative feelings.



The Structural Barrier to Breastfeeding

What is confusing, is that the investment to support women is still lacking. We know that breastfeeding protects maternal and infant health. We know it saves money for the healthcare system. We know the majority of women want to do it – and lots, once they get past the early weeks, find it simpler, more convenient and cost-effective. And we know the potentially damaging effect on their mental wellbeing if mums cannot breastfeed despite wishing to do so.

But instead of investing in the research, staffing, education and protection that is needed, cuts are being made to services, and a bottle of formula is suddenly given as the solution to any breastfeeding challenge. Ireland has a substantial share in the global market for breast-milk substitutes, which partly explain the low rates of exclusive breastfeeding. Surely, if you can't do it on your own, formula is just fine? No. Well, not no. It's just not the only solution.

Moreover, formula doesn't solve the perceived issues that it is often presented as solving. It won't help a baby sleep at night, does not create a more "settled baby" and does not stop babies wanting to be held. These are normal baby behaviours, to help them feel safe and comforted, and often nothing to do with hunger. And those behaviours have been used by the breast-milk substitute industry to ignite those feelings of "if I struggle, giving bottle with formula will be better for my baby".

And, most importantly, simply telling a mother who wants to breastfeed to give formula rather than helping her work through any challenges will not make her any happier – in fact, as shown, the opposite is often true. Mothers who are let down in this way – often without answers as to why their breastfeeding experience went wrong – blame themselves, stating that they feel like failures.

If you are a mum who cannot breastfeed, you are absolutely not failing. You are being failed – by a system that hasn't been built to raise you to success.

It's not as if we don't know why women are struggling. There is an absence of professionals to support women, no community to take care of them, and lack of a culture that understands, values, and protects breastfeeding and breastfeeding mothers whether they are at home, work or out in public.



Rest Assured: Anxiety is Very Common

First and foremost, it's important to understand that this happens to a lot of parents and you are not alone. By itself, that isn't a very reassuring statement when you are going through the negative emotions and fear. But it is true. New mums feel enormous amount of pressure to make breastfeeding work. When challenges do arise, you can feel like you are failing at nourishing your baby. Feeling that pressure and failure can cause any mum to feel anxious, and even depressed. Keep in mind, this is the postnatal period where your emotions are going places regardless how you decide to feed your baba.

New mums often stress about producing enough milk to meet their baby's needs, or their personal goals. And if this isn't your first attempt, it can be even harder. If your previous nursing experience was an emotional and physical struggle, those traumas are easily carried over to new baby.

The relationship between feelings of depression or anxiety and the demands of breastfeeding are complicated. If you struggle with nursing, that may cause anxiety and exacerbate your already unbalanced emotional wellbeing. On the other hand, feeling anxious and stressed about breastfeeding can trigger struggle especially if it:

- Feels too demanding emotionally or physically
- Takes too long or wastes time, adding more stress
- Causes stress, discomfort, or pain to you or your baby
- Prompts feelings of failure or inadequacy
- Triggers anxiety about responsibility and baby being dependent on you.





Some of you may be familiar with Dysphoric Milk Ejection Reflex (D-MER), even if you don't know it by its name. It is that abrupt emotional drop that occurs just before milk release and continues for a few seconds or minutes. While you may never hear of anyone experiencing this as it is quite rare, the brief negative feelings can range in severity from wistfulness to extreme self-loathing and even suicidal thoughts. These may have nothing to do with your usual mood, but it sure sounds scary. Definitely have a chat with your midwife or lactation help if you experience this!

On the other hand, nursing can also be a positive force for mums experiencing postnatal anxiety or depression! This can be especially true if it feels like:

- Something you enjoy or feel like you are succeeding at
- It is helping you care for your baby
- Breastfeeding allows you to connect with your little one.

I really wanted to breastfeed my baby but the more I tried the more anxious I got. Once I stopped trying I felt more relaxed and felt like I could enjoy my baby.

The best thing to do, is to familiarise yourself with your local postnatal mental wellbeing services, health visiting contacts, and infant feeding support well in advance. Many countries have IBCLC certified lactation consultants, and if there isn't one near you, many also offer online visits. Every mum benefits from at least one chat with a breastfeeding professional, even if it is just to chat about your worries and concerns. Remember, being prepared for more than one outcome can make your experiences easier to deal with. While breastfeeding is a 'natural' experience, it will feel very different to every woman, and every woman will feel very differently about it.

The responsibility for healthy infant feeding should be viewed as a collective one, rather than that of an individual with the potential for personal 'failure'.



How to Cope with Breastfeeding Anxiety

1. USE BREASTFEEDING RESOURCES

It may be tempting to utilise Google to get all your breastfeeding questions answered but do reconsider! You'll end up with highly conflicting advice which will likely only exacerbate your anxiety. Instead, relay on credible breastfeeding resources, like our <u>Ask an Expert</u> service. Check out La Leche League's website, or your country's leading breastfeeding community. Breastfeeding often takes time and practice to get the hang of for both of you, so good resources are often essential to succeed.

2. GIVE IT TIME

This may be the most frustrating advice for a parent who is experiencing anxiety but learning how to breastfeed takes time and sometimes reminding yourself of this can help ease the anxiety. It's a learning curve for you both. Give yourself time and grace. If it helps, fill your house with post-It notes full of valuable thoughts about your breastfeeding journey.

3. TRY THE BOTTLE OR SUPPLEMENT WITH FORMULA

When you're struggling with breastfeeding, you may create a narrative in your head that switching to the bottle or supplementing with formula equals failure, but that certainly isn't the case. Remember, 'fed is best,' and baby will benefit from a happy and thriving mum much more than a mum who has run herself to the ground trying to breastfeed or pump.

Resist the urge to consider bottle or formula feeding giving up, and instead try to focus on the positives. Your partner can also share responsibility when bottle feeding is incorporated. This allows them to bond with baby, and more importantly, gives you much needed downtime. This is one of the most effective ways to manage breastfeeding-related anxiety.



4. TALK TO A PROFESSIONAL

There is a reason there are so many lactation experts and maternal mental health providers out there — because a lot of new moms rely on their expertise to navigate the postpartum period. So, there may come a point where the best move for you is to talk to a professional. Making sure that baby is latching well and getting enough milk can boost your confidence too!

If the anxiety seems unbearable it is a good idea to reach out to a mental wellbeing professional who can teach you coping skills to help manage anxiety. If you experience difficulty bonding with baby, inability to care for yourself or baby, loss of interest in regular activities, scary or disruptive intrusive thoughts, or any other feelings of being too overwhelmed with the transition to parenthood, we would strongly suggest reaching out to a healthcare provider.

5. TAKE CARE OF YOURSELF

New parents are constantly reminded of the importance of self-care, which can seem downright humorous to a new mom who hasn't had 10 minutes. to so much as shower in over a week. However, if you're experiencing feelings of anxiety, the need for selfcare is essential to ensuring it doesn't worsen. Also, taking good care of your body will help keep your milk supply up so that breastfeeding is less of a struggle. Try to get enough rest during the day, make sure you eat nutrientdense foods, move, and stay hydrated. These can have a huge impact on your breastfeeding experience.



6. DON'T BE AFRAID TO STOP

Another thing that may help ease your anxiety is coming to terms with the fact that there may come a point where the best thing for you and your baby is to switch entirely to formula. Simply giving yourself this "out" can sometimes help ease all of this pressure. Remember, switching to formula is not a failure, because your baby will still be fed and healthy and you will be healthier mentally, as well.

Yes, breastmilk is very beneficial for your baby, but having a mother who is rested and emotionally stable is even more important and beneficial.



Coping with the Stress of Breastfeeding

Stress is your body's reaction and response to change. There's good stress, and there's bad stress. Good stress, or eustress, is positive and healthy. Bad stress, or distress, is the negative stress that you probably think of when you hear the word stress. This type of stress is harmful and can cause health problems. It can even affect your ability to breastfeed successfully.

Causes and Management of Breastfeeding Stress

Stress can affect breastfeeding in a few ways. High levels of stress in breastfeeding moms can lead to a difficult let-down reflex, and it can decrease your breast milk supply. Too much stress in everyday life is also associated with early weaning.

On the positive side, breastfeeding may help to lower your stress. The hormones that your body releases when you breastfeed can promote relaxation and feelings of love and bonding.



EXPERIENCING PAIN

Right after your baby is born, you may feel pain from the delivery. Then, once you start breastfeeding, other issues such as sore nipples and breast engorgement can cause even more discomfort. Pain is a stress on your body, so if your doctor prescribes pain medication you should take it—just be sure that your doctor knows that you're breastfeeding, so they prescribe a medication that's safe for you and your baby. Relief from the pain can help you to relax and reduce stress. When physical pain is managed, you should be able to breastfeed more comfortably, and your body can focus on making and releasing breast milk instead of the pain.

HAVING A DIFFICULT BIRTH EXPERIENCE

When you've planned to have a vaginal childbirth without medications but end up with a difficult delivery or an unexpected C-section, it can cause stress, guilt, and disappointment. But if you plan for the best while still acknowledging that there's a chance that birth may not go the way you envisioned it, you can better prepare for the flexibility that can help you navigate challenges. Make two birth plans: one for the birth you want, and another one for the birth you fear.

DEALING WITH CONCERNS ABOUT PRIVACY

If you're self-conscious or embarrassed about exposing your breasts, it may be stressful to breastfeed. You may be worried about having visitors or taking the baby out in public.

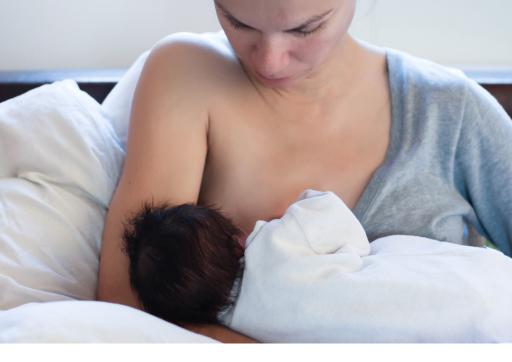
Then when you're out, you might worry about feeding your child late, or where you'll go to breastfeed privately. These fears are often greater in the beginning, but over time, you're likely to become more comfortable as you learn to breastfeed outside your comfort zone. Remember, you are feeding your child, not putting on a display for anyone to look at. If it makes you feel more comfortable, consider carrying a thin scarf that you can cover your baby and breast with to give you more of a semblance of privacy.



6 tips for breastfeeding in public without fear

- 1. Practice at home
- 2. Choose easy-access clothing
- 3. Choose a good spot
- 4. Consider a nursing cover
- 5. Focus on your baby
- 6. You have the right to breastfeed





LACKING BREASTFEEDING CONFIDENCE

You may be worried about your ability to breastfeed because of your breast size, your diet, your work schedule, or any number of reasons. Talk about your concerns with your doctor, a local breastfeeding group, an online support group, or a family member or friend that has breastfed. If your worry centres around work, talk with your supervisor and see if it's possible for you to go feed your baby or pump on the job. These people can help answer your questions and relieve some of your stress over these situations. It may help you feel better and more confident.

HAVING BREASTFEEDING PROBLEMS

Early breastfeeding problems such as difficulty getting your baby to latch on, and sore nipples can be frustrating and stressful. To prevent unnecessary stress, learn as much about breastfeeding as you can before your baby is born, and get help latching your baby on correctly right from the first breastfeed after birth. Get all the help you can, and talk to your midwife and a lactation consultant about your concerns and problems. They can help with most things!

First thing to try, is different breastfeeding positions. You can talk with your midwife or check out a guide online, such as our <u>Breastfeeding 101 e-guide</u>.



FEELING EXHAUSTED

Taking care of a newborn is tiring. It's around the clock care: 24 hours a day, seven days a week. Add to that the other responsibilities in your life, and it's easy to become overwhelmed and exhausted.

To fight off fatigue, try to sleep when your baby is sleeping and put off housework and other responsibilities for a while. And, don't be afraid to ask for a little help from your partner, family, and friends. You share life with your family. Allow them to be there for you. On the other hand, don't be too forgiving: If family is stressing you out, don't hesitate to put your wellbeing first. If it means going low contact for a little while, well, you go!

Top tip

Make night feeds as easy as possible. Have your baby sleep close by to your bed, especially in the beginning. That way they are easy to bring to the breast. Don't worry about nappy change or socialising, just get the job done.

Remember to stay hydrated. Breastfeeding dehydrates you, so having a glass of water before nursing, or a water bottle on hand during, can help. Also consider milk, tea, kefir, and low-sugar fruit juices. Avoid coffee, as it can also make your baby restless.

COPING WITH CHANGES IN YOUR BODY

Your body and your hormones change so much during pregnancy, childbirth, and breastfeeding. You may be worried about how much weight you've put on or the changes in your breasts. Stretch marks, saggy belly, sore boobs, hair loss, and haywire brain.

But, these changes didn't happen all at once. They took place slowly over nine months while your body was carrying your growing baby. So, be patient and give yourself and your body time to recover. Stay active, consider wearing a Postpartum Support Band like ours, and regain your strength. Only at that point should you think about what you want to look like, and start taking steps to achieve those goals.





HAVING CONCERNS ABOUT BREAST MILK

Some of the main fears that new breastfeeding mothers have include questioning whether they make enough breast milk, whether their baby is getting enough breast milk, and whether their breast milk is good enough. While these concerns are certainly understandable, they are often unnecessary.

Most women make nutritious breast milk regardless of their diet and their situation, so chances are your breast milk will be just fine. And, as long as your baby is latching on correctly and breastfeeding often (8-12 times per day in the beginning), you will most likely be able to make a full, healthy supply of breast milk.



Top tip

Milk flows when prolactin and oxytocin are produced. Baby sucking on your breast stimulates milk production. Later on, the suction changes to longer, relaxed eating. You can stimulate milk production with a good breast pump, like ours, but keep in mind that pumping or having baby eat your breasts 'empty', will just promote milk production, not decrease it! You'll spend a lot of time nursing or pumping in your house, so it's worth making the area as comfortable and relaxing place for you as possible. Have something to read or watch or listen to as your baby feasts!

COPING WITH YOUR CHILD'S TEMPERAMENT

Some newborns are easy. They eat well and sleep between feedings. Then there are those with a more challenging disposition. If your child rarely sleeps or cries a lot, it could be harder and more stressful for you, especially if you don't have much help or support. If you can, get some extra help. If your baby is a fussy eater who craves for a 24/7 milk bar, consider trying to feed their belly full. If baby is used to eating for a few minutes, then having a short nap, and then crying back to the breast, it might be that their little belly isn't getting properly full. Tap their bottom and talk to your baby, bringing him or her back to your breast for more milk.

We know quite a few fussy eaters who, once fed for a longer time than they were accustomed to, went on to sleep 7 hours straight. Also check their latch – it might be baby isn't latching on well, thus not being able to feed properly. Your baby might also struggle with feeding.

These problems including reflux, cow's milk protein allergy, tongue tie and colic can cause significant distress of both breast and formula fed infants and impact on your wellbeing.



RELATIONSHIP AND FAMILY PROBLEMS

If your partner is not on board with breastfeeding, but you think it's best for your baby, that's stressful. Try to acknowledge your partner's concerns and fears, so you can both be on the same page when the baby arrives. Allowing them to be part of the feeding process by keeping a small supply of pumped milk allows them to take over when you are keeling over in exhaustion.



Bringing your new baby home also changes the routine for everyone in your household. You may feel a lot of stress as you do your best to help everyone adjust. Separation and divorce are also major stressors, especially for a new mom. Every life changes drastically when a baby is born. Yours, your baby's, your partners. If you have other children, they may get jealous. Trying to cope with everything can be exhausting.

DEALING WITH CRITICISM

Even though breastfeeding is becoming more popular, there are still people who can't help but make comments or give their opinions even when it's not wanted. Sometimes these people are family and friends. In some cases, you can't do right. It's easier to brush off the comments of strangers, but it can be difficult to ignore the concerns and opinions of those who mean the most to you.

But, try to focus on what you know about breastfeeding, and remind yourself why you chose to do it. You may even be able to teach your family and friends a few things, and possibly change some of their opinions while you're at it. And remember, in the end it is you feeding your baby. You know what's best for you two.

SOCIAL MEDIA

This one is a struggle for us. We've all seen pictures on social media of celebrity mums who have children and go on to 'bounce back' to their pre-baby body within weeks. If the only thing you see are these perfect mums with perfect bodies and perfect families, it can really make you feel like you aren't measuring up. But they are fake, and you know that. It's a snapshot of someone's life, often strategically selected and filtered. You don't see their reality. No one is perfect, no matter how you think they may be. Keep doing you, because you are needed. You are wanted, and you are the perfect mum for your baby.





Healthy Ways to Cope with Stress

You can't avoid stress, but you can learn how to deal with it in a healthy way. Unlike in other areas of life where we are constantly told to eliminate the source of the stress, with a baby, you have to learn to work with it. Having your coping skills ready can help you reduce stress and prevent it from getting in the way of successful breastfeeding. You need to start by taking care of yourself.

Try to eat healthy foods and get enough sleep. That's hard to do when you're a new mom, but when you feel good and you're well-rested, it can make a difference in how you handle the things that are thrown at you each day. And, for those moments when you feel the stress rising, you can:

- Walk away from the situation if it's safe. Go out for a walk or go into another room and take a few moments for yourself.
- Take some slow deep breaths. Concentrating on inhaling and exhaling can help to calm you down.
- Talk to someone. If you can share your feelings with a friend, your
 partner, or another family member you might feel better. You can also
 discuss your feelings with your doctor or a therapist, or even take part
 in a virtual support group.
- Get some exercise. Exercise can relieve stress, and it also releases endorphins into your body. Endorphins are natural feel-good chemicals that can reduce stress and make you feel happy.
- Stay away from drugs or alcohol. They can make things much worse.



Breastfeeding and Sleep

When you breastfeed, your body releases oxytocin, a hormone that soothes your anxieties and helps you feel a unique emotional connection to your newborn baby. Oxytocin, also known as "the love hormone," packs a powerful punch that, while supporting healthy breastfeeding, but add the hormonal storm in your body, has one potentially dangerous side-effect: it can make you tired.

Add in the sleep deprivation and stress of dealing with a newborn baby who needs your almost constant attention, this hormone induced calm will definitely make you sleepy! Falling asleep, therefore, is natural inclination.

This can become dangerous if it leads to accidental co-sleeping, which is a risk factor for sleep-related infant deaths. So, how do you cope? And how can you breastfeed safely when all you want to do, is close your eyes and nap?

Mums are often told to "sleep when baby sleeps". In theory, that's sound advise, but in practice that can be so difficult to adopt - we've spent a lot of time learning to sleep at night and being awake in the day that this advise actually confuses your own body clock. And that can make you even more tired. And let's be real, it's not like you don't have everything to do while baby sleeps. Clothes need washing, you should eat something, and there's just always something. So not only do you have things to do, but you also can't nap on command.





Self-care and Support Networks

Well, like indicated a bit further above, use all the hacks you can think of or hear other mums found useful. If sleep is inevitable, try nursing in bed instead of a chair or sofa. This is a good place to start. Stay hydrated and eat well. If you are absolutely exhausted, it's a good idea to check in with your doctor to see about your blood levels. Postnatal depletion is a real thing that can make your life very difficult. (We have a short series coming out in October about iron!)

And if you can avoid sleep, there are alternative opportunities to help you recharge. Put baby down in the pram and go for a walk outside (they'll sleep through it), try exercising at home (any form will do!), or read a book. Do something you enjoy. Any activity outside baby can give you a mental and physical break, that can be just as valuable as a few hours of sleep.

Keep in mind that you can also utilise your support network. Having a baby does not keep other obligations at bay for long, but often new mums are left to balance the needs of their families, jobs, and homes, which can take its toll. The day can seem endless, and you may feel like you can't get anything done. And that can easily become a devastating feeling, especially when there's no end in sight. So having someone help you with ready made meals in the freezer, laundry, or tidying up the house, can really help. Going for a grocery run could be the best gift you've ever received from a family member or friend.

If you don't have support network, there are ways to overcome this. Many countries have organisations such as the Mannerheim League for Child Welfare in Finland, where you can get help for many things related to childcare and help with baby life.

At the risk of repeating myself, a (well-)rested you are so much more better equipped to Mum. And to Mum is indeed what you need to do.



Birth Trauma, Preterm Infants, the Unwell Baby and Breastfeeding

Following a traumatic birth, breastfeeding can either be a therapeutic event or worsen your feelings. It's important to seek and receive support. Use breastfeeding resources. The opportunity to discuss the birth experience in a non-judgemental environment can be helpful.

For me breastfeeding kept me alive, on the days when I had no idea if I would make it, I lived to express for my baby. When I went home, when I was battling flashbacks and nightmares from the birth, when I was scared and worried about my baby, breastfeeding was my lifeline. When I held her to my breast, I felt calm, and safe. The terror went away, and the fear eased.

Furthermore, if your baby is in distress and needs a longer stay at NICU, being allowed to breastfeed or pumping milk for your baby can make you feel more empowered and involved in baby's specialty care. It can also help treat your baby medically, as colostrum especially is full of all the goodies breastmilk substitute manufacturers just haven't figured out yet.

I learned that you do not have to breastfeed to bond with your baby. All that is required for bonding is that the caregiver loves the child and is free to express that love. If your birth was traumatic and you are being offered or are seeking care for birth trauma or PTSD, it's important to talk about your wishes to breastfeed or not. Feeding and having your baby on your bosom around 8 to 12 times a day initially can have a massive impact on you emotionally and physically.



Tackling Depression While Breastfeeding

We've spoken earlier how much good breastfeeding can do for your mental health. If you do have a history of mental health issues, try to share those experiences with your midwifery and other medical team. There are a bunch of things that can be done to avoid your triggers.

If you are actively taking antidepressants, please talk with your doctor: there are many, many options you have that will not affect your baby at all. If you don't want to take them while you breastfeed, there will need to be a plan of action so that your wellbeing does not worsen. The only unwise choice is not treating depression because it can have serious consequences for both you and your baby.

The important thing is that mums have a lot of choices. There are complementary and alternative treatments if you shy from medication due to whatever reason! They include:

EXERCISE

The most important studies on exercise as a treatment for depression were two randomized trials from Duke University Medical Center that directly compared exercise to Zoloft. In both studies, exercise was as effective Zoloft in treating major depression. The strongest effects are for aerobic exercise, but weight lifting and stretching/yoga are also helpful. If you exercise at a moderate level, exercise is safe during pregnancy or breastfeeding.



PSYCHOTHERAPY

Don't let anyone tell you that "talking therapy" is not effective for serious depression. That simply is not true.

Two types of psychotherapy are effective for perinatal depression, even if severe: cognitive behavioural therapy and interpersonal psychotherapy. Both have proven as effective as medications in treating major depression.

Cognitive talking therapy's premise is that depression is due to distortions in people's beliefs about themselves and the world. By addressing these beliefs, depression diminishes. This type of therapy is also effective in treating anxiety, obsessive-compulsive disorder, and even chronic pain.

Interpersonal psychotherapy (IPT), the newer modality, is quickly becoming the psychotherapy of choice for pregnant and postpartum women. IPT specifically addresses women's key relationships, the support they receive from those relationships and how the relationships have changed since having a baby. It teaches mothers to identify sources of support and increase the amount of support they receive from existing relationships. It's been used with many high-risk mothers to both prevent and treat depression during pregnancy and postpartum.



ST. JOHNS WORT

The herbal antidepressant St. John's wort is the most widely prescribed antidepressant in the world, and it is highly effective in treating depression. It is safe for breastfeeding, but some have expressed caution about its use during pregnancy.

Used by itself, St. John's wort has an excellent safety record. But there are two important cautions. First, it can interact with other medications, so should not be combined with antidepressants, birth control pills, and several other medications. If you decide to take St. John's wort, be sure to tell your doctor, midwife, or other health care provider. Second, brands of herbal products vary widely in quality, and it's not always possible to tell which product is good quality.



OMEGA-3 FATTY ACIDS

The long-chain Omega-3 fatty acids, EPA and DHA, have been used successfully to both prevent and treat depression. Both are found in fatty fish. EPA is the Omega-3 that treats depression because it specifically addresses the physiologic consequences of depression and lowers the stress response. DHA helps prevent depression, but does not treat it as such.

ALA, the Omega-3 found in flax seed and other plant sources such as walnuts and canola oil, does not prevent or treat depression. Although it isn't harmful, it's too far removed from EPA to have similar efficacy. I'm sorry to say, but fish oil is good for you. If the taste yucks you, eat fish or get it in supplement form!

✓ Top tip

Omega-3 is a natural anticoagulant, which means it may 'thin' your blood. If you notice you're getting bruised easier, consider dropping the dosage.

For all vegetarians and vegans out there, you can substitute fish oil with seaweed, nori, spirulina, and chlorella products!



All in all, you have options no matter your past or current experiences and feelings. The key thing is to keep your medical care team in the know, and keep asking "What are my options?"

The whirlwind of incoming emotions and feelings related to pregnancy, labour, and taking baby home, and breastfeeding for maybe the first time in your life can be managed better when the people helping you through these things know what to look out for.



Debunking 9 Breastfeeding Myths

Myth I: It's the fault of the parent if they're unable to breastfeed

It is never your fault if breastfeeding does not work out for you. Keep in mind, that in many countries there are no referrals to lactation consultant, or it might be immediately after birth. That does little to help you navigate the issues arising once you are at home, alone with your baby who's not growing like they should be.

Often your first doctors' appointment won't be until 6 weeks postpartum. That's a long six weeks to wait if you struggle. Often, by that time you've made decisions about going forward with breastfeeding or breast milk substitutes.

If you are experiencing difficulties with breastfeeding, consider reaching out for a certified lactation consultant near you.

Myth II: Formula is evil and breast milk is a magical cure-all

There are countless benefits of breast milk: fewer ear infections, fewer respiratory illnesses, fewer bouts with diarrhea, and a decreased risk of conditions like leukemia and diabetes, to name just a few.

That said, breast milk is only one part of a healthy lifestyle for your child. It has many long-term health advantages, but diet, exercise, and genetics all play a role in your baby's health. Additionally, as any university student who survives on pizza and noodles can attest, humans are shockingly good at living on all types of food.

Formula will not ruin your baby. However, two things can both be true: 1) babies can thrive on formula, and 2) there will never be a formula that can come close to the complexity and elegance of human milk. Breast milk is a living substance. It changes to meet the baby's needs throughout the day. For example, in the evening, a lactating body will produce milk with more melatonin (a hormone that helps humans sleep).



Still, formula isn't evil. In circumstances where formula is necessary or a choice, the bottom line is this: Formula is food. Formula will feed your baby. But breast milk not only nourishes, it creates a foundation for lifelong health.

Myth III: Pain is normal when breastfeeding

Pain is common, but never normal. As many new practices and sensations, breastfeeding can be uncomfortable for the first week or two. Beyond that, extremely painful lactation, bloody nipples, or damaged nipples are never normal and should be treated.

Many of these painful problems can be due to a common issue with a baby's oral tissues; tongue-tie. If you suspect that your baby has tongue-tie, visit with a certified lactation consultant to assess the feeding function. Your baby might benefit from an ear, nose, and throat specialist or a paediatric dentist. These specialists are able to diagnose and treat tongue-tie. Remember, just like with adults, if one area of baby's body has tightness, it is likely there are tight and sore spots elsewhere too. A specialised osteopath or a reflexologist may be able to help.

Some other causes of pain while breastfeeding are poor positioning of the baby while feeding, a vascular condition called vasospasm, or inverted nipples. Breastfeeding positions can help a lot, some mums swear by lanolin oil, and some use a nipple shield to save their breasts from overly eager baby teeth!

If you think you may have one of these problems, again — contact an IBCLC, who can assess your specific situation and help make breastfeeding much less painful. You should also check out our <u>Breastfeeding 101 guide!</u>



Myth IV: All women will make enough milk if they work hard enough OR small breasts make little milk

I pumped and pumped, for two weeks with nothing but a few ml's to show for each time. It was painful, nursing didn't work out... I called my midwife in tear, heartbroken that I couldn't fulfil my baby's needs. She told me to allow myself to 'fail' at this one tiny thing, that an upset mum was worse for my baby than a happy mum who feeds her formula

This notion creates a culture of shame around mums who are unable to produce enough breast milk. Some healthcare providers even contribute; it's often suggested that if you don't make 100% of your baby's milk, you should stop trying altogether. Mum shaming is disgraceful – every single mum is just doing the best they can.



There are several factors that can make milk production challenging. Blood loss during birth, retained placenta, hormonal imbalances, polycystic ovarian syndrome (PCOS), or being over the age of 35 are all potential causes. Your breast size has nothing to do with your ability to produce enough milk for your baby.

We have solutions to some of these problems. Feeding more frequently, 'power pumping', or being prescribed the right medications and supplements can help your milk supply. Some mums swear by lactation teas full of fenugreek, blessed thistle, fennel, stinging nettle, goat's rue, moringa, and milk thistle. There are things you can do, and a lactation consultant can offer even more solutions to your specific challenges.

However, supplementing your own milk with formula or donor milk is not something to feel ashamed of! If you are interested in milk donation, read Bonny's story on our website. It's thought that as little as slightly less than 100ml of mums own breast milk can make a difference, so never feel ashamed to supplement your baby with other foods as your physical and emotional wellbeing, and arising situations require it.

Myth V: How much you pump tells you how much milk you are making

The amount you can pump depends on the kind of pump, the proper fit of pump parts according to your nipple size, and the quality of the pump. With a good pump, we can get some information about how much milk you're making, but even that isn't the whole story.

Some people just don't respond as well to pumping as others. Often, your baby is just better at eliciting milk from the breast than any pump.

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PORTABLE



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Myth VI: If you have COVID-19 you shouldn't breastfeed

According to the World Health Organization (WHO), parents who are ill with COVID-19 should continue to breastfeed their babies. There is already one study confirming that breast milk does not transmit the COVID-19 virus.

Not only is breastfeeding with COVID-19 safe, but it could also potentially benefit your baby. There is little information still out, but as with all illnesses, long before your COVID-19 symptoms appear, the body of the lactating parent begins fighting the illness by producing antibodies that can be passed to the baby via breast milk. Breastfeeding can keep your baby safe, whether you or the baby are already sick. Check with you midwife to hear about the recommendations in your health district or region!



Myth VII: Medications and alcohol are unsafe while breastfeeding

Most medications are perfectly compatible with breastfeeding. Some common medications prescribed post-birth are antibiotics, pain medication, and anaesthesia.

Antibiotics can upset baby's tummy and change their poop temporarily, but this isn't harmful. Most pain medications cross into breastmilk in such small quantities that they usually are not an issue. Anaesthesia clears out of your system quickly, so this isn't a problem either.

It's a good idea to always ask if medication, vitamins or other supplements are breastfeeding-safe.

While not drinking alcohol is the safest option for breastfeeding mothers, a moderate alcohol consumption (up to 1 standard drink per day) is not known to be harmful to the infant. You should wait at least 4 hours before you nurse or pump. It's probably smarter to breastfeed first, and drink after. Alcohol does cross into breastmilk, but it immediately crosses back into your bloodstream and is metabolised.

Myth VIII: Breastfed babies should be sleeping through the night by 8 weeks

We wrote earlier that breastfeeding may promote sound sleeping in babies. You know how nice it is to close your eyes after eating a big meal – it might be the same for your baby. And for some babies, it isn't so. Typically, while your baby is breastfed, 'sleeping through the night' actually looks more like a nice solid 4- to 5-hour nap between feeds.

There is a myriad of reasons why your baby may be waking frequently: hunger, teething, missing you or your partner, or going through a developmental milestone such as rolling over or learning to crawl.

The reality is that for most families with a young baby, sleepiness is inevitable. And you can often find ways around it: Make a plan. Rather than falling asleep on the sofa with your baby and risk them falling, just go to bed. Most things can be worked around. You are breastfeeding, so you need to look after yourself. However, if you can't make yourself to go make a sandwich, well, then just grab the toppings and eat them separately. It's okay to life hack your way through the newborn and breastfeeding haze!!!





Myth IX: Babies can be allergic to breast milk

Babies can't really be allergic to the breast milk itself, but they can be intolerant to proteins mum is eating – dairy, eggs, tree nuts – and suffer from upset tummy or more spit-up. It's rare, but baby could develop an allergy to something in your diet and develop eczema. To treat this, you'll need to identify and eliminate the food from your diet.

It's a good idea to consult your paediatrician or your GP before starting to eliminate every potential allergen from your diet. Have a closer look at the things you are ingesting each day. A mum could drink a protein shake with pea powder and wonder why baby is gassy and uncomfortable. Well, if the pea powder is limited to a few shakes per week, or dropped entirely for the duration of breastfeeding, you should be good to go. It's not necessarily complicated, but you may have to think about your foods quite differently!

Takeaway

Breastfeeding makes a difference, and it's not all about the milk! There's a lot of information out there. Don't believe all of it. Let well-meant advice go in one ear, and out the other. Some might be helpful to you, but our guess would be that most isn't! Everyone has your best interests at heart, but you are the only one who knows your feelings, physical and emotional. A lot of the myths could also be harmful to your baby. And stay away from Google. That's a pretty big one. If you have questions, the best source of information is a lactation professional or your midwife.

Talk with your partner. Have them be part of the process. Share the chores, your worries, and keep that connection open to your support network.

✓ Top tip

Have a mental health check every day. It takes just a minute or two to actively feel your feelings. It might be a good idea to track your feelings especially if you are feeling overwhelmed. Getting them on paper can help you process, and it's a great starting point to grab with you if you decide to seek help!

Breastfeeding is a process. It is something new, something first-time mums have never done, and even experienced mums have never brought this particular baby to the breast before, either. It's new, it's daunting, it can be scary. You'll feel an odd sensation. But keep in mind, it's new for both of you. Eventually, with good enough support, it can become intuitive. Either way, you'll have to feed your baby one way or another, and regardless of how you choose to do that, your bond with baby will develop. And most importantly, your little one will be fed.

You've got this.

/ola&) Jykke Jeam

Much love,

