



Childbirth and Breastfeeding

When a mother gives birth without medications or other interventions, she and her baby are likely to have a gentle start to breastfeeding. LLLI believes that, “Alert and active participation by the mother in childbirth is a help in getting breastfeeding off to a good start.”

A mother can't control some things about her birth experience. However, she can take time during pregnancy to learn about the options in her community and talk with her care provider(s) about minimizing medications and interventions during labor. Making plans and being prepared can help you and your baby learn to breastfeed more easily, no matter what happens during your labor and birth.

Know your options

Read as much as you can about childbirth from a variety of sources. Don't be surprised when different sources say different things. Books published independently may be more unbiased than publications printed by drug manufacturers. Publications from your doctor or hospital may tell you about common procedures that you need to learn more about.

Take childbirth classes. Independent classes may be more eye-opening than those sponsored by a hospital. Attending childbirth classes will help you learn about the process of giving birth as well as how to participate and cooperate in the event.

The **Internet** can provide a wealth of information. Use your common sense about what seems right for you. Your care provider or birthing site may offer information for parents online. Some Web sites offer bulletin boards or chat lists for expectant mothers to ask questions and talk to other women in similar circumstances.

Talk to friends and family members who have already had babies. They can give you a personal view of how different things felt to them. Family members may share details about conditions that may be inherited. Knowing about such things ahead of time is invaluable.

Routine procedures

Talk to your birth attendant early in your pregnancy about his or her routine birth practices, particularly ones that require you to stay near monitors or other equipment (see sidebar). Ask for ideas about how you can minimize medications and interventions during your labor. Ask how your doctor decides whether a cesarean birth is necessary. Conversations with your care provider can give you an idea about what to expect. Seek a second opinion about anything you wonder about.

With supportive medical care, most babies, even the big ones, can be delivered vaginally with greater safety for both mother and baby. If you have already

Breastfeeding-friendly practices

Laboring women should be able to eat and drink during early labor.

Staying active helps labor to progress well. Any practice that connects you to medical equipment can keep you lying down more, even if you are allowed to walk some.

Adequate time should be allowed for labor to progress after your water breaks or contractions start.

Babies should breastfeed during the first hour after birth.

Rooming in with your baby gives you the best opportunity to breastfeed often.

Get help with any questions about breastfeeding. Ask to see a board-certified lactation consultant if you have any breastfeeding problems while you are in the hospital and contact La Leche League for ongoing information and support.

had a previous cesarean birth, remember that most mothers are able to have vaginal deliveries for subsequent babies. Frequently the reason for the first cesarean delivery does not apply to subsequent births.

Many things about birth remain the same no matter when or where a woman gives birth. However, different things become concerns at different times and places. When a particular condition among pregnant women or babies becomes a common concern, practices are put into place to deal with those health issues, often without consideration of how they will affect breastfeeding. Being aware of current health concerns during birth can help you learn ahead of time how to deal with them in a way that helps you and your baby continue to breastfeed during any treatment as much as possible.

Support

Support during your labor and after the birth makes a big difference in both your birth experience and your breastfeeding experience. Many birth places allow at least one family member to provide support during labor. Practices may vary on which family member(s) may be there, whether they need to have completed particular childbirth classes ahead of time, or whether they will be allowed to be present for a cesarean birth.

In some communities, **doulas** (trained birth support assistants) can provide support during labor. A doula who is familiar with common practices in your community will know what interventions you are likely to encounter. She can run interference for you and your spouse at a time when you are both feeling vulnerable. After your baby is born, LLL Leaders can provide support and information about how to make breastfeeding work for you and your baby.

What hinders breastfeeding?

Pain relievers and anesthesia used during labor or delivery may contribute to breastfeeding problems. One study suggested that babies whose mothers had received an epidural were less alert, less able to orient themselves, and had less organized movements than babies whose mothers had given birth without medication. These differences in behavior were measurable during the entire first month. Other medications commonly used during labor have also been found to affect baby's sucking behavior after birth.

Induction of labor can affect breastfeeding, too. Strong contractions tire a mother. Induction also increases the chances of having a cesarean birth or a birth assisted by forceps or vacuum extraction--procedures that carry risks and sometimes cause injury.

Cesarean births can affect breastfeeding both because of the medications used during the birth and because of the mother's level of pain and need for care afterward. Pain from the incision may make it hard to hold and breastfeed her baby. She will need time to heal before she can return to activities that were probably routine before the birth.

Antibiotics given because of a cesarean birth or other condition can contribute to a later yeast infection for the mother and/or her baby. And even saline IVs can contribute to edema in the mother's breasts, making it harder for her baby to latch on and breastfeed effectively.

Beyond the physical effects of such interventions, there are also emotional effects. The stronger contractions of induced labor may not be comfortable for babies. Negative experiences during birth may lead to anxiety and depression in the mother that takes a long time to resolve.

Any of these tools may be needed in some cases. To minimize their affect on breastfeeding, discuss your options ahead of time and tell your care provider how important

breastfeeding is to you. After your baby is born, ask for help if he has any kind of problem with breastfeeding.

Conclusion

When LLL was founded, most women gave birth in hospitals and stayed there for a whole week, with babies sent to central nurseries. Things have changed a lot since then. Hospital stays are much shorter, often 24 hours or less. More information is now available about both birth and breastfeeding. The medical community provides more support for breastfeeding. Midwives are available in some communities for prenatal care and birth. Home birth and freestanding birth centers are becoming popular choices in some areas. Hospitals have responded to this by offering birthing rooms and family-centered care to replace traditional labor and delivery rooms. Mothers and babies can often room together, which makes it easier for them to learn to breastfeed. Board-certified lactation consultants are often available either in the hospital or in the community.

The jury is still out on whether these changes are really helping breastfeeding. Your personal experience may affect any or all of these issues. However, no matter what kind of birth you have, educating yourself and being persistent and patient about requesting supportive care can help you have the kind of breastfeeding relationship that you want with your baby.

Resources:

Association of Labor Assistants & Childbirth Educators (ALACE), P.O. Box 390436, Cambridge, MA 02139, Phone: 617-441-2500; 888-222-5223, Fax: 617-441-3167

www.alace.org

The Bradley Method® of Natural Childbirth, Box 5224, Sherman Oaks, CA 91413-5224, Phone: 800 4-A-BIRTH

www.bradleybirth.com

International Cesarean Awareness Network (ICAN)

www.ican-online.org

Lamaze International, Inc., 2025 M Street, Suite 800, Washington DC 20036-3309, Phone: 202-367-1128; 800-368-4404, Fax: 202-367-2128

www.lamaze.org

For breastfeeding information, to order publications, or to find an LLL Leader near you, use our Web site at:

www.lalecheleague.org

Or phone: **800 LA LECHE** (9-5 Central Time)
847-519-7730 (24-hour messages)